Dear Senators HEIDER, Souza, Jordan, and Representatives WOOD, Packer, Chew:

The Legislative Services Office, Research and Legislation, has received the enclosed rules of the Bureau of Occupational Licenses - State Board of Psychologist Examiners:

IDAPA 24.12.01 - Rules of the Idaho State Board of Psychologist Examiners (Fee Rule) - Proposed Rule (Docket No. 24-1201-1802).

Pursuant to Section 67-454, Idaho Code, a meeting on the enclosed rules may be called by the cochairmen or by two (2) or more members of the subcommittee giving oral or written notice to Research and Legislation no later than fourteen (14) days after receipt of the rules' analysis from Legislative Services. The final date to call a meeting on the enclosed rules is no later than 11/01/2018. If a meeting is called, the subcommittee must hold the meeting within forty-two (42) days of receipt of the rules' analysis from Legislative Services. The final date to hold a meeting on the enclosed rules is 12/03/2018.

The germane joint subcommittee may request a statement of economic impact with respect to a proposed rule by notifying Research and Legislation. There is no time limit on requesting this statement, and it may be requested whether or not a meeting on the proposed rule is called or after a meeting has been held.

To notify Research and Legislation, call 334-4854, or send a written request to the address on the memorandum attached below.
MEMORANDUM

TO: Rules Review Subcommittee of the Senate Health & Welfare Committee and the House Health & Welfare Committee

FROM: Legislative Research Analyst - Matt Drake

DATE: October 15, 2018

SUBJECT: Bureau of Occupational Licenses - State Board of Psychologist Examiners

IDAPA 24.12.01 - Rules of the Idaho State Board of Psychologist Examiners (Fee Rule) - Proposed Rule (Docket No. 24-1201-1802)

Summary and Stated Reasons for the Rule

In 2017, the Idaho Legislature passed House Bill 212, which allows licensed psychologists who meet certain educational, examination, and experience requirements to be granted prescriptive authority (i.e., the authority to write prescriptions for certain medications). Under 54-2318(3), Idaho Code, the board was required to develop rules pertaining to such prescriptive authority. Accordingly, the proposed rules establish the qualifications for provisional certification of prescriptive authority and certification of prescriptive authority. The proposed rules further establish minimum requirements for a clinical practicum as part of the educational program, supervised practice requirements, and the adoption of the national competency examination. The proposed rules also set a formulary for the medications that may be prescribed. Further, the rules establish standards of practice for prescriptive authority and collaboration between the prescribing psychologist and a patient's licensed medical provider. Pursuant to 54-2318(3), Idaho Code, the board is authorized to set fees associated with the proposed rules, provided that such fees do not exceed three hundred dollars ($300). Under the proposed rules, each of the fees associated with certification of prescriptive authority cost two hundred and fifty dollars ($250). The board estimates that these fees will offset additional costs associated with administration of the program.

Negotiated Rulemaking / Fiscal Impact

The board states that negotiated rulemaking was not conducted because the proposed rules were discussed during noticed, open meetings of the advisory panel and the board. There is no fiscal impact.

Statutory Authority

The rulemaking appears to be authorized pursuant to sections 54-2305(12), 54-2318, and 54-2320, Idaho Code.

cc: Bureau of Occupational Licenses - State Board of Psychologist Examiners
Tana Cory
*** PLEASE NOTE ***

Per the Idaho Constitution, all administrative rules must be reviewed by the Legislature during the next legislative session. The Legislature has 3 options with this rulemaking docket: 1) Approve the docket in its entirety; 2) Reject the docket in its entirety; or 3) Reject the docket in part.
AUTHORITY: In compliance with Section 67-5221(1), Idaho Code, notice is hereby given that this agency has initiated proposed rulemaking procedures. The action is authorized pursuant to Sections 54-2305(12), 54-2318, and 54-2320, Idaho Code.

PUBLIC HEARING SCHEDULE: Public hearing(s) concerning this rulemaking will be scheduled if requested in writing by twenty-five (25) persons, a political subdivision, or an agency, not later than October 17, 2018.

The hearing site(s) will be accessible to persons with disabilities. Requests for accommodation must be made not later than five (5) days prior to the hearing, to the agency address below.

DESCRIPTIVE SUMMARY: The following is a nontechnical explanation of the substance and purpose of the proposed rulemaking:

The 2017 Legislature passed House Bill 212, which allows licensed psychologists who meet certain educational, examination, and experience requirements to be granted prescriptive authority. This proposed rule establishes the qualifications for provisional certification of prescriptive authority and certification of prescriptive authority. These include minimum requirements for a clinical practicum as part of the educational program, supervised practice requirements, and the adoption of the national competency examination. This rule also sets a formulary for the medications that may be prescribed. Finally, the rule establishes standards of practice for prescriptive authority and collaboration between the prescribing psychologist and a patient’s licensed medical provider.

