Taking a Stand: Formalizing a Policy for KPA

By Katie McBride, Ph.D.
President, KPA, 2017

In my experience, people have a very limited view of psychology. They don’t understand the full range of research and science in the discipline. They should know the full impact of what we do, whether it’s in the media, in Congress or at the state level...In a new age of health care, psychologists cannot afford not to be part of the discussion. --Arthur Evans, Ph.D., APA CEO

Greetings to all KPA members! Each year, KPA turns its focus onto new initiatives to support our mission and vision--some initiatives arise out of a need to protect our profession, while others develop in order to move us beyond our comfort zones into a more proactive stance. This year--as Dr. Willner outlined in the last e-newsletter--the Executive Team has worked steadily and intensively to respond to state executive proposals to alter psychology licensing board structures. By carefully crafting our action plans and coordinating with our lobbyist and other professions, I believe KPA positioned itself the best it could to represent the interests of Psychology in Kentucky and ensure that KPA’s voice is heard.

The second big initiative the Board has taken on this year is to formalize a policy for how KPA takes a stand on issues. Historically, when an issue comes to the attention of Leadership (e.g., a legislative bill or anticipated legislation, a topical issue within the public discourse, or a concern from a member at large), KPA has responded by following procedures that have evolved over time: these have often led to good outcomes, but have not had enough foundation and flexibility to be of help with issues that are either more controversial or less directly related to psychology and KPA’s mission.

Organizations like ours have four potential paths to respond to an issue: Legislative, Public Education, Formal Resolution, and Decline to Take Up. The proposal and routing of issues has depended upon individuals who happen to hold certain leadership positions, rather than driven by KPA as an organization by its values, vision, and mission. Without a formalized system, the risk for haphazard response is greater, and has led to KPA missing opportunities for inclusion in the conversation. The “Not taken up” scenario happens too often by default--KPA misses opportunities to shape the discourse, and to demonstrate who psychologists are and the expertise we bring to bear.

It is the hope of KPA’s Board of Directors (BoD) that formalizing a decision-tree policy driven by our values and mission will allow for greater transparency, efficiency, and accessibility for our members. Our BoD Annual Retreat weekend in June made great headway developing a broader values statement for KPA and sifting through a number of policy models from other states.

Important Announcement

The Kentucky Board of Examiners of Psychology has instituted new and updated regulations that affect all licensed psychologists including instituting fees for renewals submitted past the renewal date. Please be sure to log into the KPA website for the latest information.
From the Executive Director….

By Lisa Willner, Executive Director KPA

In one of his earliest messages to the APA membership in his new role as Chief Executive Officer of APA and the Practice Organization, Arthur C. Evans, Jr., Ph.D. wrote that "an important part of my work has been and will continue to be educating...the public...about the breadth of skills psychologists contribute to our health system and communities." At this time in our nation's history and with KPA's mission of "promoting psychology as a science and a profession," this may be an opportune time for us to individually and collectively take stock of the breadth of skills that we have as psychologists, and consider how we may challenge ourselves to bring them to bear in new ways for the good of our communities and the world we live in.

In conversations with KPA members, I hear from many of you that you are seeing increased stress, anxiety, depression, hopelessness, and rage in your clients and students, related directly to the current political environment. Many of us are experiencing our own political anxiety within the current climate of discord and divisiveness. Given our knowledge and skills as psychologists, what are our obligations and responsibilities to respond? Beyond our offices, clinics, and classrooms, what roles can psychologists play in changing systems and policies, speaking out against injustices, standing as allies and advocates, and as leaders? How should your state association give voice to psychological principles and support members' development as leaders in a world that stands to benefit from our expertise?

KPA's Board of Directors has taken up these important questions as it works to develop a policy on How KPA Takes a Stand on Issues, and by continuing to fund delegates to APAPA's annual Practice Leadership Conference (formerly State Leadership Conference) where we learn new skills, network with association leaders from across the country, and gain a national perspective. KPA's Convention Committee has responded by hosting Arthur C. Evans, Jr., Ph.D. for a return visit to Kentucky for this year's Annual Convention where he will lead a Town Hall discussion and offer a presentation on Psychologists' Role in Reducing Behavioral Health Disparities that doubles as a Call to Action for psychologists. The Kentucky Psychological Foundation Board and Diversity Committee have responded by sponsoring a Convention presentation by Sandra L. Shultman, Ph.D. on Psychologists as Leaders: Leading Difficult Conversations. The KPF Public Education Campaign has responded with a number of op eds from a psychological perspective, published in online media and newspapers across the Commonwealth. The Diversity and Continuing Education Program Development Committees are responding by planning a 2018 Diversity Conference featuring current APA President, Antonio Puente, Ph.D. who will give a keynote talk on Courageous Conversations: The State of Diversity in 2018. And the membership at large has responded with a growing advocacy involvement and psychological grassroots presence in Frankfort to speak up for psychology and those we serve by responding to KPA Action Alerts and attending KPA's annual Legislative Day.

As always, KPA is here to support you and promote psychology as we adapt to meet changing needs in our communities and a world that needs our perspective and breadth of skills - now more than ever.

Standing with you and standing up for psychology,

Lisa Willner, Ph.D.

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Getting to Know You!

By Beth Moore, Communications Committee Chair

At its most recent meeting, the KPA Communications Committee took up the topic of the new KPA website. Our members were in agreement that the new website is a wonderful improvement. However, it has been a challenge to get updates from our members to the Member Profile section. Currently there is very little information available. We encourage you to take a few minutes to update your profile in order to enhance the website's functionality, and to give your colleagues the opportunity to get to know you. Please update your member profile by logging into to the KPA website and clicking on “My Profile”, located under the image on the member landing page.

We encourage everyone to consider updating or adding specific information about your Professional Services and Specialty Areas in your Member Profile. Also, please include your Interest Sections. When doing this, you have the ability to join with other members in circles. This additional option will allow you to have discussions about topics of common interest and to share resources with your colleagues. Another new area which you may choose to complete is the information about legislative districts, which can be of use for keeping you informed of legislative concerns. Please be assured that all specific information in the KPA Member Profile is not automatically available to the general public. This specific information is available to your colleagues who are members of KPA. Contact Joy Kaplan, KPA Operations Manager, with any questions concerning this information.

And if you have any suggestions for improvement in KPA communications, please contact me (beth.moore@kctcs.edu) or another member of the Communications Committee. Committee members are: Dr. Sarah Shelton, Dr. Rachel Buehner, and Dr. Brandon Dennis.

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A KPA “Taking a Stand” task force has been compiled and work is underway to design a policy this year! It is our intention that KPA members who identify topics and concerns of interest will be able to usher their issue through a clear vetting process.

There is great value in having a stronger voice as a profession and as an organization. I am so proud of our board for working to strengthen the visibility of KPA and of psychology. Please don't hesitate to contact me by phone or email if you have any questions (502-523-8871; km@katiemcbridephd.com).
The 2017 annual convention is only 2 months away. This year’s convention, entitled “A Balancing Act: Innovation and Keeping the Heart of Psychology” will be held November 2nd-4th at the Marriott Griffin Gate Resort in Lexington.

On November 2nd, Arthur C. Evans, Ph.D., CEO of the American Psychological Association will be returning to Kentucky and to KPA’s annual convention. He will be presenting a 1.5-hour Town Hall Discussion and an additional 1.5 hour seminar, Psychologists’ Role in Reducing Behavioral Health Disparities: A Call to Action! Dr. Evans has been recognized internationally for his work in behavioral health care policy and service delivery innovation. He has also been recognized as a strong advocate for social justice. Prior to his current position as CEO of APA, Dr. Evans held positions as the commissioner of Philadelphia’s Department of Behavioral Health and Intellectual Disability Service, and the deputy commissioner of the Connecticut Department of Mental Health and Addiction Services.

Also, on November 2nd, Ryan Vandrey, Ph.D. will present Changing Cannabis Laws and Attitudes: What Psychologists Need to Know. This interactive workshop will provide an overview of cannabis, from trends in the U.S. to a detailed discussion of both harmful and potential therapeutic effects of acute and chronic cannabis use. Dr. Vandrey’s currently an Associate Professor at the Johns Hopkins University Behavioral Pharmacology Research Unit (BPRU). He is an experimental psychologist with degrees from the University of Delaware (BA) and University of Vermont (PhD). Dr. Vandrey’s research focuses primarily on the behavioral pharmacology of cannabis (marijuana).

