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From the President Warren Phillips

As I pondered what I might share in this article, I thought back to initially joining the Iowa Psychological Association in 1996 as a Psychology Associate, and I considered the friends I have made in IPA along the way and the impact they have had on my life and my career. I did not imagine, at that time, that I would one day fill the role of President of IPA, for which I am honored, and consistently humbled.

While I have some initiatives, as President, that I would like to share in my next article in TIP, I decided that, since this year is the 70th Anniversary of IPA, I would like to dedicate this article to a celebration of IPA, from my viewpoint, both past and present. I

will start with just a couple of memories and then bring us to the present day in IPA.

As I time-travel into the past, I remember distinctly, as an Early Career Psychologist (although we didn't have that name for it back then), attending my very first Executive Council meeting as a 1st year IPA Representative. I had never served in any form of governance, only vaguely heard of Robert's Rules of Order, and was confident I was the wrong person in the wrong place who was sure to say or do something incredibly stupid at any moment during that meeting.

I was absolutely awestruck watching Sally Edman, Ph.D., Bethe Lonning, Ph.D. and David Christiansen, Ph.D. intelligently and

passionately work through action items, bring up and successfully field discussions, and actually get things accomplished while people made motions, seconded things (whatever that meant), disagreed and discussed, and then eventually voted. I managed to make it through the meeting without having too much of a panic attack and realized that maybe I wasn't the wrong person in the wrong place after all. I made it through many more meetings, learned what Robert's Rules of Order was and became the Chair of the Professional Issues Committee, which was composed of one member...me. We worked through

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many issues back then including researching and developing our current AntiTrust policy, after many meetings with an anti-trust attorney, John Cortesio, J.D., who I still occasionally run into.

A few years later I then joined into the Post-doctoral Fellowship training program where my group practice became one of the training sites for several of our current amazing Psychologists here in Iowa including Danah Barazanji, Ph.D., Kayla Davidson, Psy.D., Tina Hoffman, Ph.D. (still a very active member of IPA who practices in Nebraska), Matt Dzak, Ph.D., and Kari Finnegan, Ph.D. Those were wonderful years for me as I came to know and become friends with these incredibly gifted, intelligent and inspiring Psychologists.

These were also years that I had the incredible honor of working closely with Michele Greiner, Ph.D., who served as the Training Director and indeed built this Post-doctoral training program from the ground up. Michele and I became close friends during these years, frequently discussing triumphs and worries about Psychology in Iowa. I remember these conversations, so clearly, it's almost as if she and I just had them yesterday. I also remember standing in my family room, at home, the day I received the phone call telling me Michele had collapsed and then later that she had passed away. Iowa, as well as the rest of the world, lost a true hero that day and I lost my dear friend. However, Michele's legacy goes on. We now have the Michele Greiner Early Career Psychologist award, most recently won by Dr. Kayla Davidson, and our Postdoctoral Training program is alive and robust, currently under the wise direction of Dr. Matt Cooper.

As I time travel back to the present day in 2019 and consider our current Iowa Psychological Association I feel truly blessed to be a part of this inspiring, innovative, and vibrant organization. I want to share some of the highlights of our current Executive Council and Committees with you.

First, I am so very grateful for the regular support and wisdom of our past president, Dr. Graham, and our president-elect, Dr. Tallman, with whom I discuss ideas, concerns, and questions regularly. They are a fount of knowledge and ideas and a source of continuous support to me! Our Executive Director, Suzanne Hull, is a phenomenon of innovation, organization, and grace the likes of which I have rarely seen. I am truly grateful to work with Suzanne as our Executive Director.

There are so many exciting things happening in IPA at the Council and Committee level right now, and I want to share a few highlights. Some of these include Dr. Zilber and our Membership committee working tirelessly (I genuinely mean that... I wonder when they sleep) to recruit and welcome new members to our association on a steady basis! Similarly, our Diversity and Social Justice committee (co-chaired this year by Drs. Goins and Young) has presented multiple salons on multicultural diversity and hosted many diversity and social justice events throughout the state. They have also encouraged the Executive Council and our membership to ensure that diversity is included in all our education efforts so that our member education is informative, inspiring, and reality-based.

