



# ROB STAFSHOLT

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To: Senate Committee on Health

FROM: Senator Rob Stafsholt

DATE: September 27, 2023

SUBJECT: Testimony in Favor of Senate Bills 196, 197, 391 & 400

Thank you, Chairwoman Cabral-Guevara and members of the Senate Committee on Health, for allowing me to testify in favor of Senate Bills 196, 197, 391 and 400.

Over the last few years, I have heard from many frustrated constituents that are dealing with unnecessary delays, confusion and lack of communication while attempting to get an occupational license from the Department of Safety and Professional Services (DSPS). These unnecessary delays cause individuals to have to postpone starting their careers or stops them from entering the workforce. Wisconsin's healthcare and business sectors are struggling to find qualified workers so we need to ensure our licensure process is streamlined and functions efficiently. We cannot afford to fall behind other states in attracting skilled individuals to live and work in our state.

In response, leadership created the Legislative Council Study Committee on Occupational Licenses, and I was honored to be appointed as Chair. The study committee was created with the goal of finding solutions so current and future license holders can be licensed in a timely manner. The committee was made up of two Republican and two Democratic legislators as well as five members of the public.

Through our conversations with licensed professionals, research and policy groups, and DSPS, our study committee focused our bill recommendations on three primary issue areas: data tracking, workload simplification, and reciprocal credentialing. The following bills being heard today fall under the third issue area of reciprocal credentialing:

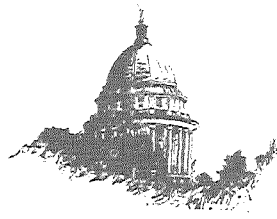
- Senate Bill 196 relating to ratification of the Counseling Compact.
- Senate Bill 197 relating to ratification of the Audiology and Speech-Language Pathology Interstate Compact.
- Senate Bill 391 relating to ratification of the Social Work Licensure Compact.
- Senate Bill 400 relating to ratification of the PA Licensure Compact

Senate Bill 196 and 197 are both interstate compacts that the study committee members broadly supported and recommended them for introduction. Senate Bills 391 and 400 are also interstate compacts that we didn't have enough time to discuss before our final hearing.

Interstate compacts allow states to create an agreement and implement standards for occupational licensing of specific professions. These compacts would allow professional, licensed individuals residing in a compact member state to practice in other member states without the need for multiple licenses. Compacts provide a clear pathway for professionals to move seamlessly from one state to another through an agreement among states to recognize another state's occupational license.

Wisconsin has recently enacted legislation allowing our state to participate in a number of interstate compacts including the Physical Therapy Compact, the Occupational Therapy Compact, the Enhanced Nurse Licensing Compact (eNLC), and others.

Thank you, members. I ask for your support and would be happy to answer any questions.



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# PAUL TITTL

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STATE REPRESENTATIVE • 25<sup>TH</sup> ASSEMBLY DISTRICT

Senate Committee on Health  
Senate Bill 391  
September 27, 2023

First of all, thank you Chair Cabral-Guevara and members of the committee for allowing me to testify before you today concerning Senate Bill 391 relating to ratification of a Social Worker Licensure Compact.

In the last few sessions we have seen the creation of licensing compacts enabling providers in various disciplines to operate more easily across state lines. These include physicians; nurses; advanced practice registered nurses; EMTs; physical therapists; psychologists; audiology and speech-language pathologists; as well as occupational therapists and counselors. It's time to add social workers as well.

State participation in the Compact provides several benefits. For example, the compact promotes unity of care when social workers or clients relocate. If a Wisconsin resident has developed a close relationship with a social worker over a period of time and then goes off to college in another state, current law would not permit the social worker to counsel the student while away from Wisconsin, unless the social worker was also licensed in that state.

However, under the compact the relationship could continue, because if that state were part of the compact it would not require the social worker to have a separate license in that state.

Similarly, as you know, the mental health needs around the state are great, but the number of professionals able to provide help is not spread evenly throughout the state. As a result, people living in rural areas in the Northwest of the state may find a shortage of social workers. However, there may be social workers across the Minnesota/Wisconsin border who could provide services in Wisconsin if both states were part of the compact.

The addendum (below) lists further benefits of this legislation. Other speakers can address them. In the meantime, I would be happy to take any questions you might have. Thanks for consideration of this bill.