On November 3rd, Ty Tashiro, Ph.D. will present Awkward: The Science of Why We’re Socially Awkward and Why That’s Awesome This exciting workshop revolves around a welcome, counter intuitive message: the same characteristics that make people socially clumsy can be harnessed to produce remarkable achievements. Additionally, on the 3rd, Dr. Tashiro will present our keynote luncheon address, The Science of Happily Ever After. Don’t Miss this one-hour presentation, during lunch on Friday. Dr. Tashiro received his Ph.D. in Psychology from the University of Minnesota. He has been a professor at the University of Maryland and the University of Colorado. Dr. Tashiro is an engaging presenter and author whose research has been published in top-tier academic journals.

Finally, on November 4th, Sandra Shullman, Ph.D. will be presenting a 3-hour workshop, Diversity and Leadership: Leading Difficult Conversations. Dr. Shullman has degrees from Dickinson College, Harvard University, and a Ph.D. in Counseling Psychology with organizational emphasis from the Ohio State University. She is currently a managing partner of an international leadership development and consulting firm. In addition to her extensive experience with leadership, she has chaired the Work Group on Executive Coaching for the American Psychological Association and has served as a member of the APA’s Board of Directors. Dr. Shullman’s presentation will be sponsored by the Kentucky Psychological Foundation.

We are also delighted to offer a wide array of workshops that address topics related to technological innovations such as: Social Media 101 for Psychologists: Effective Tools for Practice Promotion, Public Education and Advocacy as well as workshops that address core therapy skills, such as: An Experiential Introduction to Acceptance and Commitment Therapy (ACT). We are pleased to be able offer workshops throughout the convention that will appeal to Psychologists who work with Children and Adult populations. We will be offering numerous workshops that meet licensure requirements; e.g. Basic Supervision, Advanced Supervision, and Ethics.

Finally, it wouldn’t be convention without a chance for socializing and networking. Evening activities will include a reception and ceremony honoring new psychology licensees and an opportunity to tour the Barrel House Distillery, eat at Goodfella’s pizza, and socialize in the Distillery District on Manchester Street.

The Convention Committee is very excited about how the 2017 Convention is developing and we hope that you will attend and will also be excited about all of the excellent workshop choices. For more details about the 2017 KPA Convention, please visit the KPA website.
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The June 29, 2017 launch has passed, but have you changed your clinical practices to be compliant with the new law? Everyone used to be required to report domestic violence, now professionals are required to provide educational materials, services, and access to protective orders. Dave Hanna, PH.D. held a KPA workshop that reviewed the parameters of intimate violence and elder abuse, defined types of abuse and key terms, discussed the far-reaching effects of domestic violence and complications when children are involved, and covered in detail the NEW legal responsibilities for psychologists practicing in Kentucky. Borrowing heavily from Dave’s slides, some of the main points of the revised responsibilities for providers relating to domestic violence are listed below, but if you missed Dave’s workshop, take advantage of the taped version that will soon be available on the KPA website.

Before June 29, 2017:
- Kentucky was the only state that mandated domestic violence reporting.
- KRS 209A.030 - any person having reasonable cause to suspect that an adult has suffered abuse or neglect by a spouse was mandated to report to the cabinet (whether the victim wanted it to be reported or not).
- These practices were not effective in improving victim outcomes or rates of domestic violence.

As of June 29, 2017
- New regulations are more empowering to the victim. Victims are more broadly defined after a 2015 change to the law that expanded the definition from married couples to include dating partners.
- Reports of domestic violence, abuse, or dating violence can be made to law enforcement if requested by the victim and the professional has discussed the ramifications of reporting to a law officer with the victim.
- KRS 383 adds a section pertaining to landlords and tenants that prohibits a landlord from terminating or failing to renew leases “because of the person’s status as a protected tenant.”
- There is a mandated duty to report to law enforcement for a professional if s/he believes the death of a client is related to domestic violence. There is no time frame specified but vulnerable to wide range of interpretation regarding the word “believes.”
- Professional with reason to believe person has been a victim of domestic violence shall provide the victim with educational materials related to DV and abuse and how to access regional domestic violence programs under KRS 209.160 or rape crisis center under KRS 211.600 and information about how to access protective orders. Educational materials required by this statute are available on Kentucky Coalition Against Domestic Violence website – www.kcadv.org.
- A professional violating the provisions of the KRS 209A shall be guilty of a Class B misdemeanor and penalized in accordance with KRS 532.090.

New Domestic Violence Reporting Laws July 2017

By Laurie Grimes, PhD, MPH, KPA Director of Public Affairs

APA Council Representative Report

By David Susman, Ph.D.

The APA Council of Representatives held its summer meeting on August 2 & 4, 2017 at the 125th annual APA Convention in Washington, DC. APA’s new CEO, Arthur C. Evans, Ph.D. was introduced. The current Financial Report detailed that APA is on solid financial footing. The multi-year membership decline is leveling off and there could possibly be a slight increase in membership by the end of the year.

A significant issue for discussion by Council was whether APA should formally revisit Masters level training and practice in psychology. This discussion was prompted by the recent 2016 report of the Summit on Master’s Training in Psychological Practice, whose consensus was that a model of training and credentialing be developed for master’s level practitioners in psychology.

The discussion which ensued in Council covered various emerging societal and regulatory concerns, including: 1) current and projected workforce shortages for mental health practitioners across a variety of disciplines; 2) health disparities of minority and other underserved populations, and huge numbers of persons receiving inadequate or no mental health services; 3) recent initiatives by the counseling profession to limit psychology faculty from teaching in counseling programs; and 4) efforts to prohibit psychology Masters graduates from eligibility to obtain licensure as professional counselors.

After small and large group discussion by the APA Council, it was the clear consensus of the group that APA should undertake more formal study of these Masters-related training and practice issues. In a related business item, Council approved the recently developed “Guidelines on Core Learning Goals for Master’s Degree Graduates in Psychology.”

Council also received the final report from the Commission on Ethics Processes. This group is recommending sweeping changes, including splitting the Ethics Committee into an Ethics Adjudication Committee and an Ethics Guidance Committee, establishing an Ethics Ombudsperson position and an Executive Committee for Ethics, along with several other organizational and procedural enhancements.

Council received the report of the Diversity Work Group and approved the document “Re-envisioning the Multicultural Guidelines for the Twenty-First Century,” which is a comprehensive resource for multicultural training and practice issues.

Finally, Council voted to approve the implementation plan recommended by the Civility Work Group, whose focus is to promote civil discourse and behavior among APA governance, boards, committees, and divisions.

Please don’t hesitate to contact me at david.susman@uky.edu if you have questions or comments regarding APA.
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Dr. Christina Zampileia, FT, Licensed Clinical Psychologist

Many more stories on TherapyNotes.com!
Since the publication of my February 2017 article National Trends in Prescriptive Authority for Psychologists, three significant developments have occurred that warrant an update.

At the time that article appeared, Iowa had recently become the fourth state to extend prescriptive authority to Psychologists, joining Illinois, New Mexico, Louisiana, Indian Health Services, the Department of Defense and the US territory of Guam.

Shortly after the article ran, Idaho also extended prescriptive authority to Psychologists, becoming the fifth state enabling psychologists to prescribe. This made for the third state in a three-year span following a ten year period of no states passing such laws, despite proposed legislation nationwide. This was yet another development in the trend towards the prescriptive movement gaining recent traction.

Oregon is also currently seeing some action. Just last month, in July, HB 3355 (the bill extending prescriptive authority to properly trained psychologist) successfully passed through both the House (57 Yes votes and 2 No votes) and the Senate (18 Yes votes and 11 No Votes), sending the Bill to the Governor’s desk awaiting signature. The Governor may veto the bill, sign the bill, or allow it to become law due to no action taken within 30 business days of adjournment. What will be the official outcome of Oregon’s stance on the prescriptive authority issue? While the passage through the House and Senate would seem to indicate a likelihood of the bill passing, no one can be sure, given the Governor’s ability to reject the House and Senate majority rule. In fact, this is exactly what happened in Oregon in 2010 under the leadership of a different Governor despite a wide margin of passage through both the House and Senate. This means that, whether one supports, opposes, or is undecided about prescriptive authority for psychologists, all eyes are on Oregon throughout the end of this month, to see if it becomes the sixth state and the fourth in three years to take an affirmative stance on the prescriptive authority issue for psychologists.