FEE SUMMARY: The following is a specific description of the fee or charge imposed or increased:

The Board operates on dedicated funds and must be self-supporting. The following fees are established in accordance with Section 54-2318, Idaho Code, as follows: original application fee of $250 for certification or provisional certification for prescriptive authority; and renewal fee of $250 for certification or provisional certification for prescriptive authority.

FISCAL IMPACT: The following is a specific description, if applicable, of any negative fiscal impact on the state general fund greater than ten thousand dollars ($10,000) during the fiscal year resulting from this rulemaking: N/A

NEGOTIATED RULEMAKING: Pursuant to Section 67-5220(2), Idaho Code, negotiated rulemaking was not conducted because the proposed rules were discussed during noticed, open meetings of the advisory panel and the Board. As required by statute, the rules were developed in conjunction with an advisory panel consisting of a psychiatrist and a pediatric psychiatrist recommended by the Idaho state board of medicine, a pharmacist recommended by the Idaho state board of pharmacy, and two psychologists licensed in Idaho.

INCORPORATION BY REFERENCE: Pursuant to Section 67-5229(2)(a), Idaho Code, the following is a brief synopsis of why the materials cited are being incorporated by reference into this rule: N/A

ASSISTANCE ON TECHNICAL QUESTIONS, SUBMISSION OF WRITTEN COMMENTS: For assistance on technical questions concerning the proposed rule, contact Jennifer Carr at (208) 334-3233.

Anyone may submit written comments regarding this proposed rulemaking. All written comments must be directed to the undersigned and must be delivered on or before October 24, 2018.

Dated this 30th day of August, 2018.

Tana Cory, Bureau Chief
Bureau of Occupational Licenses
Phone: (208) 334-3233 / Fax: (208) 334-3945

Idaho Administrative Bulletin Page 304 October 3, 2018 – Vol. 18-10
THE FOLLOWING IS THE PROPOSED TEXT OF DOCKET NO. 24-1201-1802
(Only Those Sections With Amendments Are Shown.)

010. DEFINITIONS (RULE 10).

01. Board. The Idaho State Board of Psychologist Examiners as prescribed in Section 54-2301, Idaho Code. (7-1-93)


03. Certificate of Professional Qualification. A certificate of professional qualification shall mean the certificate of professional qualification granted to a psychologist by the Association of State and Provincial Psychology Boards. (3-15-02)

04. Collaboration or Collaborative Relationship. Collaboration or collaborative relationship means a cooperative working relationship between a prescribing psychologist and a licensed medical provider in the provision of patient care, including cooperation in the management and delivery of physical and mental health care, to ensure optimal patient care.

05. Controlled Substance. Any substance defined, enumerated, or included in federal or state statute or regulations 21 C.F.R. 1308.11-15 or article II, chapter 27, Title 37, Idaho Code.

06. Drug. Drug has the same meaning as defined in Section 37-2701, Idaho Code.

07. Geriatric Patient. A person sixty-five (65) years of age or older.

08. Licensed Medical Provider. A physician or physician assistant licensed pursuant to chapter 18, title 54, Idaho Code, or an advanced practice registered nurse licensed pursuant to chapter 14, title 54, Idaho Code.

09. Medication. Medication has the same meaning as drug.

10. Mental, Nervous, Emotional, Behavioral, Substance Abuse, and Cognitive Disorders. Disorders, illnesses, or diseases listed in either the most recent edition of the Diagnostic and Statistical Manual of Mental Disorders published by the American Psychiatric Association or those listed in the International Classification of Diseases published by the World Health Organization.

11. Pediatric Patient. A person seventeen (17) years of age or younger.

12. Prescribing Psychologist. A person who holds a license to practice psychology issued by the Board and who holds a Certification or Provisional Certification of Prescriptive Authority issued by the Board under Sections 54-2317, 54-2318, 54-2319, Idaho Code, and these rules.

13. Supervising Physician. A board-certified psychiatrist, neurologist, or other physician with specialized training and experience in the management of psychotropic medication and who is licensed under chapter 18, title 54, Idaho Code, or an equivalent licensing provision of the law of a state adjoining Idaho.

011. -- 099. (RESERVED)

100. CREDENTIALS TO BE FILED BY ALL APPLICANTS APPLICATION (RULE 100).

01. Completed Filing an Application. An application shall be completed by all applicants for
licensure upon a form prescribed by the State Board of Psychologist Examiners. No application shall be accepted or considered by the Board prior to the date the required doctoral degree was conferred upon the applicant. Applicants for licensure or certification or provisional certification of prescriptive authority shall submit a complete application, verified under oath, to the Board at its official address. The application shall be on the forms approved by the Board and submitted together with the appropriate fee(s) and supporting documentation.

02. **Official Transcripts Supporting Documents.** All applicants shall arrange for official transcripts of all credits earned at each approved college or university, to be transmitted by the registrars of the educational institutions directly to the Board. The applicant must provide or facilitate the provision of any supporting third party documents that may be required under the qualifications for the license being sought.

   a. Any third party documents, including letters of reference, must be received by the Board directly from the third party.

   b. One (1) of the two (2) years of supervised experience as required by Section 2307(b), Idaho Code, for initial licensure may be pre-doctoral. The second year must be post-doctoral work under appropriate supervision and must be verified by the appropriate supervisor.

