New Mexico Board of Nursing
Written Public Comments Received for the 21 November 2019
Public Hearing of Proposed Rulemaking

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<th>Date Received</th>
<th>Submitted by</th>
<th>Comment</th>
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<tr>
<td>11/09/19 at 01:42 p.m.</td>
<td>Jo Velasquez, PhD, MSCP, BCN</td>
<td>Emailed letter received</td>
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<tr>
<td>11/09/19 at 06:27 p.m.:</td>
<td>Randolph Roundtree, MD, PsyD, MSCP</td>
<td>Email received</td>
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<tr>
<td>11/11/19 at 08:13 a.m.</td>
<td>Doris Nevin, PhD, MSCP</td>
<td>Emailed letter received</td>
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<tr>
<td>11/15/19 at 12:57 p.m.</td>
<td>L. Billington, PhD</td>
<td>Emailed letter received</td>
</tr>
<tr>
<td>11/15/19 at 6:12 p.m.</td>
<td>Thomas Thompson, PhD, MP, ABN, ABMP</td>
<td>Email received after close of written comment period</td>
</tr>
</tbody>
</table>
Dear Board Members,

Please find attached letter regarding public comments pursuant to the amendment to the Nursing Practice Act, 61-3-23.5 NMSA 1978.

Kind Regards,

Jo Velasquez, Ph.D., MSCP, BCN
New Mexico Licensed Clinical and Prescribing Psychologist
Nevada Licensed Psychologist
iNetMed Rx
Chief Operating Officer

1505 S. Don Roser Drive, Ste A
Las Cruces, NM 88011
Phone: 575.636.2506
Fax: 575.288.2691
email: drjo@nextgenpsyche.com

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November 9, 2019

New Mexico Board of Nursing  
ATTN: NMBON Public Comments  
6301 Indian School Road, NE, Suite 710  
Albuquerque, NM 87110  
Phone: 505-841-9094  
BON.Legal@state.nm.us

Re: Proposed amendment to the Nursing Act  
61-3-23.5 NMSA 1978

Dear Members of the Board:

After reviewing the proposed changes and the underlying legislature mandating the amendment to the Nursing Act cited above, I am writing with concern. The present law was enacted on an emergency basis due to the critical need for public health and safety. It noted the need to provide greater access to qualified mental health care for the public within New Mexico. This need is critical for public welfare.

In regard to the supervision of a psychologist in the prescribing of medication, the law states “a nurse practitioner or clinical nurse specialist may supervise...”. Conversely, the proposed language of the above cited amendment limits those advanced practice registered nurses (APRNs) able to supervise to Psychiatric Nurse Practitioners and Psychiatric Clinical Nurse Specialists.
It is duly noted that the supervision that APRNs have been authorized by law to supervise occurs only during the time the psychologists are already licensed as Conditional Prescribing Psychologists. Prior to receiving this license, the psychologist has already completed a doctorate in psychology, a post-doctoral master’s degree or equivalent in clinical psychopharmacology, 80 hours of supervised physical assessment by a medical doctor and at least 6 months of providing supervised care including psychiatric medication treatment planning with a physician. As such, the Conditional Prescribing Psychologist is already well trained in the prescribing of psychotropic medications.

Limiting the APRNs able to supervise the Conditional Prescribing Psychologists does not match the scope of practice as outlined in the new law. As I have been informed, the nursing regulatory changes are to match the law. In its present proposed language, by limiting the language of the nursing regulations that were directed by the law, it does not meet the intent of the law. It also fails to address the emergency act and has great potential to continue to limit access to healthcare for our New Mexico citizens. I ask that the proposed amendment be changed to reflect access to nursing supervisors who are Nurse Practitioners and Clinical Nurse Specialists, without the limitation of “Psychiatric”.

Thank you for consideration of this request to aid public safety.

Very truly yours,

Jo Velasquez, PhD, MSCP, BCN
Dr. Randolph Philip Rountree, MD, Psy.D., MSCP

1505 S. Don Roser Drive, Ste A

Las Cruces, NM 88011

November 11, 2019

New Mexico Board of Nursing
ATTN: NMBON Public Comments
6301 Indian School Road, NE, Suite 710
Albuquerque, NM 87110

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61-3-23.5 NMSA 1978

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Thank you for consideration of this request to aid public safety.