As always, our Psychopharmacology Education committee has worked tirelessly with the Iowa Board of Psychology and the Iowa Medical Board to ensure that administrative rules are

written and entirely in place to allow Iowa Psychologists, who are appropriately trained, to prescribe consistent with the prescription law passed here in Iowa. Dr. Lonning will provide us with an update on the prescription privileges law, rules, and practice at our upcoming Spring conference on April 12th and 13th. Our finance committee, now under the direction of Dr. Kauder, continues to actively guide the membership in maintaining the strong financial health of the organization and Dr. Nikolas and the website committee have worked very hard to bring us an updated, more robust, and more friendly website for IPA. This new website should be live soon after the Spring conference.

I also want to thank Dr. Paul Ascheman, our State Advocacy Coordinator, for applying for and receiving a \$1,000 grant to allow IPA to explore possibilities of counting pre-internship hours towards licensure for Iowa psychologists. This possibility is in line with the model licensure act of the American Psychological Association and a change in licensing laws that have already occurred in several states. The Iowa Psychological Association, in fact, just received an award at the APA Practice Leadership conference by the APA Committee on Early Career Psychologists to recognize our efforts in exploring this possibility.

Speaking of the APA Practice Leadership Conference... I just returned from Washington D.C. along with our impressive Iowa delegation including Dr. Kayla Davidson, Dr. Maggie Doyle, Dr. Benjamin Tallman, Dr. Joy Goins, Dr. Jennifer Kauder, Dr. Teresa Young, and our Executive Director, Suzanne Hull. We learned essential updates about practice issues affecting Iowa Psychologists and the people they serve and had the opportunity to visit with Iowa Senators and Congressional Representatives to advocate for several essential bills. These bills include changing the Medicare definition of physicians to include Psychologists and supporting legislation that would allow Medicare beneficiaries to receive telehealth and telecounseling services in all geographic areas and from their own homes. We also encouraged continued support for the inclusion of mental health and substance abuse services in all insurance plans, including Medicaid, as part of the Affordable Care Act.

My admiration and gratitude for all of our Leadership at IPA became even more profound after spending this past weekend at the APA Practice Leadership Conference in Washington, D.C. and talking with other Presidents of other state Psychological associations about their triumphs, tribulations, and creative solutions to challenges that face our field. As I had these conversations AND listened to the innovative questions and ideas of our own Iowa PLC Delegation, I was continuously reminded of how gifted our IPA Early Career Psychologists, Executive Council members, and IPA committees genuinely are.

As you can see, our Executive Council and committees are hard at work for our membership and Iowa citizens. As I mentioned, this year marks IPA's 70th anniversary. While I am impressed and inspired by our membership, committees, and Executive Council, I am reminded that IPA is a vibrant organization that stands on the shoulders of the leaders and members who came before us. So, as a part of our Anniversary celebration that we have planned during the Spring Conference on April 12-13, please share pictures of IPA events and members as well as stories and memories of IPA from your time in the organization by sending those to Suzanne Hull. We will share these at the Spring Conference where I look forward to seeing each and every one of you!

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Update on Administration Rules for RxP Law **Bethe Lonning**

As many of you know, part of the legislation for prescriptive authority for psychologists, we needed to create the administrative rules jointly with the Board of Medicine. In September 2016, members appointed by the Board of Medicine (BOM) and members appointed by the Board of Psychology (BOP) met for the first time to determine rules each group could support to the larger boards respectively. From September 2016 until April 2018, this sub-committee met regularly. There was considerable discussion regarding the training required. The fact that the post-doctoral master's degree programs are not yet accredited was difficult for our medical folks to understand.

Conversations with APA about the process of accreditation compared to designation were held and Cathy Grus was very helpful in creating a comparison hand-out for the BOM members to visualize the similarities in each process. Once consensus on the degree program was reached, the practicum and supervision years were discussed. While this did not present as much of a challenge, there were still some intense conversations about who could be a training physician, a supervising physician and a collaborating physician.

In the end, the sub-committees reached consensus in April, 2018 and the rules as proposed were sent to the full Boards. At the June 2018 BOM meeting they voted to notice the proposed rules for public comment and the BOP did the same.

