



**TO:** The House Committee on Behavioral Health  
**FROM:** Larry Conner MA, LPC, COPACT President  
**DATE:** February 3, 2021  
**SUBJECT:** HB 2116

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Chair Sanchez, and Members of the Committee:

My name is Larry Conner. I am a Licensed Professional Counselor and the President of COPACT. COPACT advocates for the 6300 Licensed Professional Counselors (LPCs), Marriage Family Therapists (LMFTs) and Registered Interns who provide clinical mental health diagnosis and treatment to over 100,000 Oregonians each week through their work in agencies, universities, corrections, health clinics, rehabilitation and private psychotherapy practices. Thank you for this opportunity to speak with you about HB 2116.

COPACT supports the role of the Oregon Board of Licensed Professional Counselors and Therapists (OBLPCT) in determining if a licensee, intern, or applicant has significant problems with mental health, physical health, or chemical dependency. However, we have some concerns that we hope can be addressed through the following amendments.

**First, COPACT requests that language be included to ensure that the decision to require those evaluations should rest with a mental health professional on the board rather than a board investigator with no mental health training.** The vast majority of health care regulatory boards in Oregon conduct investigations using either health professional board members or health professionals hired to do that job. OBLPCT does not do investigations that way. OBLPCT investigators are largely persons with a past work history as domestic police officers or military police. Some have been attorneys. Though they are licensed investigators, none has ever had any mental health training. COPACT does not believe that such an investigator has the skills to determine if a licensee, intern, or applicant has a condition that would require a medical, psychological, or chemical dependency evaluation. Therefore, COPACT requests that any information that would lead the board to require a mental health or chemical dependency evaluation should be gathered by a mental health professional on the board.

**Second, we request that the medical confidentiality of the evaluations is protected.** Specifically, we urge that the bill be amended to give individuals who are required to undergo evaluations the option to surrender their licenses, registrations, or applications for licensure, rather than release to the board the personal information contained in the evaluation. Furthermore, we request the inclusion of a requirement that the board protect the confidentiality of any of the evaluations they receive, so those evaluations never become public.

It would be a punitive injustice if a licensee, intern, or applicant has a negative mental health or chemical dependency evaluation, and the results are made public. Imagine that person loses their license to practice but goes on to successfully complete chemical dependency or mental health treatment and then lives a healthy life. It is an injustice to have that initial evaluation exist online in one form or other to be read by anyone at any time. That could have an impact on the person's ability to make a living, get a loan, buy a house, or get life or disability insurance. The bill must require that OBLPCT will never release medical information from these evaluations under any circumstance.

**Finally, we request that the board be required to work collaboratively with those being investigated to find evaluations that are covered by the person's health insurance.**

COPACT has drafted some proposed changes to the bill language and we have submitted them to OBLPCT for their consideration. We would be happy to share those with the Committee if requested.

Thank you for this opportunity to testify and request amendments to HB 2116.

Sincerely,

Larry Conner MA LPC  
COPACT President