

Do Prescribing Psychologists Have Enough Medical Training to Prescribe?

- The Department of Defense (DoD) Psychopharmacology Demonstration Project (PDP, 1991) began by requiring a curriculum that resembled medical school but concluded that medical school is **not** necessary to prescribe.
 - Participants in the DoD PDP were universally acknowledged as medically safe providers and judged as “performing with excellence” by evaluators that included physicians and psychiatrists.
- Curriculum guidelines were established by the American Psychological Association’s model curriculum (1996). Prescribers must have a PhD or PsyD in psychology and obtain coursework and practical experience for the Masters Degree in Clinical Psychopharmacology (MSCP). Such coursework includes physiology, pathophysiology, neurology, neuropathology, pharmacology and psychopharmacology, lab test interpretation, and detecting medical disorders.

The answer is YES based on 20+ years of performance of prescribing psychologists in states that allow prescriptive authority.

- Review of research from large, robust, epidemiologic studies in states with RxP have concluded:
 - Suicides are reduced in states with RxP.^{1,2}
 - Access is increased, including in vulnerable populations.³
 - Safety has been established.⁴
 - Prescribing psychologists practice in a similar manner to psychiatrists, with the exception of less polypharmacy.
 - Prescribing psychologists more often REDUCE medication use.⁵
- In Texas, medical school training is **not** required for all prescribers, such as dentists, optometrists, and podiatrists.

The Evidence is Clear

Prescribing psychologists are safe and effective prescribers who increase access to care.

It’s Time for Texas to Get on Board for RxP!



Texas Psychological Association | www.texaspsyc.org | www.texasrxp.org



References

- ¹ Choudhury, A. R., & Plemmons, A. (2023). Effects of giving psychologists prescriptive authority: Evidence from a natural experiment in the United States. *Health Policy*, 134, 104-846. <https://doi.org/10.1016/j.healthpol.2023.104846>.
- ² Hughes, P. M., McGrath, R. E., & Thomas, K. C. (2022). Evaluating the impact of prescriptive authority for psychologists on the rate of death attributed to mental illness. *Research in Social and Administrative Pharmacy*, 19, 667-672. <https://doi.org/10.1016/j.sapharm.2022.12.006>.
- ³ Chang, R. (2024). Summary of the prescribing psychologist practice survey. State Psychologist Association New Mexico. <https://www.spanewmexico.org/rxp-practice-survey>.
- ⁴ General Accounting Office. (1999). Prescribing psychologists: DoD demonstration participants perform well but have little effect on readiness or costs. HEHS-99-98. <https://www.gao.gov/products/hehs-99-98>
- ⁵ Peck, K. R., McGrath, R. E., & Holbrook, B. B. (2021). Practices of prescribing psychologists: Replication and extension. *Professional Psychology: Research and Practice*, 52, 195-201. <https://doi.org/0.1037/pro0000338>.

Additional Supporting Studies

Choudhury, A. R., & Plemmons, A. (2023). Effects of giving psychologists prescriptive authority: Evidence from a natural experiment in the United States. *Health Policy*, 134, 104-846. <https://doi.org/10.1016/j.healthpol.2023.104846>.

Hughes, P. M., Graaf, G., Gigli, K. H., deJong, N. A., McGrath, R. E., & Thomas, P. M. (2024). Pediatric mental health care and scope-of-practice expansions. *Administrative Policy and Mental Health*, 51, 384-392. <https://doi.org/10.1007/s10488-024-01342-w>.

Hughes, P. M., McGrath, R. E., & Thomas, K. C. (2022). Evaluating the impact of prescriptive authority for psychologists on the rate of death attributed to mental illness. *Research in Social and Administrative Pharmacy*, 19, 667-672. <https://doi.org/10.1016/j.sapharm.2022.12.006>.

Hughes, P. M., Phillips, D. C., McGrath, R. E., & Thomas, K. C. (2023). Examining psychologist prescriptive authority as a cost-effective strategy for reducing suicide rates. *Professional Psychology: Research and Practice*, 54, 284-294. <https://doi.org/10.1037/pro0000519>.

McQuiston, H. L., & Zinns, R. (2019). Workloads in clinical psychiatry: Another way. *Psychiatric Services*, 70. <https://psychiatryonline.org/doi/10.1176/appi.ps.201900125>