The public hearing was held Aug. 21, 2018. At the hearing, the same concerns and suggestions from the opposing medical groups were heard. These were generally the same suggestions for amendments



heard during the legislative sessions. Over the course of BOM meetings in September and October, a couple of amendments were made to be more clear about releases of information and which physician involved with the training of the psychologist was responsible for what activity. On Dec. 14, 2018, the BOM voted to adopt the rules as amended and on Dec. 21, 2018, the BOP voted the same. These adopted rules were then filed by Dec. 26 for notice on Jan. 16, 2019. The notice period of 20 days was concluded Feb. 5 and the Administrative Rules Review Committee (ARRC) of the legislature met on Feb. 8, 2019. The rules were adopted without fanfare on Feb. 8. This was a long and challenging process and would not have been accomplished without the help and support of many, many people.

For a more thorough history of the RxP movement nationally and in Iowa, please attend the spring conference April 12-13, 2019 in Johnston.

IPA's 70th Birthday: Reflecting on our Last 10 Years

Diane Shelton

*Diane Shelton, a longtime member of IPA, offers an account of what stood out in her mind as she reviewed IPA's last ten years. Diane reviewed the content of the IPA website, the quarterly issues of *The Iowa Psychologist*, and the Executive Committee meeting minutes, along with a few conversations with colleagues. This report simply reflects what stood out in her mind; she apologizes in advance for any glaring errors or omissions.*

Over the last 10 years, the necessity for financial stability, which led to changes in IPA's governance, certainly stands out. Reflecting about our members, as well as our advocacy efforts, broad and deep, demonstrate who we are and what we stand for. The work of the Executive Council, including educational opportunities; The Iowa Psychological Foundation (IPF); The Iowa Psychologist (TIP) and the opportunities and challenges brought on by new technologies all contributed to the successes of the last decade. Finally, a look at the challenges we face as we grow into our eighth decade deserve some thought from each of us.

Seeking Financial Stability

A growing recognition of the need to strengthen our financial position ultimately led to the resignation of Carmella Schultes, who served as our Executive Director (ED) for 16 years, resigning at the end of 2016. Carmella's contributions to IPA were significant. Every issue of TIP contained a column written by Carmella, offering not only information, but more importantly, offering inspiration and ideas. Her regard for the profession of psychology, as a nonpsychologist herself, was unparalleled. To that end, Carmella met frequently with prospective members, was a key player in supporting our legislative efforts, and kept us on track with all of our activities. Carmella did not sugar coat our need to be a member driven association. Nor did she fail to remind us of our need to either increase membership or dues in order to maintain our operating and advocacy funds. At one point, Carmella froze her salary for a year. Ultimately, although Carmella had served IPA well, the association's need to stabilize the budget necessitated a reduction in the ED's responsibilities and salary. This change led to Carmella's resignation.

IPA was without an ED for a year as a search was held for Carmella's successor. During this time, the process of moving to a member driven association proceeded. With strong leadership and support of the members, this transition was a successful one.

Suzanne Hull accepted the position of Executive Director in 2017. Her responsibilities and salary are in line with a sustainable budget. Suzanne



brought her many strengths to the position, stepping right up to the plate. As we begin our eighth decade, the ED and the Executive Council (EC) are functioning smoothly.

We need to document the forces that led to our transition from one model of ED to another. IPA had ended the year in the red seven times in the decade preceding the current one. Additionally, we were actually in the red for five of the last 10 years. It might have seemed IPA could weather another financial crisis; this was not to be so.

What had changed? Historically, only about 40% of licensed psychologists in Iowa have been IPA members. In the last decade, our membership had declined by 36 members, and perhaps more importantly, the categories of dues had changed significantly. As the members of IPA aged, more of us took advantage of lifetime status (paying no dues). Our commitment to "Early Career" psychologists led to offering these members reduced membership fees. Our respect for academic psychologists, who derive less benefit from our advocacy efforts, resulted in offering them lower membership fees. Encouraging student members increased our expenditures without adding to our income. These were all value driven decisions that affected our bottom line but also hopefully ultimately could benefit both IPA and the citizens of Iowa by offsetting the effects of "graying" IPA members.

