

## **Todd Finnerty, Psy.D. 2014 APA Presidential Election Ballot Statement DRAFTv2**

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### **1000 word statement:**

Do all psychologists agree with APA's recent actions? I don't. In fact, there are now 21,671 fewer APA members than there were just 5 years ago. To add perspective, we've lost almost as many members as the total number who chose to pay the practice assessment in 2013 (25,215). APA is hemorrhaging members during a time when APS has steadily gained them. APS has also supported a new accreditation system, PCSAS, to compete with APA's accreditation. APA's dramatic loss of members and offensive gestures toward a large percentage of psychologists makes it clear that it's time for meaningful change. I'm known as an advocate for all psychologists and an advocate for common sense. We have an exciting and extraordinary opportunity to take some simple steps to:

- (1) Reverse the dramatic decline in APA membership
- (2) Improve access for the public
- (3) Increase opportunities for a large percentage of psychologists

### **QUICK SUMMARY:**

The three main take-home points you'll see echoed in my responses to APA and the APA Practice Organization (APAPO) are:

- (1) APA's new policies toward psychologists without APA-accredited internships are offensive and unsupported. Psychologists who didn't have APA-accredited internships are still needed in our health care system and shouldn't be excluded from licensure or employment. Those employers who require APA-accredited internships should immediately and unequivocally cease and desist. I'll meet with officials to change these practices.
- (2) Prescription Privileges are not a priority for me or most members. I won't spend your money on it. In my statement to APAPO I expressed my opinion that national funding from APAPO for prescriptive authority lobbying should end. The public has a harder time accessing psychotherapy than accessing a pill. In addition, we shouldn't advance Illinois-style RxP bills or similar legislative requirements for physicians to oversee

psychologists. Supporting this negatively impacts the hard-earned gains we've won as independent professionals.

- (3) We must ensure that the public has access to adequate insurance networks, an adequate number of psychologists and that psychologists receive reimbursement that is consistent with our expertise.

#### ENDING OUR RELIANCE ON DSM-5:

I propose enhancing our partnership with the World Health Organization. Our APA can adapt and publish a free, psychologically-supported version of the ICD for use in the United States. Enhancing this partnership would lead us to no longer need the guidelines in psychiatry's DSM-5.

#### AN ADVOCACY EMERGENCY:

The fact that a large percentage of psychologists are excluded from employment at our largest employer is an urgent advocacy emergency. In the 2014 APPIC internship match 871 future psychologists, 25.2% of those who matched to an APPIC internship, matched to a non-APA internship. From 2008 until now an average of 488 students each year matched through CAPIC to non-APA internships in California. Countless others have also found internships outside either match. These future psychologists face an urgent advocacy emergency.

One argument APAPO makes when we send psychologists to Capitol Hill to advocate for changing Medicare's physician definition is that psychologists should be able to practice to the full extent of their licensure; but what about the licensure of psychologists who didn't have APA-accredited internships? It should be an advocacy emergency that these 1,300 plus future psychologists from this year alone along with a large percentage of licensed psychologists can't even apply to our largest employer. Our scope of practice should be defended too. We should be able to practice to the full extent of our licensure too.

Unfortunately, while a large percentage of psychologists are currently banned from employment with our largest employer, the APA Council of Representatives' (COR) recent policy decisions have actually made it harder on these psychologists. The APA COR recently indicated that an APA-accredited internship should be required for licensure and to meet their standard to be a psychologist. APA has been complicit in an unsupported system that denies psychologists

opportunities to work in some settings and makes it harder for organizations like the VA to recruit. I disagree with APA's new policies. I support a vision of an APA that won't turn its back on its own members and advance unscientific policies which unceremoniously label a large number of competent professionals as substandard. This is also an approach that is in the public's interest. Psychologists who didn't have APA-accredited internships are still needed in our health care system.

#### ACCESS TO CARE:

A representative from the National Register tried to prevent Medicare reimbursement to psychologists who didn't have APA-accredited programs while limiting the number of psychologists who could work in community mental health. The Centers for Medicare and Medicaid Services responded to their proposal stating "*we do not have any data indicating that clinical psychologists graduating from non-accredited programs reduces the level of quality care provided to clients served*" (Federal Register/ vol. 78, no. 209, 10/29/13). CMS is not only not demanding APA-accreditation as some would argue, they are openly stating that they have no data supporting any difference in quality (nor does such data exist).

The VA needs psychologists. It's unfortunate the VA doesn't recruit psychologists who didn't have APA-accredited internships. There are psychologists who've served their country in the military and a Navy "Civilian Psychologist of the Year" who could bring this experience to the VA if they didn't require an APA-accredited internship. The VA should simply require the same qualifications required by Medicare. They should be able to hire any state licensed psychologist.

While some want APA internships required for licensure this could be disastrous for the public's access to psychologists. It's widely reported that Mississippi, the state with the highest poverty rate, is one of the only states requiring an APA-accredited internship for licensure. Unfortunately, APA recently reported that Mississippi has the lowest number of psychologists in the country per capita. It's a shame the many competent psychologists who didn't have APA-accredited internships won't be moving to Mississippi to help improve access to care. While requiring an accredited internship may have been a misguided attempt to provide Mississippians with the "best" care, it's more likely that it contributed to providing the "least" care.