



Legislative Committee 2013/2014 Year-in-Review

The Legislative Committee had a busy legislative session (2013) and then a flurry of spring activities. We were actually able to **Get to the Table!** Below is a summary of the advocacy efforts and protection to psychology the committee was able to provide for licensed psychologists across the state.

I. Legislative Session 2013

A. *Key Topics NPA monitored and/or responded about*

1. Changes related to child abuse reporting laws, child welfare services, human trafficking, sex trafficking, gun violence and the mentally ill, court-ordered outpatient treatment, billing practices of certain healthcare providers, sex offenders, mental health screenings for children, terminology changes for intellectual disability..... to name a few

B. *Bryan Gresh frequently speaks directly with legislators*

1. During session and in the interim year, Mr. Gresh highlights NPA concerns at every opportunity; presents approved PAC funds; speaks at various legislative events like 'meet-and-greets,' fundraisers, etc...

II. Legislative Retreat Oct. 5, 2013

A. *Invited Guest:* Assembly Health and Human Services Chairwoman Marilyn Dondero-Loop, with overview of Nevada's legislative process by NPA lobbyist, Bryan Gresh

B. *ACA Healthcare Reform Overview; Strategic Planning for "Getting to the Table;" Medicaid QMHP for interns; public health and hospital outreach/advocacy; report from Dr. Paula Squitieri, Commission on Behavioral Health and Developmental Services*

III. Interim Subcommittee Meetings, Healthcare Reform meetings, and Presentations

A. *Southern Nevada Healthcare Subcommittee – Senator Jones, Assemblyman Eisen*

1. Dr. Lisa Linning and Dr. Lindsey Ricciardi coordinated to attend all meetings; initial meetings also attended by Bryan Gresh (Jan. 9, 2014 – present, 2 – 3 x/month)

B. *Summit on Gun Violence, Progress Now – by invitation of Senator Jones*

1. Dr. Noelle Lefforge presented at the southern summit Jan. 25
2. Dr. Laura Drucker presented at the northern summit Feb. 7

C. The State of Nevada Commission on Behavioral Health and Developmental Services - Jan. 17

1. Dr. Ricciardi presented to the commission concerning QMHP designation for psychology interns, which would allow reimbursement for their services under Medicaid. She also spoke about the shortage of psychology intern positions in the state. Dr. Squitieri, commission member, also contributed information about challenges to psychology and NV psychologist workforce shortages
2. The Commission included this information in their letter to the Governor

D. The Board of Psychological Examiners- Jan. 17

1. Dr. Ricciardi presented the progress on the QMHP issue with Medicaid and also her report to the B.H. Commission, including Medicaid recommendation for the Board of Examiners to register psychology pre-doc interns
2. The VA presented some challenge to the Board registering psychology pre-doc interns and their supervisors; asked for an exception to the new oversight and registration since VA psychologists have Federal status and do not have to have state licenses. Amended language (re: VA) was submitted by the Board of Examiners for legislative approval

E. Community Conversation, southern regions – Jan – April, 2014 monthly meetings

1. Dr. Linning attended all meetings as an ADSD employee and also representing NPA, regarding the intersection of mental health and the criminal and juvenile justice systems. Community partners discussed the mental health crisis in the southern region and how to start partnering to address the crisis

F. ACA Workforce Mapping – Department of Public & Behavioral Health, Richard Whitley and Tracey Green, MD

1. Dr. Drucker attended first conference meeting in Carson City 2/21
2. Subsequent meetings held via weekly conference calls from 3/7/14-4/25/14, NPA was represented by legislative committee members Dr. Drucker, Dr. Linning, Dr. Dan Gunnerson, as well as Dr. Connie Sheltran (NPATC)

IV. PAC donation drive

A. *Emails over listserve; Dr. Lew Etcoff sent letters to all licensed non-NPA members to introduce purpose of the PAC and solicit donations; phone calls; presentations at all CE and regional meetings.*

1. PAC donations received: \$7000 of \$15,000 goal; fundraising continues

V. Topics/themes addressed in the meetings legislative committee has attended

A. *Reimbursement rates for psychology services are very low, psychology interns have not been eligible for reimbursement (soon to be corrected by QMHP designation*

B. *Many providers are opting out of Medicaid and Medicare due to low reimbursement rates, cumbersome paperwork and credentialing, etc...*

C. *Need for more internship positions, (in-state, salaried) to partner with community and state agency providers.*

1. NV has difficulty retaining the new psychologists completing UNR, UNLV, and other doctoral training programs. They leave the state to complete internship and do not come back. Additionally, without more paid intern positions, we cannot recruit from other states for intern year, which would increase the chances of the individual staying in Nevada upon licensure.

D. *More student loan repayment programs needed: federal, local, and state grants*

1. Most areas of Nevada are considered vastly underserved, especially in rural communities. Recruiting for psychologists through federal and state programs is needed.

E. *Legal 2000 barriers*

1. Psychologists may admit but not discharge patients on Legal 2000. Backlog of patients needing discharge and follow up treatment is especially acute in So. Nevada. Need to have more efficient medical clearance, separate from the mental health clearance, as well as a separate hospital discharge.

F. *Barriers to integrated health and wellness, continuity of care*

1. Limited clinics or agencies that include psychology positions; many services offered from “silo models” so many individuals fall through cracks or have truncated services.
2. Psychology as a specialty is not well understood and psychologists are underutilized and undervalued.

G. Corporate Practice (sometimes called Antitrust) Laws

1. Current laws state that a professional entity must be organized for only one specific type of service. As such, this prevents an integrated health care model of practice since mental health services must be operated separately from medical services, including psychiatry.

H. Licensing barriers:

1. Telehealth services not allowed for therapy; may not be reimbursed

2. Reciprocity from other states or through the VA is experienced as prohibitive in NV – reduces recruitment options for NV private practice.

3. Postdoctoral internship requirement of 1750 hours may be barrier to licensure especially with lack of paid postdoctoral internships. NV may consider adopting APA model licensure policy of 4000 hours to include a pre-doctoral internship of 2000. NPA needs to weigh in; this change is supported by UNLV.

VI. ACA/Healthcare Reform, monitoring roll out of state exchange and integration of psychology into health care plans

VII. Committee meetings via conference call **4th Fri. each month at noon**. We welcome additional committee members, especially when it comes time to review BDRs during the session.

**** Legislative Session begins February 5, 2015****

Respectfully submitted,
Laura V. Drucker, PsyD,
Lisa M. Linning, PhD
NPA Legislative Co-Chairs