

# Prescriptive Authority for Psychologists

Proposed Legislation to Grant Prescriptive
Authority to Psychologists with Advanced and
Specialized Training in Clinical
Psychopharmacology

PPA RxP Workgroup

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# Proposed Legislation to Grant Prescriptive Authority to Psychologists with Advanced and Specialized Training in Clinical Psychopharmacology

# **EXECUTIVE SUMMARY**

There is a growing national mental health crisis and a shortage of psychiatric specialists to meet the demand (Merritt Hawkins Report, 2018). Most psychotropics are currently prescribed by primary healthcare professionals, including physicians, nurse practitioners, and physician assistants; however, these professionals often have limited training in mental health treatment.

Prescribing psychologists can increase patient access to psychotropic medications, reduce travel, decrease wait times, and ensure better follow-up care for patients already on psychotropic medications. Importantly, suicide rates have decreased in states that have added prescribing psychologists to the workforce (Choudry & Plemmons, 2021). Prescribing psychologists can manage medication treatment for most mental health disorders. They must earn an additional post-doctoral master's degree emphasizing psychopharmacology and the biological bases of behavior, pass a rigorous national exam, an engage in supervised practice.

Currently six states have prescription authority for appropriately trained psychologists: Colorado, Iowa, Idaho, Illinois, Louisiana, and New Mexico. Also, prescribing psychologists have safely and effectively prescribed psychopharmacologic medications in the Public Health Service, Indian Health Service, and the US Military for more than 25 years. The health and welfare of Pennsylvania citizens would improve if this legislation passed into law.

# PPA PROPOSAL

The Pennsylvania Psychological Association (PPA) is pursuing legislation to grant prescriptive authority to licensed psychologists with advanced degrees and training in prescribing psychotropic medications, with the goal of increasing access to appropriate mental health treatment for Pennsylvanians.

To become a prescribing psychologist, a doctoral-level psychologist would need to complete the following additional qualifications (on top of the existing requirements for psychology licensure):

- 1. Complete a two-year (450 hours) post-doctoral master's degree in clinical psychopharmacology, focusing on physiology, pathophysiology, neuroscience, pharmacology, clinical psychopharmacology, and legal/ethical issues;
- 2. Pass the national board examination (Psychopharmacology Examination for Psychologists);
- 3. Complete a preceptorship under the supervision of a physician (MD/DO) or prescribing psychologist; and,
- 4. Prescribe psychotropic agents via a collaborative agreement with primary care providers.

The additional post-doctoral education and training for prescribing psychologists are comparable to other mid-level prescribers, such as nurse practitioners and podiatrists, and the knowledge and competency are comparable to psychiatrists, psychiatric nurse practitioners, and physician assistants (see Chart 1).

After additional training and supervision, psychologists will be credentialed as an independent prescribing psychologist, only allowed to prescribe psychotropic agents that are approved for the treatment of mental and emotional disorders. To maintain the prescribing psychology certificate, prescribing psychologists would be required to completed additional continuing education hours, on an ongoing basis, in psychopharmacology.

This proposed legislation seeks to expand the scope of practice for licensed doctoral-level psychologists with the additional training described above. Once prescribing psychologists gain prescriptive authority in other states, they have been viewed by other prescribers positively, and as competent practitioners (Linda & McGrath, 2017). No state that has granted prescriptive authority to appropriately trained psychologists has rescinded it.

# WHY THIS MATTERS

# Psychiatric service gaps are found across Pennsylvania.

Rural, urban, and suburban areas all struggle to provide sufficient psychiatric services to meet the demand. There are two Pennsylvania counties with the highest Health Professional Shortage Area (HPSA)¹ scores: Philadelphia County (urban) and Potter County (rural). Meanwhile, suburban areas such as Westmoreland County or Chester County have moderate scores, demonstrating insufficient psychiatric care to meet local population needs. PPA conducted a recent survey of licensed psychologists and found that over 41% of clients are required to wait four or more weeks for psychiatric care, including active clients. Based on the evidence (Malowney, et. al, 2015; Warner, 2022), there is not enough psychiatric availability to meet Pennsylvania's needs (see Map 1: Pennsylvania Psychiatric Shortage Map).

