### Oppoga Office of Program Policy Analysis & Government Accountability



April 2009 Report No. 09-26

### Limited Evidence on Other States' Experiences That Allowing Psychologists to Prescribe Psychotropic Drugs Improves Access to Mental Health Services

#### at a glance

To address problems with access to mental health services, two states—New Mexico and Louisiana—allow specially trained psychologists to prescribe psychotropic drugs. At least 17 other states have considered but not adopted this step since 2000.

Supporters of granting prescribing authority to psychologists assert that it would increase access to mental health services, particularly in rural areas where few psychiatrists practice. However, opponents of this action contend that that there is little evidence that extending prescription privileges to psychologists would improve access to needed mental health services and that this action could result in medication errors.

There is limited information available on the experiences of New Mexico and Louisiana in this area. Few psychologists have completed training and become licensed to prescribe psychotropic drugs in both states. Except for anecdotal information, there is little evidence that allowing psychologists to prescribe psychotropic drugs has expanded access to mental health services in these states.

### Scope -

At the request of the Legislature, OPPAGA examined issues surrounding the debate on whether the state should allow psychologists to prescribe psychotropic drugs.<sup>1</sup> This report answers three questions related to whether allowing psychologists to prescribe these drugs would increase access to mental health services in underserved areas.

- How many active, licensed psychiatrists and psychologists are there in Florida?
- What arguments are given for and against allowing psychologists to prescribe psychotropic drugs?
- What has been the experience of states that have authorized specially trained psychologists to prescribe psychotropic drugs?

### Background

While both psychiatrists and psychologists can be licensed to provide mental health services in Florida, the required education and training for these professions differ. The key distinction is that psychiatrists are trained as medical doctors while psychologists are trained in the social and behavioral sciences outside of a medical setting.

<sup>&</sup>lt;sup>1</sup> Psychotropic drugs affect the central nervous system and can cause a variety of changes in behavior or perception. Psychotropic drugs have different uses and fall into four major groups: hallucinogens, antipsychotics, depressants and stimulants.

OPPAGA Report No. 09-26

To become licensed, psychiatrists must have a medical degree and have completed a four-year residency, usually in a psychiatric hospital.<sup>2</sup> Psychiatrists also must pass a state licensure exam. In contrast, to become licensed in Florida, psychologists must have a doctoral degree in psychology which generally requires from five to seven years of graduate coursework in the social and behavioral sciences. Psychologists also must complete a one-year internship and pass a state licensure exam.

Patients with mental illnesses often require psychotropic medications as part of their treatment. Currently in Florida, psychotropic drugs are typically prescribed by licensed physicians.<sup>3</sup> Psychologists cannot prescribe medications to their patients.

Proposals have been made in Florida and other states to authorize specially trained psychologists to prescribe psychotropic medications. Proponents assert that this action would improve access to mental health services, especially in underserved areas.

### Questions and Answers—

### How many active, licensed psychiatrists and psychologists are there in Florida?

According to Department of Health data, there were 1,598 psychiatrists and 3,637 psychologists licensed to practice in Florida as of December 2008.<sup>4</sup> Although these practitioners reside throughout the state, there were no licensed psychiatrists or psychologists in 27 and 13 counties, respectively, with 12 counties having neither.

As of December 2008, there were 8.50 licensed psychiatrists for every 100,000 persons in Florida,

<sup>2</sup> A medical degree involves two years of graduate coursework in several areas including anatomy, biochemistry, psychology, and pharmacology; and two years of rotations as interns in various medical specialties. while there were 19.34 psychologists for each 100,000 persons. Practitioners in both professions were clustered in large urban areas. For example, as shown in Exhibit 1, the Medicaid service areas that include Gainesville, Tampa, and Miami had the highest ratios of psychiatrists per 100,000 persons. Similarly, the Medicaid service areas with the highest ratios of psychologists per 100,000 persons also contain urban areas, such as Miami, Fort Lauderdale, Gainesville, and Tallahassee.

