Oppose Psychological Prescribing

- Currently five states (Idaho, Iowa, New Mexico, Illinois, Louisiana) have psychological prescribing. Granting psychologists prescribing authority would mean an increased cost to the state with no apparent benefits. An estimated 50% of those who require medication for their mental illness also have other medical conditions which require medication. The complex interactions of these drugs and their effects present a challenge even to experienced physicians.
- While physicians’ medical degrees are clinically-focused, emphasizing the critically important physical sciences, psychologists’ medical degrees are based on the behavioral and social sciences.
- Therefore, allowing psychologists to prescribe poses a danger to public health and the standard of care for mental health patients.

Pending Legislation
- S.B. 268, Senator Jose Rodriguez
  - relating to the prescriptive authority of certain psychologists; authorizing a fee
- H.B. 1092, Representative Bill Zedler (Identical)

Oppose Independent Practice for Advanced Practice Registered Nurses (APRN)

- There is a significant gap in educational and training experience between physicians and advanced practice nurse practitioners.
  - Educationally, physicians must achieve between 16,000-17,000 more hours than nurse practitioners in order to independently treat a patient.
  - Clinically, physicians must attain 8,500 more clinical hours in residency to independently treat a patient.
- There is inconclusive evidence to suggest that allowing APRNs to independently practice would increase access to care. (see APRN handout for more information)

Pending Legislation
- H.B. 1792, Representative Stephanie Klick
  - Relating to the authority of certain advanced practice registered nurses
  - This bill calls for the Texas Nursing Board to authorize the independent practice of an advanced practice registered nurse who has practiced for a minimum of 2,080 hours under the delegation of a physician.
  - Relating to the practice of certain advanced practice registered nurses in rural counties.
- H.B. 912, Rep. Donna Howard
  - Relating to an expedited licensing process for certain advanced practice registered nurses

Increase Medical Workforce

- Texas is facing a shortage of mental health professionals, but new bills filed this session could help address the shortage.
  - By 2023, at least half of our psychiatrists will be retirement age or older.
  - There are only 85 new residents into psychiatry in Texas annually.
The Legislature’s support of grants and programs to advance psychiatry with a specific focus on child and adolescent psychiatry offers an opportunity to increase access and gives the state the ability to increase the workforce in Texas.

Significant legislation has already been filed to institute a child and adolescent psychiatry project that will expand the delivery of mental health care services through the use of telemedicine.

Pending Legislation
- S.B. 10, Senator Jane Nelson
  - Relating to the creation of the Texas Mental Health Care Consortium
  - This bill seeks to coordinate the expansion and delivery of mental health services by using the infrastructure and expertise of the health-related institutions of higher education. This proposed legislation will create health care hubs at Texas medical schools to provide consultations and specialized care coordination to pediatric primary care providers using telemedicine.
  - Relating to grants and programs for researching and treating behavioral health and psychiatric issues
  - This bill creates a grant program for child and adolescent psychiatric nurses. It proposes to fund postgraduate presidency and fellowship training positions for advanced practiced registered nurses to receive specialized training. It creates the Texas Behavioral Health Research Institute for centralized direction and vision to address child and adolescent behavioral health needs.
  - Relating to eligibility requirements for student loan repayment assistance for certain mental health professionals.
  - The bill creates a separate funding category for child and adolescent psychiatrists.

Support School Safety
- Mental health and school safety were identified by Governor Abbott as an emergency item for the 86th Legislative Session.
- Psychiatrists and school counselors have been identified as first responders for the intervention in children identified as at-risk youth.
- Significant legislation has already been filed relating to school safety on-campus, risk assessments and increased training for employees.

Pending Legislation
  - This is the major legislation for school safety this session. It encompasses the re-design of schools and mandatory increases in school safety training for teachers and students.

Mental Health Funding
- The House and Senate budgets continue the state’s commitment to mental and behavioral health. Both budget bills fund mental/behavioral health at the same level, however, take different approaches regarding the method of finance. Total behavioral health-related funding, including estimated Medicaid and CHIP expenditures, is expected to be $7.5 billion in All Funds.
- H.B. 1 and S.B. 1 include funding for:
  - Inpatient services at state hospitals and community hospitals
  - Outpatient services provided through local mental health authorities and local behavioral health authorities
  - Substance abuse prevention, intervention, and treatment services for adults and children
  - Mental healthcare and substance abuse treatment for incarcerated offenders
  - Mental healthcare services for veterans
- S.B.1 includes additional funding at $100.0 million in General Revenue Funds at the Texas Higher Education Coordinating Board contingent on passage of legislation relating to the creation of the Texas Mental Health Care Consortium (SB 10), and $59.1 million in All Funds ($54.9 million in General Revenue Funds) to expand outpatient mental health treatment capacity for adults and children.