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The transition was not an easy one, and, at this point, we need to step back a bit, and give credit to some of the members who helped IPA on its path to fiscal stability.

In 2014 as awareness of our financial situation grew, Treasurer Dr. Betsy Altmaier called for an outside audit, as well as a change in accounting methods. On more than one occasion, Betsy acknowledged Carmella's cooperation, especially in learning to use Quickbooks, a better system than the one we had been using. Carmella's assistance in understanding our finances, along with some savvy financial minds, facilitated this process.

When Dr. Catalina D'Archiardi-Ressler became president in 2016, she called upon the EC to develop a Strategic Plan for the next three years. This plan provided a myriad of straight forward ways to increase our commitment to our profession, ourselves, and our community.

Also, in 2016, our new Treasurer, Dr. Benge Tallman, along with outside financial advisors, made it clear that we could not continue along the same path without eventually draining all of our resources. As is usually the case with major change, there was fallout, and the association lost the leadership of some very vital and valuable people. Regardless, Betsy, Catalina and Benge, as well as the entire Executive Council, deserve much credit for addressing our financial concerns, and setting a course to financial sustainability.

Reflecting on our Members

As a member driven association, it seems only right to highlight some of our members' achievements, acknowledge measures IPA has taken to enhance opportunities for those entering our profession, and memorialize the passing of distinguished IPA members.

Dr. Mike Rosmann (Winter 2011) and Dr. Margaret Koch (Summer 2011) are two IPA members who were interviewed in TIP in the last decade. Both are also published authors. Mike wrote a memoir, "Excellent Joy: Fishing,

Help Us Celebrate Our History!

The IPA anniversary celebration continues in the summer issue!

In addition to featured articles, *The Iowa Psychologist* editor Stewart Ehly plans to include photographs and comments of members on their experiences over the years.

Please send all materials to stewart-ehly@uiowa.edu.

Family, Hunting and Psychology," and Margaret is the author of a series of mystery novels involving a fictional psychology practice. Our talents are not limited to our chosen profession.

In 2014, Dr. Jerrit Tucker, a student member at the time, co-authored IPA's position paper "The Importance of Psychological Assessment," in conjunction with Dr. Derek Grimmell. A link to this paper is provided on our website's homepage. Go to the website's member directory and check out his website to see how Jerrit has embraced the scientist-practitioner model.

In addition to the longstanding IPA Meritorious Achievement Award, the IPA Service Award and the Ann Ernst Public Service Awards, the Michelle Greiner Early Career Psychologist was added in 2016. To date, three members are recipients of this award: Drs. Kayla Davidson, Amanda Johnson and Jennifer Kauder.

In 2016, three of the seven prestigious APA Karl F. Heiser Awards for Advocacy went to Drs. Beth Lonning, Brenda Payne, and Greg Febbraro for their legislative work. In addition, APA's Division 31 honored Dr. Lonning as Psychologist of the Year.

Dr. Mike Rosmann received the APA State Leadership Award in 2012 for his role in advancing rural mental health. Mike has been a resolute advocate for rural mental health, not only at the state level, but also nationally.

Expanding our Membership

Our commitment to the future of our profession is well documented. IPA

provides opportunities for students to be an active and significant part of IPA. The Executive Council includes a voting student member. During the years 2009-18, no fewer than 44 articles in TIP were authored by students. During the Spring Conference, students are encouraged to participate in poster presentations, a friendly competition that nonetheless provides financial compensation for the winning entries. Although student membership has fluctuated from a high of 44 students to a low of 16, students are always encouraged to participate in IPA. In 2010, Dr. Warren Phillips hosted a "Speed Mentoring" panel at a conference. IPA made an effort for mentor/mentee matches, with 18 available mentors, resulting in seven matches. The reduced annual membership fee of \$50.00 for student members also includes a waiver for all conference fees.

