IN THIS ISSUE....

THE APA APPORTIONMENT BALLOT - What it is and why you shouldn’t just throw it away!

What is it? The Apportionment Ballot is used to determine the makeup of the APA Council. All APA members have ten votes that they can allocate to different divisions within APA. The ballots will arrive in early November.

What is the APA Council? It is the APA’s chief governing body and it is the final decision making body. The APA Council votes on multiple issues that affect the practice of psychology everywhere, including here in Nevada. The APA Council votes on key issues such as budgets for state associations (like NPA), policy documents and guidelines that impact professional practice.

What should I do? First of all, don’t throw away the ballot. In the event that you are not sure how to allocate your votes, please keep in mind that NPA Needs Your Votes and that you can allocate all ten votes to your state organization! We want to keep a strong voice on the council so that NPA and Nevada psychologists are appropriately represented.

(for more details, see Page 12)

Also, take a look inside to receive the latest information on topics relevant to Nevada

- Update from our 2018/19 President, Sarah Ahmad, Psy.D.
- Update from our Legislative Committee & NPA Lobbyist
- Update from our APA Council Rep
- 2018 & 2019 Continuing Education Calendars
- Column by Dr. Morgan Sammons: Harking on Reproducibility
- Are your 2018/19 NPA membership dues current?

Check the list on pages 18-19. If your name is not on the list, you still need to renew your dues.
The Executive Board has been working diligently to serve NPA members by continuing efforts towards our Strategic Objectives for 2018-2019.

A current and ongoing objective is to improve financial stability. We have explored partnering with other agencies to share in the cost and marketing efforts for CE events and this has been very successful. Our two-day ACT training in Las Vegas had over 170 attendees. Our goal is to continue to foster these relationships to be cost effective and provide quality CEs to our members. We are also progressing towards making non-dues revenues more accessible via our partnership with Amazon. The Executive Board has approved the creation of a 501(c)3 charitable foundation, which will serve as Noelle Lefforge’s primary Presidential initiative in 2019/20. The 501(c)3 will allow for more accessible partnerships within our community with other local organizations and companies. More to come on this exciting development. For now though, please continue to go through our NPA website and clicking on the Amazon link to support NPA when you shop on Amazon.

Providing high quality services to members is another objective. Typically, much of our revenue is generated by CE events, yet we are well aware that the format of CEs is changing with more options available online. Thus, we have applied for approval to start providing online CEs to our members. We are hoping to have this in place soon and will send an update to members once in place. With online CE options in the works, we are still also committed to providing high quality live CEs on topics that are relevant and important to our community, including Ethics, CBT-I, Child trauma and others. In addition, we are working on an initiative to have diversity training become more in the forefront for our members and as such will have this be part of our Annual presentation in Reno. We continue to reach out to our members for feedback on their goals and interests via surveys and appreciate all of your responses!

In order to maintain NPA’s success and service, another objective is to develop effective leaders. Our Northern and Southern Boards create opportunities for networking. Both recently had their Fall Socials and are now gearing up for winter events. In the South, we are collaborating with the Nevada Psychiatric Association for a joint Winter Mixer for further collaboration between our fields. In addition, NPA continues to attend and encourage members to join us in lobbying efforts in Washington DC at the APAPO Practice Leadership conference (PLC). This allows our leadership to be well versed and aware of the issues that are most important to our field. We also consistently welcome new members to join our various committees (e.g., Diversity, Early Career Psychologist, Legislative, PEC), to actively contribute and become part of our leadership pipeline.

In conjunction with developing leaders, our forth objective is to continue advocating for our field as a science and profession. Since our annual conference in May, much has happened in our community that required our attention and action. Among recent events include new Medicaid PAR requirements being overturned, issues related to security of testing kits, and the possibility of having to record sessions for which NPA wrote in opposition. Due to NPA members speaking out, we have had a strong voice at the table on these matters and will continue to monitor these and other issues that impact our practice. Following elections on Nov 6th, next February marks the start of a new legislative session and our Legislative Committee continues to provide oversight on bills that are most impactful to us.

