**Exciting News from KPA in February**

Here’s the February edition of the KPA e-NEWS, a bi-monthly newsletter, to enhance communication about psychology across the state. Numerous opportunities exist in 2014 for meeting your New Year’s resolutions of financial security, increasing knowledge, enhancing organization, planning, and practice opportunities, and cultivating new personal and professional relationships. What follows is a sampling of psychology-related news and opportunities across the Commonwealth. Check out the column on the left for upcoming KPA Social and CE events, meetings, Kentucky Currents (member news items), and more. For more updates, visit the KPA website and join KPA on Facebook: simply click "Like" on the Kentucky Psychological Association Facebook page.

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**Update from KPA Executive Director**

*by Lisa Willner, Ph.D., KPA Executive Director*

**UPDATE: The Kentucky Psychological Foundation**

The early part of 2014 has been a busy time for the Kentucky Psychological Foundation (KPF). For starters, the Foundation has a new name. (This is the organization formerly known as the Kentucky Psychological Association Foundation, or KPAF.) The KPF also has a new Board of Directors, under the leadership of KPF President Cay Shawler, M.S. (Formerly, the officers of KPA doubled as KPAF’s Board of Directors.) Projects, committees, and initiatives under the auspices of the KPF include the Academic Committee and Spring Academic Conference; the Diversity Committee,
multicultural scholarships and research prizes, and training in cultural competence; Public Education; Disaster Response; Psychologically Healthy Workplace Network; and more.

The KPF Board is meeting this weekend for a full-day retreat led by organizational psychologist and friend to KPA and KPF, Dr. Rick Cartor. Meanwhile, this is a great time for you to get involved in the life of the Kentucky Psychological Foundation, and there are many ways to do so! Read on in the KPA e-NEWS for opportunities to join the Diversity Committee, volunteer for the Spring Academic Conference, make a tax-deductible donation to support the important work of the Kentucky Psychological Foundation on behalf of psychology in the Commonwealth. Stay tuned for more information about KPF, its programs and projects, and ways for you to be involved.

KPA Website - Work in Progress

On January 3rd, KPA completed its migration to a new website host after the company we relied on for many years was bought out by a larger organization. The latest step in the transition process is the updated KPA online directory which is set to go live on Monday, March 3rd. Please take a moment to review your KPA profile in order to adjust your privacy settings and to ensure your directory listing information is correct.

To update your profile:

- Go to [www.kpa.org](http://www.kpa.org) and sign in to your account. Note – KPA sent you a new temporary log-in password in January. If you have forgotten your password follow the "Forgot your Password?" link under the sign in button and enter either your username or email.
- Once you are signed in, select the "Manage Profile" option under the My Profile box on the right-hand side of the screen.
- On the "Manage Profile" screen, select "Edit Bio" under the information and settings section.

If you have any problems updating your profile, please let us know at kpa.kpa.org. If you are not able to find what you are looking for on the new website, please email us at kpa@kpa.org.
Thank you,
Leslie Proasi
Director of Operations

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**Diversity Committee Seeking New Members**

The Diversity Committee of the Kentucky Psychological Foundation (KPF) is seeking energized and dedicated, individuals to assist with planning and fundraising for CE programming, trainings, and a 2015 KPAF Diversity Conference. Please click on this link [https://kpa.site-ym.com/?DiversityCmteApp](https://kpa.site-ym.com/?DiversityCmteApp) and complete the form by March 6th if you are interested in serving on the Diversity Committee. One of the current members of the Diversity Committee will contact you after March 6th so that we may begin to organize ourselves and our collective talents.

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**Kentucky Psychological Foundation (KPF) Spring Academic Conference**

The annual 2014 KPF Spring Academic Conference will be held on Saturday, March 29th at Asbury University in Wilmore, KY. The Conference provides a unique opportunity for graduate and undergraduate students to present their research in juried competitions, develop practical skills, and network with fellow students from across Kentucky. The featured workshop for faculty and students will be Advocacy: Every Voice Counts, and will focus on the many forms that advocacy may take, including advocacy within academic settings, and using psychological research findings for the common good. Students are encouraged to nominate a faculty member as the Outstanding Graduate or Outstanding Undergraduate Mentor. Faculty members are invited to participate in the Conference as judges, mentors, and coaches. Undergraduate students have the opportunity to talk with graduate students about "how to get into graduate school," and graduate students may
KPA Currents
A Snapshot of Events in the Lives of KPA Members

KPA member Tony L. Sheppard, Psy.D., CGP, FAGPA of Louisville has been appointed to a two-year term as Chairman of the International Board for Certification of Group Psychotherapists (IBCGP). The IBCGP certifies group psychotherapists and works to establish standards for the evidence-based practice of group psychotherapy. IBCGP is an affiliate board of the American Group Psychotherapy Association (AGPA). A past KPA board-member, Dr. Sheppard has been involved with AGPA for over 11 years and has served as a committee chair with IBCGP for the past 5 years. He is in private practice and is on faculty in the School of Professional Psychology at Spalding University.