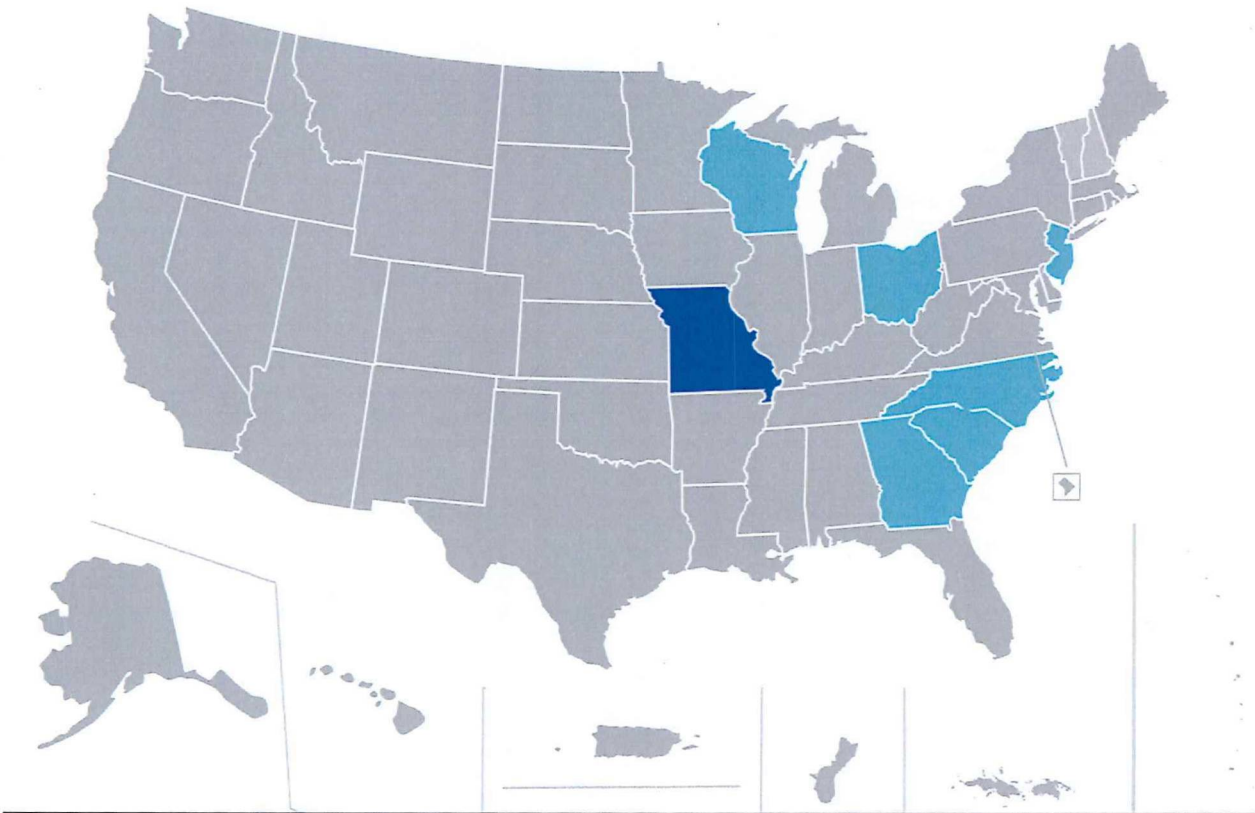
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Social Workers Licensure Compact  
Legislative Action  
September 6, 2023

- Legislation Not Introduced
- Legislation Pending
- Legislation Enacted





CSG Testimony on SB 391 – Social Work Licensure Compact (Information Only)  
Senate Committee on Health  
September 27, 2023  
Kaitlyn Bison, The Council of State Governments, [kbison@csq.org](mailto:kbison@csq.org)

Chair Cabral-Guevara and members of the committee, I would like to express my appreciation for your consideration of the Social Work Licensure Compact. My name is Kaitlyn Bison with The Council of State Governments. My written testimony is meant to provide background educational information on the compact.

The Council of State Governments is a nonpartisan membership association for elected and appointed state government officials from all three branches. CSG, through its National Center for Interstate Compacts, has facilitated the development process for all fifteen of the active occupational licensing compacts including the five that Wisconsin is a member of (medicine, nursing, psychology, physical therapy, occupational therapy). Wisconsin is also a member of 30 other interstate compacts unrelated to professional licensing.

There are approximately 500,000 licensed social workers in the United States. Despite the high demand for social work services, licensees are currently limited to providing services within state borders. The Social Work Licensure Compact seeks to provide licensees with opportunities for multistate practice, support relocating practitioners, and foster workforce development by reducing unnecessary licensure burdens.