While above are some of the ways NPA is working for you, there are various other ways in which we continue to serve our member and are highlighted in this newsletter. Given the different facets and layers in which NPA provides services to our members, there are many opportunities to get involved in a manner that may meet your interests. We hope to see more members get involved through our Committees and Boards and always welcome donations so we can continue working for you. If you are interested in being more active with this amazing organization, please contact me so we can explore your interest areas and how you can make this as rewarding an experience as it has been for me. With the wealth of knowledge and experience our members have from serving our community, we always look forward to having new and seasoned members being more active members in our organization. Look forward to hearing from you!

Sarah Ahmad, Psy.D., 2018-2019 NPA President
NPA Legislative Committee Update (Fall 2018)

It has been a busy year so far, with both planned and unplanned activities. The Legislative Committee has carefully monitored and provided feedback on the implementation of SB162, the bill which requires psychology trainees to register with the Board of Psychological Examiners and thus be eligible for Medicaid reimbursement. This has required frequent and lengthy conversations with the original bill sponsors, representatives from the Board of Psychological Examiners, and representatives from Nevada Medicaid. Right now, it appears that everything is on track, and all psychologists (regardless of Medicaid Provider Type) who supervise trainees who are appropriately registered with the Board of Psychological Examiners will be able to be reimbursed by Nevada Medicaid for services provided.

The Legislative Committee has also taken on some unplanned challenges, including providing crucial support for NPA’s efforts to address the Nevada Medicaid prior authorization requirement changes through legislative and media connections. We are thrilled with the success of our community’s efforts, and the decision of Nevada Medicaid to reverse the previous decision to require prior authorization before providing psychotherapy. We have also closely monitored and supported efforts to address local issues impacting psychologists, including the pattern of increasing requests for psychologists to disclose raw data and testing materials within forensic settings. At a national level, our committee members continue to monitor the developments with the Medicare Mental Health Access Act (also known as the Physician’s Definition Bill) which currently has a record high number of co-sponsors. We are also monitoring developments with PsyPact.

The 2019 Legislative Session just a handful of months away, we are gearing up for a busy session. As our fearless lobbyist Bryan Gresh notes:

The 2019 Legislative session hasn’t begun yet—but the work certainly has. Your NPA Legislative Committee was recently involved in pre-session discussions advanced by some in the MFT/CPC community. A potential bill was being floated which would re-incorporate psychotic disorder treatment and psychometric testing into the MFT/CPC scope of practice. It was an absolute non-starter for our membership: scope issues, education issues—what we’ve successfully defended against for decades was being jeopardized.

In 1999, NSPA (as we were known then) worked tirelessly with Marriage and Family Therapy to reach a point of compromise that allowed MFTs to diagnose and treat within their scope of practice but to expressly NOT diagnose and treat a psychotic disorder or to use psychological or psychometric assessment tests to determine intelligence, personality, aptitude, interest or addictions. That compromise has worked well for nearly two decades. In late October, after involvement by our Legislative Committee, the MFT/CPC Board of Examiners met and formally scuttled the proposal.

Respectfully submitted,

Adrianna Wechsler Zimring, Ph.D., Legislative Committee Chair, Southern Region
Bryan Gresh, NPA Lobbyist, The Gresh Group LLC
Many of you may have seen my solicitations for input leading up to the August Council of Representatives meeting as well as my immediate debrief. Here’s an even briefer version, complete with my votes as per my commitment to transparency.

- **Presidential Work Group on an Expanded Advocacy Model** – Council received the report from the Work Group and approved the Work Group's request. These requests were 1) support the concept of a unified Financial Committee and a single Board of Directors to serve in both the c3 and c6 components of APA, 2) approve the 2019 member dues allocation to be 60% to the c6 and 40% to the c3, and 3) approve amendments to the APAPO bylaws to reflect an organizational name change and broader mission, as well as create the Advocacy Coordination Committee. I voted in favor of all of these motions as they advance APA's broadened advocacy effectiveness.

- **Treatment of Detainees** - A resolution was brought to Council out of concern for the detainees in settings where persons are held outside of, or in violation of, International Law or the US Constitution (e.g., Guantanamo, CIA "black sites"). This resolution was defeated, so APA’s stance on the role of psychologists in these settings remained unchanged. I voted against the resolution due to concerns about its potentially harmful effects. APA will continue to fight for the detainees held in these settings. In fact, there is much more that we can and should do - it is my sense that APA cares deeply about this situation and is thoroughly invested in doing what is most likely to reduce suffering and offer healing as widely as possible.