03. **Letters of Reference Applications Must Be Complete.** Letters of reference, regarding the character, training, and experience of the applicant shall be returned to the Board by the references before decision is rendered on the application. Applications shall not be considered complete until all required information, documents, and fees are received by the Board. An application shall not be considered complete until the required degree(s) has been conferred upon the applicant.

04. **Supervised Experience Application Deadline Date.** One (1) of the two (2) years of supervised experience as required by Section 2307(b), Idaho Code, may be pre-doctoral. The second year must be post-doctoral work under appropriate supervision and must be verified by the appropriate supervisor. Applications for licensure or certification or provisional certification of prescriptive authority received fewer than thirty (30) days prior to a Board meeting may be held over to the next regular board meeting.

05. **Official Documentation Lack of Activity.** Official documentation of meeting the requirements of Chapter 23, Title 54, Idaho Code and IDAPA 24.12.01, must be received by the Board directly from the entity or person responsible for providing such official documentation. Applicants are responsible for requesting the required documentation from the appropriate entities and persons. If an applicant fails to respond to a Board request or an application has been on file with the Board for a period in excess of five (5) years, the application on file with the Board will be deemed denied and will be terminated upon a thirty (30) day written notice, unless good cause is demonstrated to the Board.

06. **Applications on File.** Applications on file with the Board for a period in excess of five (5) years from the date of receipt by the Bureau shall be terminated unless good cause is demonstrated to the Board.

07. **Deadline.** To be considered by the Board, a properly completed application together with all supporting documentation and required fees must be received by the Bureau at least seven (7) calendar days prior to the next scheduled meeting of the Board.

(BREAK IN CONTINUITY OF SECTIONS)

150. **FEES (RULE 150).**

   01. **Annual Renewal Fee.** Annual renewal fee -- two hundred fifty dollars ($250).

   02. **Annual Renewal Fee for Inactive License.** Annual renewal fee - one hundred twenty-five dollars ($125).

   03. **Original Application Fee For Licensure by Exam.** Application fee - one hundred fifty dollars ($150).
04. **Original Application Fee For Licensure by Endorsement/Senior Psychologist.** Original application fee for licensure by endorsement/senior psychologist fee - two hundred fifty dollars ($250). (3-24-16)

05. **Original Application Fee for Provisional Certification of Prescriptive Authority.** Original application fee for provisional certification of prescriptive authority – two hundred and fifty dollars ($250).

06. **Annual Renewal Fee for Provisional Certification of Prescriptive Authority.** Annual renewal fee – two hundred fifty dollars ($250).

07. **Original Application Fee for Certification of Prescriptive Authority.** Original application fee for certification of prescriptive authority – two hundred fifty dollars ($250).

08. **Annual Renewal Fee for Certification of Prescriptive Authority.** Annual renewal fee – two hundred fifty dollars ($250).

09. **Original Application Fee For Certification of Prescriptive Authority by Endorsement.** Original application fee for certification of prescriptive authority by endorsement – two hundred fifty dollars ($250).

10. **Service Extender Application Fee.** Application fee - one hundred dollars ($100). (3-19-07)

11. **Service Extender Annual Renewal Fee.** Annual renewal fee - one hundred dollars ($100). (3-19-07)

12. **Examination and Reexamination Fee.** Examination and reexamination fees are those charged by the national examining entity plus a processing fee of twenty-five dollars ($25). (5-3-03)

13. **Examination and Reexamination in Addition to Application Fee.** The examination or reexamination fee are in addition to the application fee and must accompany the application. (3-19-07)

14. **Reinstatement Fee.** Reinstatement fee is as provided in Section 67-2614, Idaho Code. (3-24-16)

15. **Fees are Non-Refundable.** All fees are non-refundable. (3-29-10)

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201. **EXAMINATION FOR PROVISIONAL CERTIFICATION OF PRESCRIPTIVE AUTHORITY (RULE 201).**

The approved examination for provisional certification of prescriptive authority shall be the Psychopharmacology Examination for Psychologists (PEP).

01. **Passing Score.** A passing score will be determined by the Association of State and Provincial Psychology Boards (ASPPB).

02. **Date of Exam.** The passage of the exam may have occurred prior to the effective date of these rules.

03. **Time and Place of Exam.** The examination will be conducted at a time and place specified by the administrator of the PEP.

204. -- 249. (RESERVED)

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(BREAK IN CONTINUITY OF SECTIONS)
251. ENDORSEMENT FOR CERTIFICATION OF PRESCRIPTIVE AUTHORITY (RULE 251).
The Board may grant a provisional certification or certification of prescriptive authority by endorsement to an applicant who completes an application as set forth in Section 100 of these rules, pays the required fee, and meets the following requirements:

01. **Holds a Current License.** The applicant must be the holder of a current and unrestricted license to practice psychology in another state and in Idaho:

02. **Holds a Current Certificate of Prescriptive Authority.**
   a. The applicant must be the holder of a current and unrestricted certification of prescriptive authority from another state; or
   b. The applicant must have training from the United States department of defense demonstration project or other similar program developed and operated by any branch of the armed forces that imposes substantially equivalent educational and training requirements as those contained in Sections 54-2317 and 54-2318, Idaho Code, and these rules.

