

IDAPA 24 – DIVISION OF OCCUPATIONAL AND PROFESSIONAL LICENSES

IDAHO BOARD OF PSYCHOLOGIST EXAMINERS

24.12.01 – Rules of the Idaho State Board of Psychologist Examiners

Who does this rule apply to?

This rule applies to applicants, temporary license holders, and license holders for psychologists.

What is the purpose of this rule?

This rule governs the practice of psychology in Idaho to protect the public health, safety, and welfare. This rule establishes:

- Minimum standards of competency and qualifications for applicants;
- Fees related to licensure;
- Continuing education for licensure;
- Requirements for supervised practice;
- Requirements for use of service extenders;
- Code of ethics and standards of practice; and
- Qualifications and standards of practice for prescriptive authority

What is the legal authority for the agency to promulgate this rule?

This rule implements the following statute passed by the Idaho Legislature:

Professions, Vocations, and Businesses -

- [54-2301 through 54-2320, Idaho Code](#) – Psychologists

Who do I contact for more information on this rule?

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24.12.01 – RULES OF THE IDAHO STATE BOARD OF PSYCHOLOGIST EXAMINERS

000. LEGAL AUTHORITY.

These rules are hereby prescribed and established pursuant to the authority vested in the Idaho State Board of Psychologist Examiners by the provisions of Section 54-2305, Idaho Code. (3-20-20)T

001. TITLE AND SCOPE.

These rules are titled IDAPA 24.12.01, “Rules of the Idaho State Board of Psychologist Examiners.” (3-20-20)T

002. INCORPORATION BY REFERENCE.

The document titled “Ethical Principles of Psychologists and Code of Conduct,” published by the American Psychological Association and dated June 1, 2003 with the 2010 amendments effective June 1, 2010, as referenced in Section 350, is herein incorporated by reference and is available from the Board’s office and on the Board web site. (3-20-20)T

003. -- 009. (RESERVED)

010. DEFINITIONS.

01. Certificate of Professional Qualification. A certificate of professional qualification means the certificate of professional qualification granted to a psychologist by the Association of State and Provincial Psychology Boards. (3-20-20)T

02. Collaboration or Collaborative Relationship. Collaboration or collaborative relationship means a cooperative working relationship between a prescribing psychologist and a licensed medical provider in the provision of patient care, including cooperation in the management and delivery of physical and mental health care, to ensure optimal patient care. (3-20-20)T

03. Geriatric Patient. A person sixty-five (65) years of age or older. (3-20-20)T

04. Licensed Medical Provider. A physician or physician assistant licensed pursuant to chapter 18, title 54, Idaho Code, or an advanced practice registered nurse licensed pursuant to chapter 14, title 54, Idaho Code. (3-20-20)T

05. 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 those listed in the International Classification of Diseases published by the World Health Organization. (3-20-20)T

06. Pediatric Patient. A person seventeen (17) years of age or younger. (3-20-20)T

07. Prescribing Psychologist. A person who holds a license to practice psychology issued by the Board and who holds a Certification or Provisional Certification of Prescriptive Authority issued by the Board under Sections 54-2317, 54-2318, 54-2319, Idaho Code, and these rules. (3-20-20)T

08. Supervising Physician. A board-certified psychiatrist, neurologist, or other physician with specialized training and experience in the management of psychotropic medication and who is licensed under chapter 18, title 54, Idaho Code, or an equivalent licensing provision of the law of a state adjoining Idaho. (3-20-20)T

011. -- 099. (RESERVED)

100. APPLICATION.

01. Filing an Application. Applicants for licensure or certification or provisional certification of prescriptive authority must submit a complete application, verified under oath, to the Board at its official address. The application must be on the forms approved by the Board and submitted together with the appropriate fee(s) and supporting documentation. (3-20-20)T

02. Supporting Documents. The applicant must provide or facilitate the provision of any supporting third-party documents that may be required under the qualifications for the license being sought. (3-20-20)T

a. Any third-party documents, including letters of reference, must be received by the Board directly from the third party. (3-20-20)T

b. One (1) of the two (2) years of supervised experience as required by Section 2307(2)(a), Idaho Code, for initial licensure may be pre-doctoral. The second year must be post-doctoral work under appropriate supervision and must be verified by the appropriate supervisor. (3-20-20)T

101. -- 149. (RESERVED)

150. FEES.

All fees are non-refundable. The examination or reexamination fee are in addition to the application fee and must accompany the application.

FEE TYPE	AMOUNT (Not to Exceed)	RENEWAL (Not to Exceed)
Original Application for Licensure by Exam	\$150	
Inactive License Renewal	\$125	
Annual Renewal	\$250	
Original Application for Licensure by Endorsement/Senior Psychologist	\$250	
Original Application for Provisional Certification of Prescriptive Authority	\$250	\$250
Original Application for Certification of Prescriptive Authority	\$250	\$250
Original Application for Certification of Prescriptive Authority by Endorsement	\$250	
Application for Service Extender	\$100	\$100
Examination and Reexamination	The amount charged by the national examining entity plus a processing fee of \$25	
Reinstatement	As set forth in Section 67-2614, Idaho Code.	
Temporary License	\$50	

(3-20-20)T

151. -- 199. (RESERVED)

200. EXAMINATIONS.

01. Written Exam Required. The Board will require a written examination of applicants. The written examination will be the National Examination for Professional Practice In Psychology (EPPP). (3-20-20)T

02. Passing Score. The Board has determined that a passing score on the EPPP is a raw score of one hundred forty (140) or, for examinations after April 1, 2001, a scaled score of five hundred (500) for licensure. (3-20-20)T

03. Time and Place of Exam. The examination will be conducted at a time and place specified by the administrator of the national examination for professional practice in psychology (EPPP). (3-20-20)T

04. Failure of Exam. The first time the examination is failed the applicant may take it again the next

time it is given upon application and payment of fees. If the examination has been failed twice, the individual must wait at least one (1) year and petition the Board for approval to take the examination the third time. The petition must include evidence satisfactory to the Board that the applicant has taken additional study in the field of Psychology before approval will be granted. (3-20-20)T

201. EXAMINATION FOR PROVISIONAL CERTIFICATION OF PRESCRIPTIVE AUTHORITY.

The approved examination for provisional certification of prescriptive authority is the Psychopharmacology Examination for Psychologists (PEP). (3-20-20)T

01. Passing Score. A passing score will be determined by the Association of State and Provincial Psychology Boards (ASPPB). (3-20-20)T

02. Date of Exam. The passage of the exam may have occurred prior to the effective date of these rules. (3-20-20)T

202. -- 249. (RESERVED)

250. ENDORSEMENT.

01. Eligibility for Endorsement. An applicant who is in possession of a valid statutory license or statutory certificate from another state or Canada may apply for licensing under the endorsement section of this law. (3-20-20)T