- **Transparency of Decisions** – The Board of Directors and Council Leadership Team will now have their votes published. I voted in favor because I support organizational transparency (as evidenced by my own transparency of my votes).

- **Guidelines for Psychological Practice with Boys and Men** – Council passed a motion to adopt as APA policy the *Guidelines for Psychological Practice with Boys and Men*. This document was written over the past 13 years by experts and underwent substantial public, Board, and Committee review to establish its scientific rigor. I voted in favor.

- **Hoffman Report** – The Hoffman Report will remain on APA's website, although it will be included on a timeline that offers additional context. I voted in favor to provide membership and the public more information.

- **Resolution on Violent Video Games** - Council supported the formation of a task force to conduct a comprehensive, up-to-date systematic review of violent video game literature to recommend whether the 2015 resolution should be amended. I voted in favor as it seemed reasonable to put together a careful look at the current status of the literature.

- **Resolution for the Use of the term “Patient” in American Psychological Association Policies, Rules, and Public Relations Activities** – Although Council passed this resolution, it is likely to be revisited at the next Council meeting, stayed tuned.

The Council meets again February 14-17 in Washington D.C. As the meeting approaches and the agenda is formalized, I will be sending out a poll or two to solicit your input on the key issues. Please keep your eye out for it and weigh-in. You can also email your input anytime: Noelle..Lefforge@unlv.edu; I am also happy to resend a full description of the meeting upon request. I’ll be posting my post-report to the listserv at the conclusion of the meeting, so watch for that as well.

Noelle L. Lefforge, APA Council Rep
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Update from the Commission on Behavioral Health—Noelle L. Lefforge, Ph.D.

I was appointed by Governor Sandoval to serve as the Chair of the Commission on Behavioral Health on February 28, 2018. My term as chair is set to expire 6/30/2020. I am honored to serve in this capacity, increasing the visibility of psychologist leadership.

There are several pieces of Commission business worth disseminating to NPA:

- **The Commission and the NV Board of Psychological Examiners** – Now that the Commission has oversight of the NV Board of Psychological Examiners, I have done my best to ensure the Commission acts in a way that does not hold up Board business. For example, I attended the Board’s workshops on SB162, legislation that will allow billing for services provided by some practicum students. This ensured communication between the Board regulation changes that were reviewed by the Commission.

- **Creation of a Subcommittee on Duties, Limits, and Responsibilities** – I continue to serve on this Board to clarify the role of the Commission and hopefully leverage its powers. The Commission has requested staff to gather more information on the mechanisms in place for the Commission to enact authorities granted in NRS (e.g., the ability to request new legislation).

- **Appointment of Natasha Mosby, LCSW, to serve as social work representative** – I am pleased to welcome Ms. Mosby’s appointment to the Commission. She was able to replace former Chair Kinnikin with no lapse in representation. Ms. Mosby is the Project Coordinator for the Mental Health Training Project through UNLV’s School of Social Work.

- **Medicaid** – The Commission has requested a report from NV Medicaid on changes in provider contracts subsequent to Medicaid’s rate realignments and other policy changes.

Commission meetings are conducted in accordance with NV Open Meeting Law, meaning that the public is welcome to attend during designated portions of the meeting: [http://dpbh.nv.gov/Boards/CBH/Meetings/Meetings/](http://dpbh.nv.gov/Boards/CBH/Meetings/Meetings/). I also welcome all your input, feel free to email me at noelle.lefforge@unlv.edu.

*The State of Nevada Commission on Behavioral Health is a 10-member, legislatively created body designed to provide policy guidance and oversight on behalf of Nevada’s public system of integrated care and treatment of adults and children with mental health, substance abuse, and developmental disabilities and related conditions. The Commission establishes policies to ensure adequate development and administration of services for persons with mental illnesses, reports to the Governor and Legislature on the quality of care and treatment provided for persons with mental illness, intellectual disabilities or co-occurring disorders in this State, and reports on any progress made towards improving the quality of that care and treatment. The Commission is also charged with sending the Governor a report in January of each year.*
Update from our Diversity Committee

The Nevada Psychological Association's (NPA) Diversity Committee, chaired by Sandra Gray, PhD, is currently working toward the preparation of an initiative for Cultural Diversity continuing education (CE). We recently sent out a survey to NPA members on the list serve on Cultural Diversity training and workshops. For this survey, Cultural Diversity CE’s were defined as training, workshops, and presentations that enhance competency and skill development activities advancing research, training, and practice, including but not limited to age, disability, ethnicity, gender, gender identity, language, national origin, race, religion, culture, sexual orientation, and socioeconomic status. The goal of the survey is to obtain data on the types of Cultural Diversity topics that members seek out, the average number of CE's obtained on Cultural Diversity per renewal year, how CE's were obtained (i.e., webinar or live attendance), and other topics that may be of future interest.

