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Q1. What is an interstate compact?

A1. Interstate compacts are powerful, durable, and adaptive tools for ensuring cooperative action among the states. Interstate compacts provide a state-developed structure for collaborative and dynamic action, while building consensus among the states. The nature of an interstate compact makes it the ideal tool to meet the demand for cooperative state action: developing and enforcing stringent standards, while providing an adaptive structure that, under a modern compact framework, can evolve to meet new and increased demands over time.

General purposes for creating an interstate compact include:

- Establish a formal, legal relationship among states to address common problems or promote a common agenda.
- Create independent, multistate governmental authorities (e.g., commissions) that can address issues more effectively than a state agency acting independently, or when no state has the authority to act unilaterally.
- Establish uniform guidelines, standards, or procedures for agencies in the compact's member states.
- Create economies of scale to reduce administrative and other costs.
- Respond to national priorities in consultation or in partnership with the federal government.
- Retain state sovereignty in matters traditionally reserved for the states.
- Settle interstate disputes.

Q2. Must Congress approve an interstate compact?

A2. Article I, Section 10 of the U.S. Constitution provides in part that "no state shall, without the consent of Congress, enter into any agreement or compact with another state." Historically, this clause generally meant all compacts must receive congressional consent. However, the purpose of this provision was not to inhibit the states' ability to act in concert with each other. In fact, by the time the Constitution was drafted, the states were already accustomed to resolving disputes and addressing problems through interstate compacts and agreements. The purpose of the compact clause was simply to protect the pre-eminence of the new national government by preventing the states from infringing

upon federal authority or altering the federal balance of power by compact.

Accordingly, the Supreme Court indicated more than 100 years ago in *Virginia v. Tennessee*, 148 U.S. 503 (1893) that not all compacts require Congressional approval. Today, it is well established that only those compacts that affect a power delegated to the federal government or alter the political balance within the federal system, require the consent of Congress.

Q3. Will my state's constitution permit the creation and/or joining of such a compact?

A3. Compact language is usually drafted with state constitutional requirements common to most state constitutions such as separation of powers, delegation of power, and debt limitations in mind. The validity of the state authority to enter into compacts and potentially delegate authority to an interstate agency has been specifically recognized and unanimously upheld by the U.S. Supreme Court in *West Virginia vs. Sims*, 341 U.S. 22 (1951).

Q4. How prevalent are interstate compacts?

A4. More than 200 interstate compacts exist today. Typically, a state belongs to more than 20 interstate compacts.

Q5. What types of interstate compacts exist?

A5. Although there are many types of interstate compacts, they generally are divided into three types of compacts:

- **Regulatory Compacts:** The broadest and largest category of interstate compacts may be referred to as “regulatory” or “administrative” compacts. Such compacts are a development of the twentieth century and embrace wide-ranging topics including regional planning and development, crime control, agriculture, flood control, water resource management, education, mental health, juvenile delinquency, child support, and so forth. Examples of such compacts include:
 - *Driver License Compact:* Exchange information concerning license suspensions and traffic violations of non-residents and forward them to the state where they are licensed known as the home state.
 - *Interstate Compact on Adult Offender Supervision:* Regulate the movement of adult offenders across state lines.
 - *Midwest Radioactive Waste Disposal Compact:* Regulate radioactive waste disposal.
 - *Washington Metropolitan Area Transit Regulation Compact:* Regulate passenger transportation by private carrier.
 - *1921 Port Authority of New York-New Jersey Compact:* Provides joint agency regulation of transportation, terminal and commerce/trade facilities in the New York metropolitan area.

Regulatory compacts create ongoing administrative agencies whose rules and regulations may be binding on the states to the extent authorized by the compact.

- **Border Compacts:** These types of compacts are agreements between two or more states that alter the boundaries of a state. Once adopted by the states and approved by Congress, such compacts permanently alter the boundaries of the state and can only be undone by a subsequent compact approved by Congress or the repeal of the compact with Congress's approval. Examples include the Virginia-Tennessee Boundary Agreement of 1803, Arizona-California Boundary Compact of 1963, the Missouri-Nebraska Compact of 1990, and the Virginia-West Virginia Boundary Compact of 1998.
- **Advisory Compacts:** These types of compacts are agreements between two or more states that create study commissions. The purpose of the commission is to examine a problem and report back to the respective states on their findings. Such compacts do not result in any change in the state's boundaries nor do they create ongoing administrative agencies with regulatory authority. They do not require congressional consent because they do not alter the political balance of power between the states and federal government or intrude on a congressional power. An example of such a compact is the Delmarva Peninsula Advisory Council Compact (to study regional economic development issues), 29 Del. C. § 11101 (2003); Va. Code Ann. § 2.2- 5800 (2003).

