March 1, 2021

The Honorable Denis R. McDonough
Secretary of Veterans Affairs
810 Vermont Ave, NW
Washington, DC 20420

Dear Secretary McDonough:

On behalf of the American Psychological Association (APA), I would like to congratulate you on your recent U.S. Senate confirmation to lead the Department of Veterans Affairs (VA). Your agency performs the critical duty of caring for the visible and invisible wounds affecting our nation’s Veterans and their family members. To help achieve this goal, VA trains and employs more psychologists than any other single U.S. entity.

APA is the largest scientific and professional organization representing psychology in the United States with nearly 121,000 researchers, educators, clinicians, consultants, and students. Our mission is to advance the creation, communication, and application of psychological knowledge to benefit society and improve people’s lives.

Your commitment to improving access to mental health care for our nation’s Veterans was clear in your testimony before the Senate Committee on Veterans’ Affairs. Your stated priorities – ensuring mental health care is part of comprehensive care, reducing stigma, and increasing access to mental health care – align closely with those of APA.

We applaud President Biden’s commitment to build a robust mental health workforce and to expand access to mental health care. As you know, the public health and economic impact of the ongoing COVID-19 pandemic continues to worsen the mental health of Veterans and exacerbate pre-existing barriers to care. Given that the VA psychologists among our members are on the front-lines of addressing the behavioral health needs of Veterans affected by this crisis, we offer the following recommendations for your consideration:

- **Improve Recruitment and Retention of Psychologists.** Psychologists have been on the VA Inspector General’s Critical Staffing Shortage list since 2015 and are an integral part of VA’s suicide prevention efforts. To help increase retention and recruitment, VA psychologists should be moved to full Title 38 hiring authority. Psychologists and some pharmacists are the only doctoral-level clinicians not included under this authority, and the improved flexibility and pay schedules for Title 38 employees would allow VA to appropriately compensate psychologists for the critical work they do for our nation’s Veterans.

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• **Allow Psychologists to Practice to the Full Scope of their License and Credentials.** Psychologists represent a critical component of VA’s mental health workforce and are integral to all VA suicide prevention efforts. Allowing licensed prescribing psychologists to practice in VA would improve access to, and continuity of care within, the VA system by ensuring that Veterans who need psychotropic medication can receive both psychotherapy and pharmacological treatments from the same provider. Furthermore, these prescribing psychologists would be able to reduce or un-prescribe psychotropic medications in keeping with the Veteran’s needs. This recognized authority for prescribing psychologists has existed within the Department of Defense (DoD) for almost 25 years. Furthermore, the modernization of VA and DoD’s electronic health record presents a unique opportunity to align provider roles within the Cerner system.²

• **Ensure VA Community Care Network Providers are Adequately Trained in Military Cultural Competency, Suicide Prevention, Evidence-Based Psychotherapies, and Lethal Means Safety.** Veterans receive high-quality, integrated care from VA providers within the VA system, and it is critical that this system be strengthened to ensure that future Veterans also have access to the care and benefits that VA has provided to generations of Veterans. However, we recognize that some Veterans need to receive care from community providers, whether that is because they live too far from a VA facility or require specialty care that VA does not provide. These Veterans deserve to receive care from psychologists and other providers in the community who are aware of issues impacting former service members, such as posttraumatic stress disorder, toxic exposure, and military sexual trauma. Providers participating in VA’s community care network should be required to have the same level of training and competency as VA providers, including suicide prevention and lethal means training. Increasing access to mental health care and reducing access to lethal means are key components of suicide prevention and have been a longtime top priority of the Department. APA has worked closely with VA’s Office of Mental Health and Suicide Prevention, as well as the PREVENTS Task Force, in creating suicide screening and intervention webinars and collaborating on lethal means safety initiatives.

We appreciate your consideration of these recommendations and look forward to working with you and continuing our collaboration with VA to ensure that Veterans have access to culturally competent, evidence-based mental health treatment. If you have any questions, please contact Sophie Friedl, Director of Congressional and Federal Affairs, Military and Veterans Health Policy at sfriedl@apa.org.

Sincerely,

Arthur C. Evans, Jr., PhD  
Chief Executive Officer

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