Currently, and surprisingly, there are very few States requiring Diversity CE's for psychology license renewal. While Nevada does not have a Cultural Diversity CE requirement for psychologists, it does require multicultural training for trainees and post-doctoral fellows. The NPA recognizes the importance of diversity and inclusion, particularly the importance of ensuring that we reflect our diverse community and its needs. The diversity committee has partnered with the CE committee in this initiative to increase diversity training in our community and has fully supported this initiative to increase diversity training by presenting on a Diversity topic for NPA's annual May conference. As members of a very diverse State and community, cultural competence is of the utmost importance and essential in practice. As psychologists, we understand that cultural competence is not accomplished by attending one or a few workshops or trainings. Rather, cultural competence is a life long journey.

Dr. Sandra Gray
2018-2019 Diversity Committee Chair

Update from our Southern Region Board

Greetings from the Southern Chapter of NPA! We recently held our Fall Social and were very excited to host this successful event at Firefly, a new and fun venue that offered a lounge-like setting. We were pleased to be able to offer guests complimentary Spanish tapas and sangria (thanks to your prior contributions), several raffle items, and a chance to win one of three amazing door prizes. These social events are important for a number of reasons: they provide us with valuable networking opportunities with colleagues you might not interact with in your daily routines; help foster professional relationships; give us the chance to have deeper conversations about important issues and shared interests; build a network of trusted colleagues on whom we can rely for consultation, mentoring, and advice; recruit new NPA members; and of course, meet your Southern Chapter Board members and learn more about how NPA is working to serve you!! Moreover, your donations and participation in the raffle help to fund our future endeavors. We encourage you to reach out to your colleagues, students, interns, and post-docs about these events so they can get involved in the fun, too! We are already busy planning our Winter and Spring social events for you and look forward to seeing you there!!

Rhiannon Rager, PhD, NCSP
2018-2019 NPA Southern Chapter President
2018 Continuing Education Calendar

The Trust Ethics & Risk Management Webinar Sequences
Suicidality: Clinical, Ethical and Risk Management Issues
Friday, November 30th, 2018 10:30am PST
4 Online CE Credits
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https://beacon360.content.online/xbcs/S1537/catalog/product.xhtml?eid-9280

National Register Webinar
Record Keeping and Risk Management, Eric A. Harris, Ed.D., J.D.
November 7th ~ 11:00—12:00pm PST ~ 1 CE Credits
Details and registration link: https://tinyurl.com/y7ba47f5

National Register Webinar
Child Separation at the Border
December 12th ~ 11:00—12:00pm PST ~ 1 CE Credits
Details and registration link: coming soon

2019 Continuing Education Calendar

ACT II: Clinical Skills—Building Intensity, Steven C. Hayes, Ph.D.
April 11th & 12th ~ Las Vegas, NV ~ 13 CE Credits

28th NPA Annual Conference
Practicing Cultural Humility: Ethical and Clinical Considerations, Tonya Armstrong, Ph.D.
May 3rd ~ Reno, NV ~ 6 CE Credits

Developing Expertise in Cognitive Behavior Therapy for Insomnia (CBT-I)
October 18th ~ Reno, NV ~ 6 CE Credits

Not all that blows up is Bipolar: Evidence-Based Assessment and Treatment for Bipolar Disorders in Youth and Young Adults
November 15th ~ Las Vegas, NV ~ 6 CE Credits
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ATTENTION APA MEMBERS.....Your APA Apportionment Ballot will arrive in early November. Don’t Throw Away Your Voice at the National Level!!!

THE APA APPORTIONMENT BALLOT—DOES IT MATTER? 
!!!! YES IT DOES !!!!

WHY?? The Council of Representatives is APA’s chief governing body and is charged with legislative and oversight responsibilities for the entire Association. Council’s function is to develop and implement policies and programs…“to advance psychology as a science and profession and as a means of promoting health, education and human welfare.”

