



LICENSING REFORM TASK FORCE

Parking Lot Topics Update

June 8, 2026

This memo revises the parking lot list presented at the April 13, 2026, Licensing Reform Task Force meeting to address the current status of the topics. See the original Parking Lot List for reference.

Quick Reference Table

Parking Lot Topic	Current Status	Subcommittee / Scope Note
Occupations that are not healthcare or construction — cosmetology and funeral services	Partially addressed. Cosmetology appears in Barriers compact/portability discussion; funeral services not specifically addressed.	Barriers for portability; Sunset or full Task Force for practice-act review or new non-healthcare workstream.
Building codes and zoning reform	Partially addressed if narrowed. Construction compliance work includes local building-official coordination; zoning remains outside licensing unless reframed.	Construction for licensing/enforcement/building-code coordination; park or refer zoning.
Insurance reimbursements for healthcare providers	Partially addressed. Telehealth reimbursement/payer alignment is being studied; general reimbursement rates remain adjacent.	Healthcare for telehealth-related reimbursement; broader reimbursement may be outside DLI licensing.
Prevailing wage and bids for contracts	Not directly addressed.	Park unless reframed as license-based bid qualifications, contractor registration, worker classification, or construction compliance.
Administrative rule review	Actively addressed in part. Barriers is reviewing rules affecting supervision, education/training, scope, delegation, bottlenecks, and setting limits.	Barriers for DLI licensing rules; interagency coordination for DPHHS.
Revising background checks for private security	Partially addressed. General Barriers background-check options exist; private-security-specific review is still needed.	Barriers, with targeted private-security legal review.
Water well drilling licensure	Not directly addressed.	Potential Construction or Sunset item after identifying governing authority and specific barrier.
Insurance pathways for additional healthcare providers	Partially addressed. Barriers is studying emerging credentials and reimbursement-linked pathways.	Barriers with Healthcare coordination; reimbursement itself may be outside DLI authority.

Parking Lot Topic	Current Status	Subcommittee / Scope Note
Employer supervision requirements	Actively addressed. Barriers supervision review covers remote/hybrid supervision, employment status, group supervision, documentation, and payer restrictions.	Barriers; coordinate with payers where barrier is insurer-imposed.
Contractor's liability insurance	Actively addressed. Construction has insurance-attestation and proof-of-liability-insurance staff-analysis recommendations.	Construction; staff analysis on authority, burden, feasibility, disclaimers, and consumer-protection value.
Artificial intelligence	Partially addressed. Clinical AI appears in Healthcare comments, but no final AI recommendation is reflected in reviewed supplemental recommendation documents.	Healthcare for clinical AI; full Task Force or agency governance for non-clinical AI.
Low insurance reimbursement rates	Partially addressed. Addressed only where overlapping with telehealth payment policy and Medicaid-commercial alignment.	Healthcare if tied to telehealth access; broader reimbursement rates likely outside licensing.
Insurance limitations on the use of telemedicine	Actively addressed in part. Healthcare is reviewing prior authorization, billing transparency, payment policy, and Medicaid-commercial alignment.	Healthcare; payer/provider/CSI input needed.
Crane licensing	Partially addressed. Barriers national-certification duplication review can evaluate whether crane licensing should be retained, streamlined, converted, or removed.	Barriers/Construction/Sunset; needs safety and credentialing record.
Streamline trade classifications	Actively addressed in part. Construction is mapping regulated construction trades/categories; Barriers addresses national certification and workforce bottlenecks.	Construction and Barriers.

Licensing Expansion and Occupations Outside the Core Subcommittee Lanes:

Occupations that are not healthcare or construction — cosmetology and funeral services

Current status. This topic is **partially being addressed** only at a general level. The Barriers Subcommittee's portability and compact discussion identifies cosmetology as one of the compact opportunities that could be considered through board-led compact review; however, there has not been a specific recommendation for funeral services.

Relevant details. If the Task Force wants to address cosmetology beyond a general compact/portability concept, or address funeral services at all, those issues likely require either a new non-healthcare workstream, assignment to Barriers for entry/portability issues, or assignment to Sunset Review for practice-act review.

Water well drilling licensure

Current status. This topic has **not been specifically addressed**. It may fit the Construction Subcommittee if the concern involves licensing requirements, scope, public-safety justification, reciprocity, or enforcement, but the current supplemental recommendations do not separately analyze water well drilling licensure.