Yet another development since my last article on this topic occurred in our border state of Ohio. SB300 was introduced and referred to the Health and Human Services Committee, where it was not heard prior to the close of session. So, while it is not true that the Ohio legislature rejected the Bill and is not true that the Governor vetoed the Bill, it is true that the Bill did not pass in Ohio prior to the close of session due to not being heard or voted upon allowing for either outcome. This is referred to as a bill “dying.” Sometimes, this is a strategic win by opponents via delay tactics. Other times, it is simply a product of time constraints and circumstances. Either way, there are plans to revisit the Bill in the next Ohio legislative session.

As mentioned in my previous article, Prescriptive authority for psychologists has been endorsed by the APA (since 1995), APA-PO, the National Register of Health Service Psychologists, and by multiple State Psychological Associations. Yet a relatively small – but growing – number of states have passed legislation officially authorizing this expansion to scope of practice. Aside from the obvious tensions that exist on this matter between psychologists who support this evolution in scope of practice and other prescribing healthcare providers (such as the American Psychiatric Association) who oppose it, conflict and confusion on this matter within the guild of psychology still exists.

Critics of prescriptive authority focus on the fact that the majority of states do not extend prescriptive authority to psychologists. This is true. Advocates for prescriptive authority focus on the fact that, since 2014, an average of one state per year is changing their law to afford properly trained psychologists this ability. Is progress slow? Yes. Is progress steady? As of late, that would appear to also be a Yes. If one examines the history of prescriptive authority for other non-physician prescribing providers, specifically dentists, the same slow trend of progress due to organized opposition and resistance to change characterized their paths as well. Today, however, few of us can imagine going to the dentist and not being offered medication for pain relief for uncomfortable procedures.

So, why would this shift in legislative actions occur after a decade of essentially no progress on this initiative? It appears that the passage of time, while frustrating to proponents, has actually worked in the favor of the prescriptive authority movement. At this point, the early states that enacted legislation (Louisiana and New Mexico in addition to Indian Health Services, Department of Defense, and Guam) have continued to train and award psychologists licenses to prescribe with no known adverse outcomes. As the numbers of prescribing psychologists have grown (albeit in a limited geographical scope), the original and primary argument in opposition of the movement citing concerns about “patient safety” has been effectively debunked with objective statistics across the past ten years that refute that claim. Now, to be fair, an adverse effect linked to prescribing psychologists, is inevitable. However, the trajectory is now clear that there will be no greater number of adverse effects than we see with other prescribing professionals.

Neither KPA nor KBEP has plans for any active initiatives for pursuing prescriptive authority at this time. However, as developments across the country continue to unfold, Kentucky Psychologists should be aware of the trends and the issues on both sides of the debate (reviewed in my last KPA article February 2017), so that they can take an informed position on this matter, should it present itself in the Commonwealth in the future.

Interested in joining a KPA or KPF Committee?

Complete the application form found on your KPA member landing page.
This article outlines the most recent changes in administrative regulation governing current continuing education laws for all Kentucky psychologists as required and enforced by the Kentucky Board of Examiners of Psychology. These laws apply to all psychologists regardless of the specific type of credential held by the psychologist.

First, some history and background are in order. Mandatory continuing education is a very common and nearly universal characteristic of what makes a profession a profession. By definition, professionals (who are licensed and regulated by the state to practice a defined occupation under the authority of law) go to school and pass a test – both of which are designated and approved by the state - in order to hold a professional license to practice their chosen vocation.

While that summary greatly oversimplifies the extensive education, training, and experience that psychologists must complete in order to be psychologists, a common requirement in most all professions is that the professional is also mandated to continue seeking and earning education in order to keep up with current practices and developments in the profession, hence the name “continuing education.” Although beyond the scope of this short article, the next model of this kind of quality assurance is sometimes described as “continued competency” where, for example, the professional is subject to repeated tests and practical examinations over time – like airline pilots who must be continually examined and assessed regarding their current proficiency to fly an airplane.

With this model of professional regulation described above, how does this affect you, the Kentucky psychologist? These rules for mandatory continuing education apply to any psychologist who holds a Kentucky license of any kind – even if he or she resides and practices outside Kentucky. That out-of-state practitioner must still comply with Kentucky’s mandatory continuing education requirements simply because they hold that Kentucky license.

Until 2010, Kentucky-licensed psychologists had to earn thirty (30) hours of continuing education each renewal cycle for courses that are approved by the Board. Psychologists who hold a Kentucky license have a relatively generous, even lengthy, renewal cycle of having to renew one’s credential only once every three (3) years. It did not matter – and it does not matter today – whether the psychologist earned those hours evenly during the three (3) years over time or all in one week. So long as the total number of hours were obtained as approved by the Board and documented by the psychologist, the psychologist had complied.

There has been one recent, substantial change – after 2010, psychologists have been mandated to obtain thirty-nine (39) hours of approved continuing education, a thirty percent (30%) increase from the thirty (30) hours before. This requirement was gradually implemented and specifically applied to psychologists who renewed their licenses “beginning with renewals occurring after June 30, 2013.” With three (3) year’s notice of this increase, now all psychologists have gone through a full, three (3) year renewal cycle of meeting the current, thirty-nine (39) hour requirement. Psychologists can feel good being thirty percent (30%) smarter than before!

While Kentucky statute mandated the thirty-nine (39) hour requirement, the “nuts and bolts” detail of continuing education for psychologists has been embodied in an administrative regulation promulgated under law by the Board via notice and comment rulemaking. Since the 2010 requirement for thirty-nine (39) hours as implemented in 2013, Kentucky's administrative regulation at 201 KAR 26:175 was amended in 2011 and again amended effective December 16, 2015. Now, less than two (2) years after its law update, 201 KAR 26:175 has again been amended by the Board and now has the force of law.

What changes are in store for you under the current administrative regulation, 201 KAR 26:175? The remainder of this article will detail the new law for continuing education.

First, the old standard of an hour being “fifty-five (55) minutes” of instruction remains the same. Psychologists are therefore allowed the luxury of a short, fifteen (15) minute coffee break every three (3) hours. Second, the thirty-nine (39) hour requirement is also repeated in this amended administrative regulation.

Third, another Kentucky law, KRS 210.366, mandated suicide assessment, treatment, and management for many health care professionals, including psychologists. This amended administrative regulation now requires six (6) hours of such training within the first year of licensure, then again every six (6) years thereafter. Exceptions exist here. A psychologist who has completed a graduate school course in “suicide and crisis assessment, prevention, and intervention” of at least three (3) hours credit is exempt from the first-year requirement. Next, a psychologist is exempted from this coursework that is required every six (6) years if the psychologist:

1) is primarily employed in a clinical setting accredited by the Joint Commission or another nationally accrediting healthcare entity that requires the completion of a suicide risk assessment with each patient being seen within the setting;
2) teaches a graduate-level psychology course in suicide assessment, training, and management; or
3) teaches a continuing education course in suicide assessment, training, and management at least once during the six (6) year period.

Fourth, licensed psychologists who provide supervision to other designated psychologists must complete, as part of their thirty-nine (39) hours, three (3) hours each renewal period in “supervision theory or techniques.”

Fifth, all continuing education hours must be completed “prior to the renewal date of the license.” A psychologist must certify their completion on the licensure renewal application form as well as provide copies of certificates of completion if audited by the Board.

Sixth, psychologists have the choice of maintaining their own continuing education documentation or through a Board-approved registry, such as KPA, which retains the records and certifies compliance.

Seventh, the number and kinds of organizations who are automatically approved as continuing education for psychologists has changed now to include:

1) an affiliated state chapter of the American Psychological Association, American Medical Association, American Psychiatric Association, or National Association of Social Workers;

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2) a recognized state, regional, national, or international psychological association;
3) a state or provincial psychology licensure board, and;
4) a course for graduate-level academic credit in psychology or psychiatry offered by a national, regional, or state accredited academic institution.

