

Senate proposal of amendment

H. 237

An act relating to prescribing by doctoral-level psychologists.

The Senate proposes to the House to amend the bill by striking out all after the enacting clause and inserting in lieu thereof the following:

Sec. 1. 26 V.S.A. § 3001 is amended to read:

§ 3001. DEFINITIONS

As used in this chapter:

(1) “Practice of psychology” means rendering or offering to render to individuals, groups, or organizations, for a consideration, any service involving the application of principles, methods, and procedures of understanding, predicting, and influencing behavior that are primarily drawn from the science of psychology. The science of psychology includes assessment, diagnosis, prevention, and amelioration of adjustment problems and emotional and mental disorders of individuals and groups.

(2) “Psychologist” or “practicing psychologist” means a person who is licensed to practice psychology under this chapter.

(3) “Psychologist-doctorate” means a person who is so licensed under this chapter.

(4) “Psychologist-master” means a person who is so licensed under this chapter.

(5) “Board” means the Board of Psychological Examiners established under this chapter.

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(12) “Collaborating practitioner” means a physician licensed to practice medicine pursuant to chapter 23 or 33 of this title with a specialty in psychiatry.

(13) “Drug” has the same meaning as in section 2022 of this title.

(14) “DSM” means the Diagnostic and Statistical Manual of Mental Disorders current at the time of practice.

(15) “Prescribing psychologist” means a licensed, doctoral-level psychologist who has undergone specialized training, has passed an examination as determined by rule, and has received a current prescribing specialty under section 3019 of this title that has not been revoked or suspended by the Board.

(16) “Prescription drug” has the same meaning as in section 2022 of this title.

(17) “Prescriptive authority” means the authority to prescribe or discontinue prescription drugs solely for the purpose of diagnosing, treating, or managing a condition recognized in the DSM. Prescriptive authority excludes the authority to:

(A) dispense, administer, or distribute prescription drugs; and

(B) prescribe or discontinue prescription drugs for patients who are less than 18 years of age, over 80 years of age, or pregnant.

Sec. 2. 26 V.S.A. § 3009a is amended to read:

§ 3009a. POWERS AND DUTIES OF BOARD

(a) The Board shall adopt rules necessary to perform its duties under this chapter, including rules that:

(1) specify educational and other prerequisites for obtaining licensure;

~~(2) explain complaint and appeal procedures to licensees, applicants, and the public;~~

~~(3) explain continuing education requirements; and~~

(3) regulate prescribing psychologist licensees pursuant to section 3019 of this title, including:

(A) the settings of clinical rotations;

(B) the minimum requirements for the curriculum of a postdoctoral psychopharmacology program; and

(C) prescriptive authority, including the designation of conditions and drugs excluded from that authority, as well as requirements for the prescribing of particular drugs; and

~~(4) explain how the Board shall investigate suspected unprofessional conduct~~ regulate collaborative practice agreements pursuant to section 3019 of this title, including collaborating practitioner qualifications and annual competency evaluations.

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Sec. 3. 26 V.S.A. § 3019 is added to read:

§ 3019. PRESCRIBING BY DOCTORAL-LEVEL PSYCHOLOGISTS
SPECIALTY

(a) Prescribing psychologist specialty. A psychologist-doctorate may apply to the Board for a prescribing psychologist specialty. The application shall be

made in a manner approved by the Board and include the payment of any required fees.

(b) Specialty by examination. A psychologist-doctorate shall be eligible for the prescribing specialty if the psychologist-doctorate:

(1) holds a current license to practice psychology at the doctoral level in the State;

(2) has successfully completed a postdoctoral training program in psychopharmacology designated by the American Psychological Association or its successor;

(3) has completed clinical rotations over a total of not less than 14 months in not less than five practice settings, to include psychiatry, geriatrics, family or internal medicine, emergency medicine, and neurology;

(4) has completed a national certifying exam, as determined by rule; and

(5) meets all other requirements for obtaining a prescribing psychologist specialty, as determined by rule.

(c) Criteria for prescribing medication.

(1) A written collaborative agreement is required for all prescribing psychologists practicing under a prescribing psychologist specialty issued pursuant to this section.

(2) The issuance of prescriptive authority by a collaborating practitioner to a prescribing psychologist shall only include prescription drugs for the treatment of mental health conditions that the collaborating practitioner generally provides to patients in the normal course of practice.

(3) The collaborating practitioner shall file the collaborative agreement with the Board and notice of any termination of the agreement.

(4) Issuance of prescribing authority for Schedule II–V controlled substances shall identify the specific controlled substance by brand name or generic name. Prescription or administration of a controlled substance by injection shall not be allowed.

(d) Specialty by endorsement. The Director of the Board may, upon payment of any required fee, grant a prescribing specialty without examination if:

(1) the applicant holds active psychologist prescribing authority in another U.S. or Canadian jurisdiction; and

(2) the requirements for psychologist prescribing authority in that jurisdiction are, in the judgment of the Director, substantially equivalent to the requirements of this section.

Sec. 4. REPORT; PRESCRIBING PSYCHOLOGISTS

On or before November 15, 2032, the Office of Professional Regulation shall submit a written report to the House Committee on Health Care and to the Senate Committee on Health and Welfare regarding:

(1) the number of psychologists with a prescribing specialty pursuant to 26 V.S.A. § 3019;

(2) the status of available collaborative practitioners; and

(3) whether any updates to the qualifications of prescribing psychologists are necessary to expand access to care while also ensuring public protection.

Sec. 5. EFFECTIVE DATES

(a) This section and Sec. 2 (power and duties of the Board) shall take effect on July 1, 2026.

(b) All remaining sections shall take effect on July 1, 2029.