

Senate Public Health and Welfare Committee Written Testimony in Opposition to Senate Bill 217

March 4, 2013

Chairwoman Pilcher-Cook and Members of the Committee,

DCCCA, Inc. is an established statewide, non-profit organization with a long service history. Each day we offer substance use disorder (SUD) treatment to more than 450 adults, adolescents and families in five treatment facilities, located in three Kansas communities: Wichita, Lawrence and Pittsburg. Our comprehensive continuum of SUD treatment includes non-medical detoxification, intensive short term residential, intensive outpatient, outpatient individual and group therapy, assessment and education. We specialize in serving pregnant women and women with dependent children, and have remained a safety net provider for those who do not have sufficient personal financial means or insurance coverage. DCCCA is also a member of the Kansas Association of Addiction Professionals and I currently serve as Past Chair.

DCCCA, Inc. is opposed to Senate Bill 217 and offers the following items for your consideration.

Consensus agreement was reached at the Legislature's direction.

The initial Addiction Counselor Licensure Act created disagreement among the professional disciplines licensed by the Behavioral Sciences Regulatory Board (BSRB) in 2011. At the Legislature's direction, the BSRB convened representatives of all the professional disciplines and the schools of Social Work. The Kansas Chapter of the National Association of Social Workers (KNASW) was represented by their Board President and Executive Director. I represented the Kansas Association of Addiction Professionals (KAAP). A consensus agreement was reached by all parties, outlining recommended changes to the Addiction Counselor Licensure Act. These recommendations included the continuing requirement that professionals practicing addiction counseling must be licensed as Addiction Counselors or Clinical Addiction Counselors. KNASW and KAAP, as well as those representing professional counselors, psychologists and marriage and family therapists, agreed with the changes. Those changes were reflected in SB100, which was signed by Governor Brownback last year.

It is concerning that KNASW representatives are now advocating for provisions contrary to the agreements they helped reach, at the Legislature's direction, and passed into statute.

Addiction Counseling is a specialty practice.

Kansas has made a commitment to its citizens that they will be served by competent, licensed addiction counselors if they require SUD treatment. Further, Kansas has promised that those



same addiction counselors will be held to ethical and accountability standards unique to the treatment profession and monitored by the BSRB.

KNASW suggests that someone with a social work license at the bachelor's or master's level has sufficient education and knowledge to facilitate addiction counseling. I am a master's level licensed social worker, someone who has supervised social work students from several colleges and universities over 20 years, and an employer of many clinicians with varying professional licenses, including social work. These roles have consistently reinforced that a social work degree and license validate a broad, general education and beginning skills as a practitioner. They do not automatically reflect the specialized education and competency standards necessary to effectively treat those who seek SUD services. Meeting the state standards for addiction counseling licensure, and successfully passing the required national addiction counselor competency examination, ensures that social workers and other professionals adhere to Kansas' commitment to its citizens.

The Kansas Legislature has consistently supported addiction treatment as a specialty service, requiring unique education, experience and accountability. SB217 erodes your commitment to citizens that their treatment is offered by professionals trained and supervised in Substance Use Disorder services. We strongly urge you to maintain the Legislature's support of addiction treatment and addiction counselors, and oppose SB217.

Sandra J. Dixon

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