My name is Dr. Marissa Coleman and I am testifying on behalf of the University of Vermont Health Network. I am currently a clinical psychologist and Vice President of Diversity, Equity, and Inclusion at UVM Medical Center. Vermont is facing a mental health access crisis. In order to properly support the mental health needs of Vermont residents, we need to think innovatively and utilize all of the tools available to us. The Psychology Interjurisdictional Compact (PSYPACT) is an interstate agreement designed to facilitate the practice of telepsychology and the temporary in-person, faceto-face practice of psychology across state boundaries. The mutual recognition model allows a practitioner to practice in the compact member states either using a multistate license or by obtaining a "compact privilege" or "compact authorization." (Psychology Interjurisdictional Compact (PSYPACT) - ATA (americantelemed.org)) PSYPACT is available to doctoral level licensed psychologists. As of January 1, 2023, there are 34 PSYPACT participating states. I strongly believe that if Vermont becomes at PSYPACT state, we will see an abundance of teletherapy options for Vermont residents. Notably, this will allow Vermont residents to access specialized mental health care that may not be currently available in Vermont. For example, increased access and shorter wait times for psychological assessments, culturally humble care, and pediatric and family therapy are among the services that are particularly difficult for Vermont residents to access at this time. It is clear that the lack of access to mental health services disproportionately impacts our most vulnerable populations- children, people of color, and people with disabilities. Increasing mental health access across state lines will positively impact the buildup of people with psychiatric needs in our emergency departments. Preventative psychotherapeutic supports directly impact the health and wellbeing of our state, psychiatric access challenges, and ability to equitably serve our most vulnerable people. As a bilingual clinical psychologist, I often struggle with finding appropriate referral sources for English Language Learner (ELL) individuals who contact me for therapeutic

care. PsyPact would enable ELL individuals to seek psychotherapeutic care in their primary language. I urge the House Health Care Committee to carefully consider supporting PSYPACT legislation in Vermont.