Dr. Sheppard is currently serving on KPA’s 2014 Convention Committee.

also serve as judges for the undergraduate poster competition. There will also be a Faculty/Student Luncheon that is included with your registration. The 27th Annual Psych Bowl will be a featured event, with undergraduate teams vying for the top slot as 2014 Psych Bowl Champions!

Conference Deadlines:
- Psych Bowl Team Entry - Submission deadline - Mar 3rd
- Paper Presentations  - Entry Deadline Mar 3rd
- Mentor Award Nominations - Submission deadline - Mar 7th
- Sponsorship Submissions  - Deadline Mar 7th
- Poster Competition  - Entry Deadline Mar 14th
- General Conference Registration – Deadline 14th

For more information, go to the Spring Academic Conference Page at: https://kpa.site-ym.com/general/custom.asp?page=307

New 2014 KPA Webinar Series – Exploring Attachment: Clinical Insights Across the Life Span, Season 2
Moderated by Steve Stratton, Ph.D.

Attachment Theory is a sweeping meta-theoretical perspective for understanding the human experience “from the cradle to the grave,” as John Bowlby used to say. Educators, clinicians, physicians, and scientists from around the world are fascinated with this explanatory framework, and the robust evidence to support it. The 2014 Kentucky Psychological Association Webinar Series, Exploring Attachment, brings together international researchers and practitioners who will enhance understanding and promote application of attachment-based clinical practice. Extending the 2013 Webinar Series on children and adolescents, the 2014 Series considers attachment in adults. Come spend an hour each month from now through June exploring attachment! Click here to register.

2014 KPA Academic Member Survey – The Good News and the Bad News
Members in the Media

The following members appeared on “Let’s Talk” at 970AM WGTK with fellow KPA member Stan Frager, Ph.D.

David Hanna, Ph.D., & Dustin Wygant, Ph.D. discussed “Mental Health and Violence”

Suzann O’Koon, Ph.D. discussed “Holiday Stress”

Please send your announcements to kpa@kpa.org so that your news may be shared with the KPA membership.

KPA Interest Sections

Joining KPA Interest Sections is free and participation on the listservs is an exclusive member benefit. Many ideas, resources, and requests for treatment recommendations and other opportunities flow through the KPA listservs daily. Here is an excerpt from a post on the KPA Clinical listserv: “Thank you to everyone who shared their experiences with me. I was quite surprised at the variability of your responses….Nice to have a community to call on for advice when such situations arise!” If you want to expand your resources and deepen your own sense of community within KPA, visit the KPA Interest Section webpage for instructions on how to join a KPA Interest Section.

Join KPA and KPAGS on Facebook!

by Rich Lewine, PhD, KPA Academic Representative

The good news is that we continue to find substantial reward and pleasure in our academic lives. Mentoring students, applying psychological knowledge in the world outside the classroom and lab, developing and testing ideas, sharing the joys of learning, contributing via administration, and the flexibility to do all these things were among what respondents reported as the “most rewarding.”

The bad news, and by far the most frequently cited, is what many view (on the national as well as local level) as the replacement of the academic model with the business model. How many externally funded grants can we get? How many students can we graduate? How many more students can we admit this year than last? How can we cut costs on the teaching side to increase profit on the revenue side? And while accountability is important, many fear that fiscal values are replacing scholarly ones to the detriment of education, research, and scholarship. It is no wonder that respondents also reported feeling undervalued, isolated from colleagues, and frustrated.

There is, of course, no easy answer to the changing face and structure of the academy. While there is much said and written, there seems to be little dialogue and a growing sense that we in academics are losing control of our professional lives (not unlike our colleagues in the clinical services world). The upcoming SAC meeting would be a good time and place to begin sharing ideas about our changing professional world—no need to solve problems, but a chance to articulate and consider what is going on. And as a clinician, I’d also point out the value of a being a member of a support group!