SB 391 would make Wisconsin a member of the Social Work Licensure Compact. The compact was created through a cooperative agreement between the Department of Defense and The Council of State Governments. For the past 18 months, CSG has been developing the compact language with stakeholders within the profession from the Association of Social Work Boards, National Association of Social Workers, Clinical Social Work Association, social work regulatory boards, the social work education community, and others. The compact language was finalized in February 2023.

The Compact will enable social workers to obtain a multistate license issued by their home state to practice in other states that join the compact, rather than get an individual license in every state in which they want to practice. Like the compact for a driver's license, each compact member state agrees to mutually recognize the practitioner licenses issued by every other member state.



The Social Work Licensure Compact is similar in form and function to the five occupational licensing compacts that Wisconsin is already a member of. A social worker must hold an active, unencumbered license in their home state to be eligible for a multistate license. Licensees must also pass a background check and meet other eligibility requirements related to education and examinations.

From a regulatory perspective, the Compact preserves the authority of each compact member state to protect public health and safety through the existing state regulatory structure. A licensee practicing under a multistate license must abide by the laws, regulations and rules that govern the practice of social work in the state in which they are located. The Wisconsin Marriage and Family Therapy, Professional Counseling and Social Work Examining Board has jurisdiction over anyone practicing in Wisconsin under a multistate license.

The Social Work Licensure Compact also benefits military families. If a military family gets assigned to a new duty station in a compact member state, the service member or their spouse can continue to work with their current multistate license.

Like all of the other occupational licensing compacts, the Social Work Licensure Compact will be governed by a commission made up of the member states. The delegate will be a representative from the social work section of Wisconsin's Marriage and Family Therapy, Professional Counseling and Social Work Examining Board.

The compact will come into effect once it's enacted by seven states. The compact is brand new so there is currently only one member state (Missouri). However, there are many states interested in introducing the bill in 2024. If enacted, Wisconsin would have a seat at the table when the compact commission has its first meeting to establish the compact's rules and bylaws.

Overall, the Social Work Licensure Compact will increase license portability for social work professionals in Wisconsin, support military families, and improve access to social work services for Wisconsin residents, while maintaining the current system of state licensure. Additionally, by ensuring the sharing of investigative and disciplinary information among participating states, the Social Work Licensure Compact will allow participating state regulatory entities to better protect the public. I understand that increasing access to mental health providers is a key issue facing states, and we believe the compact provides one solution that helps alleviate that problem.

## TESTIMONY PROVIDED BY NASW WI EXECUTIVE DIRECTOR MARC HERSTAND IN SUPPORT OF SENATE BILL 391, THE SOCIAL WORK LICENSURE COMPACT BILL

Chairperson Cabral-Guevara and members of the Senate Committee on Health..

My name is Marc Herstand, I have served as the Executive Director of the National Association of Social Workers, Wisconsin Chapter for close to 31 years.

I am pleased to speak in support of Senate Bill 391, the Social Work Licensure Compact bill. The need for Senate Bill 391 became extremely evident to me during the Covid-19 pandemic. Covid-19 ushered in universal usage of tele-mental health. Initially, the only way that psychotherapy could take place at the beginning of the pandemic, tele-mental health has continued to be a large part of the practice of most clinical social workers. It has enabled clients with transportation, childcare, health, financial or other barriers to get mental health treatment. It has also enabled clients with language barriers-whether it be Spanish, Hmong, French, American Sign Language or the many other languages spoken in our state to receive services they can understand. The Covid-19 pandemic also resulted in increased mobility of college students when their schools closed and for other Wisconsin residents who began working remotely. Unfortunately, college students and other residents who were receiving mental health services and moved out of state temporarily, could often not continue to receive mental health services from their Wisconsin therapists. States generally require a therapist to be licensed in the state where the clients reside in order to provide services. This has a very negative impact on clients who have developed trusting relationships with their therapist and do not want to start all over with a new therapist.

The Social Work Licensure Compact will solve this problem by allowing clinical social workers to serve clients in any state participating in the Compact..

The other main advantage I see to the Social Work Licensure Compact is that it tremendously eases the licensure process for social workers moving to Wisconsin. Over the last several years, I have spoken with scores of Licensed Clinical Social Workers with decades of experience providing mental health therapy who have had tremendous difficulty getting licensed in Wisconsin. Because of this difficulty getting licensed, I have spoken with social workers who have given up on obtaining licensure here. This is at a time of a tremendous shortage of mental health providers statewide.

