

March 29, 2022

To: Chairman Wiggam, Vice Chair John, Ranking Member Kelly, and Members of the House State and Local Government Committee

I am here today to provide proponent testimony for House Bill 452. I also want to express my appreciation to Representative Manning for her continued support for the addictions counseling profession, and for Jill Smock, Executive Director of the Ohio Chemical Dependency Board (OCDP) for her tireless work to address the changes that are needed in our field.

I have been in this field since 1979, providing addictions treatment services to adolescents, adults and to family members. In the past, I have been a OCDP Board member, OCDP treatment and education committee member, past president of the Ohio Coalition of Associate Degree Human Service Educators, which represents 15 different community colleges across the state. And now in retirement, I continue to be committed to this profession.

As a professor from Columbus State Community College, I developed certificate programs for individuals entering the field with another degree and served as the lead instructor for all classes addressing addictions related issues. Committed to this profession and all we can do to help those suffering from substance use disorders and the professionals to work with them.

It is absolutely time to change the language from 'Chemical Dependency' to 'Substance Use Disorders.' Although this field does not have a universal and consistent language this change will better align the term with the language used by most behavioral health professionals and the language in the DSM diagnostic manual.

When the Ohio Chemical Dependency Professionals Board was created, many provisions were written into to statute. Throughout the years it has become increasingly evident that transitioning specific items into rule will allow for greater flexibility in this ever-changing profession and allow those changes to be implemented with greater expedience than is now required in the legislative process.

A provision in this bill allows for a more flexible and reasonable approach to clinically focused graduate degrees. The current language has prevented graduates in masters of addictions counseling from being able to meet the LICDC requirements due to how prescriptive and restrictive the language. HS 452 maintains high educational and experiential requirements while allowing the Board to review and evaluate other clinical degrees to support individual's who are making choices to dedicate themselves to this critical work.

Currently the entry level license, the Licensed Chemical Dependency Counselor II (LCDC II) requires an associate degree in a behavioral science. The next level of licensure, the LCDC III requires a bachelor's degree in a behavioral science. The LCDC III is an important license as it allows for supervision of CDCAs, LCDC IIs, and has the authority to diagnose under supervision. There are very few specific Addictions Counseling degrees. Most individuals that meet the current LCDC III degree requirements come from criminal justice, psychology, and social work.

As I am sure you are aware, now there is a significant number of individuals who have advanced degrees, bachelors and higher that will experience a desire to work in the addictions counseling field later in life. So often these are dedicated individuals who are changing their careers to be involved in the critical work of helping those with substance use disorders and are not in the position to pursue another bachelor degree. Many of these individuals attend community

colleges who have addiction counseling certificate in addictions which include practicum experience and meet the addictions educational requirements for advanced levels of license, yet regardless of their previous degree, they are only able to meet the LCDC II level of licensure.

House Bill 452 allows for individuals who have a non-behavioral science to meet the LCDC III requirements if they have completed an addictions certificate that includes both the educational content hours along with a clinical practicum requirement. In most cases, these individuals have received more behavioral science educational hours than a person in most bachelor's degrees in a behavioral science. This is not a new idea, in fact, we have been discussing this for almost 10 years, only reinforcing that having more provisions in rule can

This has been a disincentive for individuals to enter our field as they are truly stuck in the entry license level without the opportunity to progress. House Bill 452 rectifies this issue, enabling individuals with a bachelor's degree in a non-behavioral science degree that complete a specific course of study that meets the OCDP requirements. Not only will this bill allow individual to practice at an advanced level of licensure, creating a reasonable progression within the profession, it will encourage educational institutions to enhance or create certificates that will support these dedicated individuals wanting to work in this field.

I would be remiss if I did not mention one thing that you, as legislators, can make a difference. If we have learned anything in our opiate crisis about simply throwing money (especially short-term money) at the addictions providers and expecting greater results, is not sufficient. Yes, money is an issue, but money that pays for longer term treatment and greater services for family members is woefully inadequate. Our field continues to be in a stranglehold for reimbursement dollars. We need to attract high-level clinicians to provide the clinical services for individuals with co-occurring disorders and more complicated recovery challenges. I believe the future of so many children and adults who have been impacted by addiction will directly impact Ohio's future. If we do not invest in them and the professionals who provide services to them, shame on us. It is often true that we get what we pay for and in the addictions field, we also get the results of not paying for adequate treatment services provided by qualified professionals. I encourage you to change this.

Thank you for listening and I encourage you to support and pass House Bill 452.

Respectfully submitted,

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