In that spirit, I would urge you to read two books by Derek Bok, former president of Harvard University, who recognized early the threats to the academy of the intrusion of the business model into academia. More importantly, he offers a reasoned and thoughtful view of the issues that leads to discussion rather than argument.

I’d welcome any comments, suggestions, or feedback as we address how to keep what we find most rewarding about academics while understanding and responding to what threatens and discomforts us. Hope to talk with you at SAC!
KPA has always been an organization that works to be inclusive of all psychologists in the state. Kentucky Psychological Association is officially on the popular social networking site, Facebook.com, and currently has 378 "friends". All you need to do to join the Kentucky Psychological Association on Facebook is to select the "Like" button after finding our group on Facebook. Please be sure to search for "Kentucky Psychological Association " and review the KPA Social Media/Forum Policy. The KPA Graduate Students (KPAGS) are also on Facebook! Stay up to date with the latest KPAGS news and communicate with other psychology graduate students from around the state! Click here to join KPAGS on Facebook: https://www.facebook.com/MyKPAGS

Advertise in the KPA e-Newsletter!

The bi-monthly editions of the KPA e-Newsletter, are distributed to over 1100 KPA members. The eNewsletter is sent via blast email at the end of Jan, March, May, July, Sept and Nov with submissions accepted at any time. Complete information and pricing details are available on the KPA Advertising webpage.

Support KPA During in 2014 via Shopping on Amazon.com

You can support KPA when shopping on Amazon by clicking the Amazon link on the main KPA website as a first step in making purchases on Amazon.com. Up to 3% of every purchase made on Amazon when you click their link on the main KPA website benefits KPA.

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Readings:


KPA Annual Conference - Save the Date!

The 2014 KPA Annual Conference will be held at the Galt House in downtown Louisville, November 6-8, 2014. The working title is "Psychologists as Collaborators: Partnering to provide comprehensive care." Complete details coming soon!

An Update from the Director of Professional Affairs (DPA)

by Laurie Grimes, PhD, KPA Director of Professional Affairs

Medicaid MCO Provider Enrollment Update

And they’re off! January 1st marked the official date for the new Medicaid Expansion to go into effect, and a time of new opportunity for psychologists to be independent Medicaid providers. Provider enrollment procedures were disseminated through a presentation at convention, a newsletter article, and postings on the KPA website. Enrolling involves a two-step process of applying to Medicaid for a Medicaid ID and applying to any - or all - of the five Medicaid MCOs to become credentialed as a provider in their networks. That’s a lot of bureaucracy to deal with and it’s a new procedure for all parties, so it seemed like a good time to check in with applicants and agencies to get a sense of successes and snags.

Amongst all the celebration of the new Medicaid regulations, and despite the careful communications by Dr. Schuster, there was an error in the Medicaid regulation language. It omitted reference to Certified Psychologists with Autonomous Functioning (CPAF) and Certified Psychologists (CP). KPA has been assured that these practitioners remain eligible to become providers and that the wording will be amended soon. Licensed Psychological Associates (LPA) are approved providers although will not have their own...
### The Easiest Way to Accept Payments

The Kentucky Psychological Association is pleased to offer member merchant accounts - credit and debit card processing for your practice. A merchant account provides your clients with a convenient and immediate payment option and makes it easy for them to pay you for your services. Accept payment for consultation fees, counseling sessions and insurance co-pays. With a merchant account, you can:

- Accept Visa, MasterCard, Discover & AMEX.
- Control cash flow & increase business.
- Save up to 25% off standard bank fees.
- No contract or annual fees.
- No cost to transfer services - call to compare!

The process is simple. Begin accepting payments today! Call 866-376-0950 or visit [www.affinipay.com/kpa](http://www.affinipay.com/kpa).

### Application process update

From the Medicaid office I have learned that the current average processing time for all applications is 43 days. However, the DMS has been expediting applications related to behavioral health services so that they are processing in about 30 days. Applications sent to Medicaid from an MCO that has credentialed the provider are being processed in about 6 days. The Medicaid office stressed the need to be legible, thorough, and accurate when completing the application, as incomplete or incorrect information slows the process considerably.

### Reports from Medicaid MCOs

**Anthem** reports that they are “accepting amendments up to March 1st for the 1/1/14 effective date.” After that date, providers can sign up and get an effective date 30 days after the date of the signed, received amendment. They are using the KY Medicaid fee schedule. To check the number of psychologists enrolled, Anthem refers the caller to the provider directory at [www.Anthem.com](http://www.Anthem.com).