02. Requirements for Endorsement. An applicant under the endorsement section must have: (3-20-20)T

a. A valid psychology license or certificate issued by the regulatory entity of another jurisdiction; and (3-20-20)T

b. A history of no disciplinary action in any jurisdiction; and (3-20-20)T

c. Meet one of the following qualifications: (3-20-20)T

i. A current certificate of professional qualification in Psychology as defined in these rules; or (3-20-20)T

ii. A registration with the National Register of Health Service Providers in Psychology; or (3-20-20)T

iii. A certification by American Board of Professional Psychology; or (3-20-20)T

iv. Graduated from an APA accredited program with a doctoral degree in psychology and two (2) years of supervised experience acceptable to the Board, one (1) year of which may include a pre-doctoral practicum or internship and one (1) year of which must be post-doctoral; (3-20-20)T

d. Or complete both of the following: (3-20-20)T

i. Graduated with a doctoral degree in psychology or a related field, provided experience and training are acceptable to the Board; and (3-20-20)T

ii. A record of practicing Psychology at the independent level for the five (5) years of the last seven (7) years immediately prior to application. (3-20-20)T

251. ENDORSEMENT FOR CERTIFICATION OF PRESCRIPTIVE AUTHORITY.

The Board may grant a provisional certification or certification of prescriptive authority by endorsement to an applicant who completes an application as set forth in Section 100 of these rules, pays the required fee, and meets the following requirements: (3-20-20)T

01. Holds a Current License. The applicant must be the holder of a current and unrestricted license to practice psychology in another state and in Idaho; (3-20-20)T

02. Holds a Current Certificate of Prescriptive Authority. (3-20-20)T

a. The applicant must be the holder of a current and unrestricted certification of prescriptive authority from another state that imposes substantially equivalent educational and training requirements as those contained in Sections 54-2317 and 54-2318, Idaho Code, and these rules; or (3-20-20)T

b. The applicant must have training from the United States department of defense demonstration project or other similar program developed and operated by any branch of the armed forces that imposes substantially equivalent educational and training requirements as those contained in Sections 54-2317 and 54-2318, Idaho Code, and these rules. (3-20-20)T

03. Credit Toward Requirements. In the event that an applicant has not met the requirements for certification of prescriptive authority, the Board may consider an applicant's experience in prescribing in another state as meeting a portion of the requirements necessary to qualify for provisional certification or certification of prescriptive authority in this state. In that event, the Board may require additional education, supervision, or both to satisfy the requirements to obtain a provisional certification or certification of prescriptive authority in this state. (3-20-20)T

04. Advisory Panel. The Advisory Panel, as established in Section 54-2320, Idaho Code, will review the education and training of an applicant seeking certification by endorsement and advise the Board as to its sufficiency to meet the requirements for provisional certification or certification of prescriptive authority under Chapter 23, Title 54, Idaho Code, and these rules. (3-20-20)T

252. -- 274. (RESERVED)

275. INACTIVE STATUS.

01. Request for Inactive Status. Persons requesting an inactive status during the renewal of their active license must submit a written request and pay the established fee. (3-20-20)T

02. Inactive License Status. (3-20-20)T

a. All continuing education requirements will be waived for any year or portion thereof that a licensee maintains an inactive license and is not actively practicing or supervising in Idaho. (3-20-20)T

b. When the licensees desire active status, they must show fulfillment of continuing education requirements within the previous twelve (12) months and submit a fee equivalent to the difference between the current inactive and active renewal fee. (3-20-20)T

276. -- 299. (RESERVED)

300. TEMPORARY LICENSES.

Persons not licensed in this state who desire to practice psychology under the provisions of this chapter for a period not to exceed thirty (30) days within a calendar year may do so if they hold a license in another state or province have had no disciplinary action, and pay the required fee. Persons authorized to practice under this section must hold a certification of prescriptive authority issued by the Idaho Board of Psychologist Examiners to issue a prescription. (3-20-20)T

301. -- 349. (RESERVED)

350. CODE OF ETHICS.

All licensees must have knowledge of the Ethical Principles of Psychologists and Code of Conduct, as published in the American Psychologist, as referenced in Section 004. (3-20-20)T

351. -- 374. (RESERVED)

375. DISCIPLINE.

The Board may impose a civil fine not to exceed one thousand dollars (\$1,000) upon a licensed psychologist for each violation of Section 54-2309, Idaho Code. (3-20-20)T

376. -- 379. (RESERVED)

380. REHABILITATION COMPONENTS.

In the event of a violation of Board laws or rules, the Board, in its discretion, may implement a plan of rehabilitation. Completion of the plan may lead to consideration of submission of an application for re-licensure, the removal of suspension, or the removal of supervision requirements. In the event the licensee has not met the Board's criteria for rehabilitation, the plan may be revised, expanded, or continued depending upon the progress of the rehabilitation program. The rehabilitation components listed in this Section should be considered illustrative, but not exhaustive, of the potential options available to the Board. In each instance, rehabilitation parameters will be tailored to the individual needs of the licensee. (3-20-20)T

01. Options in Devising Rehabilitation Program. The Board may follow one (1) or more options in devising a rehabilitation program: (3-20-20)T

a. The individual may be supervised in all or selected areas of activities related to his practice as a licensee by a licensed psychologist approved by the Board for a specified length of time. (3-20-20)T

i. The Board may specify the focus of the supervision. (3-20-20)T

ii. The Board may specify the number of hours per week required in a face-to-face supervisory contract. (3-20-20)T

iii. The Board may require the supervisor to provide periodic and timely reports to the Board concerning the progress of the supervisee. (3-20-20)T

iv. Any fees for supervision time will be the responsibility of the supervisee. (3-20-20)T

02. Educational Programs. The individual may be expected to successfully complete a variety of appropriate educational programs. Appropriate educational formats may include, but are not limited to, workshops, seminars, courses in regionally accredited universities, or organized pre- or post-doctoral internship settings. Workshops or seminars that are not held in a setting of academic review (approved continuing education) need prior approval of the Board. Any course of study must be approved by the Board prior to enrollment if it is to meet the criteria of a rehabilitation plan. (3-20-20)T

03. Additional Requirements. The Board may require of the individual: (3-20-20)T

a. Psychodiagnostic evaluations by a psychologist approved by the Board; (3-20-20)T

b. A physical examination that may include an alcohol and drug screen by a physician approved by the Board; (3-20-20)T

c. Psychotherapy on a regular basis from a psychologist approved by the Board; (3-20-20)T

d. Take or retake and pass the appropriate professional examination; or (3-20-20)T

381. -- 399. (RESERVED)

400. RENEWAL OF LICENSE -- CONTINUING EDUCATION.

Licenses may be renewed or reinstated by payment of the required fees and by submitting certification of having satisfied the continuing education requirement. (3-20-20)T