Even if there were enough psychiatrists, many do not accept Medicaid or Medicare. In terms of Medicaid, only 35.4% of psychiatrists accept new Medicaid patients, while 73.3% of other medical specialists accept Medicaid (Wen, et al., 2019). As of March 2022, Pennsylvania has enrolled 3,524,494 individuals in Medicaid and CHIP programs (Medicaid & CHIP, 2022). A survey of prescribing psychologists in New Mexico indicated 90% of prescribing psychologists accepted Medicaid (Vento, 2014). Therefore, there is a higher likelihood of Pennsylvanians with Medicaid coverage will have greater access to medication management by prescribing psychologists.

With respect to older Pennsylvanians, only 36.8% of psychiatrist participate in Medicare (Oh, et al., 2022). As of 2020, Pennsylvania has over 2.7 million Medicare beneficiaries (Statista, 2022). Prescribing psychologists will likely increase access for senior citizens.

# Pennsylvania needs nearly 1,000 prescribers to meet the need by 2030

The Health Resources and Services Administration (HRSA) Quarterly Reports reveals a pattern of demonstrated need: Pennsylvania will need approximately 1,000 prescribing professionals to meet the most rudimentary mental health standards by 2030. Legislating prescribing psychologists is essential to achieve this goal. The healthcare system is unable to support enough psychiatrists to cover the demand, as psychiatrists are expensive and rare. The recent increases in psychiatry resident numbers (Moran, 2021) are insufficient to fix Pennsylvania's lack of prescribers. The *Psychiatric Times* admits this point and suggests that psychiatrists collaborate more with nurse practitioners (NPs), especially in states that limit their license (Kuntz, 2022).

Psychiatric NPs could, in theory, address this need. However, another recent analysis (see Map 2: Psychiatric Nurse Practitioner map) demonstrates an inadequate number of psychiatric NPs in Pennsylvania to meet demand (total NPs is 673). More than 70% of Pennsylvania counties have 10 or fewer psychiatric nurse practitioners (Warner, 2022).

# ADDING ESSENTIAL PRESCRIBERS

Psychologist prescribers are uniquely positioned to address the psychiatric access gap in Pennsylvania. There are two ways to measure the possible increase in doctoral-level prescribing professionals in Pennsylvania.

First, we can measure other states with prescribing psychologists as exemplars. In New Mexico, 6.4% of psychologists became prescribing psychologists. The total number is 50. However, because there are 274 psychiatrists in New Mexico, those 50 prescribing psychologists increased the total doctoral-level prescribers by 18.25%. In Louisiana, there are approximately 110 prescribing psychologists, which boosted their number of doctoral-level prescribers by 23.5%, as there are 471 psychiatrists in that state. Given that there are roughly 6,000 psychologists in Pennsylvania, these estimates predict between 384 (6.4%) and 684 (11.4%) doctoral-level prescribers. This estimate of potential prescribing psychologists is in the range of current Psychiatric Nurse Practitioners as of July 2022 (See Map 2: Psychiatric Nurse Practitioner Map).

Second, a recent Pennsylvania Psychological Association survey found that 14% of PPA members would "likely" or "very likely" pursue the necessary training to become prescribers if permitted. Given 6,000 psychologists in the Commonwealth, Pennsylvania could add 840 prescribing psychologists into the workforce, increasing doctoral-level prescribing by 36%. Furthermore, the distribution of these psychologists and a telemedicine option enables them to work with a wide range of Pennsylvania residents (Warner, 2022). Again, there would likely be greater access to care from those Pennsylvanians who have Medicaid coverage (see Vento, 2014).

Prescribing psychologists will help fill the lack of access to psychotropic medication treatment by doctoral-level professionals. Family medicine providers agree that having a prescribing psychologist embedded in a family medicine clinic is helpful to their practice, safe for patients, convenient for patients, and improves patient care (Shearer, Harmon, Seavey, & Tui, 2012).