**MHnet (Coventry),** which has been bought by Aetna, is reportedly swamped with applications. If an applicant has a Medicaid ID, the process is taking 45-60 days at least. There was talk of ceasing to take new applications in the wake of the purchase by Aetna, but an exception was made for mental health providers so they are still accepting applications at this time.

**Caresource (Humana)** reports that their goal was to have 240 mental health providers enrolled by March 1st and they are "about there." This was reportedly due in part to their recruitment efforts. They encourage more providers to apply and predict the turn-around time to be 1-3 months for those who submit their Medicaid ID application at the same time.

**Wellcare of Kentucky** (response still pending)

**Passport Health Plans** reports that their application process is just beginning. They were unable to send out contracts until they received written instructions from DMS, which

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### KPA Home Study Opportunities

Under revised KRS CE regulations, you can now earn up to 12 credits per licensure cycle for home study courses. See what KPA has to offer...

- [A First Step in Understanding the Affordable Care Act and Its Potential Impact on the Health and Mental Health of Kentuckians](http://www.kpa.com)
- [Navigating the CPT Changes for 2013](http://www.kpa.com)
- [KPAF Diversity Conference Home Study Courses](http://www.kpa.com)
- [KPA Domestic Violence Home Study Series](http://www.kpa.com)
- [Clinical Applications of Neuroscience Research Home Study Series](http://www.kpa.com)
- [Religion, Spirituality, and Clinical Practice Webinar Home Study Series](http://www.kpa.com)

Medicaid numbers since they will bill under their Licensed Psychologist supervisor.
occurred in late January. So on February 3rd they began sending contracts out to the providers who had been placed on the waiting list. A "clean" application (i.e., all needed information provided) may take 4 weeks to process, though they will "retro" the effective date to the date the application was received. They encourage more applicants and advise potential providers to apply for a Medicaid ID and the MCO credentialing at the same time.

From fellow KPA members I have learned that some have already received their Medicaid numbers. While some colleagues have praised the Medicaid phone representatives as helpful and courteous in the process, others were frustrated with the difficulty in getting a return phone call or connecting with knowledgeable people. The reportedly non-negotiable Medicaid rates are posted at [http://chfs.ky.gov/dms/fee.htm](http://chfs.ky.gov/dms/fee.htm). Several colleagues have expressed concern about rates and reimbursement processes and are choosing to delay their application until these matters are better understood. Reimbursement for psychological testing is an area of particular concern; Medicaid cites the rate chart and the accompanying CPT codes as the best predictor of what will be covered and at what rate. In response to concerns about co-pays, the Medicaid office provided this response:

The co-pay structure is listed in DMS state plan amendment 13-023 titled Cost Sharing. This only applies to traditional fee for service Medicaid members. The Managed Care Organizations (MCO's) can choose to impose co-pays or not.

As you can see, this is still a work in progress. Keep your stories coming and I'll do my best to keep you updated as I get information. You can find me at Laurie@kpa.org.

*The work of KPA's DPA is made possible by your KPA dues; this information is intended for the use of KPA members only!*

**New Substance Abuse Resources Focus on Teens**

New resources were released this month by the National Institute on Drug Abuse (NIDA) to help clinicians care for teens struggling with or at risk of developing substance use disorders (SUDs).

"Because critical brain circuits are still developing during the teen years, this age group is..."
particularly susceptible to drug abuse and addiction,” emphasizes NIDA Director Dr. Nora D. Volkow.

As clinicians, we are in a prime position to help care for teens with SUDs, and NIDA has developed these resources with them in mind. Dr. Volkow adds, “These new resources are based on recent research that has greatly advanced our understanding of the unique treatment needs of the adolescent.”

You can view and/or download these teen-focused resources here:

- **Principles of Adolescent Substance Use Disorder Treatment: A Research Based Guide**: highlights evidence-based treatment approaches for teens and the clinicians’ role in identifying and supporting treatment and recovery for SUDs

- **Substance Use Disorders in Adolescents: Screening and Engagement in Primary Care Settings**: provides videos on screening teens at risk for or struggling with SUDs

- **Marijuana: Facts for Teens**: includes FAQs about marijuana and synthetic marijuana (e.g., K2, Spice) and its effects on the teen brain; this booklet can be used as a handout when discussing marijuana with teens.

