

Psychologists Prescribing: Release of Data Reveal Facts on the Ground in Louisiana and New Mexico

As part of the federal government’s ongoing efforts to drive data transparency in healthcare, the Centers for Medicare and Medicaid Services recently released prescription claims data from the Medicare prescription drug benefit (also known as Part D). The data release covers more than 3,000 drugs ordered by over 1 million clinicians in 2013 and provides data on prescriber-level claims. For the first time, this data reveals that clinical psychologists, who have wholly insufficient training to prescribe *psychiatric* drugs, are also prescribing non-psychiatric medications, well beyond any training they may have.

This behavior has crossed the line of legislative intent in the few states where psychologists are permitted to practice medicine after crash course training and certification.

While many of the medications within the dataset consist of powerful psychotropic medicines (e.g., antipsychotics and controlled substances including stimulants) with potentially harmful side effects for which psychologists are not adequately trained to administer and monitor, the data reveal even more alarming examples of non-psychotropic drugs that should be managed by a highly qualified medical professional.

Examples of Medications Ordered by Prescribing Psychologists in New Mexico and Louisiana, According to Medicare Data

Drug Name (Brand Name)	Indication	System(s)	Possible Side Effect(s)	Indicated for Mental Health Tx?
Warfarin sodium (Coumadin)	Blood clots/atrial fibrillation	Cardiovascular, Nervous	Increased risk of bleeding, sudden and severe leg or foot pain, jaundice, vomiting	No
Metoprolol succinate (Lopressor)	Cardiac medication (beta blocker)	Cardiovascular	Confusion, dizziness, slow heartbeat, rapid weight gain, shortness of breath	No
Ramipril (Altace)	Cardiac medication (ACE inhibitor)	Cardiovascular	Blurred vision, confusion, chest pain, fainting, fast or irregular heartbeat	No
Simvastatin (Zocor)	Hypercholesterol	Cardiovascular	Loss of consciousness, fast or irregular heartbeat, difficulty breathing, joint pain	No

Pilocarpine HCL (Salagen)	Cholinergic agonist	Nervous, Immune, Endocrine	Joint pain, flushing or redness of skin, nausea, fast heartbeat, trouble swallowing	No
Potassium chloride (K-Dur)	Hypokalemia	Cardiovascular	Severe allergic reactions (e.g., hives, difficulty breathing), vomiting, diarrhea	No
Dextromethorphan/ quinidine (Nuedexta)	Neurological and cardiac conditions	Nervous, cardiovascular	Urinary tract infection, vomiting, dizziness, diarrhea, flu-like symptoms	No
Levetiracetam (Keppra)	Antiseizure	Nervous	Change in personality, irregular heartbeat, depression, paranoia, mood swings	No
Levothyroxine sodium (Synthroid)	Thyroid	Endocrine	Labored breathing, tremors, fast, slow, irregular, or racing heartbeat or pulse	No
Carvedilol (Coreg)	Cardiac medication (beta blocker)	Cardiovascular	Chest pain, slow heartbeat, dizziness, swelling of feet, ankles, or legs	No
Pravastatin sodium (Pravachol)	Hypercholesterol	Cardiovascular	Confusion, chest pain, weight gain, jaundice, diarrhea, dizziness, fever	No
Clopidogrel (Plavix)	Stroke (platelet inhibitor)	Cardiovascular	Chest pain, collection of blood under the skin, red or purple spots on the skin	No
Terazosin HCL (Hytrin)	Cardiac medication (hypertension)	Cardiovascular	Fast or irregular heartbeat, sudden fainting, dizziness, shortness of breath	No
Tizanidine HCL (Zanaflex)	Muscle relaxant	Musculoskeletal	Chest pain, vomiting, blurred vision, irregular heartbeat, kidney stones	No

Source:

<http://www.cms.gov/Research-Statistics-Data-and-Systems/Statistics-Trends-and-Reports/Medicare-Provider-Charge-Data/Part-D-Prescriber.html>

Clinical psychologists are behavioral professionals with competencies in psychological assessment and psychotherapy (e.g., talk therapy) treatment. They are not medical practitioners. Under legislation that has been introduced in several states, psychologists would be permitted to prescribe powerful medications after a haphazard online training program consisting of as little as 400 hours. Some of these programs claim to teach all of the basic biological foundations of prescribing medications for individuals with zero required educational background in chemistry, biology, and anatomy in as little as 90 total hours. This would seriously jeopardize the health and safety of Americans with mental illness, who are likely to suffer from co-morbid medical conditions.

We urge policymakers to reject these proposals in favor of real reforms that improve access to safe, effective and integrated treatment of individuals that suffer from mental illness and other co-occurring conditions.