Approved by the ASPPB Board of Directors in October 2017

The [Name of Board] hereby adopts by reference as its regulations, the Association of State and Provincial Psychology Boards (ASPPB) Model Regulations for Licensure and Registration of Psychologists, definitions, MLRA [CITATION] and its amendments.

**MR-100 DEFINITIONS**

**A. DOCTORAL SUPERVISED EXPERIENCE**
Providing psychological services under the supervision of a psychologist, completed after the academic coursework and other requirements for the doctoral degree at an appropriate institution of higher education have been fulfilled.

**B. EARLY ADMITTANCE**
Beginning January 2020, applicants for licensure may register through ASPPB to take the Examination for Professional Practice in Psychology (EPPP) Part 1 prior to completing the degree for which the applicant wants to be licensed, and must abide by the established policies of ASPPB for this registration, including the EPPP Part 1 be taken after all coursework, excluding dissertation, practicum and internship credits have been completed and pay applicable fees.

**C. IMMORAL, UNPROFESSIONAL, OR DISHONORABLE CONDUCT**
Conduct that violates the accepted standards of practice through neglect, exploitation, harm, abuse, and/or tends to bring reproach or disrepute to the profession of psychology.

**D. POSTDOCTORAL SUPERVISED EXPERIENCE**
Providing psychological services under the supervision of a psychologist, completed subsequent to the successful completion of all requirements for the doctoral degree granted by an appropriate institution of higher education.
E. RESPECIALIZATION
A formal program designed to provide an individual with an earned doctoral degree in psychology with the necessary education, training and skills to become eligible for licensure, and practice as a health service psychologist and/or general applied psychologist.

F. SUPERVISION GUIDELINES
The current ASPPB Supervision Guidelines.

MR-200 ORGANIZATION AND PROCEEDINGS OF BOARD

A. DUTIES
1. The Board shall maintain records including: files for every applicant for licensure and licensee, Board minutes, meeting agendas, Board rules, and other records as required by jurisdictional statute or regulation.

2. The Board shall make available to the public, for inspection or for copying, any public record as that term is defined in this jurisdiction’s public records statute. The Board may levy a reasonable charge to defray costs of copying public records.

3. Official actions of the Board are those actions approved by vote of the Board members or those acts delegated to staff by the Board and as recorded in the minutes of the Board.

B. BOARD MEETINGS
1. The Board shall conduct meetings in accordance with Keesey’s Rules of Parliamentary Procedure.

2. The Board shall provide public notice of its meetings in accordance with the applicable open meeting statute.

3. Board meetings are open to the public except when confidential or executive session is authorized or required by this jurisdiction’s open meeting statute.

4. Unless otherwise prohibited by statute, a Board member may participate in a meeting of the Board by means of telephone, video conference equipment or other similar electronic means.
5. A Board member shall recuse himself or herself if there is a conflict of interest or an appearance of a conflict of interest and shall not be present or participate during the deliberations and/or voting.

6. Board members are eligible for reimbursement and compensation for Board service expenses in accordance with this jurisdiction’s statues, regulations and/or policies.

MR-300 FEES

A. THE BOARD HAS SET THE FOLLOWING FEES:

1. Application processing fee $________

2. Administrative fee $________

3. Psychology Licensure Universal System (PLUS) application fee as set by the ASPPB.

4. EPPP examination fee as set by ASPPB.

5. Oral examination fee $________

6. Jurisprudence examination fee $________

7. Other examination fee $________

8. Provisional supervised licensure application fee $________

9. Provisional independent licensure application fee $________

10. Temporary authorization to practice fee $________

11. License renewal fee $________

12. Late penalty fee $________

13. Verification of license/endorsement to another jurisdiction $________
14. Additional/replacement certificate $________

15. Returned check fee $________

16. Reactivation fee $________

17. Foreign credential review fee $________

18. Inactive fee $________

B. All fees are non-refundable and/or nontransferable.

MR-400 REQUIREMENTS FOR LICENSURE AS A PSYCHOLOGIST

A. GENERAL

1. Applicants for licensure must complete application forms as required by the Board and pay required application fees.

2. Application time limits
   a) Whether applying directly to the Board or via PLUS, an applicant for licensure has two (2) years from the time of beginning the application with the Board to complete all requirements for licensure.

   b) If the applicant for licensure fails to meet the requirement stated in MR-400.A.2.a above, the applicant must reapply as a new applicant, meet the requirements prevailing at the time of the reapplication and pay all fees for licensure at that time.

3. Applicants for licensure must document that they have met the requirements in MR-400.B and 400.C below before being authorized to sit for the EPPP or other examination(s) required by the Board, except as allowed under MR-400.D.1.a.ii and MR-400.G below.

4. All documentation and other information in support of the application must be obtained directly from the original primary source or from ASPPB, which shall be considered a primary source.
5. Applicants for licensure must submit a current criminal background check at the time of filing application as part of the application process.

6. Applicants for licensure must submit a current updated child abuse history clearance/vulnerable sector check at the time of filing application as part of the application process.

7. An applicant for licensure must declare on a form acceptable to the Board his/her intention to practice as a Health Service Provider in Psychology (HSP) and/or General Applied Provider in Psychology (GAP).

B. EDUCATION

1. Educational requirements for licensure with certification as a Health Service Provider in Psychology (HSP).

A doctoral degree in psychology must be obtained from an institution meeting the criteria described in MR-400.B.1.a-l below:

   a) An institution of higher education that was, at the time the degree was awarded:

      i. Regionally accredited by bodies approved by the Council for Higher Education Accreditation or the United States Office of Education, or recognized by Universities Canada, formerly known as Association of Universities and College of Canada;

      A program accredited by the American Psychology Association, the Canadian Psychology Association, or for applicants for licensure obtaining their terminal degree before 2018, is designated as a psychology program by the joint designation committee of the ASPPB and the National Register of Health Service Psychologists; or

      ii. A foreign college or university deemed to be equivalent to MR-400.B.1.a.i or ii by a foreign credential evaluation service that is a member of the National Association of Credential Evaluation
Services or by a foreign credential evaluation service;

AND

b) The psychology program, wherever it may be administratively housed, must be clearly identified and labeled as a psychology program. Such a program must specify in pertinent institutional catalogues, web sites, and brochures its intent to educate and train professional psychologists; “Professional Psychology” refers to psychology as a profession. The term is not intended in the more restrictive sense of applied or practice areas of psychology;

c) The psychology program must stand as a recognizable, coherent organizational entity within the institution;

d) There must be a clear authority and primary responsibility for the core and specialty areas whether or not the psychology program cuts across administrative lines;

e) The psychology program must be an integrated, organized sequence of study;

f) The psychology program must include a coordinated practicum experience that totals at least two (2) semesters and/or meet other supervised practicum, internship, field or laboratory training requirements appropriate to the education and specialty areas of the applicant for licensure; the Board utilizes the current ASPPB Guidelines on Practicum Experience for Licensure as its means of evaluating acceptable practicum experiences;

g) There must be an identifiable psychology faculty and a psychologist responsible for the program. This is considered to include an identifiable psychology faculty on-site sufficient in size and breadth to carry out faculty program responsibilities;

h) The program must have an identifiable body of students who are matriculated in that program for a degree;

i) The curriculum shall encompass a minimum of three (3) years of full time graduate study which includes a minimum of one (1) continuous academic year of full time residency at the educational
institution granting the doctoral degree. An academic year is defined as two (2) consecutive academic semesters, each of which must be no less than four (4) months (or three (3) consecutive trimesters or quarters which is no less than eight (8) months). Continuous is defined as full time enrollment over the course of the defined academic year. Multiple long weekends and/or summer intensive sessions do not meet the definition of continuous. Residency means physical presence, in person, face-to-face, at an educational institution granting the doctoral degree for the purposes of facilitating acculturation in the profession, the full participation and integration of the individual in the educational and training experience and includes faculty student interaction. Training models that rely exclusively on physical presence for periods less than one (1) continuous year (e.g., multiple long weekends and/or summer intensive sessions), or that use video teleconferencing or other electronic means as a substitute for any part of the minimum requirement for physical presence at the institution do not meet this definition of residency; and

j) The core program shall require every student to demonstrate competence in each of the following substantive areas. This typically will be met through substantial instruction in each of these following areas and may include distance education except as noted in MR-400.B.1.j.k below, as demonstrated by a minimum of three (3) graduate semester hours, five (5) or more graduate quarter hours (when an academic term is other than a semester, credit hours will be evaluated on the basis of 15 hours of classroom instruction per semester hour), or the equivalent:

   i. Biological bases of behavior (e.g., physiological psychology, comparative psychology, neuropsychology, sensation and perception, and psychopharmacology);

   ii. Cognitive-affective bases of behavior (e.g., learning, thinking, motivation, and emotion);

   iii. Social bases of behavior (e.g., social psychology, group processes, organizational and systems theory);

   iv. Research design and methodology;
v. Psychometric theory;

vi. Individual differences (e.g., personality theory, human development, and abnormal psychology);

vii. Statistics;

viii. Scientific and professional ethics and standards;

ix. Assessment/evaluation (e.g. psychological testing, program evaluation, and organizational analysis); and

x. Treatment/intervention (e.g. therapy, consultation, and evaluation).

k) Courses for the completion of MR-400.B.1.j.ix and x above shall not be acceptable for licensure if provided by distance education.

l) All professional education programs in psychology shall include course requirements in specialty areas and must demonstrate that the program provides training relevant to the development of competency to practice in a diverse and multicultural society.

2. Educational requirements for licensure with certification as a General Applied Provider in Psychology (GAP).

A doctoral degree in psychology must be obtained from an institution that meets the criteria described in MR-400.B.2.a-l below:

a) An institution of higher education that was, at the time the degree was awarded:

i. Regionally accredited by bodies approved by the Council for Higher Education Accreditation and the United States Office of Education, or recognized by Universities Canada, formerly known as Association of Universities and Colleges of Canada; and

ii. A program accredited by the American Psychology Association, the Canadian Psychology Association or for applicants for licensure obtaining their terminal degree before 2019, is designated as a psychology
program by the joint designation committee of the ASPPB and the National Register of Health Service Psychologists; or

iii. Meets the requirement set forth in MR-400.B.2.a.i above and is deemed substantially equivalent to MR-400.B.2.a.ii above by the Board and meets the requirements listed in MR-400.B.2.b-l below; or

iv. A foreign college or university deemed to be equivalent to MR-400.B.2.a.i or ii above by a foreign credentials evaluation service that is a member of the National Association of Credential Evaluation Services or by a recognized foreign credential evaluation services;

b) The psychology program, wherever it may be administratively housed, must be clearly identified and labeled as a psychology program. Such a program must specify in pertinent institutional catalogues, web sites, and brochures its intent to educate and train professional psychologists; “Professional Psychology” refers to psychology as a profession. The term is not intended in the more restrictive sense of applied or practice areas of psychology;

c) The psychology program must stand as a recognizable, coherent organizational program within the institution;

d) There must be a clear authority and primary responsibility for the core and specialty areas whether or not the psychology program cuts across administrative lines;

e) The psychology program must be an integrated, organized sequence of study;

f) The psychology program must include a coordinated practicum experience that totals at least two (2) semesters and meets other supervised practicum, internship, field or laboratory training requirements appropriate to the education and specialty area of the applicant for licensure; the Board utilizes the current ASPPB Supervision Guidelines as its means of evaluating acceptable practicum experiences;
g) There must be an identifiable psychology faculty and a psychologist responsible for the program. This is considered to include an identifiable psychology faculty on-site sufficient in size and breadth to carry out faculty program responsibilities;