Relevant details. Before assignment, staff should identify the governing licensing authority and clarify whether the concern is the existence of licensure, application burden, classification/scope, examination or experience requirements, reciprocity, or enforcement.

Construction Regulation, Trades, and Contractor Compliance:

Building codes and zoning reform

Current status. This topic is being **partially addressed** only if narrowed to construction licensing, contractor compliance, local building-official coordination, or enforcement. The Construction Subcommittee's contractor compliance and enforcement recommendation directs staff to review complaint intake, investigations, coordination with local building officials, licensing-board jurisdiction, worker-classification enforcement, workers' compensation compliance, and employer work-authorization verification.

Relevant details. Building-code issues may be within the Construction Subcommittee's lane when tied to licensing, inspections, or enforcement coordination. Zoning reform appears to remain outside occupational licensing unless reframed as a licensing or permitting barrier affecting licensed occupations.

Prevailing wage and bids for contracts

Current status. This topic has **not been directly addressed**. The Construction Subcommittee's compliance work touches worker classification, workers' compensation compliance, and contractor compliance, but it does not make a prevailing wage or procurement-bid recommendation.

Relevant details. Unless narrowed to license-based bid qualifications, contractor registration, worker classification, or construction compliance, prevailing wage and public-contract bidding appear to be adjacent labor/procurement issues rather than occupational-licensing reform issues.

Contractor's liability insurance

Current status. This topic is **actively being addressed** by the Construction Subcommittee. The Subcommittee has advanced two related staff-analysis recommendations: one to evaluate a contractor insurance attestation checkbox or certification, and another to evaluate standardized proof of liability insurance as part of contractor licensing or registration.

Relevant details. Both recommendations are framed as staff-analysis items rather than final statutory language. The recommendations caution that DLI should avoid implying that it guarantees coverage or substantively reviews policy exclusions, limits, classifications, or scope.

Crane licensing

Current status. This topic is being **partially addressed** by the Barriers Subcommittee through its review of duplication between state licensing and national certification. The Barriers workforce memo specifically identifies crane operator comments referencing national crane certification, and the recommendation-options memo includes an occupation-by-occupation option to reduce duplication where national certification supplies the core qualification review.

Relevant details. The parking-lot topic is framed as “retire crane licensing,” but the current subcommittee materials support a more limited review: whether state crane licensing duplicates national certification and whether any state-specific requirement provides meaningful public-protection value. Full retirement of crane licensing would likely require a developed safety, enforcement, federal-requirement, and alternative-credentialing record.

Streamline trade classifications

Current status. This topic is **actively being addressed in part** by the Construction Subcommittee and Barriers Subcommittee. The Construction Subcommittee’s enforcement review asks staff to map which construction-related trades or contractor categories require licensure, registration, or other authorization, while the Barriers materials address national-certification duplication, training access, scope, and workforce bottlenecks.

Relevant details. The Construction Subcommittee has not adopted a final trade-classification restructuring proposal. It has recommended staff review and enforcement mapping to determine whether current licensing, registration, classification, and enforcement tools are appropriately targeted.

Healthcare Insurance, Reimbursement, Supervision, and Telemedicine

Insurance reimbursements for healthcare providers

Current status. This topic is being **partially addressed** by the Healthcare Subcommittee in the telehealth context, but not as a broad healthcare reimbursement-rate review. The Healthcare Subcommittee’s telehealth recommendation identifies commercial payment policy, telehealth-specific prior authorization barriers, provider and consumer notice, audio-only flexibility, cross-state licensure access, and Medicaid-commercial payer alignment as targeted issues for clarification or further study.

Relevant details. General insurance reimbursement rates appear to be outside the core occupational-licensing lane unless tied to licensure, credentialing, telehealth access, or workforce-entry barriers. The Healthcare Subcommittee recommends payer, provider, DPHHS, consumer, and Commissioner of Securities and Insurance input before making broad insurance recommendations.

Insurance pathways for additional healthcare providers

Current status. This topic is being **partially addressed** by the Barriers Subcommittee through its discussion of emerging fields, stackable credentials, alternative pathways, and reimbursement-linked recognition. The Barriers recommendation-options memo identifies community health workers, Medicaid or insurance reimbursement, medication aides, certified nursing assistants, stackable credentials, and rural workforce needs as emerging-field issues requiring further study.

Relevant details. The Barriers memo cautions that reimbursement implications are uncertain and fall outside DLI authority and the Task Force’s scope. This topic should remain in further-study status unless converted into a specific licensing or credentialing question.