Q6. Are all regulatory interstate compacts in the field of healthcare alike?

A6. No, depending on the needs of the profession, interstate compacts addressing regulatory matters within the healthcare field can be structured quite differently. Currently, there are several professions utilizing interstate compacts to address regulatory matters and each profession has taken a different approach when writing its compact language. Two examples involve the professions of medicine and nursing. Medicine chose to construct its compact to address expedited licensure; while nursing's compact creates a multistate license. Psychology already had a mechanism to address expedited licensure, the Certificate of Professional Qualification in Psychology (CPQ), but needed a way to regulate the practice of telepsychology across state lines as well as provide some consistency among the states around temporary in-person, face-to-face practice. Thus, the interstate compact model is a feasible solution to regulate this type of practice across state lines within the profession of psychology.

Q7. What are the advantages of an interstate compact?

A7. Interstate compacts provide an effective solution in addressing multi-state issues. Compacts enable the states, in their sovereign capacity, to act jointly and collectively, generally outside the confines of the federal legislative or regulatory process while respecting the view of Congress on the appropriateness of joint action. Interstate compacts can preempt federal involvement into matters that are traditionally within the purview of the states and yet which have regional or national implications.

Compacts afford states the opportunity to develop dynamic, self-regulatory systems over which the participating states can maintain control through a coordinated legislative and administrative process. Compacts enable the states to develop adaptive structures that can evolve to meet new and increased challenges that naturally arise over time.

Interstate compacts can provide states with a predictable, stable and enforceable instrument of policy control. The contractual nature of compacts ensures their enforceability on the participating states.

The fact that compacts cannot be unilaterally amended ensures that participating states will have a predictable and stable policy platform for resolving issues. By entering into an interstate compact, each participating state acquires the legal right to require the other states to perform under the terms and conditions of the compact.

Q8. What are the disadvantages of an interstate compact?

A8. Interstate compacts may often require a great deal of time to both develop and implement. While recent interstate compact efforts have met with success in a matter of a few years, some interstate compacts have required decades to reach critical mass. The purpose of an interstate compact is to provide for the collective allocation of governing authority between participating states. The requirement of substantive “sameness” prevents participating states from passing dissimilar enactments notwithstanding, perhaps, pressing state differences with respect to particular matters within the compact.

To the extent that a compact is used as a governing tool, they require, even in the boundary compact context, that participating states cede some portion of their sovereignty. The matter of state sovereignty can be particularly problematic when interstate compacts create ongoing administrative bodies that possess substantial governing power. Such compacts are truly a creation of the twentieth century as an out-growth of creating the modern administrative state.

However, as the balance of power continues to realign in our federalist system, states may only be able to preserve their sovereign authority over interstate problems to the extent that they share their sovereignty and work together cooperatively through interstate compacts.

Q9. How is an interstate compact created?

A9. Compacts are essentially contracts between states. To be enforceable, they must satisfy the customary requirements for valid contracts, including the notions of offer and acceptance. An offer is made when one state, usually by statute, adopts the terms of a compact requiring approval by one or more other states to become effective. Other states accept the offer by adopting identical compact language. Once the required number of states has adopted the pact, the contract between them is valid and becomes effective as provided. The only other potential requirement is congressional consent.

Q10. What does a recent interstate compact look like?

A10. The compact should contain the minimum basics upon which it needs to operate, both in terms of the agreement between states and the operation of its governing body. The compact does not need to address every conceivable eventuality, nor should it. Its purpose is to provide the framework upon which to build. The rules are the actuators of the compact, containing the details of state interaction, how information will be shared, what standards and practices will be followed, forms used, timelines established, etc. By using the compact as the broad framework, the rules can be adapted and adjusted as needed throughout the life the compact without the need to go back each time for legislative approval from the member states, subject to the legislatively delegated authority.

History

Q1. How was PSYPACT developed?