These resources are part of the NIDAMED portfolio. If you have questions about these or any of the other NIDAMED resources, contact nidacoeteam@jbsinternational.com.

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**Q&A on Current Issues in Ethics**

_by KPA Ethics Committee_

**Ethical Question:**

A psychologist asked a question regarding a plan to create a blog on relationships subsequent to retirement. The specific concern regarded limitations in responding to questions if 1) the psychology license is discontinued, and 2) if the psychology license is...
The committee agreed, that license or no license, one would likely want to be careful about how one presents oneself to the public. If the license is retired, care would need to be taken in making sure self-presentation does not appear to suggest practicing psychology without a license. If the license is retained, expertise in the area "blogged" is a reasonable standard (see 2.01 below).

The committee thought that consultation with an attorney might be in order to determine what, if any, liability might arise from writing such a blog. An attorney might be better suited to answer the question regarding whether writing such a blog without a license could be construed to be practicing without a license. As a reference point, a recent case with the Kentucky Board of Examiners of Psychologists has questioned the right of a masters' level psychologist, apparently licensed in another state, to write an opinion column in a Kentucky newspaper. The exact issue, whether or not it deals with practicing without a license and/or practicing across state lines, is clearly an issue worth considering.

Some APA ethical guidelines also to consider:

5.01 Avoidance of False or Deceptive Statements:

(a) Public statements include but are not limited to paid or unpaid advertising, product endorsements, grant applications, licensing applications, other credentialing applications, brochures, printed matter, directory listings, personal resumes or curricula vitae, or comments for use in media such as print or electronic transmission, statements in legal proceedings, lectures and public presentations, and published materials.

Psychologists do not knowingly make public statements that are false, deceptive, or fraudulent concerning their research, practice, or other work activities or those of persons or organizations with which they are affiliated.

(b) Psychologists do not make false, deceptive, or fraudulent statements concerning (1) their training, experience, or competence; (2) their academic degrees; (3) their credentials; (4) their institutional or association affiliations; (5) their services; (6) the scientific or clinical basis for, or result, or degree of success of, their services; (7) their fees; or (8) their publications or research findings.
(c) Psychologists claim degrees as credentials for their health services only if those degrees (1) were earned from a regionally accredited institution or (2) were the basis for psychology licensure by the state in which they practice.

2.01 Boundaries of Competence

(a) Psychologists provide services, teach, and conduct research with populations and in areas only within the boundaries of their competence, based on their education, training, supervised experience, consultation study, or professional experience.

KPA Member Benefits: New Resources!

Technology Resource - Dr. Dan Florell, presenter of the June 21st, 2013 KPA CE Workshop, Advanced Supervision: Influence of Technology, has been gracious enough to share an audio recording of his workshop with KPA members interested in the advancements of technology and their use in the field of psychology. Click here to learn more and to access the recording.

Ethics Resource - The KPA Ethics Committee has developed a list of resources for KPA members aimed to help psychologists find resources about self-assessment, self-care and the development of skills, relationships, and personal qualities that will allow them to be less vulnerable to ethical breaches and “slippery slopes” in their professional careers and foster ethical awareness that leads to optimal practice. The posted resources define and discuss the stress—distress—impairment continuum, and the vulnerability at any point along the way to an ethical violation. They touch on topics such as risk factors, prevention of impairment, intervening with an impaired colleague, treatment options and the national movement toward establishing colleague assistance programs. Click here to learn more and to access the resources.

Arguments Against Prescription Authority for Psychologists

by Aaron Alan Smith, PhD Student,
KPA Psychopharmacology Task Force

This brief article is a continuation of the efforts by the Task Force on Psychopharmacology to provide information to members of the Kentucky Psychological Association regarding the issue of prescriptive authority for psychologists. This piece is the seventh in a series of articles designed to help the members of the Kentucky Psychological Association answer the following basic questions in preparation for a state-wide survey: What is your opinion on the issue of prescriptive authority for doctoral level psychologists? How well informed are you regarding the two sides of the issue? As a means of helping you think about the above questions, this article provides information on the arguments against prescriptive authority for psychologists.

In 1984, Senator Daniel Inouye of Hawaii proposed legislation to grant prescriptive authority to psychologists. The aim was to improve access to quality mental health care.[1] Since this time, the debate over prescriptive authority for psychologists has been thoroughly explored both inside and outside the field of psychology. Although proponents have formulated insightful arguments in support of prescriptive authority, there remains a considerable degree of apprehension from the medical community, as well as from many psychologists. With this in mind, this essay will review the main arguments against permitting universal prescription privileges to psychologists. These include: client safety issues, lack of medical training, exaggerated societal demand, ethical concerns, cost-effectiveness, and the impact on psychology practice.