There is little data to identify the extent to which access to mental health services is a problem throughout the state. The American Psychiatric Association has recommended a ratio of 10 psychiatrists per 100,000 persons. As seen in Exhibit 1, many areas of the state are below this ratio, as is the state as a whole. However, Medicaid areas that include Gainesville, Tampa, and Miami are above this standard, with ratios of 15.96, 10.53, and 11.71, respectively. In contrast, some more rural Medicaid areas have much lower ratios, such as Areas 2a and 3b with ratios of 5.75 and 4.03, respectively.

However, licensure data only contains the mailing addresses of psychiatrists and psychologists, and it does not necessarily reflect all practice locations. Because some practitioners may live in more urban areas but offer services in rural areas, the data could under and/or overstate the numbers of psychiatrists and psychologists who provide mental health services in different parts of the state. Although the Department of Health collects practitioner office location data as part of its physician workforce assessment authorized by s. 381.4018, Florida Statutes, it has not yet analyzed these data by physician type to determine where coverage gaps may exist. To better understand whether gaps exist in mental health services, the Legislature may wish to direct the department to establish an ad hoc committee charged to assess current and future mental health workforce needs.<sup>5</sup>

200903Dental Workforce Report.pdf

2

-

<sup>&</sup>lt;sup>3</sup> Advanced registered nurse practitioners, under practice standards, and physician assistants, under supervision of a physician, can prescribe some, but not all, psychotropic drugs.

<sup>&</sup>lt;sup>4</sup> These data include only practitioners with clear active licenses, which means that their licenses were up to date and that they had authority to practice in Florida.

<sup>&</sup>lt;sup>5</sup>The department convened a similar ad hoc committee in late 2007 to study issues related to access problems in receiving needed oral health services in Florida. http://www.doh.state.fl.us/Family/dental/OralHealhcareWorkforce/

Report No. 09-26 OPPAGA Report

Exhibit 1 Overall, the State's Ratio of Psychiatrists to Population Is Below the Standard Recommended by the American Psychiatric Association of 10:100,000 Persons

		Psychiatrists Psychologists		ologists			
Area	Population	Number	Average	Number	Average	Counties Included in the Area	
1	712,997	55	7.71	98	13.74	Escambia, Okaloosa, Santa Rosa, Walton	
2a	295,736	17	5.75	22	7.44	Bay, Franklin, Gulf, Holmes, Jackson, Washington	
2b	436,592	35	8.02	180	41.23	Calhoun, Gadsden, Jefferson, Leon, Liberty, Madison, Taylor, Wakulla	
3a	576,560	92	15.96	202	35.03	Alachua, Bradford, Columbia, Dixie, Gilchrist, Hamilton, Lafayette, Levy, Putnam, Suwannee, Union	
3b	1,017,781	41	4.03	69	6.78	Citrus, Hernando, Lake, Marion, Sumter	
4	1,975,386	126	6.38	249	12.60	Baker, Clay, Duval, Flagler, Nassau, St. Johns, Volusia	
5	1,377,129	105	7.62	192	13.94	Pasco, Pinellas	
6	2,232,089	235	10.53	406	18.19	Hardee, Highlands, Hillsborough, Manatee, Polk	
7	2,371,314	158	6.66	307	12.94	Orange, Osceola, Seminole, Brevard	
8	1,602,994	132	8.23	213	13.29	Charlotte, Collier, DeSoto, Glades, Hendry, Lee, Sarasota	
9	1,896,777	180	9.49	411	21.67	Indian River, Martin, Okeechobee, Palm Beach, St. Lucie	
10	1,758,494	123	6.99	607	34.52	Broward	
11	2,553,370	299	11.71	681	26.67	Dade, Monroe	
	18,807,219	1,598	8.50	3,637	19.34	Statewide Total	

Source: OPPAGA analysis of Department of Health licensure information and Office of Economic and Demographic Research population data.