A1. The development of any interstate compact should be a state-driven and state-championed solution for issues that cross state boundaries. ASPPB, the alliance of psychology licensing boards in the United States and Canada, was approached by its members to develop a mechanism to assist in the regulation of telepsychology. In doing so, ASPPB in partnership with the psychology licensing boards and other stakeholder organizations, developed PSYPACT via the following steps:

- **ASPPB Telepsychology Task Force:** ASPPB created a Task Force to review various options for the regulation of telepsychology. The ASPPB Telepsychology Task Force met several times and originally focused on the possibility of creating a certificate to assist in the regulation of telepsychology. This option was presented to the membership, and the membership questioned what type of agreement could be created between jurisdictions to address this issue. An Advisory Group was formed to review options for agreements, including interstate compacts.
- **Advisory Group:** Composed of more than 14 regional and national psychology organizations as well as state officials, the Advisory Group examined the challenges encountered by clients receiving telepsychological services. The group then reviewed the feasibility of drafting a compact as a way of regulating telepsychological services as well as meeting the request of the member boards to create an agreement between the states. The Advisory Group met once in 2014. Their work culminated in a set of broad recommendations as to what the final compact product should entail.
- **Drafting Team:** The ASPPB Telepsychology Task Force reconvened and served as the drafting team for the new compact. The Drafting Team was tasked with implementing, via a draft compact, the thoughts, ideas and suggestions of the Advisory Group as well as incorporating the original work of the Task Force. The eight (8) member Drafting Team, composed of compact and issue area experts, crafted the recommendations, as well as provided their thoughts and expertise, into the draft compact. The document was then open for comment in September 2014 for both the stakeholders as well as public. After the public feedback period, the Drafting Team made modifications as needed based on the feedback. When presented to the ASPPB membership, the feedback was to include not only telepsychology in the compact but to also include a mechanism for temporary in-person, face-to-face practice. The Drafting Team added that component to the draft compact language and the ASPPB Board of Directors voted to approve the final Psychology Interjurisdictional Compact (PSYPACT) in February 2015.
- **PSYPACT Advisory Workgroup:** A workgroup comprised of ASPPB Board of Directors and staff, members and staff from state psychology licensing boards and representatives from the American Psychological Association (APA) and the Council of Executives of State, Provincial (and Territorial) Psychological Associations (CESPPA), convened in July 2015 to devise an implementation plan for PSYPACT and create resource materials about PSYPACT.

General

Q1. What is PSYPACT?

A1. PSYPACT is an interstate compact designed to allow licensed psychologists to practice of telepsychology and conduct temporary in-person, face-to-face practice of psychology across state boundaries legally and ethically without necessitating that an individual become licensed in every state to practice.

Q2. When does PSYPACT become operational?

A2. PSYPACT becomes operational once seven (7) states enact PSYPACT and enter into the compact. Check with us often for status updates on the progress of PSYPACT!

Q3. Why are seven states required to join PSYPACT before it can become operational?

A3. PSYPACT becomes operational after seven states have enacted PSYPACT. A workgroup of stakeholders from various psychology organizations determined seven states would be the critical mass needed to make PSYPACT a useful and viable instrument to practice under the authority of PSYPACT across state lines. Coincidentally, other compacts like the Interstate Medical Licensure Compact have used seven states as a benchmark for their compact to become operational.

Q4. What happens when PSYPACT becomes operational?

A4. PSYPACT becomes operational when seven states enact the PSYPACT Model Legislation. When this occurs, the PSYPACT Commission is then created. The Commission is the governing body of PSYPACT and is responsible for its oversight and the creation of its Rules and Bylaws. Individual licensed psychologists can then apply for one or more of the certificates required to participate in PSYPACT: the E.Passport to practice telepsychology and the Interjurisdictional Practice Certificate (IPC) for the temporary in-person, face-to-face practice of psychology.

Q5. What is the role of the PSYPACT Commission?

A5. The Commission is the governing body of PSYPACT and is comprised of one representative from each PSYPACT state. The Commission is responsible for implementing the Rules and Bylaws of PSYPACT.

Q6. What is the relationship between the PSYPACT Commission and ASPPB?

A6. The PSYPACT Commission operates as the free-standing governing body of PSYPACT. ASPPB will have one ex-officio, nonvoting member serve on the Executive Board of the Commission.

Q7. How can I learn more about PSYPACT?

A7. Contact us at info@psypact.org! You can also sign up for our PSYPACT listserv to receive updates about the progress of PSYPACT and stay informed about legislative changes or follow us on Twitter @PSYPACT.

