Good morning, Chair Black and members of the committee. My name is Dr. Phillip Hughes, and I am a health services researcher and research assistant professor at the University of North Carolina at Chapel Hill. My research focuses on how policy impacts mental health care, and I am here today to testify in support of HB 237.

First, I would like to talk briefly about safety. I recently published a peer-reviewed study comparing the outcomes of 21,228 patients who saw a prescribing psychologist or a psychiatrist. This study used the same robust methods used by the FDA to generate real-world evidence for drug safety. Compared to patients treated by psychiatrists, prescribing psychologists' patients had a 24% *lower* rate of adverse drug events, 20% lower rate of using multiple psychotropic medications, and similar rates of emergency department visits and medication adherence. Prescribing psychologists appear to be *at least* as safe as psychiatrists.

There is also ample evidence to suggest that prescriptive authority for psychologists can improve population mental health. Two studies have now found that suicide rates are lowered by as much as 5-7% when psychologists prescribe. Following those, a cost-effectiveness demonstrated that prescribing psychology is highly cost-effective, reducing suicides while saving millions of dollars over a 20-year span.

Finally, my research also suggests this bill is likely to increase access to mental health services. I led a policy simulation study that estimated how prescribing psychology might impact mental health prescriber shortages in each state. Results suggest that HB 237 is likely to reduce the mental health prescriber shortage in Vermont by 8%. In additional studies, prescribing psychologists appear be treating underserved patients, including patients in rural counties, under-resourced communities, and those insured by Medicaid.

The research to date has clearly demonstrated that prescriptive authority for psychologists is safe, reduces suicide rates, reduces healthcare costs, and improves access to mental health care. HB 237 may not *solve* the mental health crisis in Vermont, but all of the available evidence suggests that it will improve access to mental health care and ultimately saves lives. Thank you, and I am happy to take any questions.