h) The program must have an identifiable body of students who are matriculated in that program for a degree;

i) The curriculum shall encompass a minimum of three (3) academic years of full time graduate study which includes a minimum of (1) continuous academic year of full time residency at the educational institution granting the doctoral degree. An academic year is defined as two (2) consecutive academic semesters, each of which must be no less than four (4) months (or three (3) consecutive trimesters or quarters which is no less than (8) months). Continuous is defined as full time enrollment over the course of the defined academic year. Multiple long weekends and/or summer intensive sessions do not meet the definition of continuous. Residency means physical presence, in person, face-to-face, at an educational institution granting the doctoral degree for the purposes of facilitating acculturation in the profession, the full participation and integration of the individual in the educational and training experience and includes faculty student interaction. Training models that rely exclusively on physical presence for periods less than one (1) continuous year (e.g., multiple long weekends and/or summer intensive sessions), or that use video teleconferencing or other electronic means as a substitute for any part of the minimum requirement for physical presence at the institution do not meet this definition of residency; and

j) The core program shall require every student to demonstrate competence in each of the following substantive areas. This typically will be met through substantial instruction in each of these following areas, and may include distance education except as noted in MR-400.B.2.j.k below, as demonstrated by a minimum of three (3) graduate semester hours, five (5) or more graduate quarter hours (when an academic term is other than a semester, credit hours will be evaluated on the basis of 15 hours of classroom instruction per semester hour), or the equivalent:
i. Biological bases of behavior (e.g., physiological psychology, comparative psychology, neuropsychology, sensation and perception, and psychopharmacology);

ii. Cognitive-affective bases of behavior (e.g., learning, thinking, motivation, and emotion);

iii. Social bases of behavior (e.g., social psychology, group processes, organizational and systems theory);

iv. Research design and methodology;

v. Psychometric theory;

vi. Individual differences (e.g., personality theory, human development, and abnormal psychology);

vii. Statistics;

viii. Scientific and professional ethics and standards

ix. Assessment/evaluation (e.g. psychological testing, program evaluation, organizational analysis); and

x. Treatment/intervention (e.g. therapy, consultation, and evaluation).

k) Courses for the completion of MR-400.B.2.j.ix and x above shall not be acceptable for licensure if provided by distance education.

l) All professional education programs in psychology shall include course requirements in specialty areas and must demonstrate that the program provides training relevant to the development of competency to practice in diverse and multicultural society.

3. Foreign-trained applicants for licensure as a HSP and/or GAP
   a) An applicant for licensure whose application is based upon a degree from an institution outside the United States or Canada shall provide the Board with documentation and evidence to establish that his/her education is substantially equivalent to the criteria in
MR-400.B.1 and 2 above. The applicant shall provide the Board with the following, at a minimum:

i. An original diploma or other certificate of graduation, which will be returned, and a photocopy of such a document, which will be retained by the Board;

ii. A transcript or appropriate documentation of all coursework completed;

iii. A certified translation of all documents that are submitted in a language other than English;

iv. Satisfactory evidence of doctoral and postdoctoral supervised experience;

v. A statement based on the documents required above that indicates the sequence of studies, training and research. This statement shall be comparable to and communicate essentially the same information as a transcript issued by a United States/Canadian university; and

vi. A credentials evaluation from a member of NACES.

b) A foreign-trained applicant for licensure must document compliance with the supervised experience requirement in MR-400.C below and satisfy the examination requirements set out in MR-400.D below.

c) The burden of proof that his/her foreign education is substantially equivalent to the criteria in MR-400.B.1 and 2 above is borne entirely by the applicant for licensure.

d) Final review and decision will be made by the Board.

4. Respecialization

A program of respecialization must include substantial requirements that are formally offered as an organized sequence of coursework, as referenced in MR-400.B.1 and 2 above and supervised experience as referenced in MR-400.C below leading to a certificate (or similar recognition) by an educational
body that offers a doctoral degree qualifying for licensure in the same area of practice as that of the certificate.

a) Respecialization for HSP:

i. Respecialization programs must occur in American Psychological Association or Canadian Psychological Association accredited doctoral programs in psychology.

ii. All requirements of doctoral training in the new specialty must be met, giving due credit for previous relevant, successfully completed coursework to be determined by the American Psychological Association or Canadian Psychological Association accredited doctoral program conducting the respecialization.

iii. Applicants must provide evidence of the completion of two (2) years supervised experience in the area of respecialization as defined in MR-400.C below.

b) Respecialization for GAP:

i. Respecialization programs must be in a program that meets the requirements in MR-400.B.2 above.

ii. All requirements of doctoral training in the new specialty must be met, giving due credit for previous relevant, successfully completed coursework to be determined by the doctoral program conducting the respecialization.

iii. Applicants must provide evidence of the completion of two (2) years supervised experience in the area of respecialization as defined in MR-400.C below.

iv. Applicants who complete such a program must present a certificate or letter from the doctoral program training director that verifies completion of the program and identifies the specialty area of psychology.
5. Documentation of Education
   
   A certified transcript of courses completed must be received:
   
   a) Directly from the university or program that granted the applicant for licensure’s doctoral degree; or
   
   b) Directly from ASPPB if the applicant for licensure is a participant in PLUS or ASPPB Credentials Bank.

C. SUPERVISED EXPERIENCE

1. Two (2) years of supervised experience, at least one (1) of which shall have been completed after receipt of the doctoral degree, for a minimum of 3,000 total hours;

2. Each year (or equivalent) shall be comprised of no less than 10 months, but no more than 24 months, and at least 1,500 hours of professional service including direct client contact, supervision and didactic training;

3. One (1) year may be a doctoral internship which consists of a minimum of 1,500 hours of actual work experience (exclusive of holidays, sick leave, vacations or other such absences);

4. At least 50% of the supervised experience must be in service-related activities such as treatment/intervention, assessment, interviews, report writing, case presentations, or consultations;

5. At least 50% of service related activities shall be direct client contact;

6. A maximum of 45 hours per week, including supervision time, may be credited toward meeting the supervised experience requirement;

7. Supervision shall be provided 10% of the total time worked per week; and

8. A minimum of two (2) hours per week of supervision, one (1) hour of which is individual face-to-face, in-person supervision by a licensed psychologist. Such as in the case of geographical or confirmed physical hardship, the Board may consider a variance in the frequency of supervision sessions providing that a
minimum of four (4) hours per month of individual one-to-one, face-to-face supervision shall be maintained.

D. EXAMINATIONS

1. Required Examinations

   a) The examination used by the Board for assessing entry-level competence for the practice of psychology shall be the EPPP Part 1 and Part 2 (Part 2 shall be required beginning January 2020). When an applicant for licensure has been accepted as a candidate for licensure and passed the EPPP Part 1 prior to January 1, 2020, he/she will not be required to take Part 2 of the EPPP.

      i. The EPPP shall be administered by ASPPB or by its designee in accordance with its established policies.

      ii. Early admittance to the EPPP Part 1: Beginning January 1, 2020, an applicant for licensure must register through ASPPB to take Part 1 of the EPPP prior to completing the degree for which the applicant wants to be licensed and must abide by the established policies of ASPPB for this registration, including the Part 1 be taken after all coursework, excluding dissertation, practicum, and internship credits have been completed and applicable fees have been paid.

      iii. All other applicants for licensure desiring to take the EPPP Part 1 must have submitted a completed application for licensure to the Board to be approved to sit for the exam and must pay all applicable fees.

      iv. All applicants for licensure must have submitted a completed application for licensure to the Board to be approved to sit for the EPPP Part 2 by the Board and pay all applicable fees. For an applicant to be approved by the Board to take the EPPP Part 2, he/she must have earned the degree for which he/she wants to be licensed and are licensure candidates. An applicant must have passed the EPPP Part 1 before he/she can take the EPPP Part 2.
v. An applicant for licensure may sit for the EPPP as a provisional supervised licensee.

vi. Upon authorization, the candidate for the EPPP shall schedule a test date with the test delivery vendor according to Board and test vendor policies and instructions within six (6) months of receiving approval to sit for the examination from the Board or from ASPPB in the case of early admittance.

vii. The passing scores on the EPPP shall be the ASPPB recommended passing scores or the passing scores established by the Board at the time the examination was taken. The applicant for licensure shall be notified of his/her official score, as well as whether those scores meet or exceed the established passing scores for the examination, by the Board or the Board’s designee.

viii. In the event that the applicant for licensure’s scores do not meet or exceed the established pass scores for the examination, the applicant must reapply to the Board or to ASPPB in the case of early admittance for authorization to sit again for the part of the examination that was below the pass score and pay any additional administrative fees established by the Board as well as a new examination fee. Upon authorization, the candidate shall schedule a test date with the test delivery vendor according to Board and test vendor policies and instructions.

ix. An applicant for licensure may take either part of the EPPP no more than four (4) times in a 12-month period; said period is calculated from the first date the applicant took the EPPP.

x. If an applicant for licensure has failed the EPPP Part 1 four (4) times, or 12 months have elapsed from receiving initial approval to sit for the examination without having passed the examination, the applicant
must submit a new application for licensure and satisfy the administrative, educational, and experience requirements prevailing at the time of the reapplication.

xi. If an applicant for licensure has failed the EPPP Part 2 four (4) times, or 12 months have elapsed from receiving initial approval to sit for the examination without having passed the examination, the applicant must submit a new application for licensure and satisfy the administrative, educational, and experience requirements prevailing at the time of the reapplication. Additionally, the applicant must submit evidence of having successfully completed a one (1) year supervised work experience in concordance with the requirements for the postdoctoral year of supervision.

xii. Individuals who have taken either part of the EPPP in another jurisdiction and whose scores meets or exceeds the passing scores required in MR-400.D.1.a.vii above must have their scores on the EPPP transferred to the Board by the score transfer service maintained by ASPPB.

b) Applicants seeking accommodation(s) for the EPPP based on identified conditions under the Americans with Disabilities Act (ADA) in the United States or the Human Rights Legislation or other equivalent governing law in Canada shall complete a form provided by the Board or by ASPPB in the case of early admittance documenting and sustaining his/her disability.

i. Such request must be made to the Board, or ASPPB in the case of early admittance, at the time of application to take the EPPP Part 1. The request must be submitted and approved before the testing appointment is made. Accommodation requests will be ruled upon by the Board or by ASPPB in the case of early admittance and the Board shall notify ASPPB of any accommodation(s) requested. The Board and
ASPPB will collaborate in making all necessary determinations of reasonable and appropriate accommodations. In the case of early admittance, ASPPB will make all necessary determinations of reasonable and appropriate accommodations. Procedures for approval and administration of ADA and Human Rights Legislation accommodations will be handled as documented in the ASPPB Examination Program Policies and Procedures Manual.

ii. ASPPB reserves the right to reject any accommodation request that, in the sole opinion of ASPPB, would jeopardize the integrity, validity, and/or security of the examination. In such situations, ASPPB reserves the right to deny access to the examination.

iii. In the event the Board chooses to approve an accommodation that is deemed by ASPPB to jeopardize the integrity, validity and/or security of the examination, and ASPPB denies access to the examination, the Board may choose to waive the EPPP requirement for that applicant for licensure.