Very truly yours,

Randolph Philip Rountree, MD, PsyD, MSCP
Dear Madam or Sir,

Please see attached letter and add it to the Public Comments for the NMBON proposed amendment to the Nursing Act as it pertains to the supervision of Conditional Prescribing Psychologists.

Thank you,

Doris E. Nevin, PhD, MSCP
2533 Candlewood Circle
Las Cruces, NM 88011
7 November 2019

New Mexico Board of Nursing
ATTN: NMBON Public Comments
6301 Indian School Road, NE, Suite 710
Albuquerque, NM 87110

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nursing supervisors who are Nurse Practitioners and Clinical Nurse Specialists, without the limitation of "Psychiatric".

Thank you for consideration of this request to aid public safety.

Very truly yours,

Doris E. Nevin, Ph.D., M.S.C.P.
Licensed Psychologist, Licensed Conditional Prescribing Psychologist – New Mexico
November 15, 2019

Lia Billington, PhD
Christus St. Vincent Family Medicine
Prescribing Psychologist $0027
2025 S. Galisteo St.
Santa Fe, NM 87505

New Mexico Board of Nursing
ATTN: NMBON Public Comments
6301 Indian School Road, NE, Suite 710
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Your Board is receiving similar letters from some concerned practitioners that are carbon copy of the material below, but I wish to add more personal comments about the role of Advance Practice Registered Nurses in numerous Family Medicine Practices throughout New Mexico and their experience in both prescribing psychotropic medications and consulting with prescribing psychologists. In the ten years I have been licensed in my discipline, I have worked closely with APRNs in large Family Medicine Clinics in Las Cruces
and Santa Fe. Primary Care APRNs are in the front line of effective medical care. We know from numerous studies that between 70-80% of all psychotropic medications are prescribed by Primary Care Providers. As such, APRNs are well experienced to supervise Conditional Prescribing Psychologists, none of which by definition would be practicing in settings such as psychiatric hospitals which might require significantly higher levels of care and expertise (this is because prescribing psychologist by law must be in collaboration with the patient’s primary care provider, who is typically not networked easily into such settings). In my current large clinic of about 10 primary care providers, I work closely with 2 APRNs, whose knowledge base is respectable in psychiatry even though they are not Psychiatric Nurse Practitioners. One of these individuals even does her own genetic testing for P450 enzymes which metabolize psychotropic medications. Both these individuals would be fully capable of providing the oversight necessary to ensure both patient safety and professional development of the Conditional Prescribing Psychologist.

While working in a similar setting in Las Cruces, I worked closely with a APRN who actually provided much of the training for young MD Family Medicine Residents re behavioral health and psychotropic medications.

I agree that the urgency of lack of providers in psychiatry has in general put New Mexicans at risk with higher levels of untreated mental illness, and it was the intention of the Legislature to put more “boots on the ground” for NM citizens by helping prescribing psychologist candidates move from Conditional to Unrestricted by increasing the availability of the medical supervision. Please do not restrict knowledgeable, practicing APRNs from supervising these candidates just because they do not have a psychiatric specialty per se.

It is duly noted that the supervision that APRNs have been authorized by law to supervise occurs only during the time the psychologists are already licensed as Conditional Prescribing Psychologists. Prior to receiving this license, the psychologist has already completed a doctorate in psychology, a post-doctoral masters degree or equivalent in clinical psychopharmacology, 80 hours of supervised physical assessment by a medical doctor and at least 6 months of providing supervised care including psychiatric medication treatment planning with a physician. As such, the Conditional Prescribing Psychologist is already well trained in the prescribing of psychotropic medications.

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Very truly yours,

Lia Billington, PhD, MA, ABMP
Medical Psychologist, Faculty
Northern New Mexico Family Medicine Residency
Christus St. Vincent Medical Center, Santa Fe NM
Affiliate Faculty, New Mexico State University
November 15, 2019

Lia Billington, PhD
Christus St. Vincent Family Medicine
Prescribing Psychologist S0027
2025 S. Galisteo St.
Santa Fe, NM 87505

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Thank you for consideration of this request.