03. **Credit Toward Requirements.** In the event that an applicant has not met the requirements for certification of prescriptive authority, the Board may consider an applicant’s experience in prescribing in another state as meeting a portion of the requirements necessary to qualify for provisional certification or certification of prescriptive authority in this state. In that event, the Board may require additional education, supervision, or both to satisfy the requirements to obtain a provisional certification or certification of prescriptive authority in this state.

04. **Advisory Panel.** The Advisory Panel, as established in Section 54-2320, Idaho Code, will review the education and training of an applicant seeking certification by endorsement and advise the Board as to its sufficiency to meet the requirements for provisional certification or certification of prescriptive authority under Chapter 23, Title 54, Idaho Code, and these rules.

(BREAK IN CONTINUITY OF SECTIONS)

401. CONTINUING EDUCATION REQUIREMENTS FOR RELICENSURE IN PSYCHOLOGY (RULE 401).

01. **Number of Hours Required.** All licensed psychologists, in order to renew their license, must have accumulated twenty (20) hours per year of continuing education credits. All prescribing psychologists, in order to renew their provisional certification or certification of prescriptive authority, must have accumulated twenty (20) hours per year of continuing education credits in psychopharmacology or psychopharmacotherapy offered in accordance with Subsection 402.01 of these rules. Continuing education credits for a prescribing psychologist are in addition to the continuing education credits required to renew their psychologist license. At the time of renewal of the psychologists’ licenses and prescribing psychologists’ certifications, they will certify that they are aware of the requirements for continuing education and that they have met those requirements for the preceding year. At the time of reinstatement of a psychologist’s license or a prescribing psychologist’s provisional certification or certification, they shall provide proof that they have met of meeting the requirements for continuing education for the preceding year. A minimum of four (4) hours credit in ethics, standards of care, and/or review of laws pertaining to the practice of psychology is required every three (3) years. Areas covered may include practice, consultation, research, teaching, and/or supervision. These units may be used as part of the continuing education credit required.

02. **Professional Level of Continuing Education -- Time Period Records Kept - Audit.** This continuing education experience must be at an appropriate level for professional training in psychology. The
licensees have responsibility for demonstrating the relevance and adequacy of the educational experience they select. The licensees are also responsible for keeping an accurate record of their own personal continuing education hours for a period of five (5) years. A random audit may be conducted to insure compliance. (7-1-93)

03. Newly Licensed Individuals. Newly licensed individuals will be considered to have satisfied the continuing education requirements for the remainder of the year in which their license is granted. (7-1-93)

04. Certificates of Satisfactory Attendance and Completion. Certificates of satisfactory attendance and completion, cancelled checks, participant lists, transcripts from universities, letters of certification on instructor’s letterhead, and other reasonably convincing proof of the submitted activities may serve as documentation when persons audited are required to submit proof of continuing education. (7-1-93)

05. Licensees Who Do Not Fulfill the Continuing Education Requirements. Licensees who do not fulfill the continuing education requirements may be subject to disciplinary action. (7-1-93)

06. Carryover of Continuing Education Hours. Continuing education courses not claimed for CE credit in the current renewal year, may be credited for the next renewal year. A maximum of twenty (20) hours may be carried forward from the immediately preceding year. (5-3-03)

07. Special Exemption. The Board has the authority to make exceptions for reasons of individual hardship including health, when certified by a medical doctor, or other good cause. The licensee must provide any information requested by the Board to assist in substantiating hardship cases. This exemption is granted at the sole discretion of the Board. Request for special exemption must be made prior to licensure renewal. (3-29-10)

402. GUIDELINES FOR APPROVAL OF CONTINUING EDUCATION CREDITS (RULE 402).

01. Continuing Education Credit. Continuing education credit will be given to formally organized workshops or classes with an attendance roster and preassigned continuing education credit offered in association with or under the auspices of:

a. Regionally accredited institutions of higher education. (7-1-93)

b. The American Psychological Association. (7-1-93)

c. A Regional Psychological Association. (7-1-93)

d. A State Psychological Association. (7-1-93)

e. For prescribing psychologists, in addition to the approved organizations above, workshops or classes may be offered in association with or under the auspices of:

   i. The American Medical Association; (____)

   ii. A regional medical association; (____)

   iii. A state medical association; or (____)

   iv. Offered by sponsors accredited by the Accreditation Council for Continuing Medical Education (ACCME). (____)

e. Credit will be given for the number of credit hours preauthorized by the sponsoring agency with no upper limit on the number of hours. (7-1-93)