# What arguments are given for and against allowing psychologists to prescribe psychotropic drugs?

The main reason that supporters cite for extending prescribing privileges to psychologists is that this step would increase access to mental health services. These supporters maintain that psychologists could safely and efficaciously prescribe psychotropic drugs after completing a post-doctoral master's degree in psychopharmacology. Conversely, opponents assert that available evidence does not sufficiently demonstrate that this step would resolve problems with access to mental health services, and they argue that the proposed training would not provide sufficient medical education to ensure that psychologists could safely prescribe psychotropic drugs.

Supporters contend that allowing psychologists with training to prescribe psychotropic drugs would increase access to mental health services. The American Psychological Association, the Florida Psychological Association, and the Florida Pharmacy Association maintain that because there are more psychologists than psychiatrists in most areas, allowing psychologists to prescribe psychotropic medications would address problems with access to mental health services, especially in rural and underserved areas. These supporters contend that clients would obtain prescriptions for needed psychotropic drugs more timely because they would not have to wait for an appointment with a primary care physician or psychiatrist to write the prescription.

Supporters maintain that the proposed training requirement for psychologists—completing a post-doctoral master's degree in psychopharmacology—would ensure that these practitioners would be

<sup>&</sup>lt;sup>6</sup> Psychopharmacology is a branch of pharmacology that focuses on the use of medications in treating mental disorders.

OPPAGA Report No. 09-26

qualified to safely prescribe psychotropic drugs.<sup>7</sup> Some supporters believe that psychologists who complete the proposed training would be more qualified to treat mental illness than general practitioners, who they assert currently prescribe 70% of psychotropic medications.

Opponents argue that there is little evidence that allowing psychologists to prescribe drugs will improve mental health access and that it would create safety concerns. The American Psychiatric Association, the American Medical Association, the Florida Medical Association, and the Florida Psychiatric Society oppose the option of allowing psychologists to prescribe psychotropic drugs. These groups argue that there is little evidence that this option would increase access to needed mental health services. They assert that there is no shortage of providers in Florida that can prescribe psychotropic drugs because family physicians can, and frequently do, prescribe drugs to treat conditions such as mild depression and anxiety. These groups also assert that persons with more serious mental disorders such as schizophrenia, or who also have serious medical conditions, should be seen and treated by medical doctors.

Opponents also argue that the proposed training for psychologists—completing a post-doctoral master's degree in psychopharmacology—would not ensure that psychologists would have the medical knowledge and experience to safely prescribe psychotropic drugs. The opponents raise several objections. First, they contend that because the study of psychology focuses on the social and behavioral sciences in a non-medical setting, psychologists with advanced training may not recognize underlying medical conditions, such as tumors of the central nervous system and thyroid disorders, which can mimic mental

-

illnesses. Second, opponents contend that psychologists may not have sufficient medical knowledge to understand and manage the interactions of psychotropic medications with other medications. Third, opponents maintain that the psychopharmacology program proposed by the American Psychological Association is inadequate because it does not provide the comprehensive medical training necessary to prescribe drugs. Specifically, the proposed training is less rigorous than that required for psychiatric specialty nurse practitioners and physician assistants that have prescribing authority. Also, in some states, these practitioners must be supervised by a physician, can prescribe only limited types of medications which are unlikely to include controlled substances such as some psychotropic drugs, or both.

## What has been the experience of states that have authorized specially trained psychologists to prescribe psychotropic drugs?

Although 17 states, including Florida, have considered legislation since 2000 that would allow psychologists to prescribe psychotropic drugs, only New Mexico and Louisiana have enacted such legislation. See Appendix A for a list of these states and when they considered legislation. In addition, the Territory of Guam has taken this step. To date, little information is available to assess the impact on access to mental health care services or quality of care in the two states that allow psychologists to prescribe.