The Board may also approve other people or entities to be approved continuing education sponsors upon individual application to the Board with required documentation. The Board may also approve a specific course for continuing education for a psychologist upon individual application with the Board with required documentation.

Eighth, the Board allows for various continuing education equivalencies such as taking a graduate level psychology course, teaching a graduate level psychology course, and teaching an approved continuing education workshop or program. Psychologists may also complete home study or internet-based courses, if offered by an approved organization, but not to exceed twelve (12) hours within the three (3) year renewal period. Live, videoconferencing in an interactive setting is allowed, but not to exceed twenty-four (24) hours within the three (3) year renewal period. While other Kentucky professions such as social work have new laws allowing for all continuing education to be done electronically, psychology still requires most continuing education to be done live (even if in an interactive video/audio session), and at least some to be done live and in-person, face-to-face.

Ninth, psychologists continue to be prohibited from carrying over excess continuing education hours from one renewal cycle to the next. Therefore, hours earned in excess of the thirty-nine (39) hours each three (3) year renewal cycle are for the professional benefit of the psychologist and do not count towards any mandated number of hours.

Tenth and finally, the Board is now specifically mandated by law to audit a minimum of ten percent (10%) of psychologists for continuing education compliance. Note this is a minimum percent, so nothing in the law would prevent the Board from auditing half its licensees, or even from auditing all of them. Nothing in this amended administrative regulation governs how that auditing process is to be carried out or the consequences of non-compliance, but Kentucky statute already provides for disciplinary action for failure to comply with an administrative regulation of the Board, of which this continuing education regulation is one. The auditing process and disciplinary action defenses to continuing education violations are beyond the scope of this newsletter article, but may warrant an article of their own.

In conclusion and as with all mandatory, legal requirements in a profession, psychologists must know the new continuing education laws, comply with those laws, and retain sufficient documentation of compliance with those laws in order to respond to an audit of the Board.

Mark R. Brengelman, JD, MA, practices health care law in Frankfort where he is the Chair of the Health Law Section of the Kentucky Bar Association. He has successfully represented psychologists in Kentucky and out-of-state as well as other licensed health care professionals. His e-mail is Mark@MarkRBrengelmanPLLC.attorney.
2017 marked a 30-day session for Kentucky’s Legislature, which ended on March 30th. We are pleased to report a number of victories that align with KPA’s 2017 KPA Legislative Priorities. Here are some highlights:

**Senate Bill 91:** Also known as “Tim’s Law.” This bill is very important in assuring that those with severe mental illness get appropriate outpatient treatment. Tim’s Law creates a mechanism within the court system for those with significant mental illness who meet strict criteria to receive outpatient treatment before they need to be hospitalized. Tim’s Law passed both the Senate and House overwhelmingly, but a surprise veto by Governor Bevin had KPA and other advocates very concerned. With much appreciation to Dr. Sheila Schuster, multiple advocacy groups, including KPA, and our legislators, the Governor's veto was overridden on March 29th, and Tim's Law is now Kentucky law.

**Senate Bill 89:** This bill requires both private insurers and Medicaid to cover USPSTF-recommended and FDA-approved smoking cessation treatments. Providing insurance coverage for all evidence-based smoking cessation treatments is critical to reversing Kentucky’s longstanding high smoking rate once and for all. This bill passed on March 14th.

**House Bill 309 (proposed legislation from SB 86 was added to this bill):** This Domestic Violence legislation, signed by the Governor on April 11th, allows for changes to the mandatory reporting to the Cabinet. **NOTE:** KPA provided Domestic Violence Continuing Education over the summer that included changes in the law. Training will be provided at the 2017 Annual KPA Convention in Lexington, and a KPA Home Study highlighting the domestic violence reporting law and its changes will be available soon through the KPA website.

**Senate Bill 108:** KPA advocates for psychology to be “at the table” and at the forefront of mental-health related issues. When this palliative care bill was filed that would establish the Palliative Care Interdisciplinary Advisory Council within the Cabinet for Health and Family Services, we asked the bill sponsor, Senator Julie Raque-Adams to include a member of Kentucky Psychological Association on the council, which she agreed to do. Feedback at APAPO’s Practice Leadership Conference last spring indicated that this is somewhat trail-blazing. While this bill did not pass this session, we believe that it may be re-filed for 2018.

**House Bill 253:** This bill is known as the “Tucker Act” and was a KMHC priority, which KPA endorsed as a member of the Kentucky Mental Health Coalition. While KPA did not actively lobby for this bill, we sent an action alert asking members to call in supporting it. This legislation will provide greater protection from harm for children known to need protective services. It passed and was signed by Governor Bevin on April 11th.

**Provider protections bills/protection from intrusion on practice Senate Bill 219:** KPA successfully worked with recreational therapists to amend language in their licensure bill, SB 219. We had concerns about their use of language indicating that they “remediated cognitive and emotional issues,” as they are not trained to do cognitive/psychological testing. They amended their language upon our consultation with them. While this bill passed, it was vetoed by Governor Bevin on April 11th for unrelated issues, due to the Governor's desire for reducing the number of licensure boards and “red tape reduction plan.”

**Senate Bill 97:** KPA expressed concerns with the pastoral counseling bill, SB 97, due to language that we believed went beyond the training/scope of practice for pastoral counselors. We learned that this bill was unlikely to be heard this session. We will consult with the pastoral counselors prior to their filing a bill next session.

**Senate Bill 8:** This bill was related to using public funds for abortion services. While KPA does not take a stance on abortion, we had concerns with language that defined “abortion service providers” as overly broad and could impinge on the practice of psychotherapy, which would have included anyone who “provides referrals to or information about facilities where abortions are performed or individuals who perform abortions;” or “provides counseling, advice, written materials or other information that encourages or promotes abortion.” We were concerned that this would prohibit our discussing options with patients in psychotherapy. The language was changed to define abortion services more narrowly, excluding provision of psychotherapy. This bill passed and was signed by the Governor on March 21st.

**House Bill 443:** One bill that passed this session codifies the Governor’s Executive Order to re-organize and consolidate the real-estate licensure boards, and contains language pertinent to the Kentucky Board of Examiners of Psychology (KBEP).

- The bill creates the Department of Professional Licensing (formerly known as the Office of Licensing and Occupations. This bill contains many of the same provisions of Executive Order (EO) 2016-859 (Governor’s Reorganization) dated December 1, 2016.
- This bill contains language about a number of licensure boards, including KBEP, to “maintain their identity” and “full authority for making policy decisions in the fields they regulate.” It is unclear how protective this language will be for KBEP.

**Opposing discriminatory legislation due to psychological harm**

**House Bills 105, 106, and 141:** These bills could have led to discrimination against transgender individuals. KPA opposed these bills, but did not actively lobby against them since the bills did not progress out of committee this session.

**Federal level**

On a federal level, members of KPA’s delegation to the Practice Leadership Conference advocated on Capitol Hill on March 7th. Action alerts were sent out to all Kentucky members who are also APA members.

**Opposition to repeal of Affordable Health Act:** APA and the APA Practice Organization opposed the American Health Care Act, as it would have removed coverage from 24 million Americans over the next ten years, radically changed the Medicaid program and reduced its funding by 25%, and increased premiums and out-of-pocket costs for millions of Americans with private insurance. As amended in the hours before the vote, the legislation would also have eliminated the requirement that health plans in the individual and small group market cover a package of essential health benefits, including mental health, substance use, and behavioral health services. APA members generated 15,000 messages to Congress this year urging members not to repeal ACA without simultaneously enacting legislation that would provide Americans with equally reliable coverage for mental health and substance

---continued on page 15---
KENTUCKY PSYCHOLOGICAL ASSOCIATION
2017 ANNUAL CONVENTION

A BALANCING ACT:
INNOVATION AND KEEPING THE HEART OF PSYCHOLOGY

FEATURED SPEAKERS

Arthur G. Evans Jr., Ph.D.
Ryan Vandrey, Ph.D.
Ty Tashiro, Ph.D.
Sandra L. Shullman, Ph.D.