Not surprisingly, in 2011, IPA received The American Psychological Association of Graduate Students (APAGS) Outstanding State, Provincial and Territorial Association Award for our exceptional level of commitment to graduate student development. Paul Ascherman, a very active student member and now our State Advocacy chair, nominated IPA for this honor. One only need take a look at his TIP report (Spring 2018) "Persistence in Postdoctoral Issues Pays off" to realize how bright IPA's future will be with Paul, and the other "young" psychologists who are taking up the mantle of leadership.

The Membership Committee is involved in finding ways to attract new members and enhance the experiences of existing members. IPA worked successfully in the past to reduce membership fees for Early Career Psychologists (ECP) and academics. Based on a 2018 survey, it appears the majority of members who responded are satisfied with the three areas they deem important: opportunities for training, networking with peers, and advocacy.

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Honoring Past Members

And finally, death is inevitable, and the grieving process is painful. In the last 10 years, we lost 17 long time members who were memorialized for their accomplishments in TIP, our archival newsletter.

VAMC psychologists have a long history of serving in important roles in IPA. Drs. Tom Linde, Mike Gaffney and Joe Hineman served both our veterans and our association well. Drs. Jerry Beckman, Thomas Sannito and Thomas Hannum advanced our profession through teaching and practice. For Dr. Peter Nathan's distinguished career, go to the Summer 2016 TIP and read about what a difference one person can make. Dr. Jacob Sines will forever be remembered for his teaching and research contributions. Drs. Joyce Keen and Jane Bibber both enjoyed long careers in psychology, as did Drs. Thomas Wilson, Mark Peltan and Janet McDonough. Dr. Melville Finklestein's memorial deserves a rereading to get a flavor for how diverse our backgrounds can be. Although Mel once attended a one room school house, he graduated from a prestigious boy's prep school. Perhaps the most personal and informative memorial was that of Dr. Herb Roth, a mover and shaker for psychology starting in the 1950's, written by Allan Demorest, himself a very distinguished early force in shaping psychology in Iowa.

The association was rocked by the untimely deaths of Dr. Michelle Greiner in 2015 and Dr. Greg Febbraro in 2016. Both were seasoned practitioners who donated a great deal of their time to advancing psychology. Michelle developed the Training Task Force and worked with the Iowa Department of Public Health to secure funding to support post doctoral positions in Iowa's rural areas. Michelle interfaced with several agencies, worked tirelessly on behalf of young psychologists, and kept members informed through her frequent articles in TIP. Greg worked tirelessly as

State Advocacy Chair and was posthumously awarded APA's Karl F. Heiser Award for his service.

Acknowledging our Advocacy Efforts

IPA's advocacy efforts comprise a significant amount of our time and the association's capital, and involve not only working to gain and maintain our status as independent health providers, but also to facilitate entry into the profession. Advocacy efforts are also directed toward ensuring affordable, appropriate and geographical access to our services, and to advocating for our patients' rights.

Arguably the most significant legislative success began in 1997 with a survey and ended this year when the administrative rules for Prescription Privileges for Psychologists (RxP) were finally adopted. Iowa became the fifth state to legalize this additional opportunity for psychologists in our state to serve their clientele. Credit for this twenty-one-year effort goes primarily to Dr. Bethe Lonning, who, along with Drs. Brenda Payne and Greg Febbraro, was recognized by the American Psychological Association for their advocacy efforts.

In 2009, Drs. Sam Graham and Michele Greiner began an effort to work with the Iowa Board of Psychology Examiners (IBPE) on training resequencing, a change that could improve retention of psychologists in Iowa. Ultimately, through legislation passed in 2014, and intensive work with the Iowa Department of Human Services (IDPH), and the Iowa Medicaid Enterprise (IME), nine years after this effort started, IPA was finally rewarded for its hard work. The result: A Doctoral Degree is now the standard of care, and Post Docs can now be provisionally licensed to practice and receive reimbursement from Medicaid, when under the supervision of a licensed psychologist.

Dr. Michele Greiner served as Director of IPA's Training Task Force (TTF) for close to eight years, from April of 2008 until her untimely death on

November 20th, 2015. With a mission to find ways to provide psychological services to rural and underserved populations in Iowa, and an ultimate goal of retaining more psychologists as practitioners in our state, Michele took "the bull by its horns" and became very involved with the Iowa Legislature and the Iowa Department of Public Health (IDPH). Michele worked to develop post-doctoral internship sites and potential candidates. IPA, along with IPF, IDPH and the Telligen Community Initiative have all contributed to the funding of this project.