02. Credit for International, National and Regional Meetings of Psychological Organizations. Six (6) hours of continuing education credit will be allowed for documented attendance at international, national and regional meetings of psychological organizations. (7-1-93)
03. Credit for Other Relevant Workshops, Classes or Training Experiences. Other relevant workshops, classes or training experiences when not offered, approved, or provided by an entity in Subsection 402.01, may receive up to six (6) hours of credit per experience provided they are conducted by a licensed or reputable psychologist or other mental health professional. Each documented hour of training experience counts as one (1) hour of continuing education experience. (4-4-13)

04. Presentation of Papers. Presentation of papers at international, national, regional or state psychological or other professional associations may be counted as equivalent to six (6) hours per event. Only actual presentation time may be counted; preparation time does not qualify for credit. The licensee must provide the Board with a letter from a sponsor, host organization, or professional colleague, copy of the program, and a summary of the evaluations from the event. (3-29-10)

05. Self-Study, Lectures or Public or Professional Publications and Presentations. The Board also recognizes the value of self-study, lectures or public or professional publications and presentations (including for example, in the case of the university faculty, preparation of a new course). Therefore, the Board will allow credit for six (6) hours of individual study per year. (7-1-93)

a. Self-Study. The reading of a publication may qualify for credit with proper documentation verifying completion. A licensee seeking credit for reading a publication must submit results from a test on the information contained within the publication. If a test is not available, the licensee must seek pre-approval of the Board. (3-29-10)

b. Professional publications. Publication activities are limited to articles in professional journals, a chapter in an edited book, or a published book. The licensee must provide the Board with a copy of the cover page of the article or book in which the licensee has been published. For chapters of an edited book, licensees must submit a copy of the table of contents. (3-29-10)

06. Board Assessment of Continuing Education Activities. The Board of Psychologist Examiners may avail itself of help and consultation from the American Psychological Association or the Idaho Psychological Association in assessing the appropriateness of continuing education activities. (3-29-10)

07. On-Line Education. A maximum of ten (10) on-line continuing education hours relevant to the practice of psychology may be counted during each reporting period. (3-29-10)

a. Continuing education credit will be given to on-line education offered in association with or under the auspices of the organizations listed in Subsections 402.01.a. through 402.01.d. of these rules. (3-29-17)

b. The licensee must provide the Board with a copy of the certification, verified by the authorized signatures from the course instructors, providers, or sponsoring institution, substantiating any hours completed by the licensee. (3-29-10)

08. Teleconferences. To qualify for credit, teleconferences must feature an interactive format. Interactive conferences are those that provide the opportunity for participants to communicate directly with the instructor or that have a facilitator present at the conference site. The licensee must provide the Board with a copy of the certificate, or a letter signed by course instructors, providers, or sponsoring institution, substantiating any hours attended by licensee. (4-4-13)

a. When offered, approved, or provided by entities in Subsection 402.01, the number of hours that may be counted during each reporting period is not limited. (4-4-13)

b. When not offered, approved, or provided by an entity in Subsection 402.01, a maximum of six (6) hours may be counted during each reporting period. (4-4-13)

(BREAK IN CONTINUITY OF SECTIONS)
QUALIFICATIONS FOR PROVISIONAL CERTIFICATION OF PRESCRIPTIVE AUTHORITY (RULE 700).

The Board may grant a provisional certification of prescriptive authority to an applicant who holds a current license to practice psychology in Idaho, who completes an application as set forth in Section 100 of these rules, pays the required fee, and who meets the following educational and training qualifications.

01. Doctoral Degree. The applicant must have been awarded a doctoral degree in psychology from an institution of higher education that meets the requirements in Section 54-2317(2), Idaho Code.

02. Master’s Degree. The applicant must have been awarded a master’s degree in clinical psychopharmacology from an accredited program that meets the requirements in Section 54-2317(3), Idaho Code.

03. Clinical Experience. An applicant must have successfully completed clinical experience as part of the master’s clinical psychopharmacology program that includes a diverse population of patients.

   a. Clinical experience must include a minimum of four hundred (400) hours consisting of direct patient contact and collaboration with licensed medical providers involving a minimum of one hundred (100) separate patients.

   b. A diverse population of patients includes diversity in:

      i. Gender;

      ii. Different ages throughout the life cycle, including adults, children/adolescents, and geriatrics, as possible and appropriate;

      iii. Range of disorders listed in the most recent diagnostic and statistical manual of mental disorders published by the American psychiatric association and acute and chronic disorders;

      iv. Ethnicity;

      v. Socio-cultural background; and

      vi. In-patient and out-patient settings, as possible and appropriate.

04. Examination. An applicant must successfully pass the national examination in psychopharmacology, as approved by the Board under Section 201 of these rules.