Employer supervision requirements

Current status. This topic is **actively being addressed** by the Barriers Subcommittee. The Barriers workforce memorandum identifies supervision as a recurring bottleneck for behavioral-health and candidate-license models and proposes reviewing supervision requirements for candidate-licensed, trainee, assistant, apprentice, and supervised-practice roles.

Relevant details. The Barriers memo specifically distinguishes state licensing supervision requirements from payer credentialing or reimbursement rules. That distinction matters because some supervision barriers may be imposed by insurers rather than by DLI or licensing boards.

Artificial Intelligence

Current status. This topic is **partially being addressed** only to the extent it concerns clinical AI in healthcare licensure. The public-comment materials include a request that “Clinical AI Licensure” be added to the Healthcare Subcommittee’s study topics, but the supplemental recommendation documents reviewed do not show a final adopted AI recommendation.

Relevant details. Clinical AI may fit the Healthcare Subcommittee if framed as a licensed clinical-service model, scope issue, liability issue, or rural-access strategy. Non-clinical AI—such as agency use of AI in licensing administration or public records—does not appear to be assigned in the reviewed materials and may require separate scope direction.

Low insurance reimbursement rates

Current status. This topic is **partially being addressed** only where it overlaps with telehealth reimbursement or payer-policy alignment. The Healthcare Subcommittee’s telehealth recommendation includes options to clarify commercial telehealth payment policy and to align Medicaid and commercial policies where appropriate.

Relevant details. General low reimbursement rates remain primarily an insurance-policy issue, not an occupational-licensing requirement. The Task Force can keep the topic in Healthcare only if it is framed as a telehealth access, credentialing, or workforce barrier requiring payer and provider input.

Insurance limitations on the use of telemedicine

Current status. This topic is **actively being addressed in part** by the Healthcare Subcommittee. The telehealth recommendation identifies telehealth-specific prior authorization barriers, billing notice, commercial payment policy, audio-only flexibility, cross-state access, and Medicaid-commercial alignment as the relevant telehealth policy options.

Relevant details. The Healthcare Subcommittee recommends advancing cross-state access and Medicaid-commercial alignment for further development, while treating commercial payment parity and prior authorization parity as related sub-issues requiring stakeholder input before legislation is proposed.

Administrative Reform and Background Checks

Administrative rule review for DLI and DPHHS

Current status. This topic is **actively being addressed in part** by the Barriers Subcommittee. The Barriers workforce memorandum recommends reviewing supervision, education and training, administrative bottlenecks, scope and delegation, rural oversight eligibility, and setting-specific restrictions to determine whether requirements are calibrated to public-safety risk and rural service needs.

Relevant details. DLI licensing rules are within the Task Force’s core lane when tied to occupational licensing barriers. DPHHS rules may require interagency coordination and should remain within the memo only to the extent they directly affect licensed workforce entry, supervision, scope, reimbursement-linked credentials, or service access.

Revising the process for background checks for private security

Current status. This topic is **partially being addressed** by the Barriers Subcommittee through its general background check and multiple-licensure options, but the supplemental documents reviewed do not contain a private-security-specific recommendation. The Barriers memo identifies background-check reuse, centralized Title 37 background-check standards, and targeted board-by-board cleanup as options.

Relevant details. The general background-check options may help if private-security applicants face duplicative or delayed checks, but staff should separately confirm whether private security is subject to distinct statutory, federal, audit, or public-safety requirements before applying a general background-check reuse or centralization model.

Topics Remaining Parked or Requiring Reframing

The following parking-lot topics still appear to require additional scoping before they can be fully incorporated into current subcommittee work:

1. **Funeral services** — not specifically addressed in the supplemental materials reviewed.
2. **Zoning reform** — likely outside occupational licensing unless reframed as building-code, permitting, or licensed-contractor coordination.
3. **Prevailing wage and bids for contracts** — likely outside occupational licensing unless reframed as contractor-compliance or license-based bid-qualification issues.
4. **Water well drilling licensure** — potentially in scope, but the specific licensing barrier and governing authority need to be identified.
5. **Private-security background checks** — generally related to Barriers background-check work but still needs a private-security-specific review.
6. **General low insurance reimbursement rates** — active only to the extent tied to telehealth; otherwise likely requires payer, Medicaid, CSI, or legislative coordination outside DLI licensing.
7. **Non-clinical artificial intelligence** — clinical AI may fit Healthcare; administrative or agency-use AI needs separate scope direction.