Dear Governor Brown and Commissioner Stolfi:

The inequities that communities of color have faced by the COVID-19 crisis has only expanded the need to create better-supporting structures for them. Our communities are struggling on multiple levels, including economically and with mental and physical health. This moment of crisis calls for solutions that will build toward a more equitable future.

Communities of color need viable options for healing, so, in this letter and in letters to come, we will be articulating what policy solutions we feel are needed to help our communities live and thrive. These solutions will alleviate the suffering of marginalized, poor, and rural communities in Oregon.

1) Allow mental health interns on insurance panels so they can bill insurance. As of March 27, there were 1,446 interns (1,158 Licensed Professional Counselor Interns and 288 Licensed Marriage and Family Interns) who have wanted to help Oregonians through this crisis but are being limited because of an inability to bill insurance. These newer counselors have often developed more cultural competency through education, and many are counselors of color or from underrepresented communities. As a result of not being able to bill insurance, clients do not get the care they need, and some end up having to forgo mental health treatment entirely. Moreover, because of their inability to bill insurance, many interns are struggling to earn a living wage in these economically trying times. Instituting this rule will instantly increase the supply of mental health practitioners available to Oregonians, giving more people access to culturally competent care. Instituting this change now will also take advantage of new rules for telehealth, increasing access to mental health counseling in rural communities.

## 2) Reduce the direct hourly requirement for full licensure to 1,200 hours.

No existing research that suggests that having a high direct hourly requirement leads to competency among mental health practitioners, yet Oregon requires interns to obtain 2,400 direct client hours to become fully licensed. By comparison, Washington requires 1,200 direct hours, California 1,750 hours, and Idaho 400 hours. The Oregon Board of Licensed Professional Counselors and Therapists (OBLPCT) recently amended OAR 833-020-0210 to allow reciprocal licensure for those practicing outside of Oregon to allow them to practice within the state for six months because of the crisis. The board is thus affirming that a lower direct hourly total is acceptable—just not to practitioners in Oregon. We believe this is a significant inequity that must be corrected immediately by changing the direct hourly requirement to 1,200 hours.

## 3) Develop a COVID-19 Mental Health Relief Fund.

Undoubtedly, communities across Oregon need to heal from the significant difficulties of the last several weeks, and in anticipation of the months to come. This moment offers a good opportunity to get behind that healing by developing a mental health relief fund that the public (especially uninsured and undocumented Oregonians) can access. A portion of this fund can have the specific focus of increasing the recruitment and retention of counselors of color, which

is critical for communities of color in particular to access the culturally-competent resources they need to heal and thrive.

Oregon's marginalized communities, its communities of color, and its rural communities will greatly benefit from the above policies. Thank you for your consideration, and we hope to see you making these changes soon.

Signed,

Janethe Bynum

Rep. Janelle Bynum House District 51