



VERMONT PSYCHOLOGICAL ASSOCIATION

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To: House Committee on Health Care

From: Dr. Rick Barnett, Legislative Chair, Past-President, Vermont Psychological Association

Re: Mental Health Advocacy Day

To the members of the House Committee on Health Care:

Thank you for your commitment to the health and mental health of Vermonters. My name is Dr. Rick Barnett. I am a licensed clinical psychologist with a doctorate, a licensed drug/alcohol counselor and I have earned 3 master's degrees (in psychology, addictions, psychopharmacology). I have worked on the frontlines of addiction and mental health treatment for nearly 25 years. I had a close friend kill himself 15 years ago. And, like many of us here, I have family members and close friends who have experienced or currently live with suicidality, chronic depression, ADHD, anxiety and addictions. I myself have been in active recovery from addiction for 27 years. As you can tell, I have a personal and professional passion to assist in helping improve the health and mental health of Vermonters..

I have served on the Board of Directors of the Vermont Psychological Association for over 10 years, currently as legislative chair and it is in this capacity I speak with you today. For years, I've also served the State of Vermont on many boards, committees, councils, task forces, and workgroups such as:

- Unified Pain Advisory Council with the Dept of Health
- Blueprint for Health's Mental Health/Substance Abuse Advisory Council
- Health Provider Advisory Group for the Green Mtn. Care Board
- Governor's Healthcare Workforce Workgroup
- Steering committee for the Vermont Health Care Innovation Project (\$45mil SIM Grant)
- Governor Scott's Opioid Coordination Council

Currently, I serve as President of the American Psychological Association's Division on Pharmacotherapy. In 2019, I was asked by Mental Health Commissioner Sarah Squirrel to serve on the Rural Health Services Task Force Committee whose report and recommendations you have been reviewing this session.

My voice on the various Boards, Committees, Councils, Task Forces and Workgroups has been a voice for the mental health and addiction workforce that often remains invisible. That voice represents the mental health care of tens of thousands of Vermonters, just like you and me. It represents tens of thousands of hours spent in the presence of trauma, anxiety, depression, despair, mood swings, addictions, violence, and the heartaches of Vermonters, who access care from the over 800 mental health and addictions practitioners in independent practice. As a workforce, we prevent emergency hospitalizations, we provide continuity of care upon discharge from hospitalizations and addictions treatment. We work closely with first responders, crisis teams, designated agencies, primary care practices, FQHC's, schools, attorneys, department of corrections, department of health, recovery centers and more.

On Mental Health Advocacy Day, my goal is to bring into focus one piece of legislation that sits before this committee, and in the Senate with a total of 17 sponsors. H.139 and S.81 are bills that would allow the Board of Psychological Examiners to confer prescribing authority upon doctoral-level psychologists who

have completed specific educational and training requirements, thereby augmenting their current skills to prescribe and deprescribe psychotropic medications.

In every single meeting I've attended on Health Care Reform and Innovation and within every group I've been honored to be a part of, there is a resounding and consistent message: there is a shortage of psychiatrists. This is evidenced by long waitlists to get an appointment with a psychiatrist, by emergency departments holding psychiatric patients for days, sometimes weeks, and the fact that up to 80% of psychiatric medications are prescribed by primary care practitioners (Physician Assistants, Nurse Practitioners, Physicians), often in 15min or less with follow up visits sometimes months later. This message is proof that we must improve the mental health care of Vermonters.

Prescribing Psychologists, known as Medical Psychologists in Louisiana, have been treating patients with talk therapy, and the prescribing and often deprescribing of psych meds across the country and in the U.S. Military for approximately 20 years. What started and ended as a successful Demonstration Project in the US Dept of Defense from 1991-1998, has now expanded to 5 states (LA, NM, IL, ID, IA). Other states are actively working on passing similar bills. I ask you to consider helping Vermonters by taking up this bill for testimony and support it to become law.

Vermont has some of the highest prevalence of mental illness in the country (ranked 43rd by MH America). We have some of the highest mortality rates from alcohol, suicide, and drug use. A Department of Health report last year showed "a need for access to mental health services for (those with addiction and) concurrent psychiatric disorders." We are in the midst of a drug, alcohol, suicide, and mental health epidemic. While a promising tool among many, telepsychiatry relies on and competes for the same small number of providers across the country to meet clinical need. Allowing appropriately trained psychologists to prescribe will increase expert mental health services. After over 20 years of safe and effective practice by prescribing psychologists, this workforce is no longer considered experimental. It is acknowledged as an innovative approach to mental health service expansion at a time when such innovation is desperately needed in order to meet such a high demand. Expanding independent scope of practice to other health practitioners has always been met with opposition. For example, Nurse Practitioners and Naturopathic Physicians fought hard to be authorized to prescribe all types of medications including psych meds. We need all tools to help those in need. We need all hands on deck.

The Office of Professional Regulation (OPR), whose charge is to protect the public through a system of licensure of over 50 professions, has reviewed H.139 and is committed to sharing their findings with the committee. Based on their depth of experience, they've concluded that the education and training described in H.139 meets or exceeds what is required to prescribe psychiatric medications, especially compared to the other prescribing health practitioner groups that it oversees.

Many support this legislation. Some do not. We believe the opposition is unfounded. We wish to work collaboratively with psychiatry. They insist that it is their responsibility to block this legislation while suggesting this workforce is unsafe for Vermonters and does not belong here. Despite repeated attempts to work together and reach consensus, opponents of this bill remain uncooperative. With regulatory oversight from OPR, licensed health care professions must not have these scopes of practice dictated by other health professional groups. While excluded from the recommendations of the Rural Health Service Task Force Committee, we believe this is an important workforce expansion that can help the overall system of care in rural settings, in hospitals, in primary care practices, and in our communities. I encourage you to view prescribing psychologists as a valuable addition to the workforce and, for the reasons outlined here, I urge your support for this important bill to help meet the mental health needs of Vermonters.. Thank you for consideration and for your tireless efforts to help improve the health and mental health care of Vermonters.

Rick Barnett, Psy.D, MS, LADC 1/29/2020