401. CONTINUING EDUCATION REQUIREMENTS FOR RELICENSURE IN PSYCHOLOGY.

01. Number of Hours Required. All licensed psychologists, in order to renew their license, must have accumulated twenty (20) hours per year of continuing education credits. All prescribing psychologists, in order to renew their provisional certification or certification of prescriptive authority, must have accumulated twenty (20) hours per year of continuing education credits in psychopharmacology or psychopharmacotherapy offered in accordance with Subsection 402.01 of these rules. Continuing education credits for a prescribing psychologist are in addition to the continuing education credits required to renew their psychologist license. (3-20-20)T

a. At the time of renewal of the psychologists' licenses and prescribing psychologists' certifications, they will certify that they are aware of the requirements for continuing education and that they have met those requirements for the preceding year. (3-20-20)T

b. At the time of reinstatement of a psychologist's license or a prescribing psychologist's certification or provisional certification, the psychologist must provide proof of meeting the requirements for continuing education for the preceding year. (3-20-20)T

c. A minimum of four (4) hours credit in ethics, standards of care, and/or review of laws pertaining to the practice of psychology is required every three (3) years. Areas covered may include practice, consultation, research, teaching, and/or supervision. These units may be used as part of the continuing education credit required. (3-20-20)T

02. Professional Level of Continuing Education – Time Period Records Kept - Audit. This continuing education experience must be at an appropriate level for professional training in psychology. The licensees have responsibility for demonstrating the relevance and adequacy of the educational experience they select. The licensees are also responsible for keeping an accurate record of their own personal continuing education hours for a period of five (5) years. A random audit may be conducted to insure compliance. (3-20-20)T

03. Newly Licensed Individuals. Newly licensed individuals will be considered to have satisfied the continuing education requirements for the remainder of the year in which their license is granted. (3-20-20)T

04. Certificates of Satisfactory Attendance and Completion. Certificates of satisfactory attendance and completion, participant lists, transcripts from universities, letters of certification on instructor's letterhead, and other reasonably convincing proof of the submitted activities may serve as documentation when persons audited are required to submit proof of continuing education. (3-20-20)T

05. Licensees Who Do Not Fulfill the Continuing Education Requirements. Licensees who do not fulfill the continuing education requirements may be subject to disciplinary action. (3-20-20)T

06. Carryover of Continuing Education Hours. Continuing education courses not claimed for CE credit in the current renewal year, may be credited for the next renewal year. A maximum of twenty (20) hours may be carried forward from the immediately preceding year for renewal of a psychologist license, and a maximum of twenty (20) hours may be carried forward from the immediately preceding year for renewal of a prescribing psychologist's certificate. (3-20-20)T

07. Special Exemption. The Board may make exceptions for reasons of individual hardship including health, when certified by a medical doctor, or other good cause. The licensee must provide any information requested by the Board to assist in substantiating hardship cases. This exemption is granted at the sole discretion of the Board. Request for special exemption must be made prior to licensure renewal. (3-20-20)T

402. GUIDELINES FOR APPROVAL OF CONTINUING EDUCATION CREDITS.

01. Continuing Education Credit. Continuing education credit will be given to formally organized workshops or classes with an attendance roster and preassigned continuing education credit offered in association with or under the auspices of: (3-20-20)T

a. Regionally accredited institutions of higher education. (3-20-20)T

- b. The American Psychological Association. (3-20-20)T
- c. A Regional Psychological Association. (3-20-20)T
- d. A State Psychological Association. (3-20-20)T
- e. For prescribing psychologists, in addition to the approved organizations above, workshops or classes may be classified as continuing medical education credit and offered in association with or under the auspices of: (3-20-20)T
 - i. The American Medical Association; (3-20-20)T
 - ii. A regional medical association; (3-20-20)T
 - iii. A state medical association; or (3-20-20)T
 - iv. Offered by sponsors accredited by the Accreditation Council for Continuing Medical Education (ACCME). (3-20-20)T
- f. Credit will be given for the number of credit hours preauthorized by the sponsoring agency with no upper limit on the number of hours. (3-20-20)T

02. Credit for International, National and Regional Meetings of Psychological Organizations. Six (6) hours of continuing education credit will be allowed for documented attendance at international, national and regional meetings of psychological organizations. (3-20-20)T

03. Credit for Other Relevant Workshops, Classes or Training Experiences. Other relevant workshops, classes or training experiences when not offered, approved, or provided by an entity in Subsection 402.01, may receive up to six (6) hours of credit per experience provided they are conducted by a licensed or reputable psychologist or other mental health professional. Each documented hour of training experience counts as one (1) hour of continuing education experience. (3-20-20)T

04. Presentation of Papers. Presentation of papers at international, national, regional or state psychological or other professional associations may be counted as equivalent to six (6) hours per event. Only actual presentation time may be counted; preparation time does not qualify for credit. The licensee must provide the Board with a letter from a sponsor, host organization, or professional colleague, copy of the program, and a summary of the evaluations from the event. (3-20-20)T

05. Self-Study, Lectures or Public or Professional Publications and Presentations. The Board also recognizes the value of self-study, lectures or public or professional publications and presentations (including for example, in the case of the university faculty, preparation of a new course). Therefore, the Board will allow credit for six (6) hours of individual study per year. (3-20-20)T

a. Self-Study. The reading of a publication may qualify for credit with proper documentation verifying completion. A licensee seeking credit for reading a publication must submit results from a test on the information contained within the publication. If a test is not available, the licensee must seek pre-approval of the Board. (3-20-20)T

b. Professional publications. Publication activities are limited to articles in professional journals, a chapter in an edited book, or a published book. The licensee must provide the Board with a copy of the cover page of the article or book in which the licensee has been published. For chapters of an edited book, licensees must submit a copy of the table of contents. (3-20-20)T

06. Board Assessment of Continuing Education Activities. The Board of Psychologist Examiners may avail itself of help and consultation from the American Psychological Association or the Idaho Psychological Association in assessing the appropriateness of continuing education activities. (3-20-20)T

- 07. Electronic Continuing Education Courses.** (3-20-20)T
- a.** Non-interactive. A maximum of ten (10) on-line, non-interactive continuing education hours relevant to the practice of psychology may be counted during each reporting period. (3-20-20)T
 - i.** Continuing education credit will be given to on-line education offered in association with or under the auspices of the organizations listed in Subsections 402.01.a. through 402.01.d. of these rules. (3-20-20)T
 - ii.** The licensee must provide the Board with a copy of the certification, verified by the authorized signatures from the course instructors, providers, or sponsoring institution, substantiating any hours completed by the licensee. (3-20-20)T
 - b.** Interactive. To qualify for credit, teleconferences must feature an interactive format. Interactive conferences are those that provide the opportunity for participants to communicate directly with the instructor or that have a facilitator present at the conference site. The licensee must provide the Board with a copy of the certificate, or a letter signed by course instructors, providers, or sponsoring institution, substantiating any hours attended by licensee. (3-20-20)T
 - i.** When offered, approved, or provided by entities in Subsection 402.01, the number of hours that may be counted during each reporting period is not limited. (3-20-20)T
 - ii.** When not offered, approved, or provided by an entity in Subsection 402.01, a maximum of six (6) hours may be counted during each reporting period. (3-20-20)T

