

Supporting member jurisdictions in fulfilling their responsibility of public protection.

Testimony on SB258 Psychology Interjurisdictional Compact (PSYPACT) Senate Finance Subcommittee on Health and Medicaid

> Sen. Stephen A. Huffman, Chair Sen. Bob D. Hackett, Vice Chair Sen. Cecil Thomas, Ranking Member

Chairman Huffman, Vice Chair Hackett, Ranking Member Thomas, and Committee Members:

Hello, I am Dr. Alex Siegel. I am an attorney and psychologist who works for the Association of State and Provincial Psychology Boards (ASPPB). ASPPB is the association of all 64 psychology regulatory boards throughout the United States and Canada. I would like to express my appreciation for your consideration of SB 256, the Psychology Interjurisdictional Compact (PSYPACT), legislation.

PSYPACT was developed with the assistance of local and national psychological associations, practicing psychologists, consumer groups, the National Governors Association, Council of State Government and the psychological regulatory community. PSYPACT is an interstate compact which provides for the legal and ethical interjurisdictional telepsychological practice as well as the ability to practice for a limited period of time while physically located in a PSYPACT compact state. PSYPACT will improve access to care and continuity of care of psychological services by facilitating the competent practice of telehealth by licensed psychologists across state lines. PSYPACT also reduces regulatory barriers and obstacles for practice for psychologists and provides for patient protection by vetting psychologists to ensure they are competent to provide services and are free of criminal, disciplinary and child abuse history.

As people begin to understand more about mental health issues and the need to effectively treat them, an increase in those seeking the services of psychologists will continue to grow. Unfortunately, like so many other health professionals, psychologists are not always available in underserved areas. Increasingly, psychologists are using telehealth as a means of responding to the demand for services. When done via live secure electronic links, psychological treatments are as effective via telepsychological means as when patients come to the psychologist's office.

The goal of PSYPACT is to improve access to and continuity of psychological services by facilitating the competent practice of telehealth by licensed psychologists across state lines. For example, it will authorize psychologists to continue treating patients who may who moved out

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of state for business or who move out of state to attend college, for patients who live in underserved areas, for patients who may have a substance use problem and live in an area of Ohio without individuals who specialize in the treatment of addiction and for military wives and children who have been relocated because the military servicemember has been transferred to another base in another state. Currently, when a patient moves out of Ohio, in order for the psychologist to continue to treat their patient, they would have to be licensed in that distant jurisdiction. Under PSYPACT, psychologists would be able to provide psychological services to these individuals without having to be licensed in the distance jurisdiction.

Currently, most states do not know or have a mechanism to know who is practicing electronically into their state. As a result, the consumer of psychological services has no idea who they are seeing or what qualifications of the mental health provider. PSYPACT provides protection to the public by certifying that psychologists have met acceptable standards of practice, are free from criminal, licensure disciplinary or child abuse histories and make certain attestations about their intentions to practice into Ohio. Importantly, PSYPACT provides compact states with a mechanism to know who is providing psychological services into their state and to address disciplinary issues that occur across state lines. For example, if a telepsychologist practices below the standard of care, unethically or illegally, the home state where the psychologist is licensed can discipline the licensee and the distant jurisdiction where the patient is located can issue a cease and desist order or issue an injunction for the psychologist to stop providing services under the Authority of PSYPACT. When that happens, the Authorization to Practice under the auspices of PSYPACT would be removed and the psychologist would not be eligible to provide telepsychological services under PYSPACT.

There are currently twelve (12) states which have adopted PSYPACT. They are Arizona, Colorado, Delaware, Georgia, Illinois, Missouri, Nebraska, New Hampshire, Oklahoma, Texas and Utah. There are also 17 states which have introduced PSYPACT legislation this legislative year. States which have active legislation besides Ohio are: Alabama, District of Columbia, Hawaii, Indiana, Iowa, Kentucky, Michigan, Minnesota, North Carolina, Pennsylvania, Tennessee, Virginia, Washington, West Virginia and Wyoming.

The cost for a state to participate in PSYPACT has been established by the Commission in Rule **10.2** Annual Assessment of Compact States: Commission shall determine the annual assessment to be paid by Compact State.

(a) Compact States will be charged an assessment of \$10 (ten) per authorization holder licensed in their Home State per fiscal year to be no greater than \$6,000 annually.

This fee structure calculates the assessment only on those Ohio licensees that hold an Authorization to Practice Interjurisdictional Telepsychology or a Temporary Authorization to Practice under PSYPACT and list Ohio as their Home State up to an annual cap of \$6,000. It is also expected that PSYPACT will have limited impact in staffing resources within a PSYPACT state. All vetting of psychologists participating in PSYPACT will be done by the Commission and ASPPB as a service to the Commission.

PSYPACT has many benefits for Ohio. The ability of psychologists to deliver mental health services through telehealth could greatly increase the access to care for people in rural and underserved areas, to people who may avoid accessing psychological interventions due to stigma or shame, to people who have special or complicated mental health needs and requires access to specialized services, and to people who need continuity of care if they need to leave Ohio for work or school. Finally, PSYPACT promotes public protection, where none currently exists, to vet psychologists for the interstate practice of telehealth. This is important for protection of the health, safety and welfare of the citizens of Ohio. I would like to ask you for your support of PSYPACT.

Thank you very much.

Very truly yours, Alex M.Siegel, J.D.,Ph.D

Alex Siegel

Director of Professional Affairs for ASPPB