05. Supervision Agreement. An applicant must submit to the Board a supervision agreement that identifies the supervising physician(s) who will directly supervise the applicant’s prescribing under a provisional certification of prescriptive authority. The documentation submitted to the Board must also identify:

   a. For each supervising physician, the supervisor’s name, address, license number, state in which granted, licensure status, length of licensure, and area of specialization;

   b. For each supervising physician, documentation of the physician’s board-certification as a psychiatrist or neurologist or of specialized training and experience in the management of psychotropic medication;

   c. For an applicant seeking to prescribe for pediatric or geriatric patients, the supervising physician(s)’ specialized training and experience in treating the patient population for which the applicant seeks to prescribe;

   d. Designate a primary supervising physician when more than one (1) supervising physician is identified. The primary supervising physician will be responsible for coordinating between the other supervising
physician(s) to obtain written progress reports at least every six (6) months concerning how the provisional prescribing psychologist is performing in the domains for supervision.

c. The types of cases for which each supervisor will be responsible for supervising and in which the supervisor has specialized training and experience.

d. The number of provisional certification holders supervised by each supervising physician. A supervising physician may not concurrently supervise more than three (3) provisional certification holders unless otherwise approved by the Board; and

e. The name and nature of setting in which the applicant will practice;

f. Prior to a change in supervisors or a change in the supervision agreement, the supervisee must notify the Board and the change must be approved by the Board, or a designated member of the Board, prior to the commencement of supervision by a new supervisor or implementation of the change.

### 701. SUPERVISED PRACTICE OF PROVISIONAL CERTIFICATION HOLDER (RULE 701)

A holder of a provisional certification of prescriptive authority may only prescribe under the supervision of physician(s) approved by the Board. Prior to application for a certification of prescriptive authority, a provisional certification holder must complete two (2) years of satisfactory prescribing, which includes:

<table>
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<tr>
<th>01. Hours of Supervision</th>
<th>A minimum of two thousand (2,000) hours acquired in not less than twenty-four (24) months and not more than forty-eight (48) months.</th>
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<tr>
<td>a.</td>
<td>The two thousand (2,000) hours may consist of direct patient contact, supervision, case consultations, and collaboration with licensed health care providers for the purpose of evaluation and treatment of patients with medication(s) within the formulary set forth in Section 730 of these rules.</td>
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<td>b. Supervised practice time during which the supervisor(s) deem(s) a supervisee’s performance to have been unsatisfactory shall not be credited towards the required supervised practice hours. A supervisor who believes the supervisee’s practice is unsatisfactory must notify the supervisee and the primary supervisor as soon as possible and identify the basis for such conclusion including, but not limited to, specific domains or issues needing remediation.</td>
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| 02. Number of Patients | A minimum of fifty (50) separate patients who are seen for the purpose of evaluation and treatment with those medications that are within the formulary established in Section 730 of these rules. |

| 03. Amount of Supervisory Contact | Supervision on a one-to-one basis for a minimum of four (4) hours each month and a minimum of a total of forty-six (46) hours each year. One-to-one supervision must be provided either face-to-face, telephonically, or by live video communication. |

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<tr>
<th>04. Domains for Supervision</th>
<th>Supervision must include assessment of the provisional certification holder with regard to each of the following domains:</th>
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<tbody>
<tr>
<td>a. Basic science;</td>
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<td>b. Neurosciences;</td>
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<tr>
<td>c. Physical assessments and laboratory exams;</td>
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<td>d. Clinical medicine and pathophysiology;</td>
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<tr>
<td>e. Clinical and research pharmacology and psychopharmacology;</td>
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<td>f. Clinical pharmacotherapeutics;</td>
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702. QUALIFICATIONS TO PRESCRIBE FOR PEDIATRIC OR GERIATRIC PATIENTS (RULE 702).

A prescribing psychologist may not prescribe for pediatric or geriatric patients unless approved by the Board. The Board may grant prescriptive authority for pediatric patients or geriatric patients to an applicant for certification of prescriptive authority who has completed one (1) year of satisfactory prescribing, as attested to by the supervising physician, for the patient population for which the prescribing psychologist seeks to prescribe.

01. Credit Toward Certification. The one (1) year of satisfactory prescribing for a pediatric or geriatric population may be counted as one (1) year of the two (2) years of satisfactory prescribing required to qualify for a certification of prescriptive authority.

02. Hours of Supervision. One (1) year of satisfactory prescribing includes a minimum of one thousand (1,000) hours acquired in not less than twelve (12) months and not more than twenty-four (24) months.

a. The one thousand (1,000) hours may consist of direct patient contact, supervision, case consultations, and collaboration with licensed medical providers for the purpose of evaluation and treatment of patients with medication(s) within the formulary set forth in Section 730 of these rules. A minimum of eight hundred (800) hours of the one thousand (1,000) hours must be directly related to the population for which the prescribing psychologist seeks to prescribe.

b. Supervised practice time during which the supervisor(s) deem(s) a supervisee’s performance to have been unsatisfactory shall not be credited towards the required supervised practice hours. A supervisor who believes the supervisee’s practice is unsatisfactory must notify the supervisee and the primary supervisor as soon as possible and identify the basis for such conclusion including, but not limited to, specific domains or issues needing remediation.