While policy development begins with APA’s boards and committees, and the Board of Directors, the final decision-making body is the Council. The Council votes on MANY items that impact state associations and the professional practice of psychology. In 2013, SPTAs composed 53% of the organized entities that make up Council, but had only 40% of the representatives and votes. The good news is that SPTAs have gained 5 seats since 2007, but you need to vote to help NPA gain more seats.

NPA Needs Your Votes! The number of votes obtained in the Apportionment Ballot process determines which SPTAs and Divisions get the additional seats past the one per entry. APA Members are given 10 votes to use as they wish—you can allocate all of your ten votes to your state (or split them up amount your SPTA and Divisions) to ensure that NPA, and all state associations, continues to have a voice on the APA Council. Because Divisions can draw from large pools across the country, many end up with multiple representatives on Council, whereas states typically can only muster enough votes for one seat.

The Nevada Psychological Association

It’s October, barely the beginning of the fiscal year, and already there is another crisis. Now, what is being identified as a crisis is something we have heard about for quite a while—the status of the science that underlies our profession, and more importantly, our clinical interventions. Now I agree that as a profession, it is our obligation to ensure that if we advertise “science-based” interventions, we must guarantee the exactitude of our scientific findings and the methods they are based on as best we possibly can. Our repertoire of clinical interventions has expanded rapidly in the past half-century, mostly driven by the results of clinical investigations into “what works,” and more specifically, “what works for which conditions.” Think here about the evidence base for specific therapies like dialectical behavioral therapy (DBT), or specific interventions for insomnia, panic disorder and the like—all based on the outcome of well-designed, often double-blinded and randomized, trials.

So forgive me if I don’t respond to the latest scientific crisis with a huge amount of alarm. True, our science is often flawed. It is extremely difficult to create a double-blinded study of psychotherapy conditions, as wait-list controls are simply not informative, and key factors, such as therapist allegiance, or other critical variables, such as the therapist-patient bond, are extraordinarily difficult to quantify. Also, social science studies often lack the funding seen for investigations of drugs or medical devices and this makes replication more difficult. Finally, as a comparatively young science, our clinical investigations take us to places where a science-blazed path is faint, if existent at all. A lot of ink has been expended about the lack of science-based rigor in newer areas of psychological investigation—studies of feminist, LGBTQ, or ethnic minority psychologies, to name a few. Work in these fields is not terribly old and it is often hard to force investigations in these emerging areas into the categories that define more established fields of study. Often this work is narrative or qualitative, methods that don’t lend themselves too well to traditional analysis. I admit that sometimes it is bad: poorly thought out, inadequately quantified, or more reflective of a particular non-science-based agenda, often a political or advocacy-based agenda. And yes, in areas where scientific norms have not been fully developed, it is possible—possibly even likely—that more “bad” research makes its way into press than in better-studied fields. But the degree to which this invalidates emerging psychological science is uncertain.

Although it is dangerous to make relativistic comparisons, particularly using negative data, much is occurring in the world of established science that suggests we should not be over-alarmed by some of the less stellar work in newer, emerging areas of psychological science. Has not the larger, more established world of cancer research been recently fixated on revelations that leading researchers at leading institutions (Memorial Sloan-Kettering, for example) had deliberately hidden their well-renumerated ties to industry? The journal Science has yet again published a front-page series of articles (Science under scrutiny, 21 September 2018) questioning the method and results of many meta-analytic studies, often in areas of applied psychology. The chief exemplar in the meta-analytic critique in Science dealt, perhaps not surprisingly, with psychological research, specifically into video gaming and a suspect publication in the preeminent journal Psychological Bulletin. A follow-on article dealt with the widespread issue of “HARKing,” or “Hypothesizing After Results are Known,” a variant of what those of you who were exposed in your graduate school research methods courses to the masterful Cook and Campbell’s Quasi-Experimentation knew more poetically as “fishing and the error rate problem,” one of many post-hoc temptations those authors outlined. This is probably closest to the modern phenomenon called “p-hacking”, where researchers find p values supporting their hypotheses and emphasize these. Not necessarily academic fraud, but something that certainly tests the boundaries of rigorous data analysis and reporting. (continued on page 14)
Column by Morgan Sammons, PhD, ABPP

