



February 2, 2017

The Honorable Della Au Belatti
Chairwoman
Hawaii State House Committee on Health
Hawaii State Capitol
Room 402
415 South Beretania Street
Honolulu, HI 96813

Dear Chairwoman Belatti:

The American Osteopathic Association (AOA), the Hawaii Association of Osteopathic Physicians and Surgeons (HAOPS) and the American College of Osteopathic Neurologists and Psychiatrists (ACONP) are writing to urge you to reconsider your support for HB 767.

This bill would expand the scope of practice for clinical psychologists to allow them to prescribe psychotropic medication without requiring psychologists to attain a level of competency equivalent to psychiatrists. We believe that this expansion in psychologists' scope of practice is improper, and that health professionals' scope of practice must be based on their level of training, education, experience and examination.

The AOA represents nearly 130,000 osteopathic physicians (DOs) and osteopathic medical students, promotes public health, encourages scientific research, serves as the primary certifying body for DOs and is the accrediting agency for osteopathic medical schools. More information on DOs/osteopathic medicine can be found at www.osteopathic.org. HAOPS is a professional organization that represents over 300 DOs providing patient care in Hawaii. The ACONP represents 890 osteopathic neurologists and psychiatrists from across the United States.

Psychology and psychiatry share similar subject matter, but are significantly different. A psychologist holds a doctorate degree and a license to practice psychology, while a psychiatrist is a specialized physician with a DO or MD degree and a license to practice medicine. Historically, only physicians have been permitted to prescribe medications due to the risk that poor prescribing practices will harm patients. Psychotropic medications present a heightened risk of patient harm because they are among the most powerful drugs available to modern medicine. These medications affect the entire body, not just the brain. Without adequate medical training, psychologists may not recognize underlying medical conditions that can mimic mental illnesses, such as thyroid disorders and tumors of the central nervous system.

Psychiatrists' extensive medical education and training have prepared them to understand medical treatment of disease, complex case management and safe prescribing practices. Psychiatrists complete four years of medical school, followed by four to seven years of clinical residency programs. By the time psychiatrists are permitted to prescribe medications independently, they have completed 12,000 to 16,000 hours of total patient care.

In comparison, this bill allows a licensed psychologist to prescribe psychotropic medication after obtaining a postdoctoral master's degree in clinical psychopharmacology that requires only 400 hours of didactic education, completing four hundred hours of clinical experience and passing an exam that is designed by a psychological organization. Thus, not only will HB 767 permit psychologists who complete less education and experience requirements than psychiatrists to apply for prescriptive authority, their competence will be evaluated by an exam designed and approved by other psychologists who may not have any personal knowledge of safe and effective prescribing practices. Further, the bill allows clinical psychologists to prescribe in collaboration with an advanced practice registered nurse, who similarly does not have comparable expertise to a physician.

The continuing education requirement in HB 767 also pales in comparison to what is required of psychiatrists and other physicians. Currently, Hawaii's psychiatrists are required to complete 100 hours of continuing medical education every two years, but clinical psychologists will only be required to complete 18 hours of continuing education. Board certified DOs also participate in Osteopathic Continuous Certification, a process that compares their current practice performance against established benchmarks. No similar program exists to evaluate the professional competence of board certified psychologists over time.

A short course in psychopharmacology is a poor substitute for the comprehensive knowledge and skills physicians acquire by completing medical school or osteopathic medical school, obtaining extensive postgraduate clinical experience, and participating in substantial continuing education and ongoing professional development. **We urge you to protect the safety of Hawaii's patients by reconsidering your support for HB 767.** Should you need any additional information, please feel free to contact Nick Schilligo, MS, Associate Vice President, State Government Affairs at nschilligo@osteopathic.org or (800) 621-1773, ext. 8185.

Sincerely,



Boyd R. Buser, DO
President, AOA



Spencer Lau, DO
President, HAOPS



Anthony Emmer, DO, FACN
President, ACONP

CC: Mark A. Baker, DO, AOA President-elect
William J. Burke, DO, Chair, AOA Department of Governmental Affairs
Richard Thacker, DO, Chair, AOA Bureau of State Government Affairs
Adrienne White-Faines, MPA, AOA Chief Executive Officer
Laura Wooster, MPH, Interim Senior Vice President, AOA Public Policy
Nicholas Schilligo, MS, Associate Vice President, AOA State Government Affairs
Samyuktha Gumidyala, Affiliate Executive, HAOPS
Sue Wesserling, Executive Director, ACONP