Dr. Brenda Payne became director of the TTF after Michele's passing. This training program not only provides funding for post-doctoral internships in Iowa, but also provides formal and informal opportunities for networking, additional education and training. After a year in the training program, participants are already integrated into the culture of psychology in Iowa, and many choose to remain here. Dr. Payne reported that over 80% of the psychologists who participate in this program stay in Iowa and become active members of IPA. Given the "graying" of psychologists in Iowa (in 2010, 53% of the psychologists in Iowa were 55 years of age or older) retention of a new generation of psychologists is imperative.

The Early Career Psychologist's Committee conducted a panel discussion on issues related to the Enhanced Examination for Professional Practice of Psychology (Enhanced EPPP), designed to be an examination for skill-based competency, complementing the current knowledge-based competency examination for licensure. Education on this issue, along with discussion and ultimately feedback on the decision to implement this additional exam in 2020 proved effective in State Psychological Associations as well as APA. The Association of State and Provincial Psychology Boards voted to rescind implementation of this exam until issues such as timing in sitting for the exam,

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costs associated with the exam and the efficacy of content of the exam could be studied further.

When it became necessary to protect a minor, the psychology firm Anderson, Arnold and Partners successfully argued before the Iowa Supreme Court that the rights of parents to confidential information can be restricted under certain circumstances (The Harding Case). IPA's Executive Council voted to provide \$2000 to the firm to help with the expense of this successful advocacy effort. This case law is often cited in cases involving children at risk.

Although IPA's advocacy work can be frustrating at times, those dedicated to these efforts persist in spite of the long-term nature of changing law or institutional prejudice. In 2009, after 10 years of working for parity in mental health care reimbursement, Representatives in the Iowa House failed to pass this legislation by just one vote. Ten more years have passed and still mental health issues are not reimbursed on par with other medical conditions.

Reflecting on the Executive Council

All of IPA's presidents have served the association in ways too numerous to mention. That said, the presidents in 2016-2017 faced IPA's most severe challenges of this decade.

In 2016, Dr. Catalina D'Archiardi-Ressler, working with at least 20 other members, led the effort that resulted in a comprehensive Strategic Plan for 2017-20. Catalina also led the Executive Council through a contentious but necessary restructuring of the Executive Director (ED) position in order to achieve financial stability.

Dr. Molly Nikolas, president in 2017, was faced with the challenge of leading the association without the benefit of an ED, and without a presidential triad. By the end of her presidency, IPA had welcomed a new ED. As Molly graciously acknowledged in her final presidential column in TIP, the strong support and

assistance of the EC as well as other members of IPA, made this possible.

Two other presidents helped negotiate IPA through this transitional time. Dr. Sam Graham, president in 2006, accepted the position again in 2018. Technology made his valuable contribution possible, as Sam now resides in Florida and Utah. Regardless, his commitment to psychology in the state of Iowa has remained strong.

Additional acknowledgment is due Dr. Phil Laughlin, who stepped in to provide leadership during the recent transition, as well as assistance in so many ways throughout his career and in retirement. Phil was ED from 1987-93, serving as a volunteer for the first two years because IPA had no money.

Although much of the association's work is directed toward advocacy, IPA provides opportunities for training and networking. We continue to hold Spring and Fall Conferences, providing an opportunity for members and nonmembers to spend time in a professional but relaxed setting with colleagues, while also earning CEUs. Dr. Susan Enzle, who organized and ran the most profitable conference in recent IPA history, noted these conferences involve the contributions of many, thanking a total of 30 volunteers for their help with the Spring 2010 Conference (Summer 2010 TIP).

The every other year Trust Workshop and the annual Legislative Breakfast continue to be successful. Dr. Greg Gullickson initiated Salons in 2012. These small gatherings are designed to facilitate members' opportunities to share their expertise in a setting designed to enhance collegiality. In 2014, Dr. Amanda Johnson launched the PSYowa Blog to provide education to the public. IPA also gained status as an APA CE provider in 2018, a move that will hopefully lead to increased attendance in conferences by a wider range of health service providers.

