

Chair, Vice Chair, and Members of the Committee,

My name is Dr. Jaime Wilson, and I am a prescribing medical psychologist and board-certified neuropsychologist writing to express my **strong support for H.237**, which would allow qualified psychologists limited authority to prescribe psychotropic medications.

Psychologists who pursue prescriptive authority complete rigorous, advanced training that includes graduate-level psychopharmacology coursework and supervised clinical experience. **Our curriculum draws from the same core medical and neuroscience textbooks used by medical and nursing students** and equips us to thoughtfully and safely integrate medication management with behavioral interventions.

This advanced training directly contributes to my ability to offer comprehensive, evidence-based care. In my practice, I have had the privilege of helping many patients who struggled for extended periods because of barriers to accessing coordinated prescriber support. **When integrated medication management and psychotherapy are available, patients experience faster symptom relief, greater functional improvement, and sustained engagement in treatment, leading to better outcomes that reduce suffering and support long-term recovery.**

There is now substantial evidence demonstrating that this model is both safe and effective in practice. Outcomes data from jurisdictions with **prescriber-trained psychologists show that prescribing psychologists have comparable or lower rates of adverse events, strong medication adherence, and treatment patterns that reflect judicious, evidence-based practice... for over 30 years.** Moreover, expanded authority has been associated with improved population mental health metrics, including reductions in suicide rates and treatment gaps, because patients are able to receive comprehensive care in a timely, coordinated manner.

It is also **important to recognize that ongoing resistance from some professional groups tends to decrease once prescriptive authority policies are implemented and collaborative practice models are established.** In real-world settings, prescribing psychologists continue to provide behavioral/talk therapy as the foundation of care, with medication management incorporated only when clinically indicated and aligned with best practices. Prescriptive authority does not replace therapy. Rather, it enhances care by ensuring that patients do not have to navigate fragmented systems or endure long delays to access needed treatment.

To demonstrate the clear need for this policy and my commitment to supporting Vermont's health care workforce, I am seriously considering relocating or expanding my practice to Vermont as a prescribing psychologist if H.237 passes. I want to contribute my skills directly to improving access to high-quality mental health care for your communities.

For these reasons, the rigor of our training, the strong safety and effectiveness data, the demonstrated patient benefit, and the workforce improvements this legislation would support, I respectfully urge the Committee to **vote YES on H.237.**

Thank you for your consideration.

Warm regards,  
Dr. Jaime Wilson