403. -- 449. (RESERVED)

450. GUIDELINES FOR USE OF SERVICE EXTENDERS TO LICENSED PSYCHOLOGISTS.

The Board recognizes that licensed psychologists may choose to extend their services by using service extenders. The Board provides general rules to cover all service extenders as well as specific rules to cover service extenders with different levels of training and experience. (3-20-20)T

- 01. General Provisions for Licensed Psychologists Extending Their Services Through Others.** (3-20-20)T
- a.** The licensed psychologist will have administrative control for a service extender. (3-20-20)T
 - b.** The licensed psychologist exercising professional direction for a service extender must: (3-20-20)T
 - i.** Prior to employing the service extender, formulate and provide to the Board a written supervisory plan for each service extender and obtain approval for the plan. The plan must include provisions for supervisory sessions and chart review. If the psychologist requires recordings to be made of psychological services delivered by the service extender, then the plan must also specify review and destruction of these recordings. The plan must also specify the hours per calendar week that the licensed psychologist will be at the same physical location as the person extending the services of the licensed psychologist. The plan must be accompanied by a completed application form and appropriate application fee. (3-20-20)T
 - ii.** Establish and maintain a level of supervisory contact sufficient to be readily accountable in the event that professional, ethical, or legal issues are raised. For service extenders in Categories I and II, there will be a minimum of one (1) hour of face-to-face supervisory contact by the licensed psychologist with the service extender for each one (1) to twenty (20) hours of services provided by the service extender during any calendar week. At least one half (1/2) of this face-to-face supervisory contact will be conducted individually, and up to one half (1/2) of this face-to-face supervisory contact may be provided using a group format. A written record of this supervisory contact, including the type of activities conducted by the service extender, must be maintained by the licensed psychologist. Except under unusual circumstances, the supervisory contact will occur either during the week the services are extended or during the week following. In no case will services be extended more than two (2) weeks without supervisory contact between the service extender and the licensed psychologist. For service extenders in Category III,

there will be a minimum of one (1) hour of face-to-face supervisory contact by the licensed psychologist with the service extender during each calendar month that services are provided by the service extender. A written record of this supervisory contact, including the type of activities conducted by the service extender, must be maintained by the licensed psychologist. The licensed psychologist will also be available for consultation either face-to-face, by phone, or by other means of contact on any day that services are provided by the service extender. (3-20-20)T

iii. Provide the service extender a copy of the current Ethical Standards of the American Psychological Association, and obtain a written agreement from the service extender of his intention to abide by them. (3-20-20)T

c. Supervision of service extenders through electronic communications, including video conferencing, cannot replace face-to-face supervision. Psychologists will ensure that the service that they provide through the use of service extenders is provided according to all applicable laws and rules. (3-20-20)T

02. Qualifications for Service Extenders. (3-20-20)T

a. Category I: A service extender will be placed in Category I if: (3-20-20)T

i. The licensed psychologist wishing to employ the service extender verifies in writing to the satisfaction of the Board that the service extender holds a license in counseling, social work, or a related mental health profession issued by the state of Idaho to practice a specific profession, and that the issuance of that license requires the licensee hold a master's degree or its equivalent as determined by the Board; or (3-20-20)T

ii. The service extender meets the criteria for Category II specified below and the licensed psychologist wishing to employ the service extender verifies in writing to the satisfaction of the Board that the service extender has satisfactorily functioned as a service extender to one (1) or more licensed psychologist for at least twenty (20) hours per calendar week over a period totaling two hundred sixty (260) weeks. (3-20-20)T

b. Category II: A service extender will be placed in Category II if the licensed psychologist wishing to employ the service extender verifies in writing to the satisfaction of the Board that the service extender holds a master's degree or equivalent from a program in psychology, counseling, or human development as determined by the Board. (3-20-20)T

c. Category III: A service extender will be placed in Category III if the licensed psychologist wishing to employ the service extender verifies in writing to the satisfaction of the Board that the service extender holds a master's degree or equivalent from a program in psychology, counseling, or human development as determined by the Board, and the service extender will only provide psychometrician services. Such services are defined as administrating, scoring, and/or summarizing psychological or neuropsychological tests and test data that require specialized training. Interpretation of the testing data must be performed by the licensed psychologist. Service extenders in Category III will not be allowed to perform psychotherapy, intake assessments, or other services outside the scope of psychometric services defined above. The licensed psychologist wishing to employ the service extender must also verify in writing to the satisfaction of the Board that the service extender has been properly trained in all of the testing instruments that the service extender will administer at the start of employment and will continue to receive proper training in any new testing instruments utilized by the service extender over the course of employment. (3-20-20)T

03. Conditions for Use of Service Extenders. (3-20-20)T

a. All persons used to extend the services of a licensed psychologist must be under the direct and continuing administrative control and professional direction of a licensed psychologist. These service extenders may not use any title incorporating the word "psychologist" or any of its variants or derivatives, e.g. "psychological," "psychotherapist." (3-20-20)T

b. Work assignments must be commensurate with the skills of the service extender and procedures must be planned in consultation with the licensed psychologist under all circumstances. (3-20-20)T

c. Public announcement of fees and services, as well as contact with lay or professional public must be offered only in the name of the licensed psychologist whose services are being extended. However, persons

licensed to practice professions other than psychology may make note of their status in such announcements or contacts. (3-20-20)T

d. Setting and collecting of fees must remain the sole domain of the licensed psychologist; excepting that when a service extender is used to provide services of the licensed psychologist, third party payers must be informed of this occurrence in writing at the time of billing. Unless otherwise provided in these rules and regulations, licensed psychologists may neither claim nor imply to service recipients or to third party payers an ability to extend their services through any person who has not been approved as a service extender to that psychologist as specified in this section. (3-20-20)T

e. All service recipients must sign a written notice of the service extender's status as a service extender for the licensed psychologist. A copy of the signed written notice will be maintained on file with the licensed psychologist. (3-20-20)T

f. Within the first three (3) contacts, the licensed psychologist must have face-to-face contact with each service recipient. (3-20-20)T

g. A licensed psychologist must be available to both the service extender and the service recipient for emergency consultation. (3-20-20)T

h. Service Extenders must be housed in the same service delivery site as the licensed psychologist whose services they extend. Whatever other activities they may be qualified to perform, service extenders must limit themselves to acting as service extenders of the licensed psychologist when providing direct services so long as they are physically located in the offices of the licensed psychologist. (3-20-20)T

i. A service extender in Category I may deliver as much as, but not more than fifty percent (50%) of their service while the licensed psychologist is not physically present at the service delivery site. A service extender in Category II may deliver as much as, but not more than twenty-five percent (25%) of their service while the licensed psychologist is not physically present at the service delivery site. Service extenders in the Category III may deliver as much as, but not more than seventy-five percent (75%) of their service while the licensed psychologist is not physically present at the service delivery site. Service Extenders providing as many as, but no more than, three (3) hours of service extension per calendar week must be exempted from the on-site provisions of Section 450 of this rule. Without notification to the Board, short term exemption from this rule for atypical circumstances, such as irregular travel by the licensed psychologist, may occur for periods as long as, but no longer than three (3) calendar weeks. Longer exemptions may be granted at the discretion of the Board on written request by the licensed psychologist to the Board. (3-20-20)T

