Happy 2022, OCA Members! I want to take a second to thank you for taking time to engage with the GRC Newsletter, as it is a great resource to stay up to date on the legislative and advocacy efforts of OCA. I’m looking forward to OCA’s continued efforts on many legislative fronts, such as the counseling compact and telehealth regulations. Ohio has been recognized many times over the years for setting an example for counseling excellence. The counseling compact legislation is of upmost importance, as Ohio has the opportunity to set the tone for compact standards. I believe it is a priority to make more counselors in Ohio informed of the legislative and advocacy efforts of OCA. If more counselors are aware of these efforts, they will be more likely to be motivated to stay informed and possibly participate at the state and national level. It is important for all counselors in Ohio to understand the impact that the counseling compact can have on them individually as a counselor, their clients, and their agency or practice.

Another priority I have is to see more member engagement at the legislative and advocacy level. I encourage you to reach out to your GRC representative (information listed at the bottom of the newsletter) with any questions you may have, or should you be interested in becoming involved. In the words of Stephen Covey, find your voice and inspire others to find theirs.

Thank you for your continued support of OCA.
Staci Tessmer, M.A., LPCC-S, NCC, BC-TMH
OCA President-Elect
Legislative efforts during the first half of 2021 were dominated by Ohio's biennial budget process. Two issues were of specific importance to OCA:

1. Language extending Counselor Trainee (CT) status for 6 months

Here is the language that was added to ORC 4757.10, regarding CT status:

"(8) In the case of an individual who is voluntarily registered as a trainee under division (B)(7) of this section and who has graduated but not yet completed all requirements for licensure, provide for an extension of the individual's registration for a period of six months beginning on the date of the individual's graduation."

2. Medical Conscience clause

Ohio's legislature enacted a "medical conscience" provision which allows healthcare providers to decline providing a healthcare service that is in conflict with the provider's moral, ethical, or religious beliefs. Examples of health services include diagnosis, referral, counseling, or research. The only exemption is for federally-required emergency care. The provision also allows payers to refuse to pay for medical services they object to on moral, ethical, or religious grounds. Despite these provisions, the clause does allow patients the opportunity to seek an alternate provider if their practitioner exercises his or her rights per this clause.

OCA GOVERNMENT RELATIONS IN 2021: A YEAR IN REVIEW

OCA's lobbyists, Amanda Sines and Julia Wynn of the Government Advantage Group, work alongside the Government Relations Committee to support Ohio’s efforts to promote and strengthen the counseling profession. They have provided the following "Year in Review" for readers of The Counseling Advocate to reflect on all the work we've done in the past year. The OCA Government Relations Committee is looking forward to 2022 so we may continue building upon the strong foundation of excellence set by previous Ohio counseling leaders.

OCA LEGISLATIVE ADVOCACY DAY

OCA’s Government Relations Committee hosted a virtual Legislative Advocacy Day on April 13, 2021. Participants learned about issues such as supporting access and coverage for telehealth; opposing universal licensing; and supporting a ban on conversion therapy. We heard from Representative Sara Carruthers (R) who is the Chair of the newly formed House Behavioral Health and Recovery Supports Committee and had a robust breakout discussion on the counseling licensure compact.

OCA WORKS TO JOIN THE INTERSTATE COUNSELING LICENSURE COMPACT

OCA has supported legislation to enter Ohio into the ACA’s licensure compact. The bill (Senate Bill 204) was unanimously passed by the Ohio Senate, and has been sponsored by Senator Kristina Roegner (R), who has shepherded many other compacts through the legislature. Ten states need to enact legislation to enter into the compact in order for it to go into effect. Ohio has an exciting opportunity to be one of those first 10 states, which means that our Compact Commission Representative will then have a role in writing the rules of the compact. SB 204 is pending in the House Behavioral Health and Recovery Supports Committee, and we are hopeful the legislation will get some hearings and favorable action early in 2022.

Separately, OCA has advocated to amend the “universal licensing” bills, which would exempt those licensure boards that have a compact. OCA believes strongly that the compact model better serves professionals and patients versus universal licensing bills.

TELEHEALTH LEGISLATION SIGNED INTO LAW

House Bill 122 was sponsored by Reps. Mark Fraizer (R) and Adam Holmes (R), and requires private insurers to cover telehealth services by professional clinical counselors, among other health professionals. Although the COVID-19 pandemic prompted Ohio to adopt rules requiring coverage for telehealth services, the statutory certainty provided by HB 122 ensures continued access to essential remote care. The Ohio House and Senate unanimously passed the bill, and the Governor signed the bill into law on December 22, 2021.

WELCOME GENE DOCKERY! THE COUNSELING ADVOCATE’S NEW ASSISTANT EDITOR

Gene Dockery, LPC, NCC, has stepped into the role of Assistant Editor of The Counseling Advocate. They are a third-year doctoral student in Ohio University's Counselor Education and Supervision program and also work as a counselor in Southeast Ohio. They are an active member of SAIGE and Chi Sigma Iota, and are interested in supporting the LGBTQ+ population.

BUDGET ADVOCACY

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OCA sent a letter to Governor DeWine asking him to veto this provision, along with other healthcare associations; however, he did not elect to do so, stating that he does not believe the language fundamentally changes the authority providers currently have to decline to perform a service.
OCA is a member of a broad coalition of organizations opposed to HB 248 and other such initiatives which discourage vaccinations. Outlandish claims made by proponents of HB 248 made national news. During opponent testimony, medical associations, business groups, and other respected organizations came forward to dispute misinformation. While this bill did not get any formal votes, the Ohio House did opt to pass a version of this vaccine mandate prohibition via House Bill 218. This bill was narrowly tailored to the COVID-19 vaccine, but has an expiration date and also extends liability protections that are broadly tailored to the COVID-19 vaccine, but have no support from any of those groups. The anti-vaccination groups are now looking to pursue a ballot initiative to enact HB 248.

While HB 218 was the House’s attempt to find a compromise between healthcare organizations, business, and anti-vaccination advocates, the result was a bill that has no support from any of those groups. The anti-vaccination groups are now looking to pursue a ballot initiative to enact HB 248.

OTHER 2021 HIGHLIGHTS

- OCA continues to be active on multi-group coalitions such as Parity @10 and the Coalition for Healthy Communities.
- OCA has been engaged in conversations with Ohio PHP to expand their programs and services to counselors.
- OCA has been engaged with legislators and other stakeholders regarding finding a path for LPCCs to have pink slipping authority.
- OCA has been supportive of HB 333, OSCA championed legislation to create a job description for school counselors.
- OCA has also been tracking and engaging in conversations regarding the licensure of art and music therapists. This has been an issue pursued by art and music therapy professionals for years.

Ohio’s No Surprise Medical Billing Law

Ohioans who get health insurance through plans regulated by the Ohio Department of Insurance are protected by Ohio law from receiving surprise medical bills. This law provides the following protections to the insured when they receive unanticipated out-of-network care:

- No balance billing for emergency services, including emergency services provided by an ambulance, even if they’re provided out-of-network.
- No balance billing by out-of-network providers at an in-network facility when you’re unable to choose an in-network provider.
- Cost-sharing amounts, such as copayments, coinsurance, and deductibles, are limited to the amount you would pay for in-network services.

Health plans regulated by the state of Ohio should have the letters “ODI” clearly denoted on your insurance identification card. You can find additional information [HERE](#).