

March 26, 2017

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Members of the Psychology Prescribing Technical Review Committee  
C/o Ron Briel, Program Manager  
Licensure Unit, Division of Public Health  
Department of Health and Human Services  
State of Nebraska

Re: Credentialing Review Application for the Prescribing Certificate submitted by the Nebraska Psychological Association

Dear Mr. Briel and Technical Review Committee Members:

I submit this letter to you to express my strong support for the recently submitted proposal by the Nebraska Psychological Association, which would allow licensed psychologists, who have completed comprehensive and specialized post-doctoral training in psychopharmacology, to prescribe psychotropic medications. This proposal offers a solution to a significant problem in our state – everyday there are thousands of Nebraskans who need access to psychiatric care but are unable to obtain the services they need due to the unavailability of psychiatrists in their area or months-long waits for appointments. The family medicine physicians and pediatricians provide medication management to the fullest extent within their training and provide an indispensable service for so many; however, our children, adolescents, and adults with the most severe mental health conditions who need specialty psychiatric care are forced to wait, often further deteriorating in the interim. How can we improve the lives of our most vulnerable Nebraskans regarding psychiatric needs? Increase access to psychopharmacological treatment by permitting psychologists who serve patients across the state to obtain in-depth additional training so that in addition to working with patients to improve their psychological health and learn skills, they may also prescribe the medications patients need to utilize the skills toward their mental health goals.

As an integrated health psychologist, I am part of a growing number of psychologists who provide behavioral health care within medical offices and who become part of the team of professionals who provide patient-centered, comprehensive care. Every day I work with very caring and committed primary care providers who are dedicated to providing the best care for their patients. I respect the breadth and quality of care they provide, as well as their openness to state when they have reached the limits of their capacity and a specialist referral is needed for any number of conditions. These providers are also willing to go above and beyond to obtain additional training in caring for the mental and behavioral health needs of their patients; however, this is not a replacement for specialized psychiatric care.

In my capacity within the clinic, I am available as a consultant for the provider so that together, we may discuss diagnoses and treatment plans for our patients. When therapy is indicated, providers trust that I will provide evidence-based treatment for our patients and we will continue to monitor the progress/evaluate the treatment plan together. As the sole behavioral health specialist within our clinic, I am the “go to” for mental health – an undergraduate degree with emphases in psychology, sociology, and

science, six years of graduate education in psychology, one year of behavioral pediatric internship, and one year of integrated care postdoctoral fellowship have provided me with the training and skills needed to provide the specialty services for my clinic. As the only full-time licensed child psychologist within Beatrice, the integrated behavioral health services I provide are critical for our patients. However, I can only provide the assessment, diagnosis, and therapy treatment for behavioral health, not psychiatric medication management, which is needed for so many of our patients. The critical shortage is even more evident in our community as there is no psychiatrist in Beatrice or even in Gage County. When our patients require a psychiatrist appointment, the child must be taken out of school for a full day, the parent must take off a full day from work, and the family must drive more than 35 miles each way to see a psychiatrist in Lincoln. For some families this is an inconvenience, while for others, the burden is so great and their resources are so severely limited, that going to the appointment in Lincoln is simply not feasible, no matter how significant the need. With prescription privileges, I would be able to reduce some of those barriers for our patients and their families if I could also provide their psychiatric medication management within our clinic, within our community, and within the context of the comprehensive care we are committed to providing.

Primary care physicians who work collaboratively with psychologists often defer to them for diagnoses and treatment of many mental health conditions due to the extensive and in-depth training psychologists receive. In jurisdictions where psychologists have been permitted to obtain additional advanced training in psychopharmacology to earn prescription privileges, their medical provider colleagues consistently state that psychologist prescribers are well-trained and very safe. Furthermore, the available data from US states, the Indian Health Service, the National Health Services Corps, and the armed services spanning more than 25 years indicate psychologists have written easily tens of thousands of prescriptions, and not one complaint or malpractice suit has been filed to date. This may be due in part to the extensive additional training the psychologists received. The current national training standards are rigorous and were developed by interdisciplinary advisory groups that included psychiatrists, prescribing psychologists, pharmacists with doctoral degrees and expertise in psychopharmacology, psychiatric nurse practitioners, and dually licensed professionals. As a psychologist committed to providing evidence-based and quality psychological services, I am encouraged by foundation of excellence in the training for and provision of psychopharmacology. As an early-career, pediatric clinical psychologist, I am emboldened by hope that the opportunity to obtain the advanced training will be afforded to me. As an integrated health psychologist in rural Nebraska, I have the express support of the amazing physicians and medical providers I have the privilege of working alongside to pursue the training and earn the prescription privileges. Together, we are determined to provide the most comprehensive care for our patients and our community. It is our hope that this proposal/initiative will receive wide support so that the state of Nebraska can demonstrate the same fervent commitment to meeting the needs of our residents, with the deserved extra care given to improving access and thus supporting the health of rural Nebraskans who need psychiatric care and overall health of our rural communities.

Thank you for your time and consideration on behalf of myself, my colleagues, and my community.

Sincerely,  
Kimberly M. Hill, PhD, NCSP  
Licensed Psychologist