The main argument against granting prescriptive authority to psychologists is that the absence of a medical background would negatively impact client safety. Because psychologists are trained in the behavioral and social sciences, it has been argued that they would lack the necessary medical science education and clinical setting experience. Both of which are important factors in understanding complex physiological and pharmacological processes. For example, many physiological conditions resemble psychiatric disorders, thus increasing the likelihood of misdiagnoses and inadequate treatment regimens. Additionally, opposition to prescriptive authority has argued that psychotropic medications are powerful drugs that require close monitoring by trained medical personnel. For these reasons, the medical community has been firm in stating that clinical training in a medical setting is the only method of ensuring prescription competency and client safety.[1-6]
Another argument against prescriptive authority for psychologists is that there is no societal need or consumer demand. For instance, it has been argued that the lack of access to mental health services is overestimated. Even so, those against prescriptive authority have claimed that there remains an adequate amount of prescribing medical professionals to provide services in underserved geographical areas. Thus, the granting of prescription privileges to psychologists would be unnecessary. However, there is mutual agreement that general practitioners are providing the majority of psychotropic treatment. In fact, general practitioners are supplying approximately 75-80% of all psychopharmacological interventions while having only 4-8 weeks of psychiatric training. Nonetheless, those opposing prescriptive authority have argued that it would be more efficient and effective to provide general practitioners with comprehensive training in mental health issues, rather than training psychologists in psychopharmacology. This argument has been seen as a possible solution to strengthening mental health services in underserved, rural locations.[1,2]

Moreover, those opposing prescribing rights for psychologists have argued against the cost-effectiveness of such an initiative. Most importantly, psychologists would lack the necessary training to diagnose and treat comorbid physiological conditions and adverse medication effects, which impacts approximately 50% of psychiatric clients.[1] This would require referral to a qualified physician and result in increased costs for the consumer. Likewise, the cost of liability insurance would be expected to increase significantly due to client safety concerns resulting from the addition of new treatment options.[2] To offset this cost, it has been argued that psychologists would increase their fees for services provided. This would restrict access to segments of the population most in need of mental health care services. Therefore, a significant concern is that granting prescriptive authority to psychologists would result in an increase in overall health care costs.[5]

Finally, many practitioners and educators within the field of psychology oppose prescriptive authority. The major concern has been that the field of psychology would undergo a major change in theory and practice. This would have an effect on academic structure and teaching, leading to a strict biomedical approach.[1] Additionally, there has been concern that focusing on psychopharmacological interventions would reduce consumer access to psychotherapy and assessment services.[5] With this said, many psychologists have argued that only a minority of their cohorts have voiced an interest in pursuing prescriptive authority due to concerns regarding adverse medication effects and psychotropic efficacy, namely a large placebo effect. Thus, these psychologists continue to argue for the importance and effectiveness of psychotherapy, while keeping distinct lines drawn between
the fields of psychology and psychiatry.[3,4,6,7]

In conclusion, physicians, psychiatrists and non-physician health care prescribers have historically been opposed to efforts by psychologists to attain prescriptive authority.[8] Non-physician health care prescribers, such as nurse practitioners and physician's assistants, have argued that their training is based in the medical sciences with on-site supervisory clinical experience in physiological, psychological and pharmacological issues. A main argument against prescription privileges for psychologists has been that the field of psychology has very little in common with a standard medical curriculum.[7] For this reason, many health care groups have refused to support psychologists in their initiative to gain prescription privileges. This professional position has been taken due to ethical considerations regarding client safety and professional competency.[5] Lastly, many psychologists have stated that postdoctoral psychopharmacology programs may be inadequate in preparing them to effectively prescribe psychotropic medications. This apprehension has led to concerns involving client safety, adverse drug effects, and overprescribing. Thus, many psychologists have chosen to rely on evidence-based psychotherapeutic approaches shown to be as effective as psychotropic interventions.[1,2]

References


Have an Idea or Contribution for the KPA e-newsletter?

Contact the KPA Central Office or Sean Reilley, Ph.D., KPA e-newsletter Editor atdr.sean.reilley@gmail.com. Deadlines for submission are the 15th of the month the newsletter is scheduled for distribution (Feb, April, June, Aug, Oct and Dec).