

Requested by Representative DIEHL

**PROPOSED AMENDMENTS TO
HOUSE BILL 4071**

1 On page 1 of the printed bill, delete lines 4 through 27 and delete page
2 2 and insert:

3 **“SECTION 1. (1) The Task Force on Health Professional Licensing**
4 **Modernization is established.**

5 **“(2) The task force consists of 18 members appointed as follows:**

6 **“(a) The President of the Senate shall appoint two members from**
7 **among members of the Senate.**

8 **“(b) The Speaker of the House of Representatives shall appoint two**
9 **members from among the members of the House of Representatives.**

10 **“(c) The Governor shall appoint 14 members as follows:**

11 **“(A) A representative of the Oregon Medical Board;**

12 **“(B) A representative of the State Board of Licensed Social Work-**
13 **ers;**

14 **“(C) A representative of the Oregon Board of Dentistry;**

15 **“(D) A representative of the Oregon Board of Physical Therapy;**

16 **“(E) A representative of the Oregon State Board of Nursing;**

17 **“(F) A representative of physicians licensed under ORS chapter 677;**

18 **“(G) A representative of clinical social workers licensed under ORS**
19 **675.530;**

20 **“(H) A representative of dentists licensed under ORS chapter 679;**

21 **“(I) A representative of nurses licensed under ORS chapter 678; and**

1 **“(J) Five representatives of employers of the health professionals**
2 **described in subparagraphs (F) to (I) of this paragraph, at least two**
3 **of whom represent counties, two of whom represent clinic systems and**
4 **one of whom represents a hospital system.**

5 **“(3) The task force shall:**

6 **“(a) Review the mission and vision statements of the health pro-**
7 **fessional regulatory boards described in subsection (2) of this section;**

8 **“(b) Recommend key performance metrics for health professional**
9 **licensing processes for each board;**

10 **“(c) Recommend resources and timelines needed for the health**
11 **professional regulatory boards to develop actionable plans to meet**
12 **their key performance metrics with a focus on what is needed to de-**
13 **liver health professional licenses accurately, in a timely manner and**
14 **with high applicant satisfaction;**

15 **“(d) Identify roadblocks to success, including applicant-facing pro-**
16 **cesses, internal processes and technical infrastructure;**

17 **“(e) Review what changes in health professional regulatory board**
18 **processes have been successful in shortening application timelines and**
19 **can be replicated;**

20 **“(f) Review the health professional regulatory boards’ technical**
21 **infrastructure or other resources that have been successful in im-**
22 **proving functions;**

23 **“(g) Identify best practices from other states’ efforts to improve li-**
24 **ensing processes;**

25 **“(h) Explore barriers to and recommend solutions for prompt li-**
26 **ensing of health professionals who move to Oregon from other states**
27 **and of new graduates;**

28 **“(i) Recommend processes by which health professionals trained**
29 **outside of Oregon may achieve licensure within an appropriate**
30 **timeframe; and**

1 “(j) Recommend best practices for the health professional regula-
2 tory boards when interacting with applicants.

3 “(4) The task force may request that health professional regulatory
4 boards, including but not limited to those described in subsection (2)
5 of this section, and the Health Licensing Office provide information
6 to the task force.

7 “(5) A majority of the voting members of the task force constitutes
8 a quorum for the transaction of business.

9 “(6) Official action by the task force requires the approval of a
10 majority of the voting members of the task force.

11 “(7) The task force shall elect one of its members to serve as
12 chairperson.

13 “(8) If there is a vacancy for any cause, the appointing authority
14 shall make an appointment to become immediately effective.

15 “(9) The task force shall meet monthly from April 2024 through
16 December 2025 and may hold additional meetings at times and places
17 specified by the call of the chairperson or of a majority of the voting
18 members of the task force.

19 “(10) The task force may adopt rules necessary for the operation
20 of the task force.

21 “(11) The task force shall submit three reports in the manner pro-
22 vided by ORS 192.245, and include recommendations for legislation, to
23 the interim committees of the Legislative Assembly related to health.
24 The task force shall submit the reports on or before:

25 “(a) September 15, 2024;

26 “(b) September 15, 2025; and

27 “(c) December 15, 2025.

28 “(12) The Legislative Policy and Research Director shall provide
29 staff support to the task force.

30 “(13) Members of the Legislative Assembly appointed to the task

1 force are nonvoting members of the task force and may act in an ad-
2 visory capacity only.

3 “(14) Members of the task force who are not members of the Leg-
4 islative Assembly are not entitled to compensation or reimbursement
5 for expenses and serve as volunteers on the task force.

6 “(15) All agencies of state government, as defined in ORS 174.111,
7 are directed to assist the task force in the performance of the duties
8 of the task force and, to the extent permitted by laws relating to
9 confidentiality, to furnish information and advice the members of the
10 task force consider necessary to perform their duties.

11 “SECTION 2. Section 1 of this 2024 Act is repealed on December 31,
12 2025.

13 “SECTION 3. This 2024 Act takes effect on the 91st day after the
14 date on which the 2024 regular session of the Eighty-second Legislative
15 Assembly adjourns sine die.”.

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