



University of Vermont Psychiatric Mental Health Nurse Practitioner Program Funding to Address Behavioral Health Workforce Needs

PROPOSAL

To reopen the University of Vermont Psychiatric Mental Health Nurse Practitioner (UVM PMHNP) at the UVM College of Nursing and Health Sciences.

Section C.106.1 of the FY2019 budget appropriated \$5 million from the Tobacco Litigation Settlement Fund to the Agency of Human Services to make strategic investments in order to expand the supply of high-quality substance use disorder treatment and mental health professionals available to Vermont residents in need of their services. The Secretary of the Agency of Human Services was directed to convene a working group to select among all proposals the funds most likely to build capacity in Vermont's substance use disorder treatment and mental health systems in a cost-effective and sustainable manner in FY2019-FY2022.

The Secretary and the working group presented several recommendations as to how the money should be spent, including expanding the workforce of psychiatric mental health nurse practitioners (PMHNPs) by expending \$2,207,904 to reopen the UVM PMHNP program.

The appropriation would fund:

- Tuition Scholarships
- Student Stipends
- PMHNP Staffing
- PMHNP Faculty Oversight

The UVM PMHNP program would prepare 20 PMHNP students over four years. Enrollees would be:

- NPs who currently work in primary care practices
- NPs who currently practice in mental health and addiction treatment facilities not credentialed in PMHNP
- Enrollment priority would be given to NPs currently practicing in primary care settings in Vermont.

WHAT IS A PSYCHIATRIC MENTAL HEALTH NURSE PRACTITIONER?

A PMNHP is an advanced practice registered nurse (APRN) who has an advanced education and board certification to assess the mental health needs of communities, individuals and groups. PMHNPs diagnose, treat, formulate healthcare plans, and evaluate effectiveness of short and long-term progress. PMHNPs prescribe medications and provide counseling services directed toward identified mental health diseases including substance use disorders.



WHY IS THE APPROPRIATION NECESSARY?

APRNs enrolling in the UVM PMHNP program would be taking time away from their current practice to gain this additional level of training and qualification. Many already hold debt from their initial certification and would not otherwise be able to afford to take time away and accrue additional debt without financial assistance.

Unlike social workers, psychologists, and counselors, PMHNPs can prescribe medications, including medication assisted treatment for substance use disorders.

WHO DOES THE PMHNP PROGRAM SERVE?

Nurse Practitioners (NPs) currently practicing in primary care settings and NPs practicing in mental health and addiction treatment facilities not credentialed in PMHNP could apply to the UVM PMHNP program. According to licensing data in 2017 there were 498 NPs working in Vermont. The greatest parentage (68.5 percent/ 328 NPs) work with primary care patients. Work settings include family health, adult health, women's health and pediatrics. Seventy percent of primary care NPs work outside Chittenden County. These primary care providers are a target population for education as PMHNPs.

Graduates would continue in their current practice location, ideally in locations with limited access to mental and behavioral health services and expertise. Students educated in the UVM PMHNP program will be required to provide at least three years of practice in Vermont.

WHY WOULD THE STATE OF VERMONT BE BETTER OFF?

Reopening the UVM PMHNP program would result in:

1. Increased workforce of prescribers to allow psychiatric mental health (PMH) innovation in the community related to de-hospitalization efforts.
 - Decreased wait times for access to PMH care with the addition of PMHNPs in primary care settings.
 - Decreased visits to the Emergency Departments.
2. Increased access to Psychiatric Mental/Behavior health in primary care practices. According to the CDC, 31% of Primary Care visits are attributable to mental health related issues.
3. Increased number of providers certified by the DEA to provide medication assisted treatment (MAT) for opioid use disorder, thereby reducing the wait time on access and missed opportunities to initiate MAT for patients.
 - Unlike social workers, psychologists, and counselors, PMHNPs can prescribe medications, including MAT for substance use disorders.
4. Averting a major PMH crisis with the aging workforce by educating new PMHNPs who will continue to practice in their communities with enhanced knowledge and expertise as PMHNPs.