2. Additional Examinations

a) Jurisprudence Examination

An oral/written examination shall assess the applicant for licensure’s knowledge of this jurisdiction’s statute regulating the practice of psychology as well as his/her understanding of ethics and standards of practice. At the Board’s discretion, this examination may be conducted in whole or in part by means of a written examination administered by the Board.

i. Only those applicants for licensure who have submitted a completed application for licensure to the Board, paid applicable fees and been approved
to sit for the examination may take the jurisprudence examination.

ii. The passing score for the jurisprudence examination shall be _______.

iii. An applicant for licensure may sit for the jurisprudence examination as a provisional supervised licensed psychologist.

iv. If a candidate does not meet or exceed the passing score for the jurisprudence examination, he/she must reapply to take the jurisprudence examination on the form required by the Board and pay the jurisprudence examination fee.

v. An applicant for licensure may take the jurisprudence examination no more than four (4) times in a 12month period; said period is calculated from the first date he/she took the jurisprudence examination.

vi. If an applicant for licensure has failed the jurisprudence examination four (4) times, or 12 months have elapsed from receiving initial approval to sit for the examination without having passed the examination, the applicant for licensure must submit a new application for licensure and satisfy the administrative, educational, and experience requirements prevailing at the time of reapplication.

b) Oral Examination

The Board will administer an oral examination that:

i. Inquiries about the candidate’s intended areas of practice.

ii. Examines the candidate’s preparation, readiness, and competencies necessary for entry level
autonomous practice in the areas of intended practice.

iii. The Board will offer the oral examination to approved candidates after they have completed all other requirements for licensure. If the applicant for licensure is unable to satisfactorily meet the requirements of the oral examination, the Board will provide the applicant with written documentation of the areas that must be addressed prior to reexamination.

iv. If after two (2) attempts, the applicant for licensure fails to pass the requirements of the oral examination the applicant is denied licensure and must submit a new application for licensure and satisfy the administrative, educational, and experience requirements prevailing at the time of the reapplication.

E. ASPPB CERTIFICATE OF PROFESSIONAL QUALIFICATION IN PSYCHOLOGY (CPQ)

1. The Board shall grant a license, upon application, payment of applicable fees, and passage of any oral or written jurisprudence examination required by the Board, to any person who has met the requirements for and holds a current CPQ issued by ASPPB.

2. An applicant for licensure under this section shall make application on forms provided by the Board and shall pay application and licensure fees as set out in MR-300.A.

3. Official notice of current CPQ status must be provided directly from ASPPB to the Board.

4. An applicant for licensure under this section is authorized to practice psychology only after being licensed by the Board unless authorized to practice under another section of the statute or the regulations of the Board.

F. RECIPROCITY
1. The Board shall grant a license, upon application, payment of applicable fees and passage of any oral or written jurisprudence or other examinations required by the Board, to a person who:

   a) Applies pursuant to the ASPPB Agreement of Reciprocity (AOR) or another agreement of reciprocity recognized by the Board; and

   b) Holds a current license in good standing from a jurisdiction that is a signatory to the ASPPB AOR or another reciprocity agreement entered into by the Board; and

   c) Has not had a public disciplinary action taken against his/her license nor has a pending complaint against his/her license in any jurisdiction.

2. An applicant for licensure under this section shall make application on forms provided by the Board and shall pay applicable application and licensure fees.

3. An applicant for licensure under this section is authorized to practice psychology only after being licensed by the Board unless authorized to practice under another section of the act or the regulations of the Board rule.

G. PROVISIONAL LICENSURE

1. Provisional license for supervised practice

   a) A provisional license for supervised practice may be issued to an applicant for license for the autonomous practice of psychology who is in the process of completing the postdoctoral supervised experience requirement for licensure. The applicant shall have met all educational requirements, including a doctoral degree in psychology as defined in MR-400.B above and after having completed the required doctoral supervised experience.

   b) A provisional license for supervised practice permits an individual meeting requirements, as stated in MR-400, to practice under supervision for a limited period of time while completing the postdoctoral supervised experience requirement for the license for the autonomous practice of psychology. The provisional license for supervised practice will be granted for a period of one (1) year and
shall only be valid in a setting approved by the Board. At the Board’s discretion and upon specific application, one (1) renewal period may be granted by the Board. Supervision of a provisional supervised licensed psychologist will be provided according to the Board’s requirement for postdoctoral supervision in MR-400.C. Evaluations by the supervising psychologist shall be provided to the Board at least quarterly.

c) The provisional license for supervised practice becomes null and void at the completion of the term as approved by the Board or when a psychologist becomes licensed for autonomous practice, whichever occurs first. The provisional license for supervised practice must be returned to the Board.

d) A person practicing with a provisional license for supervised practice is subject to the rules, regulations, standards of practice, codes of ethics, and any other guidelines adopted by the Board, as well as disciplinary action by the Board.

e) A provisional supervised licensed psychologist must be supervised by a psychologist approved by the Board. A minimum of one (1) hour per week of face-to-face supervision must be provided. The provisional supervised licensed psychologist must submit for Board approval a supervision contract signed by both the supervising psychologist and the provisional supervised licensed psychologist. Interruptions to or termination of, supervisory arrangements must be reported to the Board within three (3) business days. In the temporary absence of the supervising psychologist, supervisory responsibilities must be transferred to another psychologist who notifies the Board of his/her agreement within three (3) business days in writing of the terms of the supervision.

f) A provisional supervised licensed psychologist shall not engage in the autonomous practice of psychology. If supervision occurs in another psychologist(s)’s private practice, details of supervision are subject to Board approval to determine compliance with MR-400.

2. Provisional license for independent practice
a) A provisional license for independent practice is available to applicants for licensure who are licensed in another jurisdiction, providing the following requirements are met:

i. The requirements for licensure in the jurisdiction where the individual is currently licensed must be substantially equivalent to or exceed the requirements in this jurisdiction, provided that the individual meets the educational requirements as set out in MR-400.B or is a holder of the CPQ.

ii. An applicant for licensure must submit a written request for a provisional license for independent practice with his/her application for licensure along with the appropriate fee(s) and document that he/she holds a current license in good standing in a jurisdiction of the United States or Canada.

b) The Board may require a personal interview/oral examination with the applicant for licensure.

c) The Board may require the applicant for licensure to take a jurisprudence examination.

d) The required examinations must be taken and passed within six (6) months of his/her application for a provisional license for independent practice.

e) An applicant for licensure who does not meet or exceed the passing score on any of the required examinations must reapply to take those examinations on the form(s) as required by the Board and pay the applicable examination fee(s).

f) If an application for licensure does not meet or exceed the passing score for one or more of the required examinations after a second attempt, the provisional license for independent practice immediately expires and the delivery of all services must cease until a license for autonomous practice is obtained. In the event that the above happens, the provisional independent licensed psychologist shall notify his/her clients and shall take immediate steps to transfer/refer clients.
g) All requirements for a license for autonomous practice must be met within six (6) months of initial application but at the discretion of the Board and upon reapplication, the provisional license for independent practice may be extended for up to an additional six (6) months.

h) A person practicing with a provisional license for independent practice is subject to the rules, regulations, standards of practice, codes of ethics, and any other guidelines adopted by the Board, as well as disciplinary action by the Board.

MR-500 LICENSE STATUS; LICENSURE RENEWAL; REINSTATEMENT CONTINUING PROFESSIONAL DEVELOPMENT (CPD)

A. STATUS OF LICENSES

1. Active Licenses

   An active license is a license issued by the Board for the current licensing period. The active license is the only status that is valid for the practice of psychology.

2. Inactive License

   a) A licensee with an active license may apply to the Board for inactive licensure status by submitting a written request. A psychologist on inactive status is required to pay the renewal fee for an inactive license.

   b) If there are any unresolved professional or ethical complaints, inactive status will be denied. A licensee may not use inactive status to circumvent the authority of the Board.

   c) A psychologist who holds an inactive license may not practice psychology but may continue to use the title “psychologist”.

   d) A psychologist who holds an inactive license continues to be subject to the statute and/or regulations of the Board.
e) Inquiries concerning the credentials of a psychologist who holds an inactive license shall be honored by the Board.

f) Inactive status must be at least one (1) year but not longer than three (3) years. The Board may for good cause reactivate a license that has been inactive for less than one (1) year with the payment of applicable fees. If less than three (3) years has passed, in addition to meeting all current requirements governing reactivation of an inactive license, the licensee shall take and pass the jurisprudence examination. A licensee may reactivate his/her license by making application to the Board. The Board shall reactivate the license based on:

i. Documentation of compliance with the CPD requirements during the renewal period immediately preceding the request for reinstatement.

ii. A signed statement certifying that the licensee has neither practiced psychology nor violated any of the statutes or regulations of the Board since the date on which the license was first placed on inactive status.

iii. Proof of no criminal conviction or any disciplinary action taken against the licensee by any licensing Board or agency during the period of inactivity.

iv. Proof of no violations of applicable statutes and/or regulations.

v. Completion of a criminal history background check and/or child abuse clearance.

vi. Payment of any outstanding administrative fines.

vii. Payment of applicable reactivation fees.

g) After three (3) years, an inactive license expires.

3. Expired License
a) If the licensee fails to renew the license, either by failure to pay the appropriate renewal fee, failure to meet CPD requirements or failure to reactivate an inactive license within three (3) years the license shall expire. An expired license is invalid for the practice of psychology. Anyone practicing or using the title “psychologist” while a license is expired shall be committing an offense. Each day in which a psychologist practices psychology on an expired license shall constitute a separate offense. Each offense is subject to disciplinary action.

After the renewal date has passed, the Board shall notify the licensee, at his/her most recent contact information on file with the Board that the license has expired.

b) If the license has been expired for less than one (1) year, the license can be reactivated by completing a reactivation application, paying the appropriate fees and meeting the CPD requirements.

c) After one (1) year, a psychologist on expired status must reapply for licensure and meet all standards and requirements that prevail at the time that he/she reapplies.

4. Retired License

a) If a licensee wishes to retire a license (not under discipline), the licensee:

   i. Must apply to the Board in writing;

   ii. Must be approved by the Board;

   iii. Cannot retire his/her license if there are any pending complaints against him/her.

b) A psychologist who has retired his/her license, cannot be reinstated but must reapply and meet all current licensure requirements to gain licensure. The Board may for good cause reinstate a license that has been retired for less than one (1) year with the payment of applicable fees.
c) A psychologist who has retired his/her license may not practice psychology but may continue to use the title “psychologist”.

B. RENEWALS

1. The renewal fee shall be due on ____ of each odd/even-numbered year.

2. Each licensee shall notify the Board of any changes to his/her mailing address or email address within 30 days of such a change. Failure to do so, may result in a disciplinary action.

3. The Board shall send to licensees at least 60 days in advance of the renewal date a renewal notice containing the renewal date, renewal fee required, and remittance address. Said notice shall be sent to the last contact information on file with the Board. Failure of the licensee to receive a renewal notice shall not prevent the license from expiring.

4. Failure of the Board to receive all necessary information regarding a renewal by established deadlines shall not prevent a license from expiring.

5. To renew an active license, the licensee must remit to the Board the license renewal fee for active licenses and sign an attestation that the licensee has completed 40 credits of approved CPD per year since the last renewal and the license is not subject to disciplinary action for any of the reasons set out in MLRA-1300. Failure to receive renewal notice or failure of licensee to submit all required information on the appropriate form by any deadline established by the Board, shall not prevent any disciplinary action being taken by the Board.

C. CONTINUING PROFESSIONAL DEVELOPMENT (CPD)

The [Name of Board] hereby utilizes the current ASPPB Continuing Professional Development Guidelines as its means of evaluating acceptable CPD.