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# **ENDNOTE**

<sup>1</sup>The Health Resources & Services Administration (HRSA) is the federal bureau that calculates scores measuring quantity and quality of access to various medical services, including psychiatry, over designated geographic areas. The HRSA process is broad and implemented through various subsidiary programs. Thus, it is difficult to establish a singular cohesive perspective on one or more communities. For instance, the HRSA has separate programs for facility deficits, geographic area deficits, and deficits affecting 'special populations' (elderly, children, impoverished groups, etc.). However, HRSA has yet to provide a complete assessment of any particular region's total needs, and may underestimate actual psychiatrist availability (Malowney, et. al, 2015).

Chart 1: Prescribing Professionals in Pennsylvania

# Comparisons in Education Prior to Licensure

Prescribe Any Medication	Physician License	Licensing Exam	Residency (4 years)	Grad Med Trainee License	Licensing Exam	Doctoral Degree	Bachelor's Degree	Psychiatrist
Prescribe Any Medication	Physician License	Licensing Exam	Residency (3 years)	Grad Med Trainee License	Licensing Exam	Doctoral Degree	Bachelor's Degree	Primary Care Physician
Prescribe medications under physician co-signature				PA-C License	Licensing Exam	Master's Degree	Bachelor's Degree	Physician Assistant
Prescribe medications with collaborative agreement				CRNP License	Licensing Exam	Master's Degree	Bachelor's Degree	Nurse Practitioner
Prescribe psychotropic medication only with collaborative agreement	Prescribing Certificate	National Examination	Additional Master's Degree	Psychology License	Licensing Exam	Doctoral Degree	Bachelor's Degree	Prescribing Psychologist
Prescribe medications relative to speciality				Podiatry License	Licensing Exam	Doctoral Degree	Bachelor's Degree	Podiatrist
Prescribe medications relative to speciality				Optometry License	Licensing Exam	Doctoral Degree	Bachelor's Degree	Optometrist
Prescribe medications relative to speciality				Dental License	Licensing Exam	Doctoral Degree	Bachelor's Degree	Dentist

# Pennsylvania Psychiatric Shortage

across Pennsylvania. psychiatric shortages This map illustrates

Key Finding: Mental health service gaps are found across







Psychiatric need being met by current psychiatric workforce:

Pennsylvania citizens directly affected by shortage:

1,729,047

of child or adolescent psychiatrists: Percent of counties with a shortage

"very likely" or "likely" to become 850\* **Number of PA psychologists** prescribers if permitted:



Pike

# GET INVOLVED!

www.papsy.org/RXP this crisis with prescribing psychologists: Learn how other states are addressing

details on the construction of the Pennsylvania Psychiatric Shortage Map please visit our website: www.papsy.org/RXP This map provides the county level sum of the federal government's various Health Professional Shortage Area (HPSA) scores. Darker regions have a larger psychiatric shortage gap, which means more high needs populations and less access to care. For more