02. Number of Patients. One (1) year of satisfactory prescribing includes a minimum of twenty-five (25) separate patients in the population for which the prescribing psychologist seeks to prescribe and who are seen for the purpose of evaluation and treatment with those medications that are within the formulary established in Section 730 of these rules. For a prescribing psychologist who seeks to prescribe for pediatric patients, a minimum of ten (10) separate patients must be twelve (12) years of age or younger and a minimum of ten (10) separate patients must be between thirteen (13) years of age and seventeen (17) years of age.

03. Amount of Supervisory Contact. Supervision shall be provided in accordance with Subsection 701.03 of these rules, and under a supervision agreement approved by the Board in accordance with Subsection 700.05 of these rules.

04. Domains for Supervision. Supervision must include assessment in each of the domains set forth in Subsection 701.04 of these rules.

703. -- 709. (RESERVED)

710. QUALIFICATIONS FOR CERTIFICATION OF PRESCRIPTIVE AUTHORITY (RULE 710).

The Board may grant a certification of prescriptive authority to an applicant who completes an application as set forth in Section 100 of these rules and who meets the following educational and training qualifications.

01. Holds a License to Practice Psychology. The applicant must hold a current license to practice psychology issued by the Board.

02. Holds Provisional Certification. The applicant must hold a provisional certification of prescriptive authority issued by the Board.

03. Supervision. The applicant must have successfully completed at least two (2) years of satisfactory
prescribing under supervision that meets the requirements of Section 701 of these rules, as attested to by the supervising physician(s).

711. -- 719.  (RESERVED)

720.  STANDARDS OF PRACTICE FOR PRESCRIPTIVE AUTHORITY (RULE 720).
A prescribing psychologist who issues a prescription for medication to a patient must collaborate with the patient’s licensed medical provider and follow standards of practice as set forth in these rules.

01.  Licensed Medical Provider. A prescribing psychologist may only prescribe medication to a patient who has a licensed medical provider. If a patient does not have a licensed medical provider, the prescribing psychologist must refer the patient to a licensed medical provider prior to prescribing medication.

a.  In the event a patient terminates the relationship with the patient’s licensed medical provider, with whom the prescribing psychologist has established a collaborative relationship, and the patient declines to secure a new licensed medical provider, the prescribing psychologist must advise the patient that the prescribing psychologist cannot continue to psychopharmacologically manage the patient.

b.  The prescribing psychologist shall document that the psychologist has made every reasonable effort to encourage the patient to maintain or establish a relationship with a licensed medical provider.

c.  In those cases, in which an abrupt discontinuation of a psychopharmacologic medication could represent a health risk or result in adverse effects, the prescribing psychologist, with concurrence from the previously established licensed medical provider, may prescribe the medication in a manner that is customarily recognized as a discontinuation regimen until the medication has been completely discontinued. The prescribing psychologist must document the discontinuation regimen in the patient’s medical records.

02.  Release of Information. A prescribing psychologist must obtain a release of information from the patient or the patient’s legal guardian authorizing the psychologist to contact the patient’s licensed medical provider. If the patient or the patient’s legal guardian refuses to sign a release of information for the patient’s licensed medical provider, the prescribing psychologist must inform the patient or the patient’s legal guardian that the psychologist cannot treat the patient pharmacologically without an ongoing collaborative relationship with the patient’s licensed medical provider. The psychologist must refer the patient to another mental health care provider who is not required to maintain an ongoing collaborative relationship with a licensed medical provider.

03.  Initial Collaboration with Licensed Medical Provider. Prior to prescribing medication, a prescribing psychologist must contact the patient’s licensed medical provider as provided in these rules and receive the results of the licensed medical provider’s assessment.

a.  The prescribing psychologist must inform the licensed medical provider of:

i.  The medication(s) the prescribing psychologist intends to prescribe for mental, nervous, emotional, behavioral, substance abuse, cognitive disorders; and

ii.  Any laboratory tests that the prescribing psychologist ordered or reviewed.

b.  The prescribing psychologist must discuss with the licensed medical provider the relevant indications and contraindications to the patient of prescribing the medication(s) that the prescribing psychologist intends to prescribe.

c.  The prescribing psychologist shall document the date and time of contacts with the licensed medical provider, a summary of what was discussed, and the outcome of the discussions or decisions reached.

04.  Ongoing Collaboration with Licensed Medical Provider. After the initial collaborative relationship with the patient’s licensed medical provider is established, the prescribing psychologist must maintain and document the collaborative relationship to ensure that relevant information is exchanged accurately and in a timely manner. At a minimum the prescribing psychologist must:
a. Contact the licensed medical provider for any changes in medication not previously discussed with the licensed medical provider.

b. Contact the licensed medical provider if and when the patient experiences adverse effects from medications prescribed by the psychologist that may be related to the patient’s medical condition for which he or she is being treated by a health care practitioner.

c. Contact the licensed medical provider regarding results of laboratory tests related to the medical care of the patient that have been ordered by the psychologist in conjunction with psychopharmacological treatment.

d. Inform the licensed medical provider as soon as possible of any change in the patient’s psychological condition that may affect the medical treatment being provided by the licensed medical provider.

e. Request that as part of the collaborative relationship, the licensed medical provider inform the prescribing psychologist of any new medical diagnosis or changes in the patient’s medical condition that may affect the treatment being provided by the prescribing psychologist.

f. Request that as part of the collaborative relationship, the licensed medical provider inform the prescribing psychologist of any psychotropic medications prescribed or discontinued by the licensed medical provider or other licensed medical provider, of which the licensed medical provider is aware, the dates of any subsequent changes in psychotropic medications prescribed by the licensed medical provider or other licensed medical provider, of which the licensed medical provider is aware, and the efforts to coordinate the mental health care of the patient as soon as possible.