Convention Sponsors

PASSPORT HEALTH PLAN
bluegrass.org
ROGERS BEHAVIORAL HEALTH
Kentucky Psychological Foundation
2017 CONVENTION WORKSHOPS

THURSDAY, NOVEMBER 2

8:30 AM
T01. Vision for APA and the Future of Psychology - A Town Hall with APA CEO Arthur C. Evans, Jr., Ph.D.  1.5 CE. **Featured Presenter**

T02. Interventions for Emotions, Behavior, and Organizational Skills for Children with ADHD, 3 CE. **Paul J. Rosen, Ph.D.**

T03. Kentucky Department for Behavioral Health, Development and Intellectual Disabilities: Current Issues & Initiatives, 1.5 CE. **James Gedra, Psy.D.**

T04. “Teachable Moments” for Tobacco Cessation: Challenges, Opportunities, and Intervention Strategies, 3CE. **Jessica Lynn Burris, Ph.D., Jamie L. Studts, Ph.D., & Audrey Darville, Ph.D., APRN**

10:15 AM
T05. Psychologists’ Role in Reducing Behavioral Health Disparities: A Call to Action!, 1.5 CE. **Arthur C. Evans Jr., Ph.D.** **Featured Presenter**

T06. Ethics Decoded: Operationally Defining Obsolescence in Psychological Assessment, 1.5 CE. **Alissa Briggs, Ph.D., NCSP & Dan Han, Psy.D.**  This workshop meets 1.5 of the 3 CE requirement for ethics/risk management for psychologists.

11:50 AM
KPA Annual Awards Luncheon
**Sponsored by The Kentucky Psychological Foundation**

T07. Changing Cannabis Laws and Attitudes: What Psychologists Need to Know, 3 CE. **Ryan Vandrey, Ph.D.** **Featured Presenter**

T08. Domestic Violence and Stalking: Legal Responsibilities and Risk Assessment, 3 CE. **Carol E. Jordan, M.S. & TK Logan, Ph.D.**  This workshop meets the 3 CE requirement for domestic violence.

T09. Advocating for Psychology: What KPA is doing and how you can help, 1.5 CE. **Georgeann Stamper Brown, Ph.D. & Sheila Schuster, Ph.D.**

T10. Kentucky Psychology Laws and Ethical Practice, 1.5 CE. **Jamie Hopkins, Ph.D. & Gerald Walker, Psy.D.**  This workshop meets 1.5 of the 3 CE requirement for ethics/risk management for psychologists.

3:15 PM
T11. Practice Updates and Re-thinking Psych Testing Reports 1.5 CE. **Laurie Mount Grimes, Ph.D.**

T12. Attachment-Based Intervention with Parents and Young Children, 1.5 CE. **Shari L. Kidwell, Ph.D.**

FRIDAY, NOVEMBER 3

8:30 AM
F01. Recognizing the Many Shades of Obsessive Compulsive Disorder, 1.5 CE. **Stephanie C. Eken, M.D. & Amy Mariaskin, Ph.D.**

F02. Understanding Suicide: From Assessment to Intervention and Management, 3 CE. **Melinda Moore, Ph.D.**  This workshop meets 3 of the 6 hour CE requirement for suicide assessment.

F03. Alzheimer’s Disease and Dementia: Clinical Assessment and Person-Centered Care, 3 CE. **Benjamin T. Mast, Ph.D.**

F04. Social Media 101 for Psychologists: Effective Tools for Practice Promotion, Public Education & Advocacy, 3 CE. **David Susman, Ph.D.**

10:15 AM
F05. Exposure & Response Prevention in the Treatment of Avoidant/Restrictive Food Intake Disorder (ARFID), 1.5 CE. **Stephanie C. Eken, M.D. & Amy Mariaskin, Ph.D.**

11:50 AM
F06. Luncheon Presentation: The Science of Happily Ever After, 1 CE. **Ty Tashiro, Ph.D.** **Featured Presenter**

F07. Awkward: The Science of Why We’re Socially Awkward and Why that is Awesome, 3 CE. **Ty Tashiro, Ph.D.** **Featured Presenter**

F08. Generations in the Workplace & Therapy Room, 3 CE. **Susan Redmond-Vaught, Ph.D.**

F09. Optimizing Mental Health and Nutrition Care of Eating Disorder Clients in the Outpatient Setting, 3 CE. **Nancy C. Kuppersmith, RDN, M.S., MLDE & Cheri A. Levinson, Ph.D.**

F10. Psychopharm 2017: What Clinicians Need to Know Now, 3 CE. **Scott Salathe, Psy.D.**

THURSDAY EVENING SOCIAL EVENT
Come explore Lexington’s newly renovated distillery district with a tour & tasting at Barrel House Distilling Co. followed by a pizza dinner at Goodfella’s Pizzeria.

$30 Per Person  NOVEMBER 2ND 6-9 PM | BARREL HOUSE DISTILLING CO.

HOTEL ACCOMMODATIONS
KPA HAS NEGOTIATED A DISCOUNTED RATE OF $134 PER NIGHT AT THE GRIFFIN GATE MARriott RESORT & SPA IN LEXINGTON, KY.  KPA’S ROOM BLOCK WILL BE HELD UNTIL OCTOBER 1, 2017, OR UNTIL THE ROOMS RUN OUT.  RESERVATIONS CAN BE MADE ONLINE BY FOLLOWING THE LINK ON THE CONVENTION WEB PAGE OR BY CALLING THEM AT 859.231.5100

COMPLETE WORKSHOP DETAILS AT WWW.KPA.ORG
2017 CONVENTION WORKSHOPS

SATURDAY, NOVEMBER 4

8:30 AM

S01. Balancing the Scales: Telehealth and Ethics, 3 CE. Michael J. McClellan, Ph.D. & Dan Florell, Ph.D. This workshop meets the 3 CE requirement for ethics/risk management for psychologists.

S02. Diversity and Leadership: Leading Difficult Conversations, 3 CE. Sandra L. Shullman, Ph.D.—Kentucky Psychological Foundation-sponsored Featured Diversity Speaker

S03. An Experiential Introduction to Acceptance and Commitment Therapy (ACT), 3 CE. Michael Bordieri, Ph.D.

S04. Basic Supervision, 3 CE. Tanya Stockhammer, Ph.D. This workshop meets the 3 CE requirement for basic supervision.

11:50 AM

Luncheon & KPA Annual Membership Meeting

1:30 PM

S05. Advanced Supervision - What’s New in Psychotherapy Supervision? An Update and Considerations for Supervision 3CE. Jeff Reese, Ph.D. This workshop meets the advanced supervision requirement for the Kentucky Board of Examiners of psychology approved supervisors.


S07. Listening to Sexual Minorities at Faith-Based Colleges and Universities, 3 CE. Janet B. Dean, Ph.D., M.Div. & Stephen Stratton, Ph.D.

S08. How to Love a Human: For Psychologists Who Want to be Less "Ist", 1.5 CE. Candice Hargons, Ph.D.

3:15 PM

S09. Transgender Children/Youth in Your Practice: Interventions for Their Journey, 1.5 CE. Janet Vessels, M.S.

IMPORTANT ATTENDEE INFORMATION

Silent Auction

There will be a Silent Auction to benefit the Kentucky Psychological Foundation (KPF) throughout the Convention. Support KPF by donating auction items. Contact kpa@kpa.org for information on how to donate.

Workshop Handouts

All handouts provided in advance to KPA by presenters will be posted online and available for download from the main convention page on the KPA website. Each workshop room will have internet access, allowing handouts to be viewed online during the presentations. As an added KPA member benefit, every KPA member convention attendee will be provided access to ALL posted convention handouts, not only handouts for workshops attended.

Special Assistance

If you need special assistance, please let the KPA office know as soon as possible so we may make appropriate arrangements. The facility is fully handicap accessible.

Cancellation Policy

95% refund if cancellation received on/before Oct 1, 2017. 50% refund if cancellation is received between Oct. 16 – Oct. 23, 2017. 20% refund if cancellation is between Oct 24—Nov 1, 2017. No refunds after Nov. 1, 2017. All refund requests must be in writing to KPA, 120 Ave, Ste. 214, Louisville, KY or kpa@kpa.org

CE Credits/Attendance

Psychologists, Social Workers, Art Therapists: The workshops in this program have been approved for CE credits by the Kentucky Psychological Association (KPA). KPA is approved by the American Psychological Association to sponsor continuing education for psychologists. KPA maintains responsibility for these programs and their content. KPA is also an approved sponsor for the Kentucky Board of Examiners of Psychology, the Kentucky Board of Social Work, and the Kentucky board of Professional Art Therapists (Provider #1004). You must attend workshops in their entirety to obtain CE credit. Offerings are subject to change.

