

H.237 - An act relating to prescribing by doctoral-level psychologists

Times of crisis sometimes require innovative thinking and changes to existing structures. Since Covid we've talked about a mental health crisis, and across the country medical practitioners are examining new ways to treat patients. Here in Vermont, as in many parts of the country, the mental health crisis is coupled with a provider shortage, making treatment and care even harder and more elusive for those struggling with illness. H.237 An act relating to prescribing by doctoral-level psychologists is one step toward alleviating some of the stress on Vermonters and health practitioners.

To be clear, this bill will not solve the problem, but it will be one more tool in the toolbox to ease the potential harms of provider shortage.

H.237 came to us from Rep. McFaun who found that in his region some folks suffering from mental illness faced barriers to accessing critical medications in a timely fashion. That is the problem we are trying to solve. This bill will allow certain doctoral level psychologists to prescribe medications. The bill contemplates a scope expansion, and because psychologists are regulated by OPR, OPR wrote a sunrise assessment in January of 2025.

A little history of this practice: Psychologist prescribing began in the military in 1991 with a scope of practice expansion that was tested and was deemed successful. Since that time, 7 states have implemented legislation authorizing psychologist prescribing: Louisiana, Illinois, Iowa, Idaho, Colorado and Utah. And this practice has been successfully in place in New Mexico for 20 years.

Mr. President, I'd like to read from an article we were presented with in H and W. It was published in the Pennsylvania Psychologist "Why Psychologists are Uniquely positioned to prescribe psychotropic medications. "As the field of mental health continues to evolve, a more integrated and nuanced approach to care is emerging - one that values not just symptom reduction, but a deep understanding of human behavior, cognition and emotional functioning." Psychologists are well poised to have this scope expansion, because they have a broad therapeutic toolkit. Psychologists are extensively trained in the full spectrum of non-pharmacological interventions, including psychotherapeutic approaches and behavioral interventions. Prescribing psychologists can situate medication within a broader, holistic treatment framework.

Combining talk therapy with pharmacotherapy tends to deliver better outcomes than pharmacotherapy alone. Psychologists note that they are uniquely situated to offer bimodal care, for example: talk therapy and medication, which rarely is possible in a primary-care setting.

Some within the medical community are concerned about the overuse of psychopharmaceuticals; however psychologists argue that their training will tend to generate

more conservative prescribing, better ability to titrate medication, follow patients across time and assist with deprescribing.

Your Health and Welfare Committee heard from:

In our quest to increase access to care, improve quality and lower cost, we voted the bill out of committee 4-1-0 and ask for the support of the Senate.

lets look

→ To the bill.

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