And finally, given the need for awareness and education regarding diversity, the Committee on Diversity and

Social Justice was reactivated in 2017. IPA members presented on this topic at our Spring 2017 Conference, and the committee hit the ground running. The wide range of diversity issues that psychologists need to take into account include, but are not limited to race, gender, cultural and religious identity, geographical location and socioeconomic status.

Acknowledging a Valuable Partner: Iowa Psychological Foundation

Perhaps IPA's most significant relationship is with the Iowa Psychological Foundation (IPF). IPF celebrated its 25th anniversary in 2017. In keeping with its mission "to promote awareness and application of psychological principles to enhance the quality of life and healthy behavior for all Iowans," IPF previously sponsored The Iowa Psychologically Healthy Workplace Award. IPF also provides funding to the Student Poster Contest at IPA's Spring Conference. In addition, IPF provides financial assistance to Early Career Psychologist to assist with licensing fees. In 2014, IPF donated \$10,000 to IPA. IPF also partnered with IPA to secure a \$100,000 two-year grant from the Telligon Community Initiative. Both were used to support IPA's Post-Doctoral Training Project.

In 2018, Carmella Schultes, our Executive Director from 2000-2016, extended her commitment to psychology by joining IPF's Board of Directors. As the former ED of IPF, Carmella will be a valuable asset in the upcoming decade.

Acknowledging our Archival Publication: The Iowa Psychologist

One of the association's enduring features is the quarterly edition of TIP. Delivered electronically now, older members will remember the blue covered booklets that used to arrive in our mailboxes. Dr. David Christensen began the last decade as editor and Dr. Stewart Ehly took over in 2011. Although it's impossible to mention all of the significant articles published in TIP over

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the last 10 years, what follows is a small sampling from the many worthy of review.

—Dr. Joyce Goins-Fernandez's account of her personal experience with racism, "A Disturbing Experience of Systemic Racism," (Winter 2018) demonstrates how terrifying everyday encounters can be for persons of color.

—Dr. Suzanne Zilber's "Helping: The Original Ethical Dilemma" (Fall 2011) offers a thoughtful examination of how she, a person of white privilege, tries to balance her life in keeping with the ethics we all proclaim as psychologists.

—In his article "Ethics for Therapists" (Spring 2010) Dr. Ellery Duke raises important questions about how we treat patients who need long term care in the age of managed care, in addition to other barriers psychologists face.

—Dr. Sam Cochran's "Managing Multiple Relationships" (Fall 2010) addresses issues that psychologists face as they interact with current and former patients in everyday life.

—"Do it well, or don't do it" (Winter 2009-10) by Dr. David Beeman argued for quality in psychological assessments and prudence in the use of formal assessment tools. David provided an excellent summary of best practices in assessment.

—For an excellent history of IPA's advocacy efforts, refer to "Advancing Professional Psychology in Iowa: IPA and Advocacy" by doctoral students Chi W. Yeung and Erin Cannella (Winter 2016).

—Dr. Robert Hutzell's article "Reflections Upon Receipt of Ann Ernst Award" (Winter 2018) could have easily been titled "The opportunity just put itself out there." Although Bob was IPA's president back in 1987, his valuable contributions to the association extend from before to way beyond 1987.

Arguably, choosing seven articles written over 10 years and 40 issues of TIP is a bit presumptuous. Hopefully, though, these articles underscore the

dedication of our members to sharing their expertise and unique perspective with fellow psychologists.

Addressing Technological Issues

Dr. Rex Shahriari initially developed our website in the late '90's. However, over the years, Dr. Phil Laughlin has provided invaluable assistance in maintaining and updating it. Currently, Dr. Molly Nikolas is converting the website to state of the art under the umbrella of APA.

In 2010, Dr. Susan Enzle vowed to make IPA a "greener" association, holding some Executive Council (EC) meetings via Skype. That effort carries on. The EC moved from more costly and time consuming in person meetings, to meeting via Zoom when possible. This move proved key in being able to call upon Dr. Sam Graham to reprise his role of president in 2018.

