



2017 Lobby Day: Wrap-up
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Legislative Committee Vice-Chair

Dear NYSPA Members,

Below is a summary of the issues (our "asks") during day 2 and more photos.

As I indicated, the "NYSPA Lobby Day Team" consisted of 42 members. We were broken into six teams and had 51 appointments with legislators scheduled.

Legislative Priorities – 2017

PLLC

A1943 (Peoples-Stokes)/S412 (LaValle)

Support

This bill authorizes eleven different health professions (including licensed psychologists) to form LLC's professional service LLCs, foreign professional service LLCs, LLPs and foreign LLPs with physicians.

Thumbnail summary:

Currently, psychologists may own their own practices, but cannot enter into an ownership agreement with a psychiatrist or other medical doctor. This legislation would allow for joint ownership and the continued expansion of integrated care settings in New York State, allowing patients to seek many types of primary care within one practice.

Analysis:

Greater collaboration and coordination of healthcare among providers can improve the quality of patient care and result in better outcomes. Multi-specialty practices is a way to achieve greater collaboration and improve consultation and communication among providers in a single location. This legislation will reduce duplication of services and decrease healthcare costs. Partnering with physicians results in a sharing of liabilities and operating costs. It is important to emphasize that applicable laws related to the regulation, oversight, and enforcement of the respective professions remains unchanged.

There is a large coalition of health service provider association that strongly supports this legislation.

Note: A concern that was mentioned at a meeting with Senator John Flanagan's Senate Counsel Nikki Stewart pertains to disciplinary oversight.

Prescriptive Authority



A2851 (McDonald)/S4998 (Lanza)

Support

This bill creates the ability for psychologists to prescribe appropriate medications for the treatments, diagnosis, and management of individuals under their care. This legislation would require specialized training, education, clinical experience, passage of an examination, and certification before such authority is granted.

Thumbnail summary:

Psychologists can prescribe psychotropic medications in Louisiana, New Mexico, Illinois, Iowa, Idaho and within the United States Military. Passage of this legislation would increase access to care for those New Yorkers living in rural or isolated areas of the state where easy and affordable access to a psychiatrist is limited or nonexistent.

Analysis:

Rural areas are often underserved. Language barriers may disenfranchise people in need of medication. Consider the large Hispanic populations throughout the state and very few Spanish-speaking psychiatrists. This legislation will preserve the continuity of care between prescribing psychologist and patient and decrease non-compliance. The psychologist knows his or her patients far better than the prescribing physicians and is in a better position to monitor and can intervene more effectively. The prescribing psychologist would be able to detect misuse or abuse of medication and adjust doses, change medications, or de-prescribe during the same visit. The bill would also decrease the reliance of non-psychiatrist physicians. In short: this legislation will make access of qualified prescribing providers more attainable for people in need of mental health services throughout New York State.

Duty to protect

S775-A (Carlucci)/A6849 (Steck)

Support

This bill creates a duty to protect for licenses psychologists in New York State which would allow mental health practitioners to take reasonable steps to reduce or eliminate the risk of harm when a patient has directly communicated threats of serious, imminent, harm to self or against a specific person or persons, and demonstrates a serious intent and ability to complete the harm; this legislation would also provide immunity from disciplinary or civil or criminal liability if such information was reported. This duty currently exists for licensed psychologists working in the state-operated mental health facilities.

Thumbnail summary:

It is important that licensed psychologists be immune from criminal, civil, and professional liability when they believe in their professional opinion that a patient intends to inflict serious harm on themselves or others. When a viable threat has been made, a license psychologist should be able breach the traditional duty of confidentiality to contact the appropriated authorities or take appropriate actions.

Analysis:



This legislation provides a frontline function in allowing mental health practitioners to take effective steps to intervene and keep the patient and the public safe. The decision of the practitioner to disclose or not to disclose the patient's confidential information to others in accordance to the statute "when made reasonably and in good faith shall not be the basis for any civil or criminal liability of such mental health practitioner, including liability pursuant to unprofessional conduct as described in the rules of the board of regents of New York State, part 29." (language in the bill).

Out of Network Coverage

A.7671 (Rosenthal)/S.5675 (Hannon)

Support

This bill requires insurers to offer out of network coverage as an option to any health insurance contact, both inside and outside of the statewide health benefit exchange. NYSPA would also support alternative legislation that would mandate or increase Out of Network benefits throughout New York State.

Thumbnail summary:

The availability of out of network benefits has been steadily declining as more plans are offered by state health exchanges; licensed psychologists are concerned that this results in decreased access to mental health services and supports the expansion of health plans to include out of network coverage.

Analysis:

This bill allows for continuity of care that is disrupted if patients have to go to a new provider. The relationship between patient and provider is destroyed. This is particularly harmful to our most vulnerable patients and treatment compliance may become an issue or patients simply may discontinue treatment. Patients may become very distressed when they are unable to maintain a relationship with their providers because their insurance does not provide out of network benefits.

School Psychologist

A1132-A (Rosenthal) /S692 (Orrt)

Oppose

This bill creates the profession of school psychology, to be license and regulated by the New York State Education Department.

Thumbnail summary:

NYSPA opposes this legislation and hold the position that only doctoral level psychologists should be eligible for licensure in the New York State. Enhancement of this legislation could weaken the standards for school psychologists, which requires rigorous training beyond what this bill would require.

Analysis:



If this legislation is enacted, licensing standards for school psychologists would be significantly reduced and would erode the high credentials associated with psychology. A reduction in credentialing standards could result in the treatment of patients by inexperienced practitioners. The bill adds a level of confusion by allowing master's level practitioners to be called psychologists and places an undue burden on the public and is unfair to those who have achieved the highest level of training.

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