j. The licensed psychologist must employ no more than three (3) service extenders. (3-20-20)T

k. When a licensed psychologist terminates employment of a service extender, the licensed psychologist will notify the Board in writing within thirty (30) days. (3-20-20)T

l. At the time of license renewal the licensed psychologist must submit for each service extender the appropriate fee together with certification to the Board that they possess: (3-20-20)T

i. A written record of supervisory contact for the previous twelve (12) months; and (3-20-20)T

ii. The percentage of time during the previous twelve (12) months that the service extender extended services while the licensed psychologist was at the service delivery site; and (3-20-20)T

iii. An updated plan for the supervision of each of his service extenders. (3-20-20)T

m. Documentation of supervisory notes, hours of supervision, number of hours on-site while the service extender provided services, and plan of supervision must be maintained by the supervisor for not less than three (3) years for each service extender and submitted to the Board upon request. (3-20-20)T

451. -- 499. (RESERVED)

500. EDUCATIONAL AND CREDENTIALING REQUIREMENTS FOR LICENSURE.

Applicants who receive a doctoral degree from a program accredited by the American Psychological Association are considered to have met all criteria outlined in Section 500. (3-20-20)T

01. Training in Professional Psychology. Training in professional psychology is doctoral training offered in an institution of higher education accredited by: (3-20-20)T

- a. Middle States Commission on Higher Education. (3-20-20)T
- b. The New England Association of Schools and Colleges. (3-20-20)T
- c. Higher Learning Commission. (3-20-20)T
- d. The Northwest Commission on Colleges and Universities. (3-20-20)T
- e. The Southern Association of Colleges and Schools. (3-20-20)T
- f. The Western Association of Schools and Colleges. (3-20-20)T

02. Training Program. The training program must stand as a recognizable, coherent organizational entity within the institution. Programs that are accredited by the American Psychological Association or that meet the criteria for such accreditation are recognized as meeting the definition of a professional psychology program. (3-20-20)T

03. Authority and Primary Responsibility. There must be a clear authority and primary responsibility for the core and specialty areas by a designated leader who is a doctoral psychologist and is a member of the core faculty. (3-20-20)T

04. Content of Program. The program must be an integrated, organized sequence of study. (3-20-20)T

05. There Must Be an Identifiable Training Faculty and a Psychologist Responsible for the Program. There must be an identifiable training faculty on site of sufficient size and breadth to carry out the training responsibilities. A faculty psychologist must be responsible for the program. (3-20-20)T

06. Program Must Have an Identifiable Body. The program must have an identifiable body of students who are matriculated in that program for a degree. (3-20-20)T

07. What the Program Must Include. The program must include supervised practicum and pre-doctoral internship appropriate to the practice of psychology. Pre-doctoral internships must be completed at member sites of the Association of Psychology Postdoctoral and Internship Centers, or sites demonstrating an equivalent program. (3-20-20)T

08. Curriculum. The curriculum must encompass a minimum of three (3) academic years of full time graduate study at least one (1) year of which is spent in full-time physical residence at the degree granting educational institution. In addition to instruction in professional areas of competence, which include assessment and diagnosis, intervention, consultation, and supervision, the core program must require each student to demonstrate competence in specific substantive areas. Minimal competence is demonstrated by passing a three (3) credit semester graduate course (or a five (5) credit quarter graduate course) in each of the substantive areas listed below: (3-20-20)T

- a. Biological Bases of Behavior: Physiological psychology, comparative psychology, neuropsychology, sensation and perception, psychopharmacology. (3-20-20)T
- b. Cognitive-Affective Bases of Behavior: Learning, cognition, motivation, emotion. (3-20-20)T
- c. Social Bases of Behavior: Social psychology, group processes, organizational and systems theory. (3-20-20)T

- d. Individual Differences: Personality theory, human development, abnormal psychology. (3-20-20)T
- e. Scientific and Professional Standards and Ethics. (3-20-20)T
- f. Research Design and Methodology. (3-20-20)T
- g. Techniques of Data Analysis: statistics, multivariate statistics, factor analysis, multiple regression, non-parametric statistics. (3-20-20)T
- h. Psychological Measurement: psychometric principles, test theory, personality assessment, cognitive assessment. (3-20-20)T
- i. History and Systems of Psychology. (3-20-20)T
- j. Multiculturalism and Individual Diversity. (3-20-20)T

501. -- 549. (RESERVED)

550. REQUIREMENTS FOR SUPERVISED PRACTICE.

01. Duration and Setting of Supervised Practice. (3-20-20)T

a. A year of supervised experience is defined as a minimum of one thousand (1000) hours of supervised service provision acquired during not less than a twelve (12) month and no more than a thirty-six (36) calendar month period. The first year of supervised experience must be accredited only after acquiring the equivalent of one (1) year of full time graduate study. A second year must be obtained post-doctorally. (3-20-20)T

02. Qualifications of Supervisors. Supervising psychologists must be licensed and must have training in the specific area of practice in which they are offering supervision. (3-20-20)T

03. Amount of Supervisory Contact. One (1) hour per week of face-to-face individual contact per twenty (20) hours of applicable experience is a minimum. (3-20-20)T

04. Evaluation and Accreditation of Supervised Practice. The Board will require submission of information by the supervisor(s) that enable it to evaluate and credit the extent and quality of the candidate's supervised practice, on a form approved by the Board (3-20-20)T

05. Unacceptable Supervision. Supervised practice time during which the supervisor deems supervisee's performance to have been unacceptable will not be credited towards the required supervised practice hours. (3-20-20)T

551. -- 600. (RESERVED)

601. TELEPSYCHOLOGY.

This rule supplements Title 54, Chapter 57, Idaho Code, the Idaho Telehealth Access Act, the American Psychological Association Guidelines for the Practice of Telepsychology, and all other laws and rules applicable to the practice of telepsychology in this state. (3-20-20)T

01. Definitions. For purposes of telepsychology services, the following terms are defined as follows: (3-20-20)T

a. Emergency. Emergency means a situation in which there is an occurrence that poses an imminent threat of a life threatening condition or severe bodily harm. (3-20-20)T

b. Information Technology. Information technology means the production, storage, and communication of information using computers and microelectronics including but not limited to telephones, mobile

devices, interactive videoconferencing, email, chat, text, social media, and other Internet based services. (3-20-20)T

c. Telehealth Provider. Telehealth provider means a person who is licensed, required to be licensed, or, if located outside of Idaho, would be required to be licensed if located in Idaho by Title 54, Chapter 23, Idaho Code and who provides or offers to provide telepsychology services to persons who are located in or who reside in Idaho. (3-20-20)T

d. Telepsychology Services. Telepsychology services mean psychological services provided by a provider through the use of electronic communications, information technology, asynchronous store and forward transfer of information or synchronous interaction between the provider at a distant site and a service recipient at an originating site. Such services include, but are not limited to, assessing, testing, diagnosing, treating, educating, and consulting. (3-20-20)T