Academics are pressured to publish, preferably positive findings; journals are pressured to maintain profits, and definitely prefer to publish positive findings; and new research technologies continually challenge orthodoxy. Excuse me while I stifle a dainty yawn, but weren’t all of us exposed to these dilemmas in our graduate education—mine occurred during the era of the computer punch card and perforated multifold readout. If you’re not old enough to remember those days, consider yourself lucky. It’s not that I’m dismissing the importance of correctly collected and analyzed data. I view fudging and post-hoc fishing as dimly as the most august “journalologist,” a term that has recently come into use to describe those who study scientific publishing and strive to improve the quality of published research. Nor do I disbelieve reports that p-hacking and other dubious methods are endemic, or that negative findings are routinely squelched. More importantly, I think the journalologists and other scientific watchdogs are correct in believing that the fixes to this solution aren’t hard. Preregistration of clinical trials is now mandatory for a drug or device seeking FDA approval. This isn’t a failsafe mechanism, but it provides some protection that undoubtedly psychological research would benefit from. A discipline wide commitment to sharing raw data would help, as would a commitment by professors to avoid seeking publication in for-profit journals of questionable quality (and to teach their students to steer clear of such temptations). A true embrace of negative findings, rather than a dismissive acknowledgement that such findings can be as informative as positive findings would provide balance in the archival record.

All good science is iterative, and our research technologies are not static. As was pointed out in one of the suite of articles in the 21 September Science issue, the whole concept of meta-analysis is barely 40 years old and our definitions of what constitute convincing research findings ever-evolving. Randomized controlled trials in medicine are themselves a recent phenomenon—according to some, though this is contested, the first RCT in medicine appeared in the late 1930s and was a study of psychostimulants in children with minimal brain dysfunction, now ADHD.

It is not that all psychological science is bad, nor is it all irreproducible. We probably stand up pretty well in this regard to science in most applied fields, including medicine. We can take some, albeit not much, comfort in knowing that the publication of erroneous or misleading findings in psychotherapy outcomes studies has less drastic real-world consequences than the publication of misleading results in treatments for cancer or other life-threatening diseases. What we cannot do is become complacent.

In the spring of this year, as readers of this column will recall, APA published a clinical practice guideline on the treatment of PTSD that greatly discomfited many in the practice community. At the time, I cautioned that avid embrace of these guidelines would be unwise. I simultaneously cautioned that wholesale rejection of such guidelines would be similarly unwise. Now, APA is seeking public comment on a guideline for the treatment of depression. I predict that a similar outcry will result when the guideline is finally released. Some will legitimately argue that the guidelines are based on only those favored therapies that have received the most scientific attention. This is a criticism that has at least some merit. Others will point out the weaknesses of the meta-analyses that underlie the guideline. This criticism also has merit. What isn’t meritorious is the belief that such guidelines are part of a vast conspiracy to eradicate certain forms of therapy, or to impose lock-step rigidity on the delivery of psychotherapy. CBT may be a perfectly justified intervention for depression that is rooted in inaccurate cognitive schemae. It may be less effective for a patient whose depression stems from existential questioning of their place in the world or their contributions to their profession or the lives of others. But surely it is incumbent on all of us to examine these guidelines, weigh their merits, and determine if what we practice is the best we can offer our patients.

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John C. Friel, Ph.D.
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Presented by Scott Wolfe, Ph.D.
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**We Miss You! IS YOUR NAME ON THE LIST BELOW? IF IT IS NOT LISTED BELOW, YOU HAVEN’T RENEWED YOUR MEMBERSHIP DUES FOR 2018/19!**