During each biennial period commencing on ________, of each odd/even numbered year:

1. Each licensee shall be required to complete not less than 40 credits of CPD related to the licensee’s professional practice.

2. The required number of credits of CPD for a psychologist who first becomes licensed during the two (2) year period shall be decreased to 20 for one (1)
year and for psychologists licensed for less than one (1) year, no CPD credits will be required.

3. Each licensee is required to have at least three (3) credits in any of the areas of ethics, risk assessment and/or jurisdictional regulations or a combination thereof every two (2) years.

4. Each licensee shall be required to complete a CPD plan on a form provided from the Board at the beginning of each renewal period. The plan shall serve as a guide for the psychologist regarding CPD and shall be available to the licensing Board upon request.

5. At each renewal, the licensee shall identify his/her intended area of practice utilizing an intended area of practice form provided by the Board.

6. Credit for CPD shall be recognized in accordance with the following:

   a) Ongoing peer consultation refers to a structured and organized system of interaction with colleague(s) designed to help broaden professional knowledge and expertise and reduce professional isolation. A maximum of 20 credits per two (2) year period shall be recognized for regular and ongoing peer consultation. If this activity is chosen, a minimum of ten (10) credits are required. (one (1) hour = one (1) credit).

   b) Practice Outcome Monitoring (POM) refers to the periodic application of outcome assessment protocols with clients, in order to monitor one’s own practice process and outcomes. A maximum of 20 credits per two (2) year period shall be recognized for POM with one (1) client series of assessments being equal to one (1) credit, if properly documented.

   c) Professional activities: a maximum of ten (10) credits per two (2) year period shall be recognized for professional activities such as serving on psychological association Boards or committees, editorial Boards of peer reviewed journals, scientific grant writing teams or a Board member on a regulatory body.

   d) Conferences/Conventions: a maximum of five (5) credits per two (2) year period shall be recognized for attendance at professional
conference/conventions related to psychology, which are not part of formal approved sponsored CPD.

e) Courses: a maximum of 20 credits per two (2) year period shall be recognized for completing and passing a graduate-level course related to one’s area of psychological practice from a regionally accredited educational institution.

f) Instruction: a maximum of 20 credits per two (2) year period shall be recognized for teaching a graduate or undergraduate course related to psychology in a regionally accredited educational institution.

g) Publications: a maximum of ten (10) credits per two (2) year period shall be recognized for publications related to psychology as long as the publications are contained in a peer-reviewed article or a book chapter.

h) Approved sponsor continuing education: a maximum of 30 credits per two (2) year period shall be recognized for approved sponsored continuing education.

i) Self-directed learning: A maximum of five (5) credits per two (2) year period shall be recognized for self-directed learning directly related to the practice of the psychologist.

j) Board certification: a maximum of 40 credits per two (2) year period shall be recognized for the successful completion of the board examination of the American Board of Professional Psychology (ABPP).

7. Current approved sponsors of continuing education include the American Psychological Association or any of its sponsors approved through the current American Psychological Association sponsor approval system, the Canadian Psychological Association or any of its sponsors approved through the current Canadian Psychological Association sponsor and provider approval system, the academies of the specialty Boards of the American Board of Professional Psychology, the Association for Psychological Science, the National Association of School Psychologists, ASPPB, regionally accredited educational institutions that offer graduate training in psychology or related fields, accredited medical schools, category I Continuing Medical
Education (CME) of the American Medical Association, the Canadian Medical Association, the American Bar Association, and the Canadian Bar Association. Courses offered by non-psychology organizations must be relevant to the practice of psychology.

8. The delivery method of continuing education may be in person or electronically mediated methodologies as long as provided by an approved sponsor.

9. Each licensee shall be responsible for maintaining documentation of completed CPD activities for a period of four (4) years after the close of the two (2) year period to which the documentation pertains.

10. Each licensee shall attest on his/her biennial license renewal application that he/she has satisfied the CPD requirements. Documentation of these activities shall be retained by the licensee and not sent to the Board unless so requested. False attestation of satisfaction of the CPD requirements on a renewal application may subject the licensee to disciplinary action.

11. If a licensee fails to satisfy all of the requirements of CPD and attestation, his/her license shall be considered expired and not be renewed for the next biennial period.

12. The Board will audit at least a 10% sample of the renewal applications. Licensees whose applications are audited will be required to provide documentation of his/her CPD activities.

13. If an audited licensee attests to completion of the required CPD in the required timeframe but fails to provide acceptable documentation of the attested CPD, this shall constitute failure of the audit and he/she may be subject to disciplinary action.

14. If the licensee fails to meet the CPD requirements in a renewal period, he/she may be subject to disciplinary action and as part of the disciplinary action shall be required to remediate the required CPD activities in the timeframe specified by the Board.

15. The CPD credits used to make up the deficiencies identified in MR-500.C.14 above shall not be used by the licensee to meet CPD requirements for subsequent reporting cycles and the licensee will be audited in the next reporting cycle.
16. Appeal: the licensee shall have 30 days to appeal the decision made as a result of the CPD audit.

MR-600 PRIOR LICENSURE

A. A person licensed under a prior version of an act must comply with the current act and all regulations promulgated by the Board.

B. A person applying for renewal of his/her license under MLRA-700 must meet the same requirements for renewal as all other licensees, including:

1. Payment of renewal fees, including fees and balance due and/or late fees;

2. Compliance with CPD requirements as required in MR-500.C; and

3. Completion of any terms of remedial actions required by the Board related to a disciplinary action.

MR-700 TEMPORARY AUTHORIZATION TO PRACTICE

A. The Board may provide temporary authorization to practice to a psychologist who meets the following:

1. The individual provides verification of a valid Interjurisdictional Practice Certificate (IPC) issued by the ASPPB; or

2. Meets the following criteria:

   a) Licensed to practice psychology in at least one (1) jurisdiction where such license is based on receipt of a doctoral degree in psychology from a program meeting the criteria described in MR-400.B.

   b) No history of any publicly reported disciplinary action. If there is any disciplinary action pending, the application shall be held in abeyance until said disciplinary action is resolved.

   c) Attestation of work experience in the intended areas of practice.
d) Documentation of the nature of the intended areas of practice.

e) Statement that the individual is familiar with and will abide by the statutes and regulations of any jurisdiction in which he/she provides services and that the individual is subject to that jurisdiction’s disciplinary authority. In addition, upon application, a release must be signed, so that both the jurisdiction of licensure and the jurisdiction issuing the temporary authorization to practice will have access to verify disciplinary status.

f) A psychologist who has been granted temporary authorization to practice under this section shall be subject to the prohibitions and sanctions for inappropriate, unprofessional, and/or unethical conduct, and the provisions on hearings and investigations contained in MR-1000.

g) The Board shall conduct investigations and hearings of complaints involving psychologists practicing under this section in accordance with MR-1000, and the administrative procedures law of this jurisdiction.

B. Temporary authorization to practice shall be for 30 days per calendar year and may be extended at the discretion of the Board and upon reapplication, for up to an additional 30 days.

C. Any disciplinary action taken against an individual practicing under these regulations will also be reported to all states and provinces where the psychologist is currently licensed, as well as to the ASPPB Disciplinary Data System (DDS) and the National Practitioner Data Bank.

**MR-800 STATE OF EMERGENCY**

In the event a state of emergency is declared:

A. Pursuant to MLRA-1000, licensed psychologists from other jurisdictions of the United States or Canada may respond to a declared public health emergency and be granted a temporary authorization to practice in a declared state of emergency to engage in the practice of psychology as defined in MLRA-300.S.
B. Prior to providing professional services in this jurisdiction, a psychologist licensed at the doctoral level in another jurisdiction of the United States or Canada, shall apply for an Emergency Temporary Registration (ETR). The application for ETR shall be made available via the Board website or mailed upon request.

C. Applications for ETR shall be processed as priority during a declared emergency.

D. Accordingly, additional requirements for an ETR may be imposed pursuant to the emergency declaration issued which more properly address the needs of the particular declared emergency.

E. A psychologist not licensed in this jurisdiction, whose license is current, unrestricted, and at the doctoral-level in the jurisdiction of his/her residence in the United States. or Canada, and properly registers with the Board may gratuitously provide psychological services if:

1. The psychologist is engaged in a legitimate relief effort during the emergency period, and provides satisfactory documentation to the Board of the location site(s) that he/she will be providing psychological services;

2. The psychologist complies with the statutes and the regulations of this Board and other applicable laws, as well as practice in good faith, and within the reasonable scope of his/her skills, training, and ability; and

3. The psychologist renders psychological services on a gratuitous basis with no revenue of any kind to be derived whatsoever from the provision of psychological services within this jurisdiction.

F. The authority provided for the emergency rule shall be applicable for a period of time not to exceed 60 days at the discretion of the Board, with a potential extension of up to two (2) additional periods not to exceed 60 days for each extension as determined appropriate and necessary by the Board.

G. All interested psychologists shall submit to the Board a copy of their respective current and unrestricted licenses, picture identification, and any other information pertaining to identification or fitness to practice as requested by the Board.

H. Should a qualified psychologist registered with the Board thereafter fail to comply with any requirement or condition established by this rule, the Board may
immediately terminate his/her registration. In addition, any known jurisdiction in which the psychologist holds a license will be notified of any complaint, investigation and/or disciplinary proceedings by the Board.

I. In the event a psychologist fails to register with the Board, but practices psychology, whether gratuitously or otherwise, then such conduct will be considered the unlawful practice of psychology and prosecuted accordingly.

MR-900 CODE OF CONDUCT

The [Name of Board] hereby adopts by reference the ASPPB Code of Conduct, and its amendments.

MR-1000 INVESTIGATIONS AND HEARINGS

A. INVESTIGATIONS

1. The Board shall receive and upon receipt, process complaints regarding licensees or other individuals suspected of violating the statute, ASPPB Code of Conduct and/or all other ethical and professional standards, and regulations promulgated by the Board as amended from time to time.

2. Upon receipt of a written complaint the Board shall provide for an investigation to determine if there is sufficient evidence to warrant disciplinary proceedings.

3. If the Board determines that disciplinary action is not warranted, the investigative file shall be closed, provided that the Board may reinvestigate at any time if circumstances so warrant.

4. The Board may appoint, utilize, or employ investigators to investigate complaints.

B. BOARD HEARINGS

1. Hearings shall be conducted in accordance with this jurisdiction’s administrative procedure act and the jurisdiction’s public meeting law. In
Canada, hearings will be conducted in accordance with the applicable provincial/territorial legislation.

2. The Board may refuse to issue, renew, or may suspend, revoke, censure, reprimand, restrict or limit the license of or fine any person pursuant to the administrative procedures act, other applicable law, or set forth elsewhere in the act or in these regulations.

3. If no law covers administrative procedures, the following applies:

   a) At a hearing:

      i. The testimony of witnesses shall be taken under oath;

      ii. There shall be a right to compel the attendance of witnesses and cross examine such witnesses and present evidence in defense and rebuttal; and

      iii. When the respondent does not attend; the Board may:

          • Proceed with the hearing in the respondent’s absence upon proof of receipt of the notice/citation by the respondent or proof that the notice requirement of the jurisdiction’s administrative procedures act has been met, and

          • Without further notice to the respondent, may take any action that is authorized to take under the act and/or regulations.

   b) The decision will be based upon clear and convincing proof of the evidence.