02. General. (3-20-20)T

a. When telepsychology services are contemplated, a telehealth provider will document individualized potential benefits and potential risks to the service recipient(s). (3-20-20)T

b. Before telepsychology services are provided, a telehealth provider will document an emergency plan in the service recipient's record. The plan will specify the procedure for dealing with emergencies that will in an effective and timely way, provide for the service recipient's welfare. (3-20-20)T

c. Except for psycho-educational purposes, the use of avatars for telepsychology services is prohibited. (3-20-20)T

03. Initial Contact. Telehealth providers will, upon initial contact with the service recipient except in an emergency, prior to providing telepsychology services, obtain the written, informed consent of the service recipient(s), consistent with accepted professional and legal requirements concerning: (3-20-20)T

a. The limitations and challenges of using information technology to provide telepsychology services; (3-20-20)T

b. The potential for breaches in confidentiality of information while delivering telepsychology services; (3-20-20)T

c. The risks of sudden and unpredictable disruption of telepsychology services and the alternative means by which communication may be re-established. (3-20-20)T

04. Informed Consent. Telehealth providers will, upon initial and subsequent contact with the service recipient: (3-20-20)T

a. Make reasonable efforts to verify the identity of the service recipient; (3-20-20)T

b. Provide to the service recipient alternative means of contacting the telehealth provider should communications be disrupted during the provision of services. (3-20-20)T

c. Discuss who, in addition to the provider and the service recipient, may have access to the content of telecommunications between the provider and service recipient; (3-20-20)T

d. Inform the service recipient of when and how the provider will respond to electronic messages; (3-20-20)T

e. Ensure that a written agreement has been executed with service recipient(s) concerning compensation, billing, and payment arrangements. (3-20-20)T

05. Security and Confidentiality. Telehealth providers must: (3-20-20)T

a. Use secure communications when providing telepsychology services and document consent for the use of non-secure communication means when they are necessary; (3-20-20)T

b. Document how electronic communications are stored and maintain confidentiality of communications with service recipients; (3-20-20)T

c. Ensure that unauthorized persons cannot recover or access confidential electronically-stored information when retained by the provider and after the data or equipment in which the data is stored has been discarded. (3-20-20)T

d. Inform service recipients how electronic communications may be sent to the provider and how the provider will store these communications. (3-20-20)T

06. Assessment. (3-20-20)T

a. When conducting psychological assessments using telepsychology services, telehealth providers must only use test and assessment procedures that are empirically supported for the patient population being evaluated. (3-20-20)T

b. Telehealth providers using telepsychology for assessment must ensure that the identity of service recipients remains secure, that test security is maintained, that test-taking conditions are conducive to quiet and private test administration, and that the parameters of the test(s) are not compromised. (3-20-20)T

c. Telehealth providers will explain to service recipients the potential limitations of conclusions and recommendations drawn from the results on online assessments and will document these limitations in the findings or report. Treatment will not be based solely upon the results of online assessments. (3-20-20)T

07. Interjurisdictional Practice. (3-20-20)T

a. Before delivering telepsychology services to recipients across state, territorial, and international boundaries, telehealth providers should familiarize themselves and ensure that they comply with all applicable laws. (3-20-20)T

b. Telehealth providers who are licensed to practice psychology pursuant to Title 54, Chapter 23, Idaho Code are under the jurisdiction of the Board when providing telepsychology services to Idaho residents located either within or outside of Idaho and to all recipients located within the state of Idaho. (3-20-20)T

c. Except when providing telepsychology services in response to an emergency, telehealth providers who are not licensed to practice psychology in this state, who do not hold a temporary license under Section 300, or who are not otherwise exempt by law, but who are nevertheless providing telepsychology services to recipients located in this state, are guilty of a misdemeanor crime under Chapter 23, Title 54, Idaho Code. (3-20-20)T

602. -- 699. (RESERVED)

700. QUALIFICATIONS FOR PROVISIONAL CERTIFICATION OF PRESCRIPTIVE AUTHORITY.

The Board may grant a provisional certification of prescriptive authority to an applicant who holds a current license to practice psychology in Idaho, who completes an application as set forth in Section 100 of these rules, pays the required fee, and who meets the following educational and training qualifications. (3-20-20)T

01. Doctoral Degree. The applicant must have been awarded a doctoral degree in psychology from an institution of higher education that meets the requirements in Section 54-2317(2), Idaho Code. (3-20-20)T

02. Master's Degree. The applicant must have been awarded a master's degree in clinical psychopharmacology from an accredited program that meets the requirements in Section 54-2317(3), Idaho Code. (3-20-20)T

03. Clinical Experience. An applicant must have successfully completed clinical experience as part of

the master's clinical psychopharmacology program that includes a diverse population of patients. (3-20-20)T

a. Clinical experience must include a minimum of four hundred (400) hours consisting of direct patient contact and collaboration with licensed medical providers involving a minimum of one hundred (100) separate patients. (3-20-20)T

b. A diverse population of patients includes diversity in: (3-20-20)T

i. Gender; (3-20-20)T

ii. Different ages throughout the life cycle, including adults, children/adolescents, and geriatrics, as possible and appropriate; (3-20-20)T

iii. Range of disorders listed in the most recent diagnostic and statistical manual of mental disorders published by the American psychiatric association and acute and chronic disorders; (3-20-20)T

iv. Ethnicity; (3-20-20)T

v. Socio-cultural background; and (3-20-20)T

vi. In-patient and out-patient settings, as possible and appropriate. (3-20-20)T

04. Examination. An applicant must successfully pass the national examination in psychopharmacology, as approved by the Board under Section 201 of these rules. (3-20-20)T

05. Supervision Agreement. An applicant must submit to the Board a supervision agreement that identifies the supervising physician(s) who will directly supervise the applicant's prescribing under a provisional certification of prescriptive authority. The documentation submitted to the Board must also identify: (3-20-20)T

a. For each supervising physician, the supervisor's name, address, license number, state in which granted, licensure status, length of licensure, and area of specialization; (3-20-20)T

b. For each supervising physician, documentation of the physician's board-certification as a psychiatrist or neurologist or of specialized training and experience in the management of psychotropic medication; (3-20-20)T

c. For an applicant seeking to prescribe for pediatric or geriatric patients, the supervising physician(s)' specialized training and experience in treating the patient population for which the applicant seeks to prescribe; (3-20-20)T

d. Designate a primary supervising physician when more than one (1) supervising physician is identified. The primary supervising physician will be responsible for coordinating between the other supervising physician(s) to obtain written progress reports at least every six (6) months concerning how the provisional prescribing psychologist is performing in the domains for supervision. (3-20-20)T

e. The types of cases for which each supervisor will be responsible for supervising and in which the supervisor has specialized training and experience. (3-20-20)T

f. The number of provisional certification holders supervised by each supervising physician. A supervising physician may not concurrently supervise more than three (3) provisional certification holders unless otherwise approved by the Board; and (3-20-20)T

g. The name and nature of setting in which the applicant will practice; (3-20-20)T

h. Prior to a change in supervisors or a change in the supervision agreement, the supervisee must notify the Board and the change must be approved by the Board, or a designated member of the Board, prior to the commencement of supervision by a new supervisor or implementation of the change. (3-20-20)T

