

Submitter: Lori Schelske  
On Behalf Of:  
Committee: House Committee On Behavioral Health and Health Care  
Measure, Appointment or Topic: HB3351

I am in favor of Oregon Counselors joining compacts with other states. As department chair of Corban University's Clinical Mental Health Counseling program, I believe there are several arguments in favor of this bill. Oregon shares borders with Washington and California and often counselors need to interrupt care with clients if clients move from Portland across the bridge to Vancouver. This interruption in care can leave clients feeling abandoned and without care during stressful times in their lives. One of the ethical issues counselors face is "client abandonment." A counselor cannot abandon a client. However, the legal issue of not being allowed to practice across state lines creates a tension that is difficult for counselors to resolve. Compacts would give clarity and allow counselors to provide continuity of care in these situations.

Another argument in favor of the Bill is that without Compacts, states need to decide on a case-by-case basis whether a client who moves can continue to work with a counselor in another state. In cases I have seen, the counselor has contacted the board in each state and the answers received have been murky, unclear and sometimes contradictory. Recently, a counselor was told that one state would agree with whatever the other state said and the "other state" said the same thing. Counselors want to know without a doubt that they are practicing legally and ethically and Compacts would clear this up. I will add to this that when defining compacts, it also needs to be clearly stated how it applies to Registered Associates. My recommendation is that the Compacts be the same for Registered Associates.

The severe mental health crisis we are experiencing in Oregon can only be helped with interstate agreements such as Compacts. I do not see a downside. Nearly every licensed counselor who takes health insurance has a wait list. Per Psychology Today, many are not even adding people to the wait list because their lists are too long.

Thank you, Lori Schelske, PhD, LMFT, Registered Supervisor