Telepsychology

Q1. What is telepsychology?

A1. Telepsychology is defined as “provision of psychological services using telecommunication technologies.” For additional information about telepsychology, please refer to *the APA Guidelines for the Practice of Telepsychology* developed by the Joint Task Force for the Development of Telepsychology Guidelines for Psychologists comprised of members from the American Psychological Association (APA), the Association of State and Provincial Psychology Boards (ASPPB) and the Trust.

According to Article II, telepsychology is defined as “provision of psychological services using telecommunication technologies.”

Q2. How has telepsychology proven to be effective modality of treatment?

A2. Research has shown that psychological and other mental health services are particularly conducive for the use of telecommunication modalities since they are most frequently conducted through verbal communications without the need of expensive and elaborate medical equipment or physical intervention (Brenes, Ingraham & Danhaur 2011; Newman, 2004; Smith, Fagan, Wilson, Chen, Corona & Nguyen, 2011, Gilman & Stensland, 2013). Additionally, using telehealth procedures for psychological treatment has been repeatedly demonstrated to be effective (Barak, Hen, Boniel-Nissim & Shapira, 2008; Epstein, 2011) and provides several advantages over traditional treatment methods such as accessibility, versatility and affordability (Wencesalo, 2012).

Given the urgency and gravity oftentimes associated with situations involving mental health treatment, psychologists have already been delivering services via telehealth within states where they are licensed to provide access to care in emergency situations and to underserved populations as well as provide continuity of care as patients travel and relocate and ensure overall patient safety. Additionally, the provision of services through telehealth affords the opportunity to reach populations that are geographically isolated, that avoid needed mental health care due to stigma of mental illness or that lack specialty care. Individuals in rural parts of the country could especially benefit from increased availability of telehealth services provided by qualified licensed psychologists who are not physically located in their local area or even nearby community (Dollinger & Chwalisz, 2011; McCord, Elliot, Wendel, Brossart, Cano, Gonzalez & Burdine, 2011). Although evidence continues to accumulate about the effectiveness and applicability of telehealth services, the use of technologically enhanced methodologies by licensed psychologists has been restricted in large part because of the barriers imposed by the state based system of psychology regulation through psychology licensing boards (Baker & Bufka, 2011; Harris and Younggren, 2011).

See Appendix A for a list of references.

Temporary In-Person, Face-to-Face Practice

Q1. Why is PSYPACT applicable to only temporary in-person, face-to-face practice and not applicable to permanent practice?

A1. The Certificate of Professional Qualifications in Psychology (CPQ), developed by ASPPB, expedites the licensure process for qualified psychologists and is utilized by 45 states. PSYPACT affords the opportunity to provide in-person, face-to-face services on a temporary basis without necessitating licensure in every state.

If a psychologist wishes to establish a permanent practice, he or she must obtain a license within that state and must practice under the licensing authority of that state and can use certifications like the CPQ to apply for licensure.

Article I – “Whereas this Compact does not apply to permanent in-person, face-to-face practice, it does allow for authorization of temporary psychological practice.”

Q2. Why is temporary in-person, face-to-face practice limited to 30 days within a calendar year?

A2. The limit of 30 days within a calendar year for temporary in-person, face-to-face practice was established so that individuals who intend to practice for a significant number of days must become licensed and must practice under the licensing authority of that state. The 30-day limit is per PSYPACT state in which temporary in-person, face-to-face practice was conducted within a calendar year.

Article I – “Whereas this Compact is intended to regulate the temporary in-person, face-to-face practice of psychology by psychologists across state boundaries for 30 days within a calendar year in the performance of their psychological practice as assigned by an appropriate authority.”

Requirements of PSYPACT

Q1. Why is a doctoral degree in psychology not specified in PSYPACT?

A1. The prevailing standard in the United States for the profession of psychology is for an individual to possess a doctoral degree in psychology. The E.Passport will require a doctoral degree in psychology. However, PSYPACT is written in a way to be definitive in nature but also allow for flexibility and growth in the future as the profession of psychology continues to evolve and change. Standards within the PSYPACT language are written so as not to be too high to limit the number of eligible participants and not allow for growth within the profession but also not to be too low to allow for too many unqualified participants and provide a lesser degree of public protection. Criteria, such as educational requirements, within PSYPACT are designed to be stringent yet flexible enough to satisfy changes in the profession. Once PSYPACT is enacted, it cannot be altered again unless additional legislative changes are made.