701. SUPERVISED PRACTICE OF PROVISIONAL CERTIFICATION HOLDER.

A holder of a provisional certification of prescriptive authority may only prescribe under the supervision of physician(s) approved by the Board. Prior to application for a certification of prescriptive authority, a provisional certification holder must complete two (2) years of satisfactory prescribing, which includes: (3-20-20)T

01. Hours of Supervision. A minimum of two thousand (2,000) hours acquired in not less than twenty-four (24) months and not more than forty-eight (48) months. (3-20-20)T

a. The two thousand (2,000) hours may consist of direct patient contact, supervision, case consultations, and collaboration with licensed health care providers for the purpose of evaluation and treatment of patients with medication(s) within the formulary set forth in Section 730 of these rules. (3-20-20)T

b. Supervised practice time during which the supervisor(s) deem(s) a supervisee's performance to have been unsatisfactory will not be credited towards the required supervised practice hours. A supervisor who believes the supervisee's practice is unsatisfactory should notify the supervisee and the primary supervisor as soon as possible and identify the basis for such conclusion including, but not limited to, specific domains or issues needing remediation. (3-20-20)T

02. Number of Patients. A minimum of fifty (50) separate patients who are seen for the purpose of evaluation and treatment with those medications that are within the formulary established in Section 730 of these rules. (3-20-20)T

03. Amount of Supervisory Contact. Supervision must occur on a one-to-one basis at a minimum of one (1) hour for each six (6) hours of clinical contact time with patients being seen for the purpose of evaluation and treatment with those medications that are within the formulary established in Section 730 of these rules. One-to-one supervision must be provided either face-to-face, telephonically, or by live video communication. (3-20-20)T

04. Domains for Supervision. Supervision must include assessment of the provisional certification holder with regard to each of the following domains: (3-20-20)T

- a.** Basic science; (3-20-20)T
- b.** Neurosciences; (3-20-20)T
- c.** Physical assessments and laboratory exams; (3-20-20)T
- d.** Clinical medicine and pathophysiology; (3-20-20)T
- e.** Clinical and research pharmacology and psychopharmacology; (3-20-20)T
- f.** Clinical pharmacotherapeutics; (3-20-20)T
- g.** Research; and (3-20-20)T
- h.** Professional, ethical, and legal issues. (3-20-20)T

702. QUALIFICATIONS TO PRESCRIBE FOR PEDIATRIC OR GERIATRIC PATIENTS.

A prescribing psychologist may not prescribe for pediatric or geriatric patients unless approved by the Board. The Board may only grant prescriptive authority for pediatric patients or geriatric patients to an applicant for certification of prescriptive authority who has completed one (1) year of satisfactory prescribing, as attested to by the supervising physician, for the patient population for which the prescribing psychologist seeks to prescribe. (3-20-20)T

01. Credit Toward Certification. The one (1) year of satisfactory prescribing for a pediatric or geriatric population may be counted as one (1) year of the two (2) years of satisfactory prescribing required to qualify for a certification of prescriptive authority. (3-20-20)T

02. Hours of Supervision. One (1) year of satisfactory prescribing includes a minimum of one thousand (1,000) hours acquired in not less than twelve (12) months and not more than twenty-four (24) months. (3-20-20)T

a. The one thousand (1,000) hours may consist of direct patient contact, supervision, case consultations, and collaboration with licensed medical providers for the purpose of evaluation and treatment of patients with medication(s) within the formulary set forth in Section 730 of these rules. A minimum of eight hundred (800) hours of the one thousand (1,000) hours must be directly related to the population for which the prescribing psychologist seeks to prescribe. (3-20-20)T

b. Supervised practice time during which the supervisor(s) deem(s) a supervisee's performance to have been unsatisfactory will not be credited towards the required supervised practice hours. A supervisor who believes the supervisee's practice is unsatisfactory should notify the supervisee and the primary supervisor as soon as possible and identify the basis for such conclusion including, but not limited to, specific domains or issues needing remediation. (3-20-20)T

03. Number of Patients. One (1) year of satisfactory prescribing includes a minimum of twenty-five (25) separate patients in the population for which the prescribing psychologist seeks to prescribe and who are seen for the purpose of evaluation and treatment with those medications that are within the formulary established in Section 730 of these rules. For a prescribing psychologist who seeks to prescribe for pediatric patients, a minimum of ten (10) separate patients must be twelve (12) years of age or younger and a minimum of ten (10) separate patients must be between thirteen (13) years of age and seventeen (17) years of age. (3-20-20)T

04. Amount of Supervisory Contact. Supervision must be obtained in accordance with Subsection 701.03 of these rules, and under a supervision agreement approved by the Board in accordance with Subsection 700.05 of these rules. (3-20-20)T

05. Domains for Supervision. Supervision must include assessment in each of the domains set forth in Subsection 701.04 of these rules. (3-20-20)T

703. -- 709. (RESERVED)

710. QUALIFICATIONS FOR CERTIFICATION OF PRESCRIPTIVE AUTHORITY.

The Board may grant a certification of prescriptive authority to an applicant who completes an application as set forth in Section 100 of these rules and who meets the following educational and training qualifications. (3-20-20)T

01. Holds a License to Practice Psychology. The applicant must hold a current license to practice psychology issued by the Board. (3-20-20)T

02. Holds Provisional Certification. The applicant must hold a provisional certification of prescriptive authority issued by the Board. (3-20-20)T

03. Supervision. The applicant must have successfully completed at least two (2) years of satisfactory prescribing under supervision that meets the requirements of Section 701 of these rules, as attested to by the supervising physician(s). (3-20-20)T

711. -- 719. (RESERVED)

720. STANDARDS OF PRACTICE FOR PRESCRIPTIVE AUTHORITY.

A prescribing psychologist who issues a prescription for medication to a patient must collaborate with the patient's licensed medical provider and follow standards of practice as set forth in these rules. (3-20-20)T

01. Licensed Medical Provider. A prescribing psychologist may only prescribe medication to a patient who has a licensed medical provider. If a patient does not have a licensed medical provider, the prescribing psychologist must refer the patient to a licensed medical provider prior to prescribing medication. (3-20-20)T

a. In the event a patient terminates the relationship with the patient's licensed medical provider, with

whom the prescribing psychologist has established a collaborative relationship, and the patient declines to secure a new licensed medical provider, the prescribing psychologist must advise the patient that the prescribing psychologist cannot continue to psychopharmacologically manage the patient. (3-20-20)T

b. The prescribing psychologist must document that the psychologist has made every reasonable effort to encourage the patient to maintain or establish a relationship with a licensed medical provider. (3-20-20)T

c. 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 licensed medical provider, may prescribe the medication in a manner that is customarily recognized as a discontinuation regimen until the medication has been completely discontinued. The prescribing psychologist must document the discontinuation regimen in the patient's medical records. (3-20-20)T