05. Disagreement between Prescribing Psychologist and Licensed Medical Provider. If the licensed medical provider and the prescribing psychologist do not agree about a particular psychopharmacological treatment strategy, the prescribing psychologist must document the reasons for recommending the psychopharmacological treatment strategy that is in disagreement and must inform the licensed medical provider of that recommendation. If the licensed medical provider believes the medication is contraindicated because of a patient’s medical condition, the prescribing psychologist shall defer to the judgment of the licensed medical provider and may not prescribe that psychopharmacological treatment strategy.

06. Prohibited Agreements with Licensed Medical Providers. A prescribing psychologist is prohibited from employing a licensed medical provider or entering into an independent contractor or similar contractual or financial relationship with a licensed medical provider with whom the prescribing psychologist collaborates, unless approved by the Board. The Board may grant an exception to this requirement on a case-by-case basis where the prescribing psychologist shows that such relationship is structured so as to prohibit interference with the licensed medical provider’s relationship with patients, the licensed medical provider’s exercise of independent medical judgment, and satisfaction of the obligations and responsibilities in Chapter 23, Title 57, Idaho Code, and these rules.

07. Prescriptions. All prescriptions issued by a prescribing psychologist shall comply with all applicable federal and state laws, rules and regulations and these rules.

08. Emergencies. If a prescribing psychologist determines that an emergency exists that may jeopardize the health or well being of the patient, the prescribing psychologist may, without prior consultation with the patient’s licensed medical provider, prescribe psychotropic medications or modify an existing prescription for psychotropic medication previously written for that patient by that prescribing psychologist. The prescribing psychologist shall consult with the licensed medical provider as soon as possible. The prescribing psychologist must document in the patient’s psychological evaluation/treatment records the nature and extent of the emergency and the efforts made to contact the licensed medical provider prior to prescribing or other reason why contact could not be made.

09. Disaster Areas. If a prescribing psychologist is working in a declared emergency/disaster area, the
on-site medical staff can serve as the evaluating licensed medical provider.

721. -- 729. (RESERVED)

730. FORMULARY (RULE 730). A prescribing psychologist may prescribe medications and controlled substances that are recognized in or customarily used in the diagnosis, treatment and management of individuals with mental, nervous, emotional, behavioral, substance abuse and cognitive disorders and that are relevant to the practice of psychology or other procedures directly related thereto under the following limitations.

01. Prohibited Medications and Controlled Substances. A prescribing psychologist may not prescribe:

a. Any medication or controlled substance designated or included as a Schedule I controlled substance; or

b. Any opioid.

02. Disorders and Conditions. A prescribing psychologist may not prescribe medication to treat a primary endocrine, cardiovascular, orthopedic, neurologic, gynecologic, obstetric, metabolic, hematologic, respiratory, renal, gastrointestinal, hepatic, dermatologic, oncologic, infectious, ophthalmologic, or rheumatologic illness or disorder. The provisions of this rule do not prohibit a prescribing psychologist from prescribing to treat a mental, nervous, emotional, behavioral, substance abuse or cognitive disorder that arises secondary to a primary physical illness, provided that the primary illness is being treated and the prescribing psychologist collaborates with the patient’s licensed medical provider, as provided in these rules.

65731. -- 999. (RESERVED)
PROPOSED RULE COST/BENEFIT ANALYSIS

Section 67-5223(3), Idaho Code, requires the preparation of an economic impact statement for all proposed rules imposing or increasing fees or charges. This cost/benefit analysis, which must be filed with the proposed rule, must include the reasonably estimated costs to the agency to implement the rule and the reasonably estimated costs to be borne by citizens, or the private sector, or both.

Department or Agency: Idaho State Board of Psychologist Examiners

Agency Contact: Tana Cory, Bureau Chief Phone: (208) 334-3233

Date: August 30, 2018

IDAPA, Chapter and Title Number and Chapter Name:

24.12.01 – Rules of the Idaho State Board of Psychologist Examiners

Fee Rule Status: _X_ Proposed ___ Temporary

Rulemaking Docket Number: 24-1201-1802

STATEMENT OF ECONOMIC IMPACT:

The 2017 Legislature passed House Bill 212, which granted prescriptive authority to licensed psychologists who meet certain educational, examination, and experience requirements. The fee rule implements House Bill 212 and establishes application, certification, and renewal fees for the provisional certification of prescriptive authority and the certification of prescriptive authority. It is estimated that these fees will offset the additional costs to the board for administering this certification program.