

Ohio Legislative Service Commission

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Fiscal Note & Local Impact Statement

Bill: Sub. S.B. 287 of the 129th G.A. Date: December 4, 2012

Status: As Passed by the House Sponsors: Sen. LaRose

Local Impact Statement Procedure Required: No

Contents: Creates the limited chemical dependency counselor supervisor license, creates the prevention

specialist assistant license, and updates existing license and certificate requirements

State Fiscal Highlights

- The bill excludes wheelchair costs from the direct care costs used in determining a nursing facility's Medicaid reimbursement rate, thereby permitting wheelchair providers to obtain Medicaid reimbursement directly from the state (rather than being required to obtain reimbursement from the nursing facility). According to the Ohio Department of Job and Family Services (ODJFS), this change will cost the Medicaid Program \$15 million to \$20 million each year. If the federal government approves this change, the state share of the costs would be \$5.5 million to \$7.3 million. However, according to ODJFS, it is unlikely that the federal government will approve, in which case, the state would be responsible for the entire \$15 million to \$20 million cost.
- The bill establishes two new license categories: independent chemical dependency counselor-clinical supervisor and prevention specialist assistant. The bill also revises the requirements to qualify for existing licenses and certificates. As a result, the Chemical Dependency Professionals Board will incur additional administrative costs related to the processing of license applications and license renewals, administering exams, taking disciplinary actions, and paying additional e-licensing fees.
- Under the bill, the Board will collect additional revenues related to the processing of license applications and license renewals, and the administering of exams.

Local Fiscal Highlights

• No direct fiscal effect on political subdivisions.

Detailed Fiscal Analysis

The bill revises the law governing the practice of chemical dependency counseling and alcohol and other drug prevention services that are regulated by the Chemical Dependency Professionals Board.

Independent chemical dependency counselor-clinical supervisor

The bill establishes a new category of individuals who may practice chemical dependency counseling pursuant to a license issued by the Chemical Dependency Professionals Board: independent chemical dependency counselor-clinical supervisor.

License applications

An individual seeking licensure must submit a properly completed application and all other documentation specified in rules and pay an application fee. (This does not apply, however, if the individual holds, on the bill's effective date, a valid independent chemical dependency counselor license.) The Board would incur a minimal administrative cost to process new independent clinical dependency counselor supervisor applications, but would also collect new license fee and exam revenue. According to a spokesperson for the Chemical Dependency Professionals Board, the application fee for an independent chemical dependency supervisor license would likely be \$50. In addition, applicants may be required to complete an exam. There is currently an exam fee of \$150, which is paid to the testing company by the applicant; the Board receives \$35 of the exam fee from the testing company.

According to the Board spokesperson, independent chemical dependency counselors who are currently licensed by the Board will qualify to be an independent chemical dependency counselor-clinical supervisor. The Board currently charges a fee of \$35 to convert one license to another. The Board spokesperson believes that in addition to the independent chemical dependency counselors, other licensed professionals such as counselors, social workers, and psychologists who provide substance abuse counseling, may choose to seek licensure with the Board given the proposed changes in the bill.

License renewal and restoration

Unless revoked or suspended earlier, an independent chemical dependency counselor-clinical supervisor license would expire two years after it is issued. To have the license renewed, an independent chemical dependency counselor-clinical supervisor must pay the renewal fee and complete not less than 40 hours of continuing education. To have an expired license restored, an independent chemical dependency counselor-clinical supervisor must apply for the restoration not later than two years after the license expires, pay a renewal fee, and complete a number of hours of continuing education to be specified in rules. The Board spokesperson believes the renewal fee for the license will likely be \$150, which is the renewal fee for other licenses

the Board currently issues. The Board could expect to collect additional license renewal fee revenue. The Board would also incur a minimal administrative cost to renew the licenses.

Prevention specialist assistant

The bill establishes a new category of individuals who may practice alcohol and other drug prevention services pursuant to a certificate issued by the Chemical Dependency Professionals Board: prevention specialist assistants. A prevention specialist assistant must practice under the supervision of an individual specified in the bill. The Board spokesperson believes that the application fee for a prevention specialist assistant certificate will likely be \$50. However, some applicants will already be certified as registered applicants; therefore, they would pay a certificate conversion fee of \$35 instead of the \$50 application fee. The Board spokesperson stated that there are approximately 540 registered applicants who may choose to seek this new certification. The Board will incur additional administrative costs to process new prevention specialist assistant applications.