Reception Honoring New Licensees and Swearing-In Ceremony at the Griffin Gate Marriott Resort & Spa

5:00 PM - RECEPTION AND CEREMONY HONORING NEW PSYCHOLOGY LICENSEES/KPAGS SOCIAL SPONSORED BY THE KPA EARLY CAREER PSYCHOLOGISTS COMMITTEE

All are invited to attend a Happy Hour to mingle with colleagues and to celebrate the swearing-in of new KBEP licensees.
**Registration Information**

Name: ________________________ Degree: _____

*Please print your name as you want it to appear on your badge

Address: __________________________________________

City, State, Zip __________________________________

Email: __________________________________________

Phone: __________________________________________

Licensure Board: ___________________________________

Are you a member of the CE Registry?   ____Yes   ____No

**Circle the Workshops & Events you plan to attend**

**Thursday, November 2**

- 8:30 AM - 10:00 AM  T01  T02  T03  T04
- 10:15 AM  T05  T06
- 12:00 PM  KPA Annual Awards Luncheon
- 1:30 PM - 3:00 PM  T07  T08  T09  T10
- 3:15 PM - 4:45 PM  T11  T12
- 5:30 PM  Social Event

**Friday, November 3**

- 8:30 AM - 10:00 AM  F01  F02  F03  F04
- 10:15 AM  F05
- 12:00 PM  F06-Featured Presentation Luncheon
- 1:30 PM - 3:00 PM  F07  F08  F09  F10
- 3:15 PM - 4:45 PM  ECP Reception

**Saturday, November 4**

- 8:30 AM - 10:00 AM  S01  S02  S03  S04
- 10:15 AM - 11:45 AM  KPA Annual Membership Meeting
- 12:00 PM  Luncheon & KPA Annual Awards Luncheon
- 1:30 PM - 2:00 PM  S05  S06  S07  S08
- 2:15 PM - 4:45 PM  S09

**KPA Status:**

- ____KPA Member
- ____Sister State Psych Assoc. Member (state:___)
- ____KPA Student Member (no CE credit)**
- ____Non-Member—Join now and save a bundle!

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### Convention Registration Fees

**ALL CONVENTION PACKAGE - BEST BUY!**

Fee includes admission to all 3 days of Convention and all luncheons

<table>
<thead>
<tr>
<th></th>
<th>Early Bird (Before Sept 25)</th>
<th>Pre-registration (Sept 26—Oct 16)</th>
<th>Onsite</th>
<th>TOTAL</th>
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<td>KPA Member+</td>
<td>$370</td>
<td>$425</td>
<td>$500</td>
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<tr>
<td>Non Member</td>
<td>$590</td>
<td>$650</td>
<td>$725</td>
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<tr>
<td>KPA Student Member **</td>
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<td>$175</td>
<td>$200</td>
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</tbody>
</table>

All Convention Fee: $_____

### Per Day Fees

Fee includes admission to all workshops and lunch on indicated attendance day(s).  

<table>
<thead>
<tr>
<th>Per Day</th>
<th>Early Bird (Before Sept 25)</th>
<th>Pre-registration (Sept 26—Oct 16)</th>
<th>Onsite</th>
<th>TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
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<td>$150</td>
<td>$170</td>
<td>$210</td>
<td>x # days =</td>
</tr>
<tr>
<td>Non Member</td>
<td>$235</td>
<td>$260</td>
<td>$315</td>
<td>x # days =</td>
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<tr>
<td>KPA Student Member **</td>
<td>$60</td>
<td>$75</td>
<td>$90</td>
<td>x # days =</td>
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</table>

* You must be a current member of KPA as of 11-2-17 in order to take advantage of the KPA Member discounted rate.

Indicate day(s) you will attend:

- ____Thursday  ____Friday  ____Saturday

**NOTE: THERE WILL BE NO ONSITE LUNCH REGISTRATIONS**

### Lunch “Opt Out” Preference

Lunch is included in your registration fee. If you do not want lunch on the day(s) you are registered to attend, indicate which day below and deduct $20 per day from your registration fee.

- ____Thursday  ____Friday  ____Saturday

Total Lunch Deduction: ___# days x $20 = $_____

### Dietary Needs:

- ____None
- ____Vegetarian
- ____Gluten Free
- ____Other, please specify________________________

### Thursday Evening Social Event

- ____# tickets x $30 = _______

### Kentucky Psychological Foundation Donation

Make a tax-deductible donation to support education initiatives, scholarships, diversity initiatives and other projects of the Kentucky Psychological Foundation.

Total Donation: $_____

### Payment Method:

- ____Check enclosed, made payable to KPA
- ____Credit Card: Visa/Mastercard/AMEX/Discover

Cardholder Name: ________________________________

Account #: ____________________________

Exp. Date: _____________  CVV: _____________

Signature: ________________________________

Send registration form, along with payment to KPA, 120 Sears Avenue, Louisville KY 40207 or fax to 502-894-0635
Behavioral Health Parity is still the law…now let’s get it implemented!

By Sheila A. Schuster, Ph.D.

YOUR INPUT is needed to assure that insurers implement parity so that there is full access to behavioral health (Mental Health & Substance Use Disorders) services!

HB 268, passed in Kentucky in 2000, and Federal legislation (The Mental Health Parity and Addiction Equity Act - MHPAEA) passed in 2008 require qualified health insurance plans and Medicaid to provide Behavioral Health services at PARITY (Equality) with physical health services. This means:

➢ Same co-pay or co-insurance is charged for behavioral health as for physical health
➢ Same deductibles, annual and lifetime limits are in place for behavioral health as for physical health
➢ NO limitations on outpatient services for behavioral health that are not in place for physical health
➢ NO limitations on inpatient services for behavioral health that are not in place for physical health
➢ NO differences in access to behavioral health services or medication than is available for physical health

If you have provided behavioral health services – or know someone who has received behavioral health services – since January 1, 2014, please respond to these questions:

Q: Has there been a different copay or coinsurance for the behavioral health service than for a comparable physical health service?

Q: Does the policy set different deductible levels, annual or lifetime limits for behavioral health than for physical health?

Q: Has the behavioral health service been denied by the insurance plan or by a Medicaid MCO?

Q: If denied, what was the reason given??

Q: Have you provided services and your client been told: “You have run out of therapy sessions” or “You have run out of inpatient days.” or “Your policy does not cover any more services.”

Q: Have you or someone you know or have provided services for been denied access to a prescribed medication for a behavioral health condition?

Q: Have you or someone you know or have provided services for had to wait longer for a visit with a behavioral health provider than for a physical health provider? Had to travel further for behavioral health services than for physical health services?

If you have answered “Yes!” to any of these questions, please contact: Sheila Schuster, Ph.D. kyadvocacy@gmail.com 502-836-4222

We have an opportunity to work with other provider organizations including the KY Hospital Association and the KY Mental Health Coalition, with consumers and family members, with regulators such as the KY Department of Insurance and the KY Department for Medicaid Services, as well as with the insurers and MCOs to resolve these issues and to make sure that FULL PARITY is truly the law of the land in Kentucky! Behavioral health deserves no less than full equality.
Multiple Relationships—Pre and Post—Can be Problematic

By The Ethics Committee

The Ethics Committee received a consult regarding any ethical principles that may apply to an invitation received by a practitioner to attend a gathering hosted by a former patient. Services provided by the practitioner had ended over a year ago, but the invitation was issued by the family to the entire multidisciplinary team who had treated the patient as a way to express their gratitude. The consult centered on the question of whether this constituted a dual relationship if there were no other additional social contact and it was within the context of thanks expressed to the team as a whole. While many dilemmas may arise during the course of treatment with a client, similar dilemmas may present post termination as well.

The Ethics Code states in Standard 3.05 that multiple relationships that would not be expected to cause impairment or risk exploitation or harm are not unethical. A multiple relationship occurs when a psychologist is in a professional role with a person and (1) at the same time is in another role with the same person, (2) at the same time is in a relationship with a person closely associated with or related to the person with whom the psychologist has a professional relationship, or (3) promises to enter into another relationship in the future with the person or a person closely associated with or related to the person. A psychologist refrains from entering into a multiple relationship if the multiple relationship could reasonably be expected to impair the psychologist's objectivity, competence or effectiveness in performing his or her functions as a psychologist, or otherwise risks exploitation or harm to the person with whom the professional relationship exists.

