



ARIZONA STATE SENATE
Fifty-Sixth Legislature, Second Regular Session

AMENDED
FACT SHEET FOR S.B. 1062

behavioral health professionals; addiction counseling

Purpose

Expands the practice of substance abuse counseling to include treatment for all forms of addiction that are a persistent, compulsive dependence on a behavior or substance. Reduces, from three to one, the number of years in which a behavioral health professional seeking licensure by endorsement through the Arizona Board of Behavioral Health Examiners (Board) must be licensed or certified in at least one other state or federal jurisdiction.

Background

The Board oversees the licensure and regulation of the practice of behavioral health, which includes the following practice areas: 1) marriage and family therapy; 2) professional counseling; 3) social work; and 4) substance abuse counseling. The *practice of substance abuse counseling* is the professional application of general counseling theories, principles and techniques as specifically adapted, based on research and clinical experience, to the specialized needs and characteristics of persons who are experiencing substance abuse, chemical dependency and related problems and to the families of those persons (A.R.S. §§ [32-3251](#) and [32-3253](#)).

An applicant for licensure as an independent substance abuse counselor is required to: 1) have a graduate level degree from an accredited college or university in a behavioral science, with an emphasis on counseling, from a program approved by the Board or that meets requirements outlined by Board rules; 2) present documentation of having completed at least 1600 hours of work experience in substance abuse counseling over a period of at least 24 months, with direct client contact and under supervision that meets the requirements as prescribed by the board; 3) pass a Board-approved examination; and 4) provide an attestation from the applicant's supervisor that the applicant demonstrated satisfactory competency in clinical documentation, consultation, collaboration and coordination of care of clients ([A.R.S. § 32-3321](#)). Pursuant to Board rule, each prospective licensee's required graduate-level behavioral health science education must meet the core content standards outlined by the Board, including the use of assessment and diagnosis to develop appropriate treatment interventions for substance use disorders or other addictions (A.A.C. [R4-6-701](#) and [R4-6-703](#)).

There is no anticipated fiscal impact to the state General Fund associated with this legislation.

Provisions

1. Expands the practice of substance abuse counseling to include treatment for all forms of addiction.

2. Replaces statutory use of the term *substance abuse counseling* with the term *addiction counseling*.
3. Defines *practice of addiction counseling* as the application of general counseling theories, principles and techniques to the specialized needs of persons who are experiencing an addiction that is a persistent, compulsive dependence on a behavior or substance, including mood altering behaviors or activities known as process addictions.
4. Requires a person who is licensed as a *substance abuse technician, associate substance abuse counselor* or *independent substance abuse counselor* to update the person's licensure designation to *licensed addiction technician, associate addiction counselor* or *independent addiction counselor* by the person's license renewal date.
5. Reduces, from three to one, the number of years in which a behavioral health professional seeking licensure by Board-endorsement must be licensed or certified in at least one other state or federal jurisdiction.
6. Exempts the Board from statutory rulemaking requirements for 12 months for purposes of licensing and regulating addiction counselors and technicians.
7. Makes technical and conforming changes.
8. Becomes effective on the general effective date.

Amendments Adopted by the House of Representatives

- Modifies the requirements for behavioral health professionals seeking licensure by endorsement through the Board.

Senate Action

House Action

HHS	1/23/24	DP	6-0-1	HHS	2/26/24	DP	8-1-0-1
3 rd Read	2/5/24		25-5-0	3 rd Read	4/2/24		41-12-6-0-1

Prepared by Senate Research
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MM/KS/slp