Certificate renewal and restoration

Unless revoked or suspended earlier, a prevention specialist assistant certificate expires two years after it is issued. To have the certificate renewed, a prevention specialist assistant must pay the renewal fee and complete not less than 20 hours of continuing education. To have an expired certificate restored, a prevention specialist assistant must apply for the restoration not later than two years after the certificate expires, pay a renewal fee, and complete a number of hours of continuing education to be specified in rules. The Board spokesperson believes the renewal fee will likely be \$150. The Board will incur additional administrative costs related to processing of certificate renewals.

E-licensing

The Board will also have to maintain records of licenses with the e-licensing system, which is managed by the Department of Administrative Services (DAS). Boards and licensing agencies pay a fee to DAS based on their share of the total licenses and certificates entered into the system. The Board currently pays approximately \$5,500 to DAS for an estimated 13,000 records, 7,900 of which are active records. The Board estimates there will be a minimal increase in e-licensing costs as it expects additional licenses and certificates as a result of the proposed changes.

Disciplinary actions

Continuing law authorizes the Board to deny licenses and certificates and to take other disciplinary actions against individuals seeking to engage, or engaging, in the professions that the Board regulates. The bill provides two additional reasons for which the Board may take disciplinary action. As a result of these changes and the increases in potential licenses and certificates, there may be additional cases for the

Board involving disciplinary action. The Board spokesperson believes these cases can be handled with existing resources, but to the extent that the Board requires additional assistance, the Board would likely rely on a contract investigator at a cost of \$5,000 to \$15,000 annually.

Existing license and certificate categories

The bill revises the requirements to qualify for existing licenses and certificates. Most of these changes modify the education and experience required to apply for a license. According to the Board spokesperson, these changes will likely encourage some current licensees to seek the next level of licensure. For example, the Board spokesperson believes that 25% to 50% of the approximately 300 chemical dependency counselor III license holders may choose to seek an independent chemical dependency counselor license as a result of the changes in the bill. As stated earlier, the Board charges a fee of \$35 to convert one license or certification to another. Therefore, these changes could result in additional revenues to the Board.

Registered applicant

An individual seeking a registered applicant certificate must meet the general requirements applicable to the licenses and certificates that the Chemical Dependency Professionals Board issues. However, current law does not establish requirements specific to a registered applicant certificate. The bill establishes such requirements. The Board will have minimal administrative costs to implement the new requirements.

Examinations to participate in federal drug and alcohol testing program

The bill permits the Board to administer examinations for individuals seeking to act as substance abuse professionals in a transportation workplace drug and alcohol testing program regulated by the U.S. Department of Transportation. The Board also is to adopt rules governing its administration of the examinations if the Board elects to administer the examinations. If the Board elects to provide these examinations, the exams would be provided through the same testing company the Board already utilizes for other licenses. The Board spokesperson does not anticipate that the Board will receive any fee revenue for this exam.

Nursing facility Medicaid reimbursement and wheelchair costs

The bill removes "wheelchairs" from the definition of the direct care costs in the nursing facility reimbursement formula.¹ However, it does not reduce the nursing

¹ The formula for determining the rate nursing facilities are to be paid under Medicaid for providing covered services is divided into several parts sometimes referred to as cost centers or price centers. The price centers in the nursing facility reimbursement formula include direct care costs, ancillary and support costs, tax costs, and capital costs. Wheelchairs are one factor among many included in the direct care costs price center. A nursing facility is paid a rate for each price center; there is a separate formula for determining each rate. There is also a quality incentive payment included in the formula. A nursing facility's total rate is the sum of all of the rates and quality incentive payment.

facility per diem rate. Therefore, state payments to nursing facilities are unaffected. Additionally, the bill does not change the nursing facility franchise permit fee. Thus, the franchise fee revenue that the state will collect is also unaffected.

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