

March 28, 2025

Dear Senate Committee on Health and Welfare,

My name is Phillip Hughes, and I am a health services researcher in the Eshelman School of Pharmacy at the University of North Carolina at Chapel Hill. My research focuses on mental health and substance use treatment policy, and scope-of-practice regulation is a topic I regularly study. I am writing to you in relation to H.237, which would expand prescriptive authority to psychologists.

Below, I summarize my research on this topic. References are provided for studies that have already undergone peer review. While all findings use the best possible methods, findings marked with a \* are those in which the methodology approximates a causal estimate.

### **Prescribing Psychologists are Safe and Effective**

1. \*The rate of adverse drug events is 24% **lower** among patients treated by prescribing psychologists than among patients treated by psychiatrists.<sup>1</sup>
2. \*The rate of psychotropic polypharmacy (a risk factor for complications) is 20% **lower** among patients treated by treated by prescribing psychologists than among patients treated by psychiatrists.<sup>1</sup>
3. \*The rate of psychiatric emergency room visits and medication adherence is the same for patients of prescribing psychologists as for patients of psychiatrists.<sup>1</sup>
4. Prescribing psychologists at a clinic in New Mexico provided psychotherapy in 87.5% of all visits.<sup>2</sup>

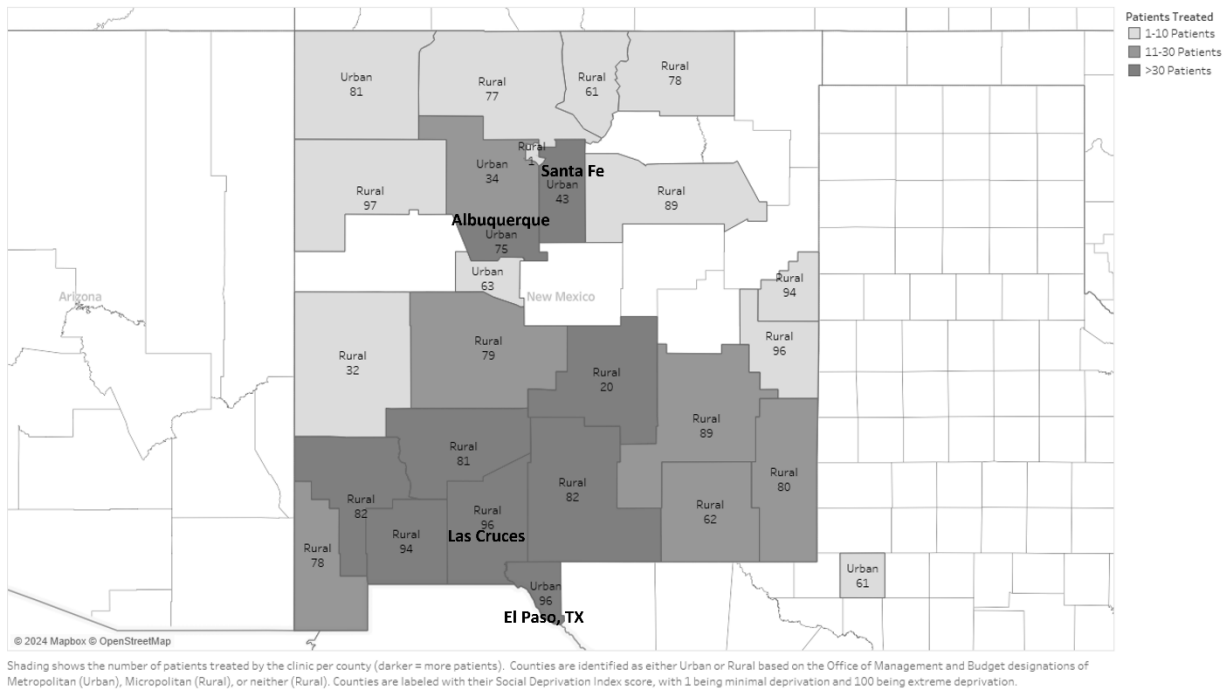
### **Prescribing Psychology Improves Population Mental Health**

5. \*Suicide rates decreased in Louisiana when psychologists began prescribing<sup>3</sup>
6. \*Mental health mortality decreased in New Mexico when psychologists began prescribing<sup>3</sup>
7. Prescriptive authority for psychologists is a cost-effective suicide reduction policy, estimated to save millions of dollars over a 20-year span.<sup>4</sup>

### **Prescribing Psychology Increases Access to Mental Health Care**

8. Unmet need for pediatric health care is 5.4 percentage points lower in states where psychologists can prescribe.<sup>5</sup>
9. This policy may reduce mental health prescriber shortages in Vermont by 8%, a notably larger impact than expected in many other states (US average: 4.3%).<sup>6</sup>
10. Psychologists currently already prescribe approximately 2% of all psychotropic medications nationally.<sup>7</sup>
11. Prescribing psychologists treat a population of patients that are very similar to psychiatrists – including their physical health and chronic health conditions.<sup>8</sup>
12. Prescribing psychologists at a clinic in Las Cruces, New Mexico treat patients who are on Medicaid (33% of their patients), live in rural counties (95% of their patients), and

patients from low-resource areas (average deprivation score of 92 out of 100).<sup>2</sup> See the map below for the distribution of their patients.



The scientific record clearly demonstrates that prescribing psychologists are safe and effective, improve population mental health, and increase access to mental health care. I also want to be clear that this work is not rooted in any one paradigm, but instead was conducted with a team of researchers from multiple fields: health services research, pharmacoepidemiology, health economics, psychology, psychiatry, social work, and nursing.

I implore you to please consider this information as you work to decide how to proceed with H.237. I would be more than happy to find a time to meet with you to answer any questions you may have on this issue.

Sincerely,

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## References

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