



DALE KOOYENGA
STATE SENATOR · 5TH DISTRICT

State Capitol · P.O. Box 7882 · Madison, WI 53707-7882 · (608) 266-2512

October 27, 2021

TO: Members of the Senate Committee on Insurance, Licensing and Forestry

FR: Senator Dale Kooyenga

RE: Support for SB 657 – Advanced practice social workers and independent social workers treating substance use disorder as a specialty

Thank you for holding a hearing on Senate Bill 657. This bill makes a small but important technical correction to one of the HOPE package bills enacted in 2018 to expand access to substance use treatment.

Prior to the passage of 2017 WI Act 262, licensed clinical social workers were able to provide substance use treatment services within their scope of practice. All other master's level licensed mental health professionals were required to obtain a "substance use treatment specialty certification" or another substance use treatment certification in addition to their mental health license in order to treat substance use.

2017 WI Act 262 sought to bring equivalency to fully licensed mental health practitioners in the state by eliminating the specialty requirement for marriage and family therapists and professional counselors. In addition, that law eliminated the requirement to obtain an additional substance use treatment credential for licensed marriage and family therapists and professional counselors who are still pursuing their required 3,000 hours of practice.

Unfortunately, these master's level social workers that are "in training" (Certified Advanced Practice Social Workers (CAPSW) and Certified Independent Social Workers (CISW)) were unintentionally omitted from this statutory change because their credential is titled "certified" instead of "licensed."

The unintentional omission of CAPSW and CISW credentialed staff from the changes enacted in 2018 has resulted in differential treatment of these social work professionals under the law. Currently DSPS and by extension Medicaid require these certified master's level mental health practitioners to obtain a "specialty" designation on their mental health credential or obtain a substance use certification in order to provide substance use treatment.

This bill corrects this error and enables these master's level social workers to provide substance use treatment within their scope of practice, thus removing an unnecessary regulatory barrier that impacts access to treatment.

Thank you for hearing SB 657. I respectfully ask for your support.



PATRICK SNYDER

STATE REPRESENTATIVE • 85th ASSEMBLY DISTRICT

Testimony in Support of Senate Bill 657 Senate Committee on Insurance, Licensing and Forestry October 27th, 2021

Chairwoman Felzkowski and members of the Committee:

Senator Kooyenga and I, authored this bipartisan legislation to fix an unfortunate oversight from the from the HOPE agenda several sessions ago.

Prior to the HOPE legislation passing licensed clinical social workers were able to provide substance use treatment services within their scope of practice. All other master's level licensed mental health professionals were required to obtain a "substance use treatment specialty certification" in addition to their mental health license in order to treat substance use.

2017 Act 262 sought to bring equivalency to fully licensed mental health practitioners by eliminating this requirement for marriage and family therapists and professional counselors. The bill also eliminated the requirement to obtain an additional substance use treatment credential for "in training" licensed marriage and family therapists and professional counselors (i.e., still pursuing their 3000 hours of practice).

Unfortunately, due to an oversight when this change was made master's level social workers that are "in training" (Certified Advanced Practice Social Workers (CAPSW) and Certified Independent Social Workers (CISW)) were omitted because they are not licensed but instead certified under the statutes.

Senate Bill 657 rectifies this omission to allow these social work professionals to provide substance use treatment within their scope of practice without obtaining a specialty designation on their credential – removing an unnecessary government barrier to treatment.

Thank you for taking the time to hear my testimony today. I am happy to answer any questions you may have.

TO: The Honorable Members of the Senate Committee on Insurance, Licensing and Forestry
FROM: Marc Herstand, NASW-WI and Kathy Markeland, WAFCA
DATE: October 27, 2021
RE: Support for SB 657 - Removing Substance Use Specialty for Certified Master's Level Social Workers

On behalf of the members of the Wisconsin Chapter of the National Association of Social Workers (NASW-WI) and the Wisconsin Association of Family & Children's Agencies (WAFCA), thank you for the opportunity to appear before you today in support of Senate Bill 657. SB 657 is a technical trailer bill to 2017 Wisconsin Act 262 - a HOPE package bill enacted to improve access to substance use treatment. In short SB 657 permits master's level social workers in-training (pursuing their 3000 hours) to provide substance use treatment services within their scope of practice without obtaining an additional credential from DSPS. Other master's level mental health professionals in training were granted this regulatory relief under 2017 WI Act 262.

BACKGROUND

Prior to the passage of 2017 WI Act 262, licensed clinical social workers (LCSW) could provide substance use treatment services within their scope of practice. 2017 WI Act 262 sought to create the same standard across all fully licensed mental health practitioners by removing additional substance use treatment credentialing requirements for licensed marriage and family therapists (LMFT) and licensed professional counselors (LPC).