Blair

North-

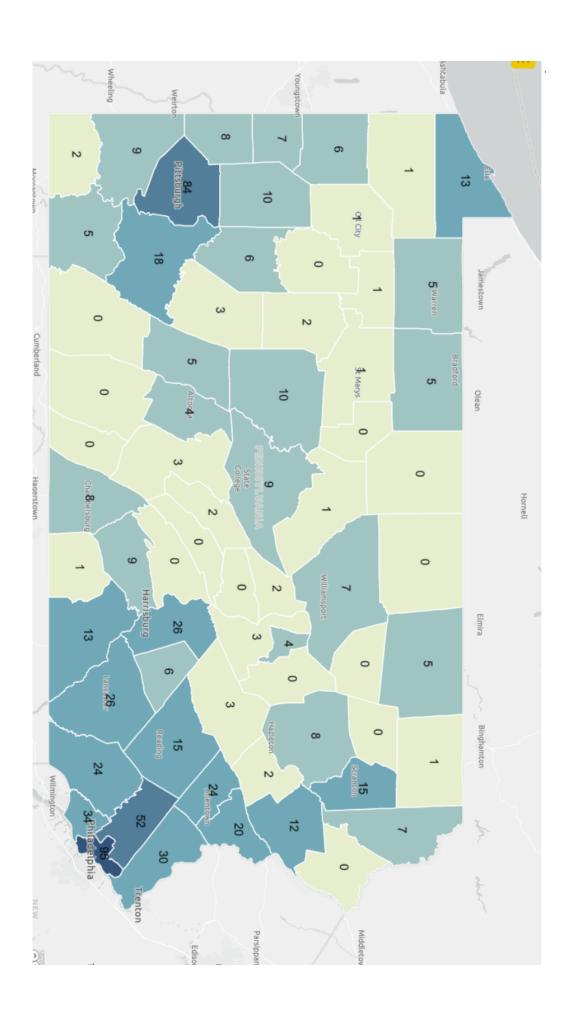
Fulton

Adams

- \*According to American Academy of Child & Adolescent Psychiatry Workforce Maps: https://www.aacap.org/aacap/Advocacy/Federal\_and\_State\_Initiatives/Workforce\_Maps/Home.aspx
- Association membership survey \*\* According to the most recent (2022) Pennsylvania Psychological

from web page: https://data.hrsa.gov/tools/shortage-area/hpsa-find This map data comes from HRSA, and is of 01-20-2022, downloaded

This map was last updated 07-26-22



Map 2: Psychiatric Nurse Practitioners in Pennsylvania

Total Number = 673

# **SUPPORT HB1000**

# WHY WE NEED PSYCHOLOGISTS WITH PRESCRIPTIVE AUTHORITY IN PA

# THERE IS A GROWING NATIONAL CRISIS. "A SILENT SHORTAGE":

Many physician specialities are not producing enough graduates. A recent study projects a shortage of between 21,000 and 77,100 physicians in non-primary care specialties by 2034. Psychiatry is one of the specializations with the largest gap between supply and demand.

This crisis is sometimes referred to as the "silent shortage" due to the lack of public attention paid to mental illness compared to other medical specialties.



According to the Federal government's Health Resources & Services Administration (HRSA)

Upwards of 70% of psychotropics are prescribed by primary care providers, not mental health specialists.

Muench, U. et al. November 2022. BMC Health Services Research.

Consumers in need of psychotropics report problems of:

- Inadequate access
- Long travel and wait times
- Limited follow up

# THE CRISIS IN PA

Only

40.28%

of the present psychiatric needs of patients are being met across Pennsylvania.

MILLION

Pennsylvanians live in mental health professional shortage areas.

Untreated mental health issues costs the US

# **BILLION/YR**

in healthcare costs, lost work productivity, and disability benefits.

of Pennsylvania counties have a shortage of child/adolescent psychiatrists.

**MYTH** Psychologists are not medically trained to prescribe safely.

Prescribing psychologists are fully capable of managing medication treatment for all types of psychological disorders, through extensive graduate education and supervision.

**MYTH** Psychologists aren't real doctors.

For decades, doctors of psychology have been recognized as independent, health care providers in all 50 states and by the federal government, licensed to autonomously diagnose and treat mental illness.

# **SOLUTION: RXP**

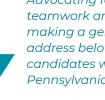
Prescriptive Authority (RxP) Psychologists:

- Earn a post-doctoral masters degree studying psychopharmacology and the biological bases of behavior
- Receive supervised clinical experience & pass a rigorous national exam to be licensed
- Participate in ongoing education post-licensure

RxPs have safely & effectively prescribed psychopharmacologic medications in the Public Health Service, Indian Health Service, and the US Military for nearly 30 vears

A psychologist's wide range of skills addresses the needs of diverse patients, and often reduces the prescription of unnecessary medications when behavioral interventions are more likely to succeed. Treatment is also no longer spread over multiple providers, reducing costs and inconvenience for the patient.

**6 STATES** have Prescriptive Privilege, plus the territory of Guam: New Mexico, Louisiana, Illinois, Iowa, Idaho, & Colorado.



# Pennsylvania Psychologists for Prescriptive Authority

Advocating for our profession and patients involves teamwork and funding from supporters. Please consider making a generous donation to "PennPsyPac" at the address below so that we may support legislative candidates who recognize the importance of RxP in Pennsylvania. Thank you! rxp@papsy.org

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**PSYCHOLOGICAL** ASSOCIATION