Articles IV and V, Section B – “Hold a graduate degree in psychology from an institute of higher education that was, at the time of the degree was awarded: A. Regionally accredited by an accrediting body recognized by the U.S. Department of Education to grant graduate degrees, OR authorized by Provincial statute or Royal Charter to grant doctoral degrees; OR B. A foreign college or university deemed to be equivalent to 1 (A) above by a foreign credential evaluation service that is a member of the National Association of Credential Evaluation Services (NACES) or by a recognized foreign credential evaluation service.”

Q2. Why is residency not specially defined in PSYPACT?

A2. The E.Passport will define residency as the physical presence, in person, at the educational institution granting the doctoral degree in a manner that facilitates the full participation and integration of the individual in the educational and training experience and includes faculty-student interaction. However, PSYPACT is written in a way to be definitive in nature but also allow for flexibility and growth in the future as the profession of psychology continues to evolve and change. Standards within the PSYPACT language are written so as not to be too high to limit the number of eligible participants and not allow for growth within the profession but also not to be too low to allow for too many unqualified participants and provide a lesser degree of public protection. Criteria, such as residency requirements, within PSYPACT are designed to be stringent yet flexible enough to satisfy changes in the profession. Once PSYPACT is enacted, it cannot be altered again unless additional legislative changes are made.

Articles IV and V, Section B 2(j) - The graduate degree in psychology must be a program that “includes an acceptable residency as defined by the Rules of the Commission.”

Q3. Why must a psychologist have no adverse actions that violate the Rules of the Commission or have no criminal record history in order to be eligible to participate in PSYPACT?

A3. A licensed psychologist’s participation in PSYPACT requires that he or she meet a defined set of criteria as stated in PSYPACT. By obtaining an E.Passport to practice telepsychology and/or an IPC to conduct temporary in-person, face-to-face practice, a psychologist has met this criteria, thus allowing he or she to practice into PSYPACT states where they may not hold a license to practice psychology.

Through a state’s participation in PSYPACT and a psychology licensing board’s acknowledgement of the E.Passport and the IPC, boards do not conduct the full assessment and review as required when

reviewing an individual's application for licensure. Rather, they rely on PSYPACT and these certifications to vet an individual's qualifications and ensure that they meet this defined set of standards, such as not having any disciplinary issues, as those individuals participating in PSYPACT will not be reviewed by a board on a case by case basis.

Articles IV and V, Sections B 4 and 5, a participant must "Have no history of adverse action that violate the Rules of the Commission" and "Have no criminal record history reported on an Identity History Summary that violates the Rules of the Commission."

Q4. Can an individual with a master's degree in psychology practice under the authority of PSYPACT?

A4. At this time, the E.Passport and the IPC, which are the certificates required to practice telepsychology and/or conduct temporary in-person, face-to-face practice under the authority of PSYPACT, require that an individual possess a doctoral degree in psychology. Currently, those individuals who are eligible for independent practice at the master's level are ineligible to apply for the E.Passport and/or the IPC and therefore cannot practice under the authority of PSYPACT. Individuals who obtain a license to practice psychology through their master's degree are ineligible to apply for E.Passport and/or IPC. However, in these situations, it does not mean that these individuals are incompetent to provide psychological services in states where they are licensed.

Discipline

Q1. What happens when an individual's E.Passport and/or IPC are revoked?

A1. An individual can no longer practice under the authority of PSYPACT if his or her E.Passport and/or IPC are revoked. It is important to note that an individual is still eligible to apply for licensure directly in any state, regardless of that state's participation in PSYPACT. By applying for licensure, the board will make the final, ultimate determination to decide if a license to practice psychology should be granted.

Articles IV and V, Section E – “If a psychologist’s license in any Home State, another Compact State, or any Authority to Practice Interjurisdictional Telepsychology in any Receiving State, is restricted, suspended or otherwise limited, the E.Passport shall be revoked and therefore the psychologist shall not be eligible to practice telepsychology in a Compact State under the Authority to Practice Interjurisdictional Telepsychology” and “If a psychologist’s license in any Home State, another Compact State, or any Temporary Authorization to Practice in any Distant State, is restricted, suspended or otherwise limited, the IPC shall be revoked and therefore the psychologist shall not be eligible to practice in a Compact State under the Temporary Authorization to Practice.”

Q2. What happens if a psychologist's license is revoked?