02. Release of Information. A prescribing psychologist must obtain a release of information from the patient or the patient's legal guardian authorizing the psychologist to contact the patient's licensed medical provider. If the patient or the patient's legal guardian refuses to sign a release of information for the patient's licensed medical provider, the prescribing psychologist must inform the patient or the patient's legal guardian that the psychologist cannot treat the patient pharmacologically without an ongoing collaborative relationship with the patient's licensed medical provider. The psychologist must refer the patient to another mental health care provider who is not required to maintain an ongoing collaborative relationship with a licensed medical provider. (3-20-20)T

03. Initial Collaboration with Licensed Medical Provider. Prior to prescribing medication, a prescribing psychologist must contact the patient's licensed medical provider as provided in these rules and receive the results of the licensed medical provider's assessment. (3-20-20)T

a. The prescribing psychologist must inform the licensed medical provider of: (3-20-20)T

i. The medication(s) the prescribing psychologist intends to prescribe for mental, nervous, emotional, behavioral, substance abuse, cognitive disorders; and (3-20-20)T

ii. Any laboratory tests that the prescribing psychologist ordered or reviewed. (3-20-20)T

b. The prescribing psychologist must discuss with the licensed medical provider the relevant indications and contraindications to the patient of prescribing the medication(s) that the prescribing psychologist intends to prescribe. (3-20-20)T

c. The prescribing psychologist must document the date and time of contacts with the licensed medical provider, a summary of what was discussed, and the outcome of the discussions or decisions reached. (3-20-20)T

04. Ongoing Collaboration with Licensed Medical Provider. After the initial collaborative relationship with the patient's licensed medical provider is established, the prescribing psychologist must maintain and document the collaborative relationship to ensure that relevant information is exchanged accurately and in a timely manner. At a minimum the prescribing psychologist must: (3-20-20)T

a. Contact the licensed medical provider for any changes in medication not previously discussed with the licensed medical provider. (3-20-20)T

b. Contact the licensed medical provider if and when the patient experiences adverse effects from medications prescribed by the psychologist that may be related to the patient's medical condition for which he or she is being treated by a health care practitioner. (3-20-20)T

c. Contact the licensed medical provider regarding results of laboratory tests related to the medical care of the patient that have been ordered by the psychologist in conjunction with psychopharmacological treatment. (3-20-20)T

d. Inform the licensed medical provider as soon as possible of any change in the patient's

psychological condition that may affect the medical treatment being provided by the licensed medical provider. (3-20-20)T

e. Request that as part of the collaborative relationship, the licensed medical provider inform the prescribing psychologist of any new medical diagnosis or changes in the patient's medical condition that may affect the treatment being provided by the prescribing psychologist. (3-20-20)T

f. Request that as part of the collaborative relationship, the licensed medical provider inform the prescribing psychologist of any psychotropic medications prescribed or discontinued by the licensed medical provider or other licensed medical provider, of which the licensed medical provider is aware, the dates of any subsequent changes in psychotropic medications prescribed by the licensed medical provider or other licensed medical provider, of which the licensed medical provider is aware, and the efforts to coordinate the mental health care of the patient as soon as possible. (3-20-20)T

05. Disagreement between Prescribing Psychologist and Licensed Medical Provider. If the licensed medical provider and the prescribing psychologist do not agree about a particular psychopharmacological treatment strategy, the prescribing psychologist must document the reasons for recommending the psychopharmacological treatment strategy that is in disagreement and must inform the licensed medical provider of that recommendation. If the licensed medical provider believes the medication is contraindicated because of a patient's medical condition, the prescribing psychologist must defer to the judgment of the licensed medical provider and may not prescribe that psychopharmacological treatment strategy. (3-20-20)T

06. Prohibited Agreements with Licensed Medical Providers. A prescribing psychologist is prohibited from employing a licensed medical provider or entering into an independent contractor or similar contractual or financial relationship with a licensed medical provider with whom the prescribing psychologist collaborates, unless approved by the Board. The Board may grant an exception to this requirement on a case-by-case basis where the prescribing psychologist shows that such relationship is structured so as to prohibit interference with the licensed medical provider's relationship with patients, the licensed medical provider's exercise of independent medical judgment, and satisfaction of the obligations and responsibilities in Chapter 23, Title 57, Idaho Code, and these rules. (3-20-20)T

07. Prescriptions. All prescriptions issued by a prescribing psychologist must comply with all applicable federal and state laws, rules and regulations and these rules. (3-20-20)T

08. Emergencies. If a prescribing psychologist determines that an emergency exists that may jeopardize the health or well being of the patient, the prescribing psychologist may, without prior consultation with the patient's licensed medical provider, prescribe psychotropic medications or modify an existing prescription for psychotropic medication previously written for that patient by that prescribing psychologist. The prescribing psychologist must consult with the licensed medical provider as soon as possible. The prescribing psychologist must document in the patient's psychological evaluation/treatment records the nature and extent of the emergency and the attempt(s) made to contact the licensed medical provider prior to prescribing or other reason why contact could not be made. (3-20-20)T

09. Disaster Areas. If a prescribing psychologist is working in a declared emergency/disaster area, the on-site medical staff can serve as the evaluating licensed medical provider. (3-20-20)T

721. -- 729. (RESERVED)

730. FORMULARY.

A prescribing psychologist may prescribe medications and controlled substances that are recognized in or customarily used in the diagnosis, treatment and management of individuals with mental, nervous, emotional, behavioral, substance abuse and cognitive disorders and that are relevant to the practice of psychology or other procedures directly related thereto under the following limitations. (3-20-20)T

01. Prohibited Medications and Controlled Substances. A prescribing psychologist may not prescribe: (3-20-20)T

a. Any medication or controlled substance designated or included as a Schedule I controlled substance; or (3-20-20)T

b. Any opioid. (3-20-20)T

02. Disorders and Conditions. A prescribing psychologist may not prescribe medication to treat a primary endocrine, cardiovascular, orthopedic, neurologic, gynecologic, obstetric, metabolic, hematologic, respiratory, renal, gastrointestinal, hepatic, dermatologic, oncologic, infectious, ophthalmologic, or rheumatologic illness or disorder. The provisions of this rule do not prohibit a prescribing psychologist from prescribing to treat a mental, nervous, emotional, behavioral, substance abuse or cognitive disorder that arises secondary to a primary physical illness, provided that the primary illness is being treated by a licensed medical provider and the prescribing psychologist collaborates with the patient's licensed medical provider, as provided in these rules. (3-20-20)T

731. -- 999. (RESERVED)

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