4. If the Board does not have an appointed hearing officer, the Board may designate a member of the Board who shall have the authority to address and decide pre-hearing or preliminary matters on behalf of the Board. The designated member may issue subpoenas and rule on routine, non-dispositive matters, and unopposed or stipulated motions for a continuance of a hearing date filed at least seven (7) days prior to the scheduled hearing date.
5. Notice/Citation for hearing: The notice or citation shall be sent to the respondent by personal service or by certified mail at the last known address for that licensee, not fewer than 30 days before the date of the hearing or a shorter time if allowed by the administrative procedure act.

C. INFORMAL SETTLEMENT/CONSENT AGREEMENT
1. The Board, at its discretion, may enter into a consent agreement with the licensee in lieu of further disciplinary proceedings.

2. Informal settlement of a disciplinary complaint against a licensee by consent agreement shall be a public record in accordance with this jurisdiction’s public records law. Informal settlements or consent agreements, which are both a public record and a disciplinary action, are reportable to disciplinary/adverse action databases.

D. NOTIFICATION AND PUBLICATION OF DISCIPLINARY ACTIONS
1. The Board shall make public disciplinary actions taken by the Board against a licensee in accordance with this jurisdiction’s public records law and shall notify other regulatory and professional bodies including the ASPPB DDS.

2. Informal settlements are disciplinary actions reportable to disciplinary/adverse action databases.

E. EMERGENCY SUSPENSION
1. In situations where there is potential for imminent physical, emotional, or other psychological harm to a client or to the public because of a licensee’s conduct or practice notwithstanding any other provisions in law, the Board may, without a hearing, summarily suspend a license, if the Board finds that a licensee has violated a statute or regulation that the Board is empowered to enforce.

2. The suspension shall take effect upon written notice to the licensee specifying the statute or regulation violated. The licensee may appeal the emergency suspension. If the licensee appeals, a hearing of the appeal will be held within 30 days of the notice of appeal. If the emergency suspension is upheld, a disciplinary hearing will be held within 90 days of the suspension.
3. In the event of emergency suspension, the licensee shall notify his/her clients of the action and take the appropriate steps to refer or transfer clients to other appropriate providers.

F. INJUNCTIVE RELIEF
1. The Board, at its discretion, may pursue injunctive relief against a licensee of the Board as otherwise provided by the statute.

2. No provision of this section shall prohibit the Board from seeking any other relief or penalty, permitted by statute or regulations, regarding a licensee of the Board.

G. DETERMINATION OF MENTAL, COGNITIVE, OR PHYSICAL IMPAIRMENT
1. If required by the Board in its investigation or handling of a complaint, the medical/psychological records of a licensee shall be provided to the Board within the time period stipulated by the Board.

2. For the purposes of this section medical records shall mean, at a minimum, any records of treatment for physical, mental, cognitive conditions or disorders.

3. As part of a disciplinary proceeding, the Board, at its sole discretion, may require a licensee of the Board to obtain such mental, medical or cognitive evaluations as the Board determines are necessary to determine the licensee’s competence or fitness to practice psychology. Professionals performing such evaluations shall be subject to the prior approval of the Board. Results of such evaluations shall be provided to the Board within 30 days of the completion of such evaluations.

4. Costs of obtaining medical records or evaluations as defined in this section shall be borne by the licensee.

H. REINSTATEMENT OF REVOKED LICENSE
1. Any person whose license has been revoked by the Board under the provisions of this section may, subsequent to such Board action, submit to the Board a petition to reapply for a license.

2. The Board, at its discretion, may grant or deny the petition of reapplication.
a) If granted, the psychologist must reapply for licensure as a new applicant for licensure and meet all standards and requirements prevailing at the time that he/she re-applies.

b) If denied, the psychologist may request a hearing to appeal the decision of the Board.

c) The Board, at its discretion may, after a hearing, grant or deny the reapplication.

I. VOLUNTARY SURRENDER

1. The Board, at its sole discretion may accept or refuse to accept the voluntary surrender of a license to practice psychology by a licensee of the Board. A licensee may surrender his/her license when such person is charged with unethical conduct and upon receipt of that charge that person decided to surrender the license. Such surrender and acceptance by the Board shall constitute acknowledgment by the psychologist of guilt as charged and is considered a public and reportable disciplinary action. Such surrender shall not rescind the jurisdiction of the Board to proceed to a formal adjudication of the matter.

2. Such voluntary surrender shall not exempt the licensee from other disciplinary actions by the Board as provided for by the relevant statute and these regulations.

3. Persons voluntarily surrendering a license under this section may reapply for license to practice psychology as provided in MR-1000.H above.

MR-1100 APPEALS

A licensee or an applicant for licensure, whose license to practice has been denied, revoked, suspended or otherwise limited pursuant to a final decision of the Board, may appeal the decision by applying for a judicial review in accordance with the provisions of the jurisdiction’s administrative procedure act.

MR-1200 SEVERABILITY
If any section in these regulations or any part of any section thereof shall be adjudged by any court or competent jurisdiction to be invalid, such judgment shall not affect, impair, or invalidate the remaining section or parts thereof of these regulations.

**MR-1300 EFFECTIVE DATE**

These regulations shall become effective upon the date it is signed by the [cite appropriate authority] or on the date it otherwise becomes effective by operation of law.
PSYCHOLOGICAL ASSOCIATE

If psychological associates are licensed, the following language is suggested for insertion in the appropriate sections of the model regulations. If no language is provided, the model regulations language should be used. For jurisdictions licensing psychological associates prior to the enactment of these regulations for autonomous practice, a grandparent provision should be considered.

REQUIREMENTS FOR LICENSURE AS A PSYCHOLOGICAL ASSOCIATE

A. GENERAL

1. Applicants for licensure as a psychological associate must document that they have met the requirements in MR _____ and _____ before being authorized to sit for the EPPP or other examination(s) required by the Board.

B. EDUCATION

1. A master’s degree in psychology must be obtained from an institution meeting the following criteria:

   a) An institution of higher education that was, at the time the degree was awarded:

      i. A university recognized by the designated provincial or territorial authority; or

      ii. A foreign college or university deemed to be equivalent to B.1.a.i, ii or iii above by a foreign credential evaluation service that is a member of the National Association of Credential Evaluation Services.

      b) The program, wherever it may be administratively housed, must be clearly identified and labeled as a psychology program. Such a program must specify in pertinent institutional catalogues, web sites, and brochures its intent to educate and train professional psychological practitioners; “Professional Psychology” refers to
psychology as a profession. The term is not intended in the more restrictive sense of applies or practice areas of psychology;

c) The psychology program must stand as recognizable, coherent organizational entity within the institution;

d) There must be a clear authority and primary responsibility for the core and specialty areas whether or not the program cuts across administrative lines;

e) The psychology program must be an integrated, organized sequence of study;

f) There must be an identifiable psychology faculty and a psychologist responsible for the psychology program. This is considered to include an identifiable psychology faculty on-site sufficient in size and breadth to carry out faculty program responsibilities;

g) The psychology program must include a minimum of 500 hours of supervised professional experience, supervised by a doctoral level psychologist. At least 80% of the supervised professional experience shall be service-related activities defined as treatment/intervention, assessment, interviews, report-writing, case presentations, and consultations. At least 25% of the supervised professional experience shall be devoted to face-to-face client contact. The student shall be designated as any of the following: an “intern,” “extern,” or “practicum student,” or shall hold a title which indicates training status for the supervised practice of psychology;

h) The psychology program must have an identifiable body of students who are matriculated in that program for a degree;

i) The curriculum shall encompass a minimum of one (1) academic year of full-time graduate study which includes a minimum of one (1) continuous academic year of full time residency at the educational institution granting the master’s degree. An academic year is defined as two (2) consecutive academic semesters, each of which must be no less than four (4) months (or three (3) consecutive trimesters or quarters which is no less than eight (8) months). Continuous is defined as full time enrollment over the course of the defined academic year. Multiple long weekends
and/or summer intensive sessions do not meet the definition of continuous. Residency means physical presence, in person, face-to-face, at an educational institution granting the master’s degree for the purposes of facilitating acculturation in the profession, the full participation and integration of the individual in the educational and training experience and includes faculty student interaction. Training models that rely exclusively on physical presence for periods less than one (1) year continuous year (e.g., multiple long weekends and/or summer intensive sessions), or that use video teleconferencing or other electronic means as a substitute for any part of the minimum requirement for physical presence at the institution do not meet this definition of residency; and

j) The core program shall include a minimum of one (1) course three (3) semester, five (5) quarter or trimester hours in the following areas and is typically met through substantial instruction in each of these following areas, and may include distance education except as noted in MR [CITATION] below:

i. Biological bases of behavior (e.g., Physiological psychology, comparative psychology, neuropsychology, sensation and perception, and psychopharmacology);

ii. Cognitive-affective bases of behavior (e.g., learning, thinking, motivation, and emotion);

iii. Social bases of behavior (e.g., social psychology, group processes, organizational and systems theory);

iv. Research design and methodology;

v. Psychometric theory;

vi. Individual differences (e.g., personality theory, human development, and abnormal psychology);

vii. Statistics;

viii. Scientific and professional ethics and standards;
ix. Assessment/Evaluation (e.g. psychological testing, program evaluation, and organizational analysis); and

x. Treatment/Intervention (e.g. therapy, consultation, and evaluation).

k) Courses for the completion of MR [CITATION] above shall not be acceptable for licensure if provided by distance education.

J. DOCUMENTATION OF EDUCATION
1. A certified transcript of courses completed must be received:

   a) Directly from the university or program that granted the applicant for licensure’s master’s degree; or

   b) Directly from ASPPB if the applicant for licensure is a participant in PLUS or the ASPPB Credentials Bank.

K. FOREIGN-TRAINED APPLICANTS
1. An applicant for licensure whose application is based upon a degree from an institution outside the United States or Canada shall provide the Board with documentation and evidence to establish that his/her education is substantially equivalent to the criteria in B.1. above. The applicant shall provide the Board with the following, at a minimum:

   a) An original diploma or other certificate of graduation, which will be returned, and a photocopy of such a document, which will be retained by the Board;

   b) A transcript or appropriate documentation of all coursework completed;

   c) A certified translation of all documents that are submitted in a language other than English;

   d) Satisfactory evidence of supervised experience included in the educational degree program; and
e) A statement based on the documents required above that indicates the sequence of studies, training and research. This statement shall be comparable to and communicate essentially the same information as a transcript issued by a United States or Canadian university.

2. Final review and decision will be made by the Board.

3. The burden of proof that his/her foreign education is substantially equivalent to the criteria in B.1 above is borne entirely by the applicant for licensure.