This standard does not prohibit such activities as attending a client's/student's/employee's/employer's family funeral, wedding or graduation, having the psychologist's child participate on a sports team coached by a client/patient, or gift giving or receiving with those with whom one has a professional role. Incidental encounters with clients/patients at such activities as religious services, school events, in grocery stores, health clubs or restaurants, etc. are not unethical, as long as the psychologist reacts to these encounters in a professional manner. On the other hand, psychologists should be mindful of whether the nature of a professional relationship might lead to a client's misperception regarding an incidental meeting or encounter. The practitioner should always consider whether the particular nature of a professional relationship might lead to a client's/patient's misperception regarding the encounter.

A good resource for these questionable situations is Celia Fisher's book, Decoding the Ethics Code, A Practical Guide for Psychologists, 4th Edition. (Sage Publications, 2017). Fisher suggests keeping a record of incidental encounters and discussing them with the client when/if appropriate. Fisher points out that all multiple relationships involve boundary crossings but that every boundary crossing is not a boundary violation. Regarding post-termination nonsexual relationships, Fisher states: “The standard does not have an absolute prohibition against post termination nonsexual relationships with persons with whom psychologists have had a previous professional relationship. However, such relationships are prohibited if the post termination relationship was promised during the course of the original relationship or if the individual was exploited or harmed by the intent to have the post termination relationship.”

This standard does not recommend an all-encompassing, absolute prohibition against post-termination non-sexual relationships with persons who once had a professional relationship with the psychologist. However, psychologists should be aware that post-termination relationships can become problematic when personal knowledge acquired during psychotherapy becomes relevant to the new relationship.

In our consult, the professional role had been terminated, and the invitation to revisit that relationship was presented in the context of a larger group, not as an individual. The committee recommended that the following factors were important to consider in making a decision:

1. To what degree would your attendance risk causing exploitation, impairment, or harm?
2. What was the depth of the therapeutic relationship? Less intense therapeutic work may lead to a less intense relationship although it still may include strong gratitude.
3. Would your presence compromise a future therapeutic relationship if the client returns for treatment?
4. Are there financial entanglements? Are there outstanding bills from treatment? Is the former client/patient paying for an admission to an event, food or other amenities?
5. To what degree would there be social contact with the family and friends of the client? Would a naive client unintentionally reveal confidential information by introducing you as his/her therapist without understanding the potential ramifications (e.g. potential negative judgement of client by family or friends)? Some psychologists report that they attend a personal function but keep a low profile and leave the event after the formalities are concluded so that socializing with friends and family are kept to a minimum.

6. If a decision is made to attend, a conversation with the client prior to the event may be helpful in explaining your reasoning behind the minimal involvement. If you decide not to attend, some sort of communication with the client, such as a phone call or short note expressing appreciation for the invitation and congratulations on the event or continued good progress, may help soften the blow if you are concerned about hurt feelings.

7. Consultation with the other members of the group to discuss their reasons for accepting and their level of involvement may prove helpful.

In Memoriam

Billie Ables, Ph.D. 1925-2017
Howard Bracco, Ph.D. 1944-2017
Kenneth L Kirsh, Ph.D. 1972-2017
Mary Ellen Peacock, Psy.D. 1943-2016
Judith B. Peoples, Ph.D. 1941-2016

Thank you to friends, colleagues and family members who let us know of the passing of these long-time KPA members who contributed so much to psychology in KY.
This edition of the ECP Spotlight focuses on Margaret Sergeant, Ph.D., BCBA-D, a Licensed Psychologist, Licensed Behavior Analyst and the Program Director of Behavior Associates LLC. Dr. Sergeant was kind enough to let us get to know her for the Spotlight. —Beth Simon, Psy.D.

Tell us about your path from graduate school to the job you have now?
After graduate school I began working as a psychologist for Behavior Associates. I was conducting psychological evaluations and was providing behavior services in an ICF facility. I acquired a certification in behavior analysis a few years after taking that position. I am currently the owner and executive director of the company.

What made you want to become a psychologist?
I was working as a teacher for 7 years and while my coworkers were, we often struggled to help children succeed. I applied to graduate school as my coworkers were, we often struggled to help children succeed. I applied to graduate school with the intent to help families get the services they needed outside the school setting to be more prepared for success in the school setting.

What challenges have you faced early in your career?
Challenges that I have faced have all been related to the business side of providing psychology and behavior services. While I felt prepared to provide clinical services, I had no training in running a business. I have learned a great deal along the way from my father (my boss) but it continues to be difficult to work through the insurance world.

What excites you the most in your job?
The aspect of my job that excites me the most is when my clients make progress that allows them to engage more successfully in school or in the community.

What has been the best moment in your career as a psychologist so far?
I can’t think of one specific moment but there have been many small successes for my clients that are my favorite moments. For example, when a child with Autism has a successful social interaction or an adult learns to communicate in a way that allows them to venture into the community without behavior incidents.

What do you see ahead for the field of psychology?
I think technology will continue to expand in our field. More computer assisted therapy services will be offered and training opportunities online will become more and more lifelike.

What benefit do you most appreciate from being a KPA member, especially as an ECP?
I have benefited from so many trainings offered by KPA, but my involvement in the ECP committee has been the most useful. One of the most useful aspects of this committee has been that I stay informed and have had more tools to help me work through the licensure process and have early success as a psychologist.

KPA Member Benefit Highlight

Free Practice Consultations
Have an ethical concern or question?
KPA’s Director of Professional Affairs, Dr. Laurie Grimes is available to consult with KPA members concerning problems with third party reimbursement and will work with KPA members to bring these issues to the attention of insurers, regulators such as the KY Department of Insurance, and, in coordination with the KPA lobbyist, with legislators. She will inform KPA leadership of legislative, regulatory and advocacy issues affecting the provision of psychological services, and will gather psychological practice information from APA resources and from other state and provincial psychological associations. She will also communicate as necessary with KY Board of Examiners of Psychology concerning legislative and regulatory issues which affect KPA membership and their ability to provide and be reimbursed for psychological services.

Have a professional/practice question for Dr. Grimes? KPA Members log in to the KPA website and access the consultation form under the Members Only section!

A KPA Member Only Service!

Kentucky Currents: A Snapshot of Events in the Lives of KPA Members

Congratulations to KPA members Dee Werline, M.A. and James Gedra, Psy.D., on their appointment as Deputy Commissioners of the Kentucky Department for Behavioral Health, Developmental and Intellectual Disabilities.

KPA Executive Director Lisa Willner, Ph.D., was elected Vice Chair of the Jefferson County Board of Education. In related news, Lisa was honored to receive recognition from the Kentucky Alliance Against Racist and Political Oppression for her school board service.

Tom Miller, Ph.D., ABPP was recently inducted into the Science and Technology Hall of Fame at his undergraduate alma mater, St. John Fisher College.

Monnica T. Williams, Ph.D. was featured on NPR’s Science Friday discussing the effects of racism on mental health.

This year, the Kentucky Psychological Association received the Outstanding Achievement by a Psychological Association Staff Member Award, which went to our Executive Director, Lisa Willner, Ph.D.

Sarah F. Shelton, Psy.D., MPH, MSCP - Congratulations to KPA President-Elect, Dr. Sarah Shelton, on her re-election to National Register of Health Service Psychologists Board of Directors...Read More

Shelia Schuster, Ph.D., was on Kentucky Tonight June 26th, 2017 discussing State tax reform. Dr. Schuster was featured in a profile by APAPO that focused on her advocacy and leadership in the passing of Tim’s Law... read more
The Kentucky Psychological Foundation works to build a psychologically healthy Kentucky through:

- Promoting healthy behavior throughout life
- Decreasing mental illness and stigma
- Embracing diversity
- Educating the public on psychological topics, health, and mind-body wholeness, including the award-winning Heads Up! and Heads Up for Kids! educational and public art campaigns.

