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March 3, 2026

The Honorable Heather Bagnall
Chair

House Health Committee
240 Taylor House Office Building
Annapolis, Maryland 21401

The Honorable Bonnie Cullison
Vice Chair

House Health Committee
240 Taylor House Office Building
Annapolis, Maryland 21401

Re: Maryland HB 1021 - Oppose

Dear Chair Bagnall, Vice Chair Cullison, and the House Health Committee Members:

On behalf of the American Psychiatric Association, a national medical specialty society representing over 39,000 psychiatric physicians, as well as their patients and families, we strongly urge you and the members of the Committee to oppose HB 1021, which would authorize psychologists to prescribe powerful psychotropic medications without appropriate medical training. HB 1021 will jeopardize the safety of patients with mental health and substance use disorders in Maryland.

Patient safety must be paramount when considering the change of any law, and this bill puts Maryland's most vulnerable patients at risk including the elderly, children, pregnant women, people with disabilities. Prescribers who are not medically trained could put patients who live with mental illness and substance use disorder (SUD) at risk, especially those with medical co-morbidities.

Supporters of HB 1021 say this bill will increase access to needed mental health care. However, there is no data to support this, including in rural and underserved areas. We know in states that have allowed psychologists to prescribe that those states have seen no increased access to mental health and substance use disorder services. In addition, Medicare, which provides insurance for over a million people in Maryland, does not reimburse prescribing

psychologists for pharmacologic management due to their lack of medical education and training. Additionally, this bill will ultimately siphon psychologists off from providing the needed clinical therapies that fall within their expertise.

Psychologists often receive their education in research, therapies, psychological testing, and evaluation. They simply do not have the medical training needed to understand the effect psychotropic medications have on an individual. SB 568 requires approximately 1,500 – 1,750 hours of clinical training, which is dangerously inadequate compared to the training psychiatrists and other prescribing professionals receive.

In contrast, a psychiatrist completes their undergraduate degree, spending an additional 4 years in medical school learning basic science topics such as anatomy, biochemistry and pathophysiology and an additional 4 years in residency rotating at the patient bedside and accruing over 12,000 hours of training in the medical treatment of mental health and substance use disorders.

Psychiatrists also treat a significant number of patients with co-morbid medical conditions, such as mental illness along with heart disease or diabetes. Patients needing more than one drug at a time for mental and physical conditions are at risk for potentially serious drug interactions. The clinicians who treat these patients must be medically trained to understand and treat all systems of the body to recognize the warning signs of adverse effects.

We strongly encourage the committee to protect patient safety by opposing this bill and supporting and building-upon proven evidenced based solutions such as:

- Allocating funding to primary care practices to implement the Collaborative Care Model. This model is a multiplier for the psychiatric workforce and has over 100 randomized-control studies demonstrating its effectiveness to increase access to care, improve patient and provider satisfaction, as well as reduce costs to the overall healthcare system.
- Increasing loan repayment opportunities, which will lessen physician debt and is an encouraging factor in areas where physicians practice.
- Increasing residency slots for psychiatry, which allows for greater opportunities for students to specialize in psychiatry.
- Expanding telehealth services, including audio-only services.

I urge you to preserve patient safety and consider alternative solutions to psychologist prescribing privileges and oppose House Bill 1021.

Sincerely,

A handwritten signature in black ink, appearing to read 'T. Rivera', with 'MD' written in smaller letters below it.

Theresa Miskimen Rivera, MD, DLFAPA
President, American Psychiatric Association