L. POST-LICENSE SUPERVISION

1. Supervision in general

a) A licensed psychological associate (hereinafter, “supervisee”) may practice psychology as defined in this act only under the supervision of an actively licensed psychologist (hereinafter, “supervisor”).

b) A supervisee is authorized to practice in those public or private places or facilitates where his/her primary supervisor regularly provides psychological services.

c) A supervisee is not required to be in the presence of the supervisor to provide psychological services.

d) A supervisor shall assess the experience, skill, knowledge and training of each supervisee under his/her supervision and provide an adequate level of supervision according to accepted professional standards, based on this evaluation, the availability of other qualified licensees for consultation, and the type of psychological services being provided.

e) The supervisor shall determine the manner in which the supervision is provided to ensure appropriate monitoring of all delegated services for legal, competent, and ethical performance.

f) Supervision may be provided in-person or by electronic means as determined by the supervisor.
g) All individuals receiving psychological services from a supervisee must be informed in writing of the professional status, qualifications, and functions of the supervisee and how the client may contact the supervisor directly.

h) With respect to the limits of confidentiality, the individual receiving psychological services must be informed that the supervisor will have access to all relevant information.

i) All materials relating to the practice of psychology, upon which the supervisee’s name or signature appears, must indicate his/her supervisory status.

j) A familiar or multiple relationship that compromises objectivity shall not exist between the supervisee and the supervisor. A supervisor may only supervise the number of supervisees for which he/she can provide adequate supervision, but in no case shall he/she serve as a primary supervisor for post-licensure purposes to more than four (4) supervisees at any one time.

k) Prior to the performance of any psychological practice by a supervisee, each supervisor shall submit to the Board written notification, signed by both parties, of the supervisee’s intent to practice. The notification of intent to practice shall include:

   i. The names, practice addresses, email addresses and telephone numbers of the supervisee and supervisor;

   ii. Summary of intended practice;

   iii. Description of supervisory arrangements in each setting; and

   iv. Signatures of both the supervisee and supervisor.

l) The supervisee and supervisor shall notify the Board of any substantial changes to the intent to practice notification filed with the Board within 15 days of occurrence.
2. Responsibilities of supervisor

a) The supervisor shall retain professional responsibility for the actions of, and services provided by, the supervisee, and is accountable for the planning, delivery and outcome of the work of the supervisee.

b) The supervisor shall be competent to perform any psychological services being provided under his/her supervision.

c) The supervisor shall be available for emergency consultation at the request of the supervisee.

d) The supervisor shall notify the Board if the supervisor has reason to believe that the supervisee is practicing in a manner contrary to legal, ethical, and/or professional standards.

e) The supervisor shall maintain a clear and accurate record of supervision with the supervisee that documents the following:
   i. Dates and appointment times of each supervision session, including the length of time of each session;
   ii. Summary content of each session including treatment issues addressed, concerns identified by the supervisor and supervisee, recommendations of the supervisor, and intended outcome for recommendations of the supervisor; and
   iii. Fees charged, if any, to the supervisee.

f) The supervisory record as defined in E.2.e above shall be available upon request by the Board or the supervisee. Except when prevented from doing so by circumstances beyond the supervisor’s control, the supervisor shall retain securely and confidentially the supervisory record for at least seven (7) years from the date of termination of a supervisor/supervisee relationship.

g) Within 15 days of termination of a supervisor/supervisee relationship, the supervisor shall give written notice and date of termination to the Board by an appropriate verifiable method.
3. Responsibilities of supervisee

a) The supervisee shall not commence practice until he/she receives acknowledgment from the Board that the Board has received and processed the intent to practice notification;

b) The supervisee shall participate in scheduled supervision sessions;

c) The supervisee shall provide the supervisor with a disclosure of all psychological services being offered by the supervisee;

d) The supervisee shall provide the supervisor with information necessary for the supervisor to advise the supervisee on cases giving rise to professional, ethical and legal concerns; and

e) The supervisee shall notify the Board if he/she has reason to believe that the supervisor has behaved in a manner contrary to legal, ethical and/or professional standards.
BEHAVIOR ANALYST

If behavior analysts are licensed, the following language is suggested for insertion in the appropriate sections of the model regulations. If no language is provided, the model regulations should be used.

REQUIREMENTS FOR LICENSURE AS A BEHAVIOR ANALYST

A. GENERAL

Applicants for licensure as a behavior analyst must complete application forms as required by the Board and pay required application fees.

B. EDUCATION

1. The training program to obtain licensure as a behavior analyst:

   a) Is accredited by the Association for Behavior Analysis International or its successor organization; or

   b) If not accredited by the Association for Behavior Analysis International, an applicant for licensure must present to the Board transcripts, description of training program, letters from the directors of departments of the institution where the program is conducted, or other documentation deemed suitable by the Board showing that the program substantially complies with the standards of the Association of Behavior Analysis International or its successor organization.

2. An applicant for licensure must meet the requirements of MLRA [CITATION].

3. An applicant for licensure shall complete, as part of or in addition to the coursework necessary to obtain the graduate degree required under MLRA [CITATION], 225 classroom hours of graduate level instruction. The applicant shall ensure that the classroom hours include the following content areas:

   a) Ethical and professional conduct: 15 hours;

   b) Definition and characteristics, principles, processes, and concepts: 45 hours;

   c) Behavioral assessment; selecting interventions outcomes and strategies: 30 hours;
d) Experimental evaluation of interventions: 20 hours;

e) Measurement of behavior; displaying and interpreting behavioral data: 20 hours;

f) Behavioral change procedures; systems support: 45 hours; and

g) Discretionary content related to behavior analysis: 50 hours.

C. SUPERVISED EXPERIENCE

1. The applicant for licensure has completed a minimum of 1,500 hours of supervised experience in behavior analysis that meets the requirements under MLRA [CITATION] Experience for Behavior Analyst section;

2. Proof that the applicant for licensure’s supervised experience in behavior analysis included:

   a) Conducting behavioral assessment and assessment activities related to the need for behavioral interventions;

   b) Designing, implementing, and monitoring behavior analysis programs for clients;

   c) Overseeing the implementation of behavior analysis programs by others; and

   d) Performing or participating in other activities normally performed by a behavior analyst.

3. Verification of supervised experience in behavior analysis submitted by an individual with direct knowledge of the supervised experience in behavior analysis, independent fieldwork, university practicum, or intensive university practicum.

D. EXAMINATIONS

1. To be licensed as a behavior analyst, an individual shall take and pass the examination administered by the Behavioral Analyst Certification Board (BACB) as part of its certification process.
2. An individual who does not meet or exceed the passing score for the BACB examination three (3) times, regardless of the jurisdiction, shall not take the examination again until the individual complies with additional requirements that the Board specifies based on the assessment of the knowledge and skill deficiencies identified as being related to the applicant for licensure’s inability to achieve a passing score on the examination.

E. ETHICAL STANDARD
   The Board incorporates by reference the BACB Professional and Ethical Compliance Code for Behavior Analysts, published by the BACB and available for review at the Board office and online at www.BACB.com and other guidelines as approved by the Board.

F. LICENSE BY RECIPROCITY
   An individual who is licensed as a behavior analyst in another state may apply for an initial license as a behavior analyst in this jurisdiction by completing necessary application forms and submitting evidence that the applicant for licensure:

   1. Obtained a graduate degree from an institution of higher learning accredited by a recognized accrediting agency;

   2. Completed a minimum of 1,500 hours of supervised experience;

   3. Completed a minimum of 225 classroom hours of graduate-level instruction in the content areas listed in B.3 above; and

   4. Passed the examination referenced in D above.

CONTINUING EDUCATION (CE) REQUIREMENT

A licensed behavior analyst shall ensure that each CE program provides the necessary understanding of current developments, skills, or procedures related to the practice of behavior analysis. The following provide the necessary understanding of current developments, skills, or procedures related to the practice of behavior analysis:

1. CE programs offered by a BACB-approved provider: one (1) credit of continuing education for each hour of participation;

2. Courses that directly relate to behavior analysis and are provided by an accredited educational institution: maximum of 20 credits per two (2) year
period shall be recognized for completing and passing graduate level courses related to one’s area of practice from a regionally accredited educational institution;

3. Self-study, online, or correspondence course that is directly related to behavior analysis and offered by a BACB-approved provider or approved/offered by a regionally accredited educational institution: hours of CE determined by the course provider;

4. Teaching a CE program offered by a BACB-approved provider or approved/offered by a regionally accredited educational institution: one (1) credit of CE for each hour taught;

5. Credentialing activities approved for CE by the BACB: one (1) credit of CE for each hour of participation; and

6. Publication of a peer-reviewed article or text book on the practice of behavior analysis: 10 credits of CE.

The numbers of credits of CE is limited as follows:

1. No more than 20 credits of the required credits in a two (2) year period may be obtained from teaching a CE program or course. A licensed behavior analyst shall not obtain CE credits for teaching the same CE program or course more than two (2) times during each licensing period. A licensed behavior analyst shall not earn CE credits for participating as a member of a panel at a CE program or course.

2. No more than five (5) credits in a two (2) year period shall be recognized CE.

3. Credits obtained in excess of the minimum required during a license period shall not be carried over to a subsequent license period.

A licensed behavior analyst shall obtain a certificate or other evidence of attendance from the provider of each CE program or course attended that includes the following:

1. Name of the licensed behavior analyst;

2. Title of the CE;

3. Name of the CE provider;
4. Date, time, and location of the CE; and

5. Number of hours of CE obtained.

A licensed behavior analyst shall maintain the evidence of attendance for two (2) licensing periods and make the evidence available to the Board upon request.
PSYCHOLOGISTS WITH PRESCRIPTIVE AUTHORITY

If Prescribing Psychologists are licensed, the following language is suggested for insertion in the appropriate sections of the model regulations. If no language is provided, the model regulations language should be used.

PREFACE

Pursuant to [place jurisdiction’s statutory reference here] enacted on [place statute enactment date here], this document provides for regulations regarding prescriptive authority for [insert statutory designation here; EX: ‘prescribing’] psychologists, including the application process, limits of practice, documentation requirements and physician consultative relationship, prescribing practices, continuing education requirements, renewal process and complaint procedure.

CERTIFICATE OF PRESCRIPTIVE AUTHORITY

DEFINITIONS

A. BONA-FIDE MEDICATION SAMPLE
   A medication, other than a controlled substance, packaged by the original manufacturer thereof in such quantity as does not exceed a reasonable therapeutic dosage and provided at no cost to a Prescribing Psychologist for administration or distribution to a client at no cost to the client.

B. COLLABORATING PHYSICIAN
   A physician who consults and/or collaborates with a Prescribing Psychologist.

C. CONCURRENCE OR CONCUR
   A physician’s agreement to a plan for psychopharmacologic management of a client based on prior discussion with a Prescribing Psychologist.

D. CONSULTATION AND COLLABORATION WITH A PRESCRIBING PSYCHOLOGIST OR CONSULT AND/OR COLLABORATE
   The practice in which a physician discusses and, if deemed appropriate, concurs in a Prescribing Psychologist’s plan for psychopharmacologic management of a client for whom the physician is the primary or attending physician.

E. CONTROLLED SUBSTANCE
   Any substance defined, enumerated, or included in federal or state statute or regulations 21 C. F. R. 1308. 11-.15 or [insert pertinent state/provincial/territorial
statute(s)], or any substance which may hereafter be designated as a controlled substance by amendment or supplementation of such regulations or statute.

F. **DISCUSSION**
A communication between a physician and a Prescribing Psychologist conducted in person, by telephone, in writing or by some other appropriate means.

G. **DRUG**
The same as the term “drug” as defined in [pertinent state/provincial/territorial statute], including controlled substances except narcotics, but shall be limited to only those agents related to the diagnosis and treatment or management of mental, nervous, emotional, behavioral, substance abuse or cognitive disorders.

H. **MEDICATION**
Synonymous with drug, as defined herein.

I. **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 the mental, nervous, emotional, behavioral, substance abuse and cognitive disorders listed in the International Classification of Diseases published by the World Health Organization.

J. **NARCOTICS**
Natural and synthetic opioid analgesics and their derivatives used to relieve pain.

K. **PHYSICIAN**
An individual licensed by the medical Board to engage in the practice of medicine in the [state/province/territory] of [insert jurisdiction] as evidenced by a current license duly issued by the Board.