A2. The revocation of a license for a psychologist practicing under the authority of PSYPACT means his or her E.Passport and/or IPC will be revoked as well as their authority to practice under PSYPACT. It is important to note that PSYPACT cannot revoke an individual's license. Rather, the Home State can revoke an individual's license and PSYPACT can revoke their Authority to Practice Interjurisdictional Telepsychology and/or the Temporary Authorization to Practice.

Articles IV and V, Sections D and E – “A psychologist practicing into a Receiving State under the Authority to Practice Interjurisdictional Telepsychology will be subject to the Home State’s authority and laws. A Receiving State may, in accordance with that state’s due process law, limit or revoke a psychologist’s Authority to Practice Interjurisdictional Telepsychology in the Receiving State and may take any other necessary actions under the Receiving State’s applicable law to protect the health and safety of the Receiving State’s citizens. If a Receiving State takes action, the state shall promptly notify the Home State and the Commission. If a psychologist’s license in any Home State, another Compact State, or any Authority to Practice Interjurisdictional Telepsychology in any Receiving State, is restricted, suspended or otherwise limited, the E.Passport shall be revoked and therefore the psychologist shall not be eligible to practice telepsychology in a Compact State under the Authority to Practice Interjurisdictional Telepsychology A psychologist practicing into a Distant State under the Temporary Authorization to Practice will be subject to the Distant State’s authority and law. A Distant State may, in accordance with that state’s due process law, limit or revoke a psychologist’s Temporary Authorization to Practice in the Distant State and may take any other necessary actions under the Distant State’s applicable law to protect the health and safety of the Distant State’s citizens. If a Distant State takes action, the state shall promptly notify the Home State and the Commission. If a psychologist’s license in any Home State, another Compact State, or any Temporary Authorization to Practice in any Distant State, is restricted, suspended or otherwise limited, the IPC shall be revoked and therefore the psychologist shall not be eligible to practice in a Compact State under the Temporary Authorization to Practice.”

Q3. What happens if a psychologist enters into an alternative program while practicing under the authority of PSYPACT?

A3. A psychologist's authority to practice and E.Passport and/or IPC are not revoked while a psychologist is in an alternative program. However, a psychologist cannot provide services as defined under PSYPACT during the time of the alternative program. It is the responsibility of the PSYPACT state to notify the

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Commission that a psychologist has entered into such a program and that their practice is temporarily surrendered.

Article VII Section F – “Nothing in this Compact shall override a Compact State’s decision that a psychologist’s participation in an alternative program may be used in lieu of adverse action and that such participation shall remain non-public if required by the Compact State’s law. Compact States must require psychologists who enter any alternative programs to not provide telepsychology services under the Authority to Practice Interjurisdictional Telepsychology or provide temporary psychological services under the Temporary Authorization to Practice in any other Compact State during the term of the alternative program.”

Q4. Why isn’t a separate license required in every PSYPACT state to practice telepsychology or to conduct temporary in-person, face-to-face practice?

A4. PSYPACT was created to provide an accessible and manageable regulatory structure for the practice of telepsychology and temporary in-person, face-to-face practice. Advantages to consumers are increased access to care, an avenue for complaints and a greater degree of public protection. Psychologists also have a means to provide services into other states where they may not currently hold a license. PSYPACT requires that a psychologist be licensed in their Home State but allows a psychologist to practice telepsychology in a Receiving State or conduct temporary in-person, face-to-face practice in a Distant State. This allows the Home State to continue to regulate and also allows the Receiving States and Distant States to know who is practicing in their state and in what capacity without requiring psychologists to obtain and maintain a license in every PSYPACT state.

Impact on States

Q1. How does PSYPACT promote compliance with laws governing psychological practice in each PSYPACT state?

A1. Licensing requirements vary state to state. As a means to promote compliance with laws as well as develop consistency in practice standards amongst states, PSYPACT serves as mechanism in which states agree to accept psychologists that have met a defined level of standards who are practicing in their state via telepsychology or temporary in-person, face-to-face practice.

Article I – “Promote compliance with the laws governing psychological practice in each Compact State.”

Q2. Several types of states are defined within PSYPACT. What do they mean and how are they different?

A2. A psychologist must be licensed to practice psychology in their **Home State** in order to practice telepsychology or conduct temporary in-person, face-to-face practice as defined in PSYPACT.

