



In an effort to address critical shortages in mental and behavioral health professionals, the Indiana General Assembly passed two bills into law to address licensure reciprocity and the creation of three new licensure categories.

SEA223 Information Provided by Health Practitioners (Head)

Requires medical and behavioral health practitioners licensed under the following boards must complete a brief survey with every license renewal that is completed online:

- Medical Licensing Board
- State Board of Nursing
- State Board of Dentistry
- Behavioral Health & Human Services Licensing Board
- State Psychology Board
- Board of Pharmacy

Questions to be asked include:

- Practitioner's specialty or field of practice
- Location or address of current practice
- Setting type of current practice
- Average hours worked weekly
- Health care services provided
- Practitioner's education background and training
- Whether practitioner delivers health care services through telemedicine

Reports will be prepared for the following entities:

- Office of Medicaid Policy and Planning
- Department of Workforce Development
- Commission on Improving the Status of Children in Indiana
- Legislative Council
- Office of the Attorney General

Also specifies notice requirements for network health care providers that make referrals via telephone to out-of-network health care providers.

Rationale: Indiana does not have complete data on gaps in services for medical, substance use, and mental health. This survey would obtain the necessary information to be used for obtaining resources such as Health Professional Shortage Area funding to incentives professionals to serve in those designated areas. Gathering this information gives greater detail into the types of services provided, including the geographic location of the services, and whether telemedicine is a service provided by the practice. The required reports can then be used to create a plan for how to address the service shortage areas based on federal and state resources and funding.

SEA224 Behavioral Health and Human Services (Head)

Provides that up to 50% of supervised clinical work experience hours required after receiving a graduate degree in social work, marriage and family therapy, mental health counseling, or addiction counseling may be virtual supervision with a qualified supervisor. Reduces the number of clinical practicum, internship, or field experience in a counseling setting from 1,000 to 700 for students in a mental health counseling degree program. Reduces the number of required face to face client contact hours for a marriage and family therapist license from 500 to 400.

Rationale: In certain areas, particularly rural, around the state, qualified supervisors are not easily accessible to meet with for weekly in-person supervision. This bill will allow greater flexibility in accessing supervision through virtual methods. These requirements fall in line with those in 30 other states and at least one accrediting body for counseling programs; it makes it easier for persons graduating with a Master's degree in Counseling to obtain an Indiana license to practice and reduces the number of persons leaving Indiana to practice in other states that accept this accreditation.

[SEA225 Continuing Education Requirements \(Head\)](#)

Provides that licensed medical practitioners who register or reregister to dispense or prescribe opioids to complete two hours of continuing education on opioid prescribing and opioid abuse. All courses must be approved by the board that regulates the practitioner or offered by an approved organization. Requires Indiana Professional Licensing Agency to maintain a list of resources to complete this training.

Rationale: Currently, medical practitioners are not required to participate in any training or continuing education regarding opioid abuse or prescribing practices. This bill will ensure that all practitioners are knowledgeable about best practices to reduce and prevent opioid addiction.

[HEA1007 Mental Health Access \(Kirchhofer\)](#)

- Requires the Office of Medicaid Policy & Planning to develop and implement a centralized credentials verification organization and credentialing process
- Increases the number of additional opioid treatment programs approved by the Division of Mental Health and Addiction (DMHA) from 5 to 9
- Specifies that mental health and addiction forensic treatment services may be administered only by a provider certified by DMHA or licensed by the Indiana Professional Licensing Agency (IPLA)
- Creates provisions for employees who fail a drug test to participate in drug education and treatment and maintain their job if they comply with the agreed upon conditions
- Specifies that supervised clinical social work hours obtained while the person has a temporary permit apply toward the supervised clinical social work experience requirements for four years, or greater than four years if approved by the board
- Sets guidelines for a temporary permit for a person who meets the educational requirements for a license as a social worker for one year and may not be renewed
- Sets guidelines for an associate temporary permit to practice marriage and family therapy to a person who meets the educational requirements for licensure and is pursuing the clinical supervisory hours to expire after one year and may not be renewed
 - This also applies to a person pursuing a mental health counseling license, addiction counseling license, or clinical addiction counseling license
- Provides that accident and sickness insurance policies that cover substance use disorder treatment shall utilize treatment provided by licensed addiction or clinical addiction counselors or licensed marriage and family therapists
- Details further guidelines for insurers and health maintenance organizations to credential providers and provide reimbursement for services
- Recommends an interim study of the impact that opioid treatment programs have on neighborhoods and communities

Rationale: This bill was part of the Governor's agenda to fund additional opioid treatment programs and create easier pathways for licensed behavioral health professionals to provide treatment.