KPF is a nonprofit 501(c)(3) organization. To support KPF with your tax deductible contribution, visit www.kpa.org/donations or mail your donation to:
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Visit www.kpa.org for Heads Up! Kentucky Healthy Living Guides
What’s New?

The Kentucky Psychological Foundation continues to expand its activities based on the goal of promoting a psychologically healthy Kentucky. Here are a few highlights:

KPF’s Public Education Committee continues to look for more ways to get scientifically based psychological information to the public. Past chair Jennifer Price, Ph.D., and new chair, Christen Logue, Ph.D., have been successful in having several op-ed pieces published in The Lexington Herald, The Courier Journal, as well as papers in Northern Kentucky and the Insider Louisville website. Topics included How to Talk to Your Kids About Mental Health and Challenging Myths About Refugees. You can follow the KPF Public Education Campaign on Twitter for more information: @HeadsUpKentucky.

The Georgetown College Women’s Volleyball team designated the Foundation for their annual fundraising event that focused on suicide prevention. The team generated over $2000 for KPF. Thank you!!

As you may recall, KPF produced brochures on a wide range of topics in psychology during the Heads Up! public art event several years ago. Many thanks to DeDe Wohlfarth, Ph.D. and her students at Spalding University for revising and updating the information and references. We hope that the new brochures will be available soon. We are very grateful for these amazing students and faculty.

Various Public Education events have been held across the state, including providing public education materials about psychology during KPA’s annual Legislative Day. Legislators and their staff members were appreciative of materials provided to them. Our thanks to outgoing chair Jennifer Price, Ph.D., for all her accomplishments with this committee. She will soon be assuming a new role with KPF!!

Psychology in the Workplace has expanded its reach into the business community. Chairperson Courtney Keim, Ph.D., reports that they are currently reviewing five applications for annual Psychologically Healthy Workplace Awards presented at the Annual Convention. This represents the largest group for awards consideration to date. Dr. Keim has also met with representatives of the Mayor’s office in Louisville to review ways they might assist in promoting the Psychologically Healthy Workplace campaign. Dr. Keim’s students created a Mental Health Awareness in the Workplace which they offered to various businesses in Louisville. We hope to use this model in other locations.

Diversity Committee Chair, Gina DeArth-Pendley, Ph.D. and the committee have developed a plan for a diversity conference in 2018, and will once again be sponsoring a diversity speaker at the annual KPA Convention. Multicultural Awards will be presented that the annual Awards Luncheon during the upcoming KPA Convention.

Disaster Response Network Chair Ginny Frazier, Ph.D. continues to look for ways to get information to members on a regular basis or when disasters occur. Look for more!

KPF’s Student Academic Conference is still the largest of its kind in the country! This year drew even more entries for the poster competitions for undergraduate and graduate levels. This conference helps promote and support new psychologists in the state and the important work of our student researchers.

SILENT AUCTION continues to be one of our largest sources for funding so look for unique items at Convention 2017. These funds support all the efforts presented above as well as many more.

We look forward to many more events and projects in the coming year. Thank you to all our donors throughout the year and at convention. It has been exciting to see the growth of KPF in the last 5 years!
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Work Related Stress, Politics, and Well-being

By Courtney Keim, Ph.D., KPF Psychology in the Workplace Network Chair and Christen T. Logue, Ph.D., KPF Public Education Chair

Anyone who has held a job has felt the pressure of work-related stress. Unfortunately, such long-term stress is all too common. According to the 2016 American Psychological Association’s (APA) annual Stress in America Survey, 58% of Americans cited work as a source of stress.

Any job can have stressful elements, even if people love what they do. For these reasons, maintaining well-being at work is not always easy, but add the most contentious political season in recent history, and many workers are left feeling overwhelmed.

In fact, a recent survey from APA says that many Americans are feeling stressed and cynical specifically from political talk in the workplace. This stress has increased since the presidential election. APA says that, “26% of full-time and part-time employed adults said they felt tense or stressed out as a result of political discussions at work since the election, an increase from 17% in September 2016.” That stress and tension can make the workplace uncomfortable, or even hostile.

Heated political discussions can and do happen in the workplace. Dr. Courtney Keim, Chair of the Kentucky Psychological Foundation's (KPF) Psychology in the Workplace Network says, “The important thing is for employers to create a supportive workplace where employees feel valued no matter their political leanings or any disagreements that may arise.”

This starts from the top of the organization. Keim says, “Executives, directors, and supervisors can’t pretend political conversations aren’t happening and they shouldn’t be afraid to talk about relevant political issues. In fact, the way organizational leaders communicate about politics sets the standard for how others in the organization should follow.”

Of course, not all workplaces have supportive and open organizational cultures, which can cause stress to workers. When work stress becomes chronic, it can be overwhelming — and harmful to both physical and emotional health. Fortunately, KPF and APA offer tips to manage stress at work.

Track stressors. Keep a journal for a week or two to identify which situations or people create the most stress. Taking notes can help you find patterns among stressors and reactions.

Figure out what you can change. Once you determine if there are any patterns to when you feel stressed at or about work, you might be able to identify areas that you can change. Perhaps you can change your immediate work environment or avoid situations or people who tend to bring up conflictual discussions or topics.

Talk to management. Healthy employees are typically more productive, so bosses have an incentive to create a work environment that promotes employee well-being. Employees should start by having an open conversation with their supervisor. The purpose of this isn’t to lay out a list of complaints, but rather to come up with an effective plan for managing the work stressors, so employees can perform at their best on the job.

Develop healthy responses. Instead of attempting to fight stress with fast food, alcohol, or ranting on social media, try to make healthier choices. Exercise is a great stress-buster. Yoga can be an excellent choice, but any form of physical activity is beneficial. Also make time for hobbies and favorite activities. Whether it’s reading a novel, going to concerts, or playing games with the family, make sure to set aside time for pleasurable activities. Getting enough good-quality sleep is also important for effective stress management. Build healthy sleep habits by limiting caffeine intake late in the day and minimizing stimulating activities, such as computer and television use right before bed.

Take time to recharge. To avoid negative effects of chronic stress and burnout, take time to replenish and return to pre-stress levels of functioning. This recovery process requires “switching off” from work, including emails and maybe even all forms of electronic media. When possible, take time off to relax, unwind, and unplug so you can come back to work feeling reinvigorated and ready.

Seek support. Accepting help from trusted friends and family members can improve one’s ability to manage stress. Employers may also have stress management resources available through an employee assistance program (EAP), which might include online resources or referrals to mental health professionals, if needed. If you continue to feel overwhelmed by work stress, you may want to talk to a psychologist. Psychologists are trained to help people better manage stress and change unhealthy behaviors.
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The Kentucky Psychological Foundation’s 2017 Spring Academic Conference held on April 1, 2017 and titled, “Psychology in Unexpected Places,” was a great success! The conference took place at Spalding University in Louisville. We hosted a number of undergraduate and graduate students from around the Commonwealth, as well as area businesses and universities who sponsored the conference with whom students could connect for professional resources. The theme of the conference was designed to bring professionals together from various disciplines in psychology, to showcase tremendous work that is being done to evaluate, treat, understand, and work with various human behavior in “unexpected” places. A few of the roles of psychology in various unexpected places included professionals engaged in leadership and neuroscience, human resources and coaching practices, Fortune 500 companies, perception in the popular Kentucky field of bourbon, working with students on family and coaching practices, Fortune 500 companies, psychology in the workplace network (PWN), diversity, multicultural national professional organization. Award recipient must be a KPA member in good standing. Reward amount: up to $500. Multicultural Professional Development Award - Qualified applicants are psychologists who represent an ethnic/racial diverse group. The cash award may be used for a specific multicultural initiative, training, conference, event, or membership dues to a multicultural national professional organization. Award recipient must be a KPA member in good standing. Reward amount: up to $500. Multicultural Student Professional Development Award - Qualified applicants are psychology graduate students representing an ethnic/racial diverse group. Award money may be used for a specific multicultural initiative, training, conference, event, or dues to a multicultural national professional organization. Award recipient must be a KPA member in good standing. Reward amount: up to $350.
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Define the Profession... Have a strong voice in how our profession is defined in Kentucky through KPA’s advocacy initiatives.

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If you aren’t investing in psychology in Kentucky, isn’t it time you did? Become a member today and begin to collect those dividends!

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