In 2002, New Mexico enacted legislation granting psychologists the right to prescribe psychotropic medications. The state requires psychologists who wish to prescribe these drugs to possess a doctorate in psychology, have an active state

<sup>&</sup>lt;sup>7</sup> The American Psychological Association recommends that the curriculum for psychopharmacology require a minimum of 400 contact hours of medical and clinical coursework (neurochemistry, pharmacology, physiology, physical assessment and laboratory exams, etc.), and a supervised clinical experience. Nova Southeastern University currently offers a master's in psychopharmacology based on the American Psychological Association's recommended curriculum.

<sup>&</sup>lt;sup>8</sup> These states are California, Connecticut, Florida, Georgia, Hawaii, Illinois, Louisiana, Mississippi, Missouri, Montana, New Hampshire, New Mexico, North Dakota, Oregon, Tennessee, Texas, and Wyoming.

<sup>&</sup>lt;sup>9</sup> Guam enacted legislation in 1998 to allow licensed clinical psychologists to prescribe under a collaborative practice agreement with physician supervision that must be approved by Guam's Board of Allied Health Examiners and Board of Medical Examiners. As of 2002, no psychologists in Guam had sought certification to prescribe drugs; more current information is not available.

Report No. 09-26 OPPAGA Report

license, and complete a post-doctoral master's degree in psychopharmacology that includes specific coursework and practicum requirements. This curriculum includes 450 hours of coursework in specific core areas such as neuroscience, physiology, and psychopharmacology; an 80-hour practicum in clinical assessment; and a 400-hour/100-patient practicum in treating patients with mental health disorders. Applicants must also pass the national Psychopharmacology Examination for Psychologists developed by the American Psychological Association.<sup>10</sup>

Upon fulfilling these requirements, New Mexico psychologists qualify to obtain a conditional prescription certificate, which allows them to prescribe psychotropic medications under the supervision of a licensed physician qualified to prescribe these drugs. After two years of supervision and approval of a peer review panel, psychologists can receive a prescription certificate, which allows them to prescribe psychotropic drugs without direct supervision of a licensed physician. However, these psychologists must contact each patient's primary physician prior to prescribing medication to the patient. Further, New Mexico requires prescribing psychologists to have malpractice insurance and complete at least 20 hours of continuing professional education every year.

Louisiana enacted similar but less specific legislation in 2004. The state requires applicants who wish to prescribe psychotropic drugs to have a doctorate in psychology, a current state license, complete an approved post-doctoral master's degree in psychopharmacology, and pass the national Psychopharmacology Examination for Psychologists. However, Louisiana does not specify the total number of classroom and clinical hours needed for an approved master's degree in psychopharmacology; thus, psychologists in Louisiana can qualify to receive prescribing

authority with fewer contact hours than psychologists in New Mexico.

Louisiana psychologists who fulfill the state's requirements qualify to receive a *certificate of prescriptive authority,* which allows them to prescribe psychotropic drugs. These prescribing psychologists must consult with each patient's primary physician prior to prescribing medication or making changes to an established drug regimen. Louisiana requires prescribing psychologists to obtain 30 hours of continuing education annually but does not require them to purchase malpractice insurance.

Few psychologists in either state have become certified to prescribe psychotropic drugs. The New Mexico Board of Psychologist Examiners reported that as of December 2008, only 13 psychologists had earned *conditional prescribing certificates*, while 5 had earned *prescribing certificates* allowing them to prescribe without direct supervision. The Louisiana State Board of Examiners of Psychologists reported that as of December 2008, 51 psychologists had received *certificates of prescriptive authority*.

However, these states reported that they have little information on the outcomes of granting prescribing authority to psychologists. Both states reported that prescribing psychologists have successfully issued prescriptions without reported adverse effects. Neither state had information such as the number of patients treated by the psychologists, the diagnoses of these patients, the types and numbers of prescriptions issued by the psychologists, or patient treatment outcomes. Also, neither state has conducted formal studies to determine the effect of granting prescribing authority on access to or quality of mental health care

5

\_

This examination is currently the only national test available for psychologists seeking prescribing authority. Psychologists must successfully complete a post-doctoral program of psychopharmacology education of at least 300 contact hours to sit for the exam.

