Monday, January 11, 2021

Beth Taylor, Chief Nursing Officer
Veterans Health Administration
Department of Veterans Affairs
810 Vermont Avenue NW
Washington, DC 20420

Submitted electronically via Regulations.gov

Re: RIN 2900-AQ94—Authority of VA Professionals to Practice Health Care.

The American Psychological Association (APA) appreciates the opportunity to comment on the Department of Veterans Affairs (VA) interim final rule¹ that solidifies the ability of providers, including psychologists, to practice throughout the VA to the full scope of their license or credential regardless of which state they are licensed or credentialed to provide care. This interim final rule is critical to ensure that veterans have access to the best care and that VA is able to recruit and retain high quality providers, including psychologists. APA strongly supports many of the assertions made in the interim final rule and hopes to continue working with VA as it establishes national standards of practice for VA psychologists.

Summary of APA comments:
1. APA supports the ability of VA providers to care for veterans, either in-person or through telehealth, regardless of where the veteran is located or where the provider is licensed.
2. APA supports the inclusion of health professional trainees, including psychologist trainees, in the interim final rule.
3. APA hopes to be included in the creation of sub-regulatory policy that establishes national standards of practice for VA psychologists and encourages VA to allow prescribing psychologists to practice to the full scope of their license and credential.

The COVID-19 pandemic has created unique challenges and opportunities for providing physical and mental health care. As stated in the interim final rule, the demand for and usage of telehealth appointments in VA skyrocketed, increasing by more than 1,475 percent between February and July 2020. Additionally, hundreds of VA providers, including psychologists, were deployed throughout the country to help other states deal with the pandemic hotspots. Outside of VA, 15 states have already enacted multi-state compact legislation allowing psychologists to practice telepsychology and temporary in-person care in those states that have joined the compact.² APA has endorsed the compact, known as PSYPACT, as a long-term solution for interjurisdictional

² PSYPACT MAP/States (n.d.) PSYPACT. Retrieved December 16, 2020 from https://psypact.org/page/psypactmap
practice whether telehealth or temporary, in-person care. Studies have shown that telepsychology is just as effective as face-to-face care, and many patients appreciate not having to travel in order to attend an appointment\(^3\). It is crucial for VA, as one of the leaders in the telehealth space, to continue to allow its credentialed providers, including psychologists, to provide care to veterans throughout the VA system without finding themselves in conflict with State licensing board rules and regulations. **APA supports the ability of VA psychologists to provide care to veterans wherever they may be located, whether that care is delivered in-person or through telehealth.**

APA also appreciates that under this interim final rule, the ability to practice across state lines is being extended to health professional trainees, including psychology trainees, within the scope of their duties and appointment to VA. Allowing these trainees to practice within the scope of their duties across jurisdictions within the VA system under supervision of credentialed, licensed VA providers will increase access to care for veterans as well increase the competencies of the trainees. By increasing the potential population of veterans being seen by each trainee, under appropriate supervision, these VA trainees will be able to gain additional experience that might not have been available without this authority. APA supports the continued training of health professionals within VA, and this new authority allowing trainees to provide care throughout the VA system will enhance VA’s training capabilities. **APA supports allowing health professional trainees, including psychology trainees, to practice under supervision across state lines in line with their appointment at VA as trainees.**

In the interim final rule, VA lays out two specific authorities that the rule seeks to confirm:

\[\text{“(1) VA’s continuing practice of authorizing VA health care professionals to deliver health care services in a State other than the health care professional’s State of licensure, registration, certification, or other requirement; and (2) VA’s authority to establish national standards of practice for health care professions via policy, which will govern their employment, subject only to State laws where the health care professional is licensed, credentialed, registered, or subject to some other State requirements that do not unduly interfere with those duties.”}\]

As previously stated, APA supports VA’s authority to allow VA providers, including psychologists, to deliver care in a state other than the state in which they are licensed. APA also believes VA should have the ability to set national standards of practice for VA providers in order to ensure consistent, quality care across the system. VA acknowledges that these national practice standards will be set in sub-regulatory policymaking and that VA will engage with “appropriate stakeholders” when creating these standards for each health care profession. APA believes it is essential for psychologists to be involved in the creation of sub-regulatory national standards of practice for psychologists and psychology trainees. The scope of practice that will be outlined in these policies is a critical component of access to care, and APA, as the accrediting body for psychology education, training, and continuing education, is prepared to contribute to the creation of these policies.

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Specifically, APA would like to encourage the Department to examine the use of prescribing psychologists within VA. Prescribing psychologists, who have been practicing in the Department of Defense (DoD) for over 20 years, can increase access to critical mental health treatment for our nation’s veterans at a time when veteran suicide rates have never been higher. Clinical Psychopharmacology is an APA-recognized specialty that requires additional rigorous training in clinical psychopharmacology for prescribing psychotropic medication in addition to traditional psychological interventions. These psychologists are well-trained and well-accepted by their patients and other providers. Allowing prescribing psychologists to practice in VA will allow enhanced continuity of care for veterans who are participating in traditional psychological interventions. The benefit of medication to a veteran would not need to be delayed until an appointment with a second, unfamiliar provider can be scheduled. The integration of medication into treatment by an already trusted provider will assure continuity of care for that veteran.

One of the issues raised in the interim final rule about establishing national standards of practice is the electronic health record (EHR) modernization project that is currently being undertaken by VA and DoD. According to the interim final rule:

“In order to be successful [in EHR modernization], VA must standardize clinical processes with DoD. This means that all health care professionals in DoD and VA who practice in a certain health care profession must be able to carry out the same duties and tasks irrespective of State requirements. [. . .] These tasks include, but are not limited to, dispensing and administrating medications; prescriptive practices; ordering of procedures and diagnostic imaging; and required level of oversight. [. . .] In order to achieve standardized clinical processes, VA and DoD must create the uniform standards of practice for each health care specialty.”

Currently, prescribing psychologists, those who have received a post-doctoral Master’s degree in Clinical Psychopharmacology and additional clinical training as required by DoD, are part of a recognized health care specialty within DoD, and are able to prescribe medication across all branches. Therefore, the “role” of prescribing psychologist will already be present in VA’s new EHR because it is required in DoD’s EHR. APA strongly encourages VA to take this historic opportunity presented by the EHR modernization effort to truly create uniform standards of practice for each health care specialty and allow prescribing psychologists to practice to the full scope of their license and credential, in alignment with DoD, Indian Health Service (IHS), Public Health Service (PHS) and several states. APA recommends allowing prescribing psychologists to practice to the full scope of their license and credential in any sub-regulatory policy created, and requests that APA participate fully in the creation of any national standards of practice for psychologists.

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APA again thanks you for the opportunity to comment on this important VA policy. If APA can be of any further assistance, please contact Sophie Friedl, Director of Congressional and Federal Affairs, at SFriedl@apa.org.

Sincerely,

Katherine B. McGuire
Chief Advocacy Officer