Sincerely,

Lia Billington, PhD, MA, ABMP
Medical Psychologist, Faculty
Northern New Mexico Family Medicine Residency
Christus St. Vincent Medical Center, Santa Fe NM
Affiliate Faculty, New Mexico State University
November 15, 2019

Thomas C. Thompson, PhD, MP, ABN, ABMP
Medical Psychology and Neuropsychology-Prescribing
Diplomate American Board of Professional Neuropsychology
Diplomate American Board of Medical Psychology
943 N. Alameda
Las Cruces, NM 88005

New Mexico Board of Nursing
ATTN: NMBON Public Comments
6301 Indian School Road, NE, Suite 710
Albuquerque, NM 87110

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In terms of the supervision of a psychologist in the prescribing of medication, the law states “a nurse practitioner or clinical nurse specialist may supervise…”. Conversely, the proposed language of the above cited amendment limits those advanced practice registered nurses (APRNs) able to supervise to Psychiatric Nurse Practitioners and Psychiatric Clinical Nurse Specialists.

In my experience, in Southern New Mexico, APRNs are experienced and more than able to supervise Conditional Prescribing Psychologists in the various outpatient clinics and practices where Conditional Prescribing Psychologists are training. All of the APRN that I have had the opportunity to work with in an integrated behavioral health setting and outpatients mental health (FQHC) were in my opinion completely capable of providing the supervision/oversight needed to provide for both patient safety and professional development of the Conditional Prescribing Psychologist.
As you well know, the lack of providers in psychiatry has in general put New Mexicans at risk with higher levels of untreated mental illness, and it was the intention of the Legislature to put more “boots on the ground” for NM citizens by helping prescribing psychologist candidate move from Conditional to Unrestricted by increasing the availability of the medical supervision. Please do not restrict knowledgeable, practicing APRNs from supervising these candidates just because they do not have a psychiatric specialty per se.

As you already know APRNs have been authorized by law to supervise psychologists who are already licensed as Conditional Prescribing Psychologists. I am a member of the New Mexico Board of Psychologist Examiners (NM BOPE) Prescriptive Authority (RxP) Application Committee. In that position I have been involved in the review of application for Psychologists Conditional and Unrestricted Prescriptive Licensing. Prior to Psychologists Conditional Application approval, they have already completed the following:

1. Doctorate in psychology with pre and postdoctoral internships.
2. Post-doctoral masters degree or equivalent in clinical psychopharmacology from an approved program.
3. 80 hours of supervised physical assessment by a medical doctor.
4. A minimum 400 hours and 100 patient supervised care including psychiatric medication treatment planning with a physician.

I also sit on the Psychopharmacology Program Advisory Board Member, New Mexico State University, Department Counseling and Educational Psychology, Postdoctoral M.S. in Clinical Psychopharmacology (MSCS) Degree. As such I can assure you the Conditional Prescribing Psychologist is already well trained in the prescribing of psychotropic medications.

In my opinion the limiting of APRNs able to supervise the Conditional Prescribing Psychologists does not match the scope of practice as outlined in the new law. In my position with the New Mexico Board of Psychologist Examiners (NM BOPE) Prescriptive Authority (RxP) Application Committee it my understanding that the nursing regulatory changes were to match the law.

The currently proposed language limits the language of the nursing regulations that were directed by the law, i.e., not meeting the intent of the law. It also does not meet the need to address the emergency act. As such this would have great potential to continue to limit access to healthcare for our New Mexico citizens. As we all know the citizens of New Mexico have been and continue to be significantly underserved in terms of their access to mental health care. I ask that the proposed amendment be changed to reflect access to nursing supervisors who are Nurse Practitioners and Clinical Nurse Specialists, without the limitation of “Psychiatric”.

Thank you for consideration of this request.
Respectfully,

Thomas C Thompson, PhD, MP, ABN, ABMP
Medical Psychology and Neuropsychology-Prescribing
Diplomate American Board of Professional Neuropsychology
Diplomate American Board of Medical Psychology