<table>
<thead>
<tr>
<th>Aalbers, Carol</th>
<th>Davis-Coelho, Kristen</th>
<th>Gruen, Johanna</th>
<th>Leonard-Steckline, Leah</th>
</tr>
</thead>
<tbody>
<tr>
<td>Aberasturi, Suzanne</td>
<td>Depa, Melissa</td>
<td>Guevara-Fayad, Magdalena</td>
<td>Levenson, Marvin</td>
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<tr>
<td>Ahmad, Sarah</td>
<td>DeVillez, Amanda</td>
<td>Gunnarson, Daniel</td>
<td>Linning, Lisa</td>
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<td>Alaei, Kambiz</td>
<td>Devore, Tiger</td>
<td>Gutride, Martin</td>
<td>Lipson, Glenn</td>
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<td>Alandy-dy, Zyra</td>
<td>Dhaliwal, Sonia</td>
<td>Haight, Courtney</td>
<td>Locey, Nadia</td>
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<td>Allen, Bruce</td>
<td>Dickens, Yani</td>
<td>Hanson, John</td>
<td>Lopez, Iliana</td>
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<td>Antonuccio, David</td>
<td>Diliberto, Rachele</td>
<td>Harbin, Jeramic</td>
<td>Loring, Susan</td>
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<td>Dillon, Stephanie</td>
<td>Harder, Gregory</td>
<td>Lyon, Lawrence</td>
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<td>Donaldson, Robyn</td>
<td>Heavey, Christopher</td>
<td>Mahaffey, Martha</td>
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<td>Donohue, Margaret</td>
<td>Hefetz, Shlomi</td>
<td>Mather, Deborah</td>
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<td>Ayarbe, Susan</td>
<td>Drucker, Laura</td>
<td>Hemenway, Leeanne</td>
<td>McGuire, Michelle</td>
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<td>Baggio, Mary</td>
<td>Dugan, Daniel</td>
<td>Hendron, Marisa</td>
<td>McKay, Kenneth</td>
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<td>Baldo, Richard</td>
<td>Earnest, Leanne</td>
<td>Hinitz, Dean</td>
<td>McLaughlin, Stephanie</td>
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<td>Barrera, Patricia</td>
<td>Ellwood, Amy</td>
<td>Hixon Brenenstall, Sheri</td>
<td>McNaul, Nancy</td>
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<td>Beitz Thompson, Kendra</td>
<td>Esmaeili, Soseh</td>
<td>Holland, Stephanie</td>
<td>Mejia, Claudia</td>
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<td>Belmont, Teri</td>
<td>Etoff, Lewis</td>
<td>Hronek, Antrice</td>
<td>Mercier, Diane</td>
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<td>Black, Amelia</td>
<td>Ferguson, Roberta</td>
<td>Hronek, Ivan</td>
<td>Moore, Brie</td>
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<td>Blakelock, Harold</td>
<td>Fertel, Evan</td>
<td>Huangfu, Victoria</td>
<td>Mora, Ariana</td>
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<tr>
<td>Borsh, Tara</td>
<td>Field, Clint</td>
<td>Hunt, Sara</td>
<td>Mortillaro, Louis</td>
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<td>Bradley, Shera</td>
<td>Fisher, Scott</td>
<td>Hussey, Julia</td>
<td>Mosco, Elizabeth</td>
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<td>Brouwers, Vincent</td>
<td>Fishkin, Cortney</td>
<td>Ibaibarriaga, Rachel</td>
<td>Moynihan, Stefanie</td>
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<td>Burkett, Sarah</td>
<td>Fladmo, Brent</td>
<td>Jankovich, Rebecca</td>
<td>Mullin, Bree</td>
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<td>Cahill, Janet</td>
<td>Foerster, Lisa</td>
<td>Jensen, Laura</td>
<td>Neighbors, Elizabeth</td>
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<td>Caldwell, Jessica</td>
<td>Fornander, Mirae</td>
<td>Jobe, James</td>
<td>Nesto, Kellie</td>
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<td>Carlson, Rita</td>
<td>Forsyth, Karyn</td>
<td>Jones-Forrester, Sharon</td>
<td>Nielsen, Earl</td>
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<td>Cavenagh, Nicole</td>
<td>Frantom, Linda</td>
<td>Kampfer, Karen</td>
<td>Noh, Ree</td>
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<td>Coard, Herbert</td>
<td>Freeman, Megan</td>
<td>Kang, Johannah</td>
<td>O’Bryan, Gwenyth</td>
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<td>Collins, Sunshine</td>
<td>Friel, John</td>
<td>Katz, Hilary</td>
<td>O’Neill, Kelly</td>
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<td>Cook, Dosheen</td>
<td>Gallas, Jeremy</td>
<td>Kinsora, Thomas</td>
<td>Oren, Yelena</td>
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<td>Cornwall, Michael</td>
<td>Garcia, Michael</td>
<td>Kompaniez, Elyss</td>
<td>Osgood, Roberta</td>
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<td>Crabb, Yangcha</td>
<td>Garcia, Juan</td>
<td>Krogh, John</td>
<td>Owens, Whitney</td>
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<td>Cromond, Alexander</td>
<td>Gentry, Ruth</td>
<td>Krotkiewicz, Dorota</td>
<td>Panish, Jacqueline</td>
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<td>Cromond, Kelly</td>
<td>Gilbert-Elliot, Trudy</td>
<td>Landis, Shauna</td>
<td>Parker, Chauncey</td>
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<td>Crawford, John</td>
<td>Giron, Gregory</td>
<td>Lanti, Alessandra</td>
<td>Paul, Michelle</td>
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<td>Crawford, Melanie</td>
<td>Gravley, Michelle</td>
<td>Larson, Lynn</td>
<td>Perez, Xochil</td>
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<td>Damas, Sarah</td>
<td>Gray, Sandra</td>
<td>Leark, Robert</td>
<td>Perlotto, Carla</td>
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<td>Danton, William</td>
<td>Graybar, Steven</td>
<td>Lefforge, Noelle</td>
<td>Peterson, Christa</td>
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<tr>
<td>Davis, Rachel</td>
<td>Greenslade, Cindy</td>
<td>Lenkeit, Gary</td>
<td>Pistorello, Jacqueline</td>
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</tbody>
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What is the Cost of NPA Membership Dues from June 1st, 2018 to May 31st, 2019?

