



March 5, 2008

Honorable Sheila Kuehl, Chair
Senate Health Committee
State Capitol
Sacramento, Ca 95814
VIA FAX

Support SB 1427 (Calderon) - Co-sponsored by SEIU

Dear Senator Kuehl:

On behalf of over 650,000 California members of the Service Employee International Union who were major contributors to the success of Proposition 63 (the Mental Health Services Act), this is to inform you of our co-sponsorship of SB 1427 (Calderon) and to request your support for the bill in the Senate Health Committee.

When the legislature ponders altering the scope of practice in any of the healing arts there are two primary considerations rightfully dominate that decision-making process.

1. Will the change improve access to care for those who need the care? And,
2. Will the change be safe for those receiving care?

Despite the voter enactment of Proposition 63 and the earlier legislative enactment of mental health parity reform there is a stunning lack of access to complete mental health care in California. That lack of access affects every community in California from Los Angeles to Del Norte and reaches across every economic background from those with the best private insurance to the homeless mentally ill.

- The 2005 report to the Legislature regarding the implementation of mental health Parity said; ***"Lack of Access to qualified and appropriate providers is perhaps the largest barrier to making mental health parity successful."***
- The San Francisco Medical Society in an April 2003 study discovered that, ***"only 45% of psychiatrists were accepting PPO patients and only 27% were accepting HMO patients."***
- A January 2007 California Medical Association report entitled **Doctors In California** says that ***"20% of California Licensed Physicians are not active in patient care.... Many more do not see patients full time."*** That would suggest that there are a ***maximum of 4410 psychiatrists actually practicing in California. (80% of 5513).***

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SB 1427 helps improve access to care by allowing specially trained psychologists, working in collaboration with a physician, to prescribe psychotropic medications to those patients who need them.

Additionally, SB 1427 requires that any psychologist wish to prescribe must spent at least 200 of 800 required hours of internship in a public system of care or in an underserved area, thus making care much more available.

Patient safety and quality of care is a primary concern of SB 1427 which is why it:

- Requires a specific and intense post-doctoral training (equal to an MS) in psychopharmacology for any psychologist wishing to prescribe.
- Requires completion of an 800 proctorship under supervision of a physician for any psychologist before he is able to prescribe.
- Requires all prescribing psychologists to practice within guidelines and protocols developed in collaboration with a collaborating physician.
- Requires any patient prescribed to by a prescribing psychologist to have a primary care physician and that they have a physical exam prior to the prescription being written.
- Continues current practice in which the Board of Psychology contracts with the Medical Board of California (the same board that regulates physicians and surgeons) to investigate and discipline allegations of psychologist malfeasance.

In summary, SB 1427 fulfills the reasonable requirements of a change in cope of practice. It dramatically improves access to care and it ensures the safety of those receiving the care.

For those important reasons, I respectfully request you to support this important bill

Sincerely,



Allen Davenport
Director of Government Relations

cc: Senator Calderon
Members of the Senate Health Committee
Committee Consultant