To further expand substance use treatment access, 2017 WI Act 262 also eliminated the requirement for master's level "in-training" licensed marriage and family therapists (LMFT-IT) and professional counselors (LPC-IT) to obtain a specialty certification or substance use treatment credential.

Unfortunately, master's level certified advance practice social workers (CAPSW) and independent social workers (CISW) were inadvertently omitted from the streamlining provisions adopted for LMFT-IT and LPC-IT practitioners, because their credential title is "certified," instead of "licensed."

The practical effect of this statutory oversight has been the continuation of specialty certification requirements for CAPSW and CISW practitioners. These additional requirements are unnecessarily burdensome and impose greater cost and complexity on master's level social workers in training and those supervising their clinical development. In addition, the differential requirements for CAPSW and CISW practitioners complicate the Medicaid certification process for these professionals.

SENATE BILL 657

SB 657 resolves the imbalance and places all master's level mental health practitioners on a level playing field with regard to the DSPS credentialing required of them in order to provide substance use treatment services.

The demand for mental health and substance use treatment services continues to grow. Master's level social workers are key to continuing to expand our treatment capacity in the state with nearly 1000 professionals currently holding the CAPSW or CISW credential.

The mental health workforce and access issues before us as a state are significant and complex. We appreciate the ongoing commitment of policymakers to actively pursue solutions. We are committed to continuing to work in collaboration with all stakeholders toward greater access to quality services. SB 657 is one small component of this larger task before us and we thank you for your consideration and support.

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October 27, 2021

Honorable Committee on Insurance, Licensing and Forestry

My name is Michael Kemp and I am a certified Substance Abuse Counselor in the state of Wisconsin. I have been an Addiction Professional for 36+ years, providing treatment and interventions for people with substance use disorders. I am also co-chair of NAADAC, the Association for Addiction Professionals that represents over 200,000 addiction professionals. I am also the chair-elect of the National Certification Commission of Addiction Professionals, the organization that writes, evaluates, & assures the Quality of the exam for addiction professionals in the state of Wisconsin, & 35+ other states.

I am here to express my concern regarding SB 657 (advanced practice social workers and independent social workers treating substance use disorder as a specialty) that has been put forth by Senators Kooyenga and Johnson, and Representatives Snyder, Magnafici, and Doyle. It is stated that "This bill makes a small but important technical correction to one of the HOPE package bills enacted in 2018 to expand access to substance use treatment. 2017 WI Act 262 made a variety of changes to the licensing and certification requirements for professionals who provide substance use treatment services."

As a person who has received an extensive education and training focusing on the treatment of substance use disorders, and completed the extensive certification process, I am deeply disturbed by this effort to extend the scope of practice to professionals who have mostly received minimal education on the treatment of this unique brain disorder. Whereas I have the same concerns about the effects of 2017 WI Act 262, in which licensed clinical social workers and licensed professional counselors were able to provide substance use treatment services "within their scope of practice", this effort expands that scope to persons who far less experience in the profession, and concerning supervision by someone training as a clinical supervisor that specializes in the treatment of such disorder. I would compare this to needing brain surgery and having a general practitioner MD engage in such surgery. Would you consent to a surgery performed by someone who had completed a 3 credit course on surgery & a short rotation, or would you want a surgeon who has completed the complete course on brain surgery and completed an extensive internship under an experienced brain surgeon??

Whereas I acknowledge we need to expand the workforce to meet the growing addiction crisis in our state, the public deserves to have fully qualified people providing the evidence-based practices that make recovery a reality for the people in need. It is my hope that you will oppose such legislation until which time there are measures introduced that require education & testing requirements that meet the minimum standards to engage in treating substance use disorders and provides the requirement of supervision by a clinical supervisor that has that has expertise in such treatment. Currently, to be a certified Addiction Professional in this state, one must complete 360 hours of education focusing extensively on the trans-disciplinary foundations & 8 practice domains that assure competency in treating the brain disorder of addiction. One must also complete an internship under the supervision of a clinical supervisor, plus the pass the above-mentioned competency exam before receiving their certification to practice.

I would ask the committee to exam the above criteria for SUD certification and compare it to the education curriculum and testing of social worker licensing to see just how much instruction is truly given to understand the psychopharmacology of substances, intervention and treatment techniques for substance use disorders that are evidence based as well as knowledge of the culture and social issues

around substance use and recovery. Again, ask yourself, what education would you would want treating a loved one for the brain disorder of addiction.

Thank you for your time and taking a deep look at criteria for addiction counseling while reviewing this legislation. If I can be of any further assistance, please contact me at michaeledwinkemp@gmail.com / 920-410-4367

Michael Kemp, ICS/ CSAC/ CSW/ NCAC I