OPPAGA Report Report No. 09-26

#### Appendix A

# Since 2000, At Least 17 State Legislatures Have Considered Bills to Allow Psychologists to Prescribe Drugs

At least seventeen state legislatures, including Florida's, have considered legislation since 2000 that would authorize psychologists to prescribe psychotropic drugs. In many states, this legislation has been proposed in multiple years. To date, two states, New Mexico and Louisiana, have passed such legislation. New Mexico passed legislation in 2002 and Louisiana in 2004. In 2007, Hawaii's legislature passed a bill that would have authorized this action, but the act was vetoed by the governor because the legislation did not provide specific information regarding training and supervisory requirements.

Table A-1
Since 2000, 17 States Have Considered Legislation Allowing Psychologists to Prescribe Drugs

State	Years Legislation Considered to Allow Psychologists to Prescribe	Legislation Enacted?
California	2007-08,	N
Connecticut	2001, 2005, 2006	N
Florida	2003	N
Georgia	2001-02, 2003-04, 2005-06, 2007-08	N
Hawaii	2001-02, 2003-04, 2005-06,,2007-08, 2009-10	N
Illinois	2001-02, 2005-06, 2007-08, 2009-10	N
Louisiana	2001, 2004	Υ
Mississippi	2007, 2008, 2009	N
Missouri	2001, 2005, 2006, 2007, 2008, 2009	N
Montana	2007, 2009	N
New Hampshire	2003	N
New Mexico	2001, 2002	Υ
North Dakota	2009	N
Oregon	2003, 2005, 2007	N
Tennessee	2001-02, 2003-04, 2005-06, 2007-08, 2009-10	N
Texas	2001, 2003	N
Wyoming	2003, 2005	N

Source: OPPAGA analysis.

11 In addition, Alaska, Maine, Massachusetts, Oklahoma, Vermont, and Wisconsin appear to have considered similar legislation.

<sup>12</sup> The Legislature of the United States Territory of Guam passed a law in 1998 allowing clinical psychologists to prescribe under certain conditions.

Report No. 09-26 OPPAGA Report

#### The Florida Legislature

# Office of Program Policy Analysis and Government Accountability



OPPAGA provides performance and accountability information about Florida government in several ways.

- <u>OPPAGA reviews</u> deliver program evaluation, policy analysis, and Sunset reviews of state programs to assist the Legislature in overseeing government operations, developing policy choices, and making Florida government better, faster, and cheaper.
- OPPAGA PolicyCasts, short narrated slide presentations, provide bottom-line briefings of findings and recommendations for select reports.
- <u>Florida Government Accountability Report (FGAR)</u>, an Internet encyclopedia, <u>http://www.oppaga.state.fl.us/government</u>, provides descriptive, evaluative, and performance information on more than 200 Florida state government programs.
- <u>Florida Monitor Weekly</u>, an electronic newsletter, delivers brief announcements of research reports, conferences, and other resources of interest for Florida's policy research and program evaluation community.
- Visit OPPAGA's website, the Florida Monitor, at <u>www.oppaga.state.fl.us/</u>

OPPAGA supports the Florida Legislature by providing evaluative research and objective analyses to promote government accountability and the efficient and effective use of public resources. This project was conducted in accordance with applicable evaluation standards. Copies of this report in print or alternate accessible format may be obtained by telephone (850/488-0021), by FAX (850/487-3804), in person, or by mail (OPPAGA Report Production, Claude Pepper Building, Room 312, 111 W. Madison St., Tallahassee, FL 32399-1475). Cover photo by Mark Foley.

Project supervised by Yvonne Bigos, Chief Analyst (850/487-9230)

Project conducted by Jennifer Johnson, Jeanine Brown, and Laurie Scott

Gary R. VanLandingham, Ph.D., OPPAGA Director