Why is it so difficult to get licensed here? Because of the way the law is written, regardless of how many decades of experience a licensee might bring from another state, they still need to get a form filled out by the supervisor of their initial 3,000 hours of supervised practice after graduate school

and to get the syllabus for a course they may have taken decades ago. In many cases, these supervisors are not even alive anymore and sometimes the agencies may have closed. The social work program may not be able to find a syllabus for a course from 20, 30 or 40 years ago. The Social Work Licensure Compact would eliminate these unnecessary, extremely burdensome and often impossible to accomplish requirements. Once the Compact is implemented nationwide, social workers moving to Wisconsin would simply go through a background check, take the open-book state jurisprudence exam and then get licensed.

Full implementation of the Social Work Licensure Compact will take time as each state has to pass the legislation. Once seven states have passed the bill, these states can then establish the Compact Commission to set the national ground rules for the Compact. I am hoping that Wisconsin will be among the initial seven states passing the Social Work Compact.

Thanks for the opportunity to testify on the Social Work Licensure Compact. I am happy to answer any questions.

Marc Herstand, MSW CISW  
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# Kay B. White LCSW, Counseling

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September 27, 2023

Chairperson Sen. Cabral-Guevara and members of the Senate Committee on Health

Senate Bill 391

Thank you for the opportunity to share my story as an LCSW moving into Wisconsin and attempting to obtain an LCSW license to practice Psychotherapy and Counseling in Wisconsin.

My name is Kay White, I moved to Madison in January of 2023 and began my attempt at obtaining a Wisconsin license shortly after that time. I currently am not licensed in Wisconsin.

I am licensed (by examination) as a clinical social worker in Illinois since 1989. I obtained my MSW from the University of Illinois Champaign/Urbana in 1978. My employment history includes working for a hospital in Bloomington Illinois for twenty plus years providing social work counseling and services on an inpatient psychiatric unit serving both voluntary and involuntary patients and their families. I also hired and supervised other LCSW staff in that treatment area for over twenty years. Additionally, I worked for a Psychiatric Hospital in Champaign Illinois doing emergency assessment for admission of voluntary patients for inpatient care. I have also worked with the treatment teams of Hospice, Cancer, Cardiac, Intensive Care/Emergency Trauma, and Addictions to provide counseling to patients and their families. I began my private practice on a full-time basis in 2017 and am currently still seeing patients in Bloomington, Illinois in person weekly.

During my career I have taught social work courses for the University of Illinois School of Social Work Masters Program, Illinois State University School of Social Work, and Millikin University Human Service Program. I am an Associate Professor of Social Work emerita. The majority of my teaching was in social work methods of counseling for individuals, families and groups. I taught the Psychopathology course required by the state of Wisconsin to MSW students at the University of Illinois.

I have experienced a great deal of difficulty obtaining the specific requirements of the state of Wisconsin for my licensure. The supervisor and faculty member for my field placement from the University of Illinois are deceased. The site supervisor from the hospital I completed my internship hours and work hours toward Wisconsin's requirements is in her mid 80's and location unknown. The hospital I worked for during this time has changed management four times and individuals to speak to my specific role performance are no longer

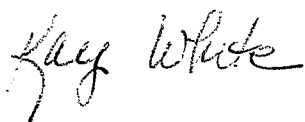


employed and employment records archived. I have been able to enlist the University of Illinois current staff to verify my course work and field experiences, and my teaching of the Psychopathology course for them including syllabus. I have obtained formal verification of my licensure from Illinois (which requires the same exam Wisconsin requires), my actual scores from my testing in 1989 from the ASWB national testing body. This has taken a significant amount of time, and seems quite duplicative to me.

The understanding of my current status from the communications from the Wisconsin licensure representatives is that my information must be evaluated by a larger committee to consider my application since I do not meet their criteria.

In my short time in Wisconsin, as I have met other Social Work therapists in Dane County and in fact in the Counties identified at WOW, that have shared with me that there are as many as 300 clients on a waiting list in one local agency to be seen and a minimum of a six month wait in the WOW counties.

In my professional opinion, for the people of your state, and the ability of professionals who wish to provide care in Wisconsin, it is imperative that SB391 be passed. The process is not user friendly and certainly does not include expedited steps for experienced clinicians.

A handwritten signature in cursive script that reads "Kay White".

Kay B. White LCSW, ACSW