L. **PRESCRIBING PSYCHOLOGIST**
A psychological practitioner who is a licensed, doctoral-level psychologist who has undergone specialized education and training in preparation for prescriptive practice and has passed an examination accepted by the regulatory authority relevant to establishing competence for prescribing, and has received from the regulatory authority a current certificate or license granting prescriptive authority, which has not been revoked or suspended. Such practice includes the authority to administer and prescribe drugs and distribute bona-fide medication samples, as defined in this section.
M. PRESCRIBING PSYCHOLOGY

Profession of the health sciences which deals with the examination, diagnosis, psychological, pharmacologic and other somatic treatment and/or management of mental, nervous, emotional, behavior, substance abuse or cognitive disorders, and specifically includes the authority to administer, and prescribe drugs and distribute bona-fide medication samples as defined in this section. In addition, the practice of prescribing psychology includes those practices as defined in [insert pertinent state/provincial/territorial statute].

N. PRIMARY OR ATTENDING PHYSICIAN

A physician who has an active clinical relationship with a client and is principally responsible for the health care needs of the client, or currently attending to the health care needs of the client or considered by the client to be his/her primary or attending physician.

O. PSYCHOPHARMACOLOGIC MANAGEMENT

The treatment and/or management of the mental, nervous, emotional, behavior, substance abuse and cognitive disorders with medication.

REQUIREMENTS FOR CERTIFICATION AS A PRESCRIBING PSYCHOLOGIST

A. A Certificate of Prescriptive Authority will be issued by the Board granting a psychologist the authority to prescribe medications when the psychologist has met the following requirements:

1. The applicant for certification has filed an application for a Certificate of Prescriptive Authority and paid the required fees.

2. The applicant for certification holds a current [insert name of jurisdiction] license to practice psychology with a health service provider certification.

3. The applicant for certification has successfully graduated with an approved post-doctoral master’s degree in clinical psychopharmacology from an institution accredited by a regional body recognized by the Council of Higher Education Accreditation or the United States Department of Education.

4. The applicant for certification has successfully completed training approved by the Board that is equivalent to a post-doctoral master’s degree in clinical
psychopharmacology is an alternative educational qualification for the Certificate of Prescriptive Authority.

5. The applicant for certification has passed the Psychopharmacology Examination for Psychologists (PEP), developed and maintained by the ASPPB.

   a) Applicants for the PEP must apply and be approved by ASPPB.

   b) The successful completion of the PEP must be within three (3) years of completing an application for a Certificate of Prescriptive Authority.

   c) Applicants for certification shall be required to authorize ASPPB to release their test results to the Board each time the applicant for certification attempts the examination according to the procedures for such notification established by ASPPB.

   d) The passing score for the PEP shall be established by ASPPB.

   e) If the applicant for certification’s score falls below the passing score, the applicant may take the examination a second time after a mandatory 90-day waiting period.

   f) If the applicant for certification’s score falls below the passing score on the second attempt, the applicant shall be required to wait one (1) year before repeating the PEP.

   g) If the applicant for certification falls below the passing score on the third attempt, the applicant shall be required to undergo and successfully complete remedial education and training as determined by the Board before being permitted to repeat the PEP.

   h) If the applicant for certification falls below the passing score on the fourth attempt, the applicant will be required to repeat the educational program as outlined above before repeating the PEP and re-applying for prescriptive authority.

6. As a condition for eligibility for the issuance of a Certificate of Prescriptive Authority, the applicant for certification must submit such number of full sets of fingerprints, or other identifiable information, and fee and costs as may be
incurred by the Board in requesting or obtaining criminal history record information as authorized by [insert statutory authority] and in the form and manner prescribed by the Board’s regulations.

7. The applicant for certification possesses approved certification in Basic Life Support (BLS).

8. The applicant for certification shall not be otherwise disqualified by any ground for denying either a license to practice psychology or a certificate or license for prescriptive authority provided by the Prescribing Psychologist statute or these regulations.

B. The burden of satisfying the Board as to the qualifications and eligibility of an applicant for certification shall be upon the applicant. An applicant shall not be deemed to possess such qualifications unless the applicant demonstrated and evidences such qualifications in the manner prescribed by and to the satisfaction of the Board.

C. Upon successful completion of all requirements in A. 1-6 in this section, the Board will review the application and notify the applicant of his/her approval status.

1. The Board shall have the right to modify, restrict or otherwise limit the prescriptive authority being granted a Prescribing Psychologist, based on his/her training, experience, practice history or other factors as might be necessary to ensure the health, safety and welfare of the public. Such modifications, restrictions or other limitations may include, but are not necessarily limited to, restrictions on the age range of clients treated, the prescription of controlled substances, off-label prescribing, medication classes prescribed, and types of disorders treated. The Board shall have the right to change, modify or remove any such restriction or other limitations when appropriate.

2. If the application is approved, a valid Certificate of Prescriptive Authority with an assigned number will be issued to the psychologist, and the psychologist will be listed with the Board as a Prescribing Psychologist.

   a) The Certificate of Prescriptive Authority will be visibly displayed in the Prescribing Psychologist’s primary practice location.
b) All documents produced by a Prescribing Psychologist relevant to prescribing activities, including prescriptions, must include a signature block with “Prescribing Psychologist” or the abbreviation of “PP” following the designation of his/her doctorate degree.

c) The Prescribing Psychologist shall not issue a prescription for a controlled substance until the Board has received verification that the Prescribing Psychologist has received a valid [Controlled and Dangerous Substance (CDS) license; Controlled Substance Registration (CSR); or appropriate term for the jurisdiction’s controlling authority] from the state [or province or territory] of [insert jurisdiction’s name] and valid federal DEA number. In order to continue prescribing controlled substances, the Prescribing Psychologist is also required to maintain and renew the [CDS, CSR, or controlling authority’s term] license and DEA number in accordance with all applicable state and federal laws.

d) The Board shall submit to the [jurisdiction’s pharmacy authority] the name and address of the Prescribing Psychologist approved for a Certificate of Prescriptive Authority, the certificate number, and effective date of the certificate.

3. If the application for a Certificate of Prescriptive Authority is not approved, the psychologist will be notified and provided an explanation for denial and information pertaining to potential guidelines for remediation of any identified deficiencies.

4. If the license of a psychologist who has applied for a Certificate of Prescriptive Authority is under disciplinary restriction or under investigation due to a complaint having been filed with this Board, granting of the Certificate of Prescriptive Authority may be withheld until such time as the restriction or the investigation has come to conclusion and the license is in good standing status.
CERTIFICATION; CERTIFICATION RENEWAL; CERTIFICATION REINSTATEMENT; CONTINUING PROFESSIONAL DEVELOPMENT/CONTINUING MEDICAL EDUCATION

A. CONTINUING PROFESSIONAL DEVELOPMENT (CPD)/CONTINUING MEDICAL EDUCATION (CME)

1. In addition to the requirements for CPD as specified in the regulations of the Board, each Prescribing Psychologist shall annually complete 30 hours of approved CME in psychopharmacology and/or psychopharmacotherapy and/or other topics relevant to the practice of prescribing psychology. When selecting CME activities, the Prescribing Psychologist shall select those activities that are offered by sponsors approved by the Board and contain information on subjects relevant to the practice of prescribing psychology.

2. At least two hours required by this section shall be devoted to ethics relevant to the practice of prescribing psychology.

3. Acceptable sponsors of CPD are listed in [insert jurisdiction’s statutory or regulatory reference here]. These include accredited institutions of higher education; national (e.g., American Psychological Association, American Medical Association), regional, or state professional association (e.g. SPA, A State Medical Society), which specifically offer graduate or post-doctoral continuing education training. When choosing other CME activities to fulfill CPD requirements, the Prescribing Psychologist shall select those Category 1 activities that are offered by sponsors accredited by the Accreditation Council for Continuing Medical Education.

4. Home study courses shall have either American Psychological Association or Accreditation Council for Continuing Medical Education approval.

5. Each Prescribing Psychologist shall, as part of his/her CPD requirements, maintain BLS certification.

6. The Board may, in its discretion, waive all or part of the CPD required by these regulations in favor of a Prescribing Psychologist who makes written request for such waiver and evidences to the satisfaction of the Board a permanent physical disability, illness, financial hardship, or other similar extenuating circumstances precluding the Prescribing Psychologist’s satisfaction of the CPD requirements.
B. FAILURE TO SATISFY CONTINUING PROFESSIONAL DEVELOPMENT REQUIREMENTS
1. A Prescribing Psychologist who fails to provide satisfactory evidence of the CPD requirements shall be given written notice of such failure by the Board. The Certificate of Prescriptive Authority shall remain in full force and effect for a period of 60 days following the mailing of such notice, following which it shall be deemed expired, non-renewed, and subject to revocation without further notice, unless the psychologist shall have, within such 60 days, furnished the Board satisfactory evidence, by affidavit, that:

   a. The psychologist has satisfied the applicable CPD requirements; or

   b. The psychologist’s failure to satisfy the CPD requirements was occasioned by disability, illness, or other good cause as may be determined by the Board.

2. The license of a Prescribing Psychologist whose Certificate of Prescriptive Authority has expired by nonrenewal or been revoked for failure to satisfy the CPD requirements may be reinstated by the Board within the time and in accordance with the procedures for reinstatement provided by these regulations.

C. FEES

1. Certificate of Prescriptive Authority application processing fee $________

2. Certificate of Prescriptive Authority renewal fee $________

3. PEP Fee as set by ASPPB.

4. Certificate of Prescriptive Authority reinstatement fee $________

D. ANNUAL RENEWAL OF THE CERTIFICATE OF PRESCRIPTIVE AUTHORITY

1. Each Prescribing Psychologist shall report his/her ___ hours of annual CPD relevant to the pharmacological treatment of mental and emotional disorders on a form provided by the Board. This form will be distributed with the license renewal form. By signing the report form, the Prescribing Psychologist signifies that the report is true and accurate. This report is submitted annually, at the time of license renewal, while other CPD
requirements follow the biennial reporting guidelines listed in [insert jurisdiction’s statutory or regulatory reference here].

2. Each Prescribing Psychologist prescribing controlled substances shall also submit documentation of a valid CDS license and DEA number with the CPD report.

3. Upon acceptance of required CPD credits and documentation of current BLS certification, the Board will issue a renewal of the Prescribing Psychologist’s Certificate of Prescriptive Authority, providing that the Prescribing Psychologist’s license to practice psychology is simultaneously renewed by the Board.

E. REINSTATEMENT OF EXPIRED CERTIFICATE OF PRESCRIPTIVE AUTHORITY

1. A Certificate of Prescriptive Authority that has expired without renewal may be reinstated by the Board provided that application is made within two (2) years of the date of expiration.

2. A Prescribing Psychologist whose Certificate of Prescriptive Authority has expired for a period in excess of two (2) years or who is otherwise ineligible for reinstatement under this section may apply to the Board for an initial original Certificate of Prescriptive Authority pursuant to these regulations.

3. An applicant for certification seeking reinstatement more than one (1) year but less than two (2) years from the date on which his/her Certificate of Prescriptive Authority expired shall demonstrate, as a condition of reinstatement, satisfaction of the CPD required for each year since the date of the Certificate of Prescriptive Authority expiration. As additional conditions of reinstatement the Board may require that the applicant:

   a) Complete a statistical affidavit; and

   b) Provide a recent photograph;

   c) Take and successfully pass:

      i. The PEP; and/or
ii. A written certification or recertification examination acceptable to the Board; and/or

d) demonstrate clinical competency by successfully completing a program designated by the Board and any recommended remediation.