- If the psychologist is licensed in more than one **Compact State** and is practicing under the Authorization to Practice Interjurisdictional Telepsychology, the **Home State** is the **Compact State** where the psychologist is physically present when the telepsychological services are delivered. If the psychologist is licensed in more than one **Compact State** and is practicing under the Temporary Authorization to Practice, the **Home State** is any **Compact State** where the psychologist is licensed.
- Should a licensed psychologist want to practice telepsychology from their **Home State**, services would be provided into a **Receiving State**.
- Should a licensed psychologist want to conduct temporary in-person, face-to-face practice, services would be rendered within a **Distant State**.
- It is important to note that should any adverse actions be taken, all states will be notified.

Article II

- *Compact State: “A state, the District of Columbia, or United States territory that has enacted this Compact legislation and which has not withdrawn pursuant to Article XIII, Section C or been terminated pursuant to Article XII, Section B.”*
- *Distant State: “The Compact State where a psychologist is physically present (not through using telecommunications technologies), to provide temporary in-person, face-to-face psychological services.”*
- *Home State: “A Compact State where a psychologist is licensed to practice psychology. If the psychologist is licensed in more than one Compact State and is practicing under the Authorization to Practice Interjurisdictional Telepsychology, the Home State is the Compact State where the psychologist is physically present when the telepsychological services are delivered. If the psychologist is licensed in more than one Compact State and is practicing under the Temporary Authorization to Practice, the Home State is any Compact State where the psychologist is licensed.”*
- *Non-Compact State: “Any State which is not at the time a Compact State.”*
- *Receiving State: “A Compact State where the client/patient is physically located when the telepsychological services are delivered.”*

Q3. Other compacts indicate practice originates where the patient is located. According to PSYPACT, practice originates where the psychologist is located. Why is PSYPACT structured like this?

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A3. PSYPACT indicates Home State is where the psychologist is licensed. Regulatory authority rests with the state where the psychologist is licensed. Disciplinary actions against a license may only be taken by the state where the psychologist is licensed. Therefore, it is important to allow the Home State to have authority over psychologists licensed in their state and set the standards and procedures for discipline.

Article II – “Home State means: a Compact State where a psychologist is licensed to practice psychology. If the psychologist is licensed in more than one Compact State and is practicing under the Authorization to Practice Interjurisdictional Telepsychology, the Home State is the Compact State where the psychologist is physically present when the telepsychological services are delivered. If the psychologist is licensed in more than one Compact State and is practicing under the Temporary Authorization to Practice, the Home State is any Compact State where the psychologist is licensed.”

Q4. How do rules of PSYPACT apply to state laws?

A4. The rules of PSYPACT are only applicable to states that enact PSYPACT. The rules of PSYPACT would only supersede any state law pertaining to the interjurisdictional practice of telepsychology and temporary in-person, face-to-face practice.

Article II – “Rule means a written statement by the Interjurisdictional Psychology Compact Commission promulgated pursuant to Section XI of the Compact that is of general applicability, implements, interprets, or prescribes a policy or provision of the Compact, or an organizational, procedural, or practice requirement of the Commission and has the force and effect of statutory law in a Compact State, and includes the Amendment, repeal or suspension of an existing Rule.”

Q5. Can a state withdraw from PSYPACT?

A5. A state can withdraw from PSYPACT by repealing the PSYPACT Model Legislation. The withdrawal shall not take effect until six (6) months after enactment of the repealing Statute.

Withdrawal will not affect the continuing requirement of the withdrawing State’s Psychology Regulatory Authority to comply with the investigative and adverse action reporting requirements of this act prior to the effective date of withdrawal.

Article XIII, Section C – “Any Compact State may withdraw from this Compact by enacting a Statute repealing the same.”

Q6. Does PSYPACT impact state’s rights?

A6. PSYPACT does not impact a state’s right or ability to issue a license. It is applicable to the interjurisdictional practice of telepsychology and temporary in-person, face-to-face practice and only takes precedence over state laws regarding this type of interjurisdictional practice. For example, any licensed psychologist must obtain an E.Passport to practice telepsychology under the authority of PSYPACT and must have three (3) hours of continuing education training in technology as required by the E.Passport. Should a PSYPACT state not require continuing education, this requirement of PSYPACT would supersede the state’s authority.

Impact on Psychologists

Q1. As a psychologist, how do I utilize PSYPACT?

