



DOPL Board introductions
OPLR Healthcare Licensure Reviews
April 2026

Licenses in OPLR healthcare review

2025 Review

Nursing & Related

APRN, CNM, CRNA, Direct Entry Midwife, LPN, Medication Aide, Physician Assistant, Respiratory Therapist, RN, RN Apprentice

Allied Health – Physical:

Acupuncturist, Athletic Trainer, OT, OT Assistant, PT, PT Assistant

Allied Health – Speech/Hearing:

Audiologist, Hearing Instrument Intern, Hearing Instrument Specialist, Speech Language Pathologist

2026 Review

Fall 2025 Reviews

- Dietitian
- Genetic Counselor
- Health Facility Administrator
- Medical Language Interpreter

2026 Reviews

- Anesthesiologist Assistant
- Chiropractor
- Dentist & Dental Hygienist
- Naturopath
- **Optometrist**
- Pharmacist & Pharmacy Technician
- Physician & Surgeon (incl. DO)
- Podiatrist
- Radiologic Technician & Assistant

OPLR review criteria for healthcare licensure

Safety

- Harm to the **health, safety,** or **financial welfare** of the public
- **Severity, probability,** and **permanence** of harm
- The extent to which the proposed or existing regulation of the occupation **protects against** or **diminishes** the harm

Access

- The **supply** of qualified practitioners
- **Barriers to service** that are not in the public interest
- **Barriers to entry** into the occupation or related occupations
- Potentially **less burdensome regulatory alternatives**

Affordability

- Imposes **new costs** on existing practitioners
- Barriers to service that are not in the **public financial welfare**
- Impacts the health care provider's **ability to obtain payment**
- **Barriers to entry** into the occupation or related occupations

Example ways to adjust occupational regulation

<u>Area</u>	<u>Example adjustment</u>	<u>Description</u>
<i>Structure</i>	Change model of regulation	<u>Licensure</u> (protected scope of practice) vs <u>Certification</u> (verified qualifications, protected title) vs <u>Registry</u> (name and address) vs other
<i>Entry</i>	Change educational req's	Allow for alternate educational pathways (e.g., stacking experience and credentials)
	Change experience req's	Adjust the number of practical or clinical hours required for licensure
	Change exam req's	Create alternative exams or pathways
<i>Practice</i>	Change scope of practice	Add procedures, services, or tasks for which providers are (or could be) fully trained and safe but not allowed by practice act
	Change independence & supervisory relationships	Allow lighter or no supervision for routine or lower risk tasks; require more formal or explicit supervision for higher risk tasks
	Change investigation & enforcement	Focus investigation on sub-groups of practitioners more likely to experience issues (e.g., early-career, repeat offenders)

Board input: Perspectives on licenses under review and related issues

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- **To what extent can changes in state licensure:**
 - Improve patient safety?
 - Improve patient access?
 - Reduce practitioner barriers / costs?
 - Improve the state's oversight of a profession (efficiency/effectiveness)?
- **Are there data sources you recommend?**
- **What perspectives should OPLR keep in mind?**
- **Who else should OPLR speak to?**

Anticipated timeline

Review step

Develop initial findings from research & analysis

Vet findings and early recommendations

Finalize review recommendations

Timing

January – April

May – August

September – November