4. An applicant whose license to practice psychology or Certificate of Prescriptive Authority has been revoked, suspended or placed on probation by the licensing authority of any state/province/territory or who has voluntarily or involuntarily surrendered his/her license to practice psychology or Certificate of Prescriptive Authority in consideration of the dismissal or discontinuance of pending or threatened administrative or criminal charges following the date on which his/her Certificate of Prescriptive Authority expired, shall be deemed ineligible for reinstatement of the Certificate of Prescriptive Authority.

5. An application for reinstatement of a Certificate of Prescriptive Authority meeting the requirements and conditions may nonetheless be denied for any of the causes for which an application for the original Certificate of Prescriptive Authority may be refused by the Board pursuant to [relevant statute] or for violation of these regulations.

6. An application for reinstatement shall be made in a format supplied by the Board together with the applicable fees and costs for Certificate of Prescriptive Authority renewal, plus a penalty computed as follows:

   a) If the application is made less than one (1) year from the date of expiration, the penalty shall be equal to the renewal fee of the Certificate of Prescriptive Authority.

   b) If the application is made more than one (1) year but less than two (2) years from the date of expiration, the penalty shall be equal to twice the renewal fee of the Certificate of Prescriptive Authority.

F. NECESSITY FOR CERTIFICATE OF PRESCRIPTIVE AUTHORITY

No person shall engage in the practice of prescribing psychology, or identify or hold himself or herself out as such, nor use in connection with his/her name the words “Prescribing Psychologist” or the letters “PP”, unless he/she has a current Certificate of Prescriptive Authority issued by the Board.
**LIMITS OF PRACTICE**

A. Prescribing psychologists shall pharmacologically treat only those disorders listed in the most recent edition of the Diagnostic and Statistical Manual of Mental Disorders (DSM) published by the American Psychiatric Association or those mental and emotional disorders listed in the most recent edition of the International Classification of Diseases (ICD).

B. Prescribing psychologists shall order, administer, and prescribe or distribute without charge only medications recognized and customarily used for the management of mental, nervous, emotional, behavioral, substance abuse and cognitive diseases or disorders.

C. A Prescribing Psychologist may order and interpret routine laboratory procedures, as necessary for adequate pretreatment health screening, diagnosis of mental, nervous, emotional, behavioral, substance abuse and cognitive disorders and treatment maintenance, including those necessary for the monitoring of potential side-effects associated with medications prescribed by the Prescribing Psychologist.

D. A Prescribing Psychologist shall not order, administer, prescribe or distribute drugs that are not customarily used for the management of mental, nervous, emotional, behavioral, substance abuse and cognitive diseases or disorders.

E. A Prescribing Psychologist shall not prescribe medications outside his/her areas of competency consistent with his/her training and experience as defined by the Board.

F. Under no circumstances shall a Prescribing Psychologist order, prescribe or distribute narcotics, defined as natural and synthetic opioid analgesics and their derivatives used to relieve pain.

G. A Prescribing Psychologist shall not delegate the administration, prescription, or distribution of a drug to any other individual.

H. A Prescribing Psychologist shall not self-prescribe medication and shall not prescribe medication to any person who is a member of the psychologist’s family or household, or with whom the psychologist has a conflict of interest, including a prohibited dual relationship, as defined in [jurisdiction’s regulations], of these regulations and the Code of Conduct adopted by the Board.
I. Nothing in these regulations shall be interpreted or construed as to permit a Prescribing Psychologist to pharmacologically treat clients for primary endocrine, cardiovascular, orthopedic, neurologic, gynecologic, metabolic, hematologic, respiratory, renal, gastrointestinal, hepatic, dermatologic, oncologic, infectious, ophthalmologic, or rheumatologic illness or disorders.

J. Prescribing psychologist may prescribe medications for mental and emotional disorders that arise secondary to a primary physical illness, so long as the primary physical illness is being managed the client’s primary or attending physician.

EXEMPTIONS

A. The provisions of this section shall not prevent, restrict the practice, services, or activities of any individual:
   1. Licensed by other statutes in this state from engaging in the profession or occupation for which he/she is licensed; or
   2. Employed as a Prescribing Psychologist by the United States government when practicing solely under the direction or control of the United States government agency by which he/she is employed.

PRESCRIBING PSYCHOLOGIST GENERAL

A. DOCUMENTATION OF PHYSICIAN CONSULTATION
   1. When psychopharmacologic management of a client is indicated, the initial plan shall include consultation with the client’s primary or attending physician.

   2. The Prescribing Psychologist shall document the consultation with the primary or attending physician in the client’s medical record. This documentation shall include, but is not necessarily limited to, the client’s name; the physician’s name; date of consultation; purpose of consultation (e.g., new medication, change in medication, discontinuance of medication, adverse treatment effects, treatment failure, change in medical status, etc.); the results of the consultation (e.g., medications ordered, generic or trade; starting dosage and titration plan, if any; number of refills; etc.); any specific responsibilities of the Prescribing Psychologist and physician respecting the client’s care; any reporting and documentation requirements between the Prescribing Psychologist and the physician and/or a schedule by which such are to take place; a plan to accommodate immediate consultation between the Prescribing Psychologist, physician, and/or client; and any other information that might be necessary for the appropriate coordination of care.
for the client (e.g., review of prior labs or diagnostic procedures; new labs or diagnostic procedures requested by the physician, if any; etc.).

3. The Prescribing Psychologist shall forward documentation of all psychopharmacologic consultations to the client’s primary or attending physician for that physician’s records.

4. With the permission of the client, the Prescribing Psychologist shall forward any other relevant medical documentation requested by the patient’s primary care or attending physician.

5. In addition to the written release and authorization set forth in section [refer to section ‘Prescribing Practices of a Prescribing Psychologist’], a Prescribing Psychologist shall insure that each of his/her clients subject to consultation and collaboration with a physician is informed:

   a) Of the relationship between the Prescribing Psychologist and physician and the respective role of each with respect to the client’s psychopharmacologic management;

   b) The client may decline to participate in such a practice and may withdraw at any time without terminating the Prescribing Psychologist-client relationship;

   c) The Prescribing Psychologist’s decision to withdraw from consultation and collaboration with a physician; and

   d) By written disclosure, of any contractual or financial arrangement that may impact the Prescribing Psychologist’s decision to engage in consultation and collaboration with a physician.

B. PRESCRIBING PRACTICES OF A PRESCRIBING PSYCHOLOGIST

1. In order to permit the necessary coordination of care for the client, the Prescribing Psychologist shall obtain a release of information from the client and/or the client’s legal guardian to contact the client’s primary or attending physician in all cases in which psychopharmacologic management is planned.

2. If a client or the client’s legal guardian declines to sign a release of information authorizing coordination of care with his/her primary or attending physician, the Prescribing Psychologist shall inform the client
and/or the client’s legal guardian that he/she cannot treat the client pharmacologically without such consultation.

3. If the client wishes to have his/her primary or attending physician prescribe any recommended psychotropic medications, the Prescribing Psychologist shall forward to the attending physician, with a proper release from the client, a summary of the Prescribing Psychologist’s findings and treatment recommendations.

4. The Prescribing Psychologist shall contact the primary or attending physician prior to prescribing medications or making changes to an established psychopharmacological regimen, such as dosage adjustments, or adding and discontinuing a medication as described in these regulations.

   a) The Prescribing Psychologist shall inform the primary or attending physician of the medication(s) he/she intends to prescribe and any laboratory tests that he/she has ordered or reviewed.

   b) The Prescribing Psychologist shall engage in a discussion with the primary or attending physician about any relevant indications and contraindications of the proposed medications.

   c) In the event that the primary or attending physician does not concur with the psychopharmacologic treatment protocol planned by the Prescribing Psychologist, the Prescribing Psychologist shall defer to the medical judgment of the physician.

5. In all cases in which the client does not have a primary or attending physician, the Prescribing Psychologist shall inform the client that he/she cannot prescribe medication for that client until such time as the client has secured a primary care or attending physician and has been established as an active client of that physician.

6. In the event an established client changes his/her primary or attending physician with whom the Prescribing Psychologist has established a consultative relationship, the Prescribing Psychologist shall establish a consultative and collaborative relationship with the new physician in order to continue psychopharmacological treatment of the client.

7. In the event a client terminates his/her relationship with his/her primary or attending or attending physician, with whom the Prescribing Psychologist has
established a consultative relationship and declines to secure a new primary
care or attending physician, the Prescribing Psychologist cannot continue to
psychopharmacologically manage the client and shall so advise the client.

a) In such instances, the Prescribing Psychologist shall document that
he/she has made every reasonable effort to encourage the client to
maintain and/or establish a relationship with a primary care or
attending physician.

b) 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 primary or attending
physician of record, is authorized to prescribe the medication(s) in a
manner that is customarily recognized as a discontinuation
regiment until the medication has been completely discontinued.
This regimen shall be documented in the client’s medical chart.

8. Providing sample medications.

a) If a Prescribing Psychologist provides sample medications to a
client, dispensations of these medications shall be governed by the
same regulations as those governing the prescribing of medications
as defined in these regulations.

b) Medication samples maintained in the Prescribing Psychologist’s
office shall be secured in accordance with all relevant state and
federal regulations and/or laws.

9. The Prescribing Psychologist shall maintain a duplicate copy of all
prescriptions in the client’s medical record. When prescriptions are ordered
by telephone, the Prescribing Psychologist shall document the date and
prescriptions ordered in the client’s medical record.

C. COMPLAINT PROCEDURE

1. Any complaint against a Prescribing Psychologist shall be made, investigated
and adjudicated according to the complaint procedures outlined in [insert
jurisdiction’s statutory reference here] and these regulations.
2. The Board shall have the right to restrict, modify, suspend or revoke, in whole or in part, the prescriptive authority of a Prescribing Psychologist who is found in violation of any part of [insert jurisdiction’s statutory reference to prescribing psychology here] or these regulations as the Board determines necessary to protect the health, safety and welfare of the public.

   a) Any Prescribing Psychologist who knowingly fails to adhere to any modifications, limitations or restrictions of their prescriptive authority, as determined by the Board, shall be subject to revocation of their Certificate of Prescriptive Authority.

   b) The name and prescriptive authority number of any Prescribing Psychologist whose prescriptive authority is restricted, modified, limited, suspended or revoked for any reason stemming from violation of any part of these regulations shall be forwarded to the [insert jurisdiction’s name] state board of pharmacy [or provincial or territorial controlling pharmacy authority], along with the nature of any such modification, limitation, suspension or revocation.

   c) In any case involving the restriction, modification, limitation, suspension or revocation of the authority to prescribe controlled substances, the Board shall forward to the controlled substances section of the [state, provincial, or territorial agency governing controlled substances, if applicable] and the regional office of the United States Drug Enforcement Agency [or provincial or territorial controlling agency], the name and address, DEA number and [jurisdictional, provincial, or territorial] CDS license of the Prescribing Psychologist whose Certificate of Prescriptive Authority has been so restricted, suspended or revoked.

Any Prescribing Psychologist who prescribes any medication while his/her Certificate of Prescriptive Authority is suspended or revoked shall be subject to the additional revocation of his/her license to practice, and his/her name shall be forwarded to the district attorney [or appropriate legal authority] in the [ county, province or territory] of their practi