A1. Once PSYPACT becomes operational, psychologists can apply for the E.Passport and/or IPC, which are required to practice telepsychology and/or temporary in-person, face-to-face practice in PSYPACT states through the following steps:

To practice telepsychology:

- Apply for and obtain the Association of State and Provincial Psychology Boards (ASPPB) E.Passport to practice telepsychology in PSYPACT states and pay associated certification fees.
- Identify and notify ASPPB and the PSYPACT Commission of telepsychological practice into each PSYPACT state.
- Complete continuing education requirements for E.Passport.
- Annually renew the E.Passport.

To conduct temporary in-person, face-to-face practice:

- Apply for and obtain the Association of State and Provincial Psychology Boards (ASPPB) Interjurisdictional Practice Certificate (IPC) to conduct temporary in-person, face-to-face practice telepsychology in PSYPACT states and pay associated certification fees.
- Identify and notify ASPPB and the PSYPACT Commission of temporary in-person, face-to-face practice into each PSYPACT state.
- Annually renew the IPC.

Q2. I am a psychologist licensed in both the Home State and Receiving/Distant States. Why does PSYPACT not apply to me?

A2. By already being licensed in the Home State and Receiving/Distant States, an individual has already established full rights to practice in these states, and therefore, PSYPACT is not applicable to these individuals. PSYPACT only applies to the interjurisdictional practice of telepsychology and/or temporary in-person, face-to-face practice.

Article I – “Whereas this compact does not apply when a psychologist is licensed in both the Home and Receiving state.”

Q3. What happens when laws conflict within PSYPACT states (e.g. duty to warn laws, child/elder abuse laws, recording keeping rules, etc.)?

A3. Currently, there is no easy answer to this question. If a psychologist is in one state and a patient is in another, it can be confusing which laws to follow and which laws take precedence. A good example is the “duty to warn” standards among the states. States like California have a mandatory “duty to warn/protect” requirement, in Pennsylvania there is a mandatory duty to use reasonable care to protect by warning while other states like Texas have more permissive requirements. In some states, like North Dakota and Nevada, there is no duty to warn or protect requirement. These differences make it very difficult for psychologist to know what standard to apply when practicing telepsychology. Under

PSYPACT FAQs

PSYPACT, this is simplified as this process is defined in the legislation. Compact States agree to the following:

- If a psychologist is practicing into a Receiving State under the Authority to Practice Interjurisdictional Telepsychology, he or she is subject to the Home State's authority and laws.
- If a psychologist is practicing into a Distant State under the Temporary Authorization to Practice, he or she will be subject to the Distant State's authority and law.

However, psychologists must be aware of each state's laws where they are conducting practice. Statutes and regulations pertaining to the practice of psychology vary from state to state.

Impact on Consumers

Q1. How does PSYPACT ensure the public is better protected from harm?

A1. PSYPACT is a mechanism that can ensure public protection and improve access to care while easing the barriers for competent and qualified psychologists through the following:

- All psychologists must hold an active license in their Home State and an active E.Passport and/or Interjurisdictional Practice Certificate, which has acceptable education and training requirements.
- Although psychologists are not required to have a license in the Receiving and/or Distant State, they must meet established criteria, have had no disciplinary sanctions, and provide regular updates on their intended practice activities.
- States will have access to a real-time, searchable database that provides information about where and in what capacity E.Passport and IPC holders are intending to practice within their state.
- PSYPACT provides a structure for the receiving state to revoke the psychologist's ability to practice within their state.
- Currently, states may not have the authority to impose discipline on their licensees for practice outside state boundaries. PSYPACT allows the Home State to impose discipline regarding the practice in other states.

Through PSYPACT, states can be assured that their consumers will be receiving care from qualified psychologists and have improved access to care. States will now have a means to identify telepsychology and temporary practice providers in their state as well as have a procedure to address disciplinary sanctions.

Q2. Why is PSYPACT important to consumers?

A2. Through PSYPACT, consumers will have greater access to care. PSYPACT will allow licensed psychologists to provide continuity of care as clients/patients relocate. Psychologists will also be able to reach populations that are currently underserved, geographically isolated or lack specialty care.

Additionally, states will have an external mechanism that accounts for all psychologists who may enter their state to practice telepsychology or conduct temporary in-person, face-to-face practice, thus indicating psychologists have met defined standards and competencies to practice in other states. PSYPACT will also help states ensure the public will be better protected from harm.

Appendix A – References

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