**Full Member dues:** only 68¢ a day

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In Remembrance of Dr. Louis Mortillaro

The Nevada Psychological Association was deeply saddened to hear of the passing of Dr. Louis Mortillaro in October. Dr. Mortillaro was a former President of NPA as well as the Board of Psychological Examiners and a strong advocate of the field of psychology over the years. He will be greatly missed by NPA and his colleagues.

1944-2018
LOUIS MORTILLARO

Louis "Louie" Francis Mortillaro, 73, passed away Sunday, Oct. 14, 2018, surrounded by family and friends. Louie was born in Fort Dodge, Iowa, Dec. 8, 1944, the youngest child of Louis and Cathrine Mortillaro. As a child, Louie moved with his family from Iowa to Southern California, where he graduated from San Gabriel Mission High School in 1962. In addition to being an outstanding student, Louie was a powerful running back, earning the nickname "the Pizza Express." After high school, Louie earned a B.S. in biology from Loyola University of Los Angeles in 1966, an M.S.Ed. in counseling psychology from U.S.C. in 1968, a master's in public administration from U.S.C. in 1975, a Ph.D. in psychology from the United States International University in 1978, and received a certificate of specialization in clinical neuro-psychology from the Fielding Institute in 1998. After working as a teacher in Southern California, Louie moved to Las Vegas in 1971, where he thrived professionally and became an active and well-respected member of the Las Vegas community. Among other notable distinctions, Louie served terms as president and executive committee member of the Nevada State Psychological Assoc. and as president of the Nevada State Board of Psychological Examiners. Louie was a founding member and past president of the Big Brothers and Big Sisters of Southern Nevada and served on the board of numerous other philanthropic organizations, including Youth Charities of Southern Nevada, Boys & Girls Club, Nevada Association for the Handicapped and Nevada Network Against Domestic Violence. Most recently, Louie was passionately involved in protecting and preserving Nevada's wildlife through his board membership and efforts with the Fraternal Order of the Desert Bighorn. Louie was also an avid golfer and world-traveler. He was preceded in death by his mother and father; his brother, Nino; and sister, Betty. Louie is survived by his brother, Jimmy and sister-in-law, Irene; sons, Darren and Ross; daughter-in-law, Julie; grand-daughters, Arianna and Carlina; long-time friend and companion, Eleanor Duffy; and by Gene Feher, Louie's other "brother" and best friend for nearly 50 years. Anyone who knew Louie can attest to the fact that he had so many loyal friends, colleagues, loved ones, and others that were positively touched by him, that it would be impossible to list everyone.

A Rosary will be at 7 p.m. Mon., Oct. 22. Mass will be at 12:30 pm Tue., Oct. 23, both at St. John Neumann Catholic Church, 2575 W. El Campo Grande Ave., North Las Vegas, NV 89031. Burial to follow at Palm Northwest Mortuary, 6701 N. Jones Blvd, Las Vegas, NV 89131.

In lieu of flowers, the family suggests making a donation to the Fraternal Order of the Desert Bighorn, or to a children's charity of their choice.