Suzanne Hull, our ED, created a Facebook Fan Page in order to market our profession to nonmembers and other mental health professionals.

In 2009, Dr. Ron Nelson, wrote an article on "Detecting and Dismantling Ethical Landmines in the New Terrains of e-Psychology" articulating the challenges new technology presents to our profession. He wrote that the use of technology "raised more questions than answers." Not surprisingly, questions raised with each advance in technology persist.

Following a workshop presented at IPA's Spring Conference in 2014 and subsequent discussions with professionals knowledgeable in psychology, technology and cybersecurity, Drs. Sam V. Cochran, Karen Nelson and Tina Hoffman authored "Confidentiality 2.0: Digital Dilemmas." (Summer 2014 TIP)

IPA's Spring Conference will feature a workshop presented by Dr. Dan Florell who will offer training on cyberbullying and education regarding telepsychology.

Growing into our 8th Decade

Although no one can predict IPA's challenges over the next 10 years, this

much is true: There will be challenges and IPA will meet those challenges. As Dr. Phil Laughlin wrote in the Winter 2017 TIP, IPA experienced a major upheaval 30 years ago and again 15 years ago. The years 2016-2017 saw another upheaval arise and then settle down. In an effort to achieve and maintain financial stability, IPA articulated the need to create a liaison between the Membership and Finance Committees, and to create a workable balance between benefits and affordability for all of our members and prospective members. We have a membership willing to take ownership of the business issues that come with managing a professional association.

As evidenced by IPA's ultimately successful twenty plus years effort to legalize prescription privileges for psychologists, our persistence and hard work does bring results that enhance our profession and help our patients. Efforts to diminish our role as independent health care professionals remind us that we must be ever vigilant of the forces that would cripple our profession. In 2014, IPA successfully advocated to expand Medicare's definition of "physician" to include psychologists, in order to practice without supervision. It is remarkable that barriers such as this one still exist.

IPA is now represented on the Medical Assistance Advisory Council and the Patient Centered Health Advisory Council. IPA members and our lobbyist continue to develop relationships with legislators. We are working to achieve recognition of psychologists as primary caregivers in an integrated health care system.

Our common goals will hold IPA up throughout. Dr. Suzanne Zilber called IPA's recent years a renaissance, and she promises we WILL have fun as we work hard. We have a playbook in the Strategic Plan developed under Dr. Catalina D'Achiardi-Ressler's leadership. We have sound working committees. Simply stated: We have a bright future!

From the Executive Director

Suzanne Hull

The 2019 IPA Spring Conference will be held at the Hilton Garden Inn Des Moines/Urbandale April 12-13, 2019. The two-day conference will feature Dr. Dan Florell speaking on ethics in telepsychology and the inclusion of technology in general practice on Day 2, preceded by presentations by several regional speakers on Day 1.

Florell is an Associate Professor in the School of Psychology Program at Eastern Kentucky University and he has a private practice that focuses on children and adolescents. He has published several journal articles and book chapters on the topics of cyberbullying and the use of technology in professional practice. His research focuses on the effects of technology on adolescents and in the practice of psychology.

The conference will include 12 total CEUs.

Accommodations: Hotel rooms are reserved at the Hilton Garden Inn Des Moines/Urbandale at the group rate of \$99/night plus tax for the nights of April 11 and April 12. Breakfast is not included in the rate. Hotel rooms may be reserved by contacting the hotel directly at 515-270-8890. Reservations need to be made by March 21 to receive the block rate.

Social Hour: IPA will be hosting a social from 5-7pm on Friday, April 12 at The Range Grill + Golf (11865 Hickman Rd, Urbandale, IA 50323). Your first drink and appetizers will be hosted by IPF and IPA. Please email your RSVP to ipa@iowapsychology.org by April 6.

Please complete the online registration process. Registration will close on April 9, 2019 at 9am. There will no refunds or cancellations after April 9, 2019. Register at iowapsychology.org/event-3113154.

...

2019 IPA Trust Workshop Sequence VIII: Ethics and Risk Management in a Digital World 2.0

The 2019 IPA Trust Workshop will be held at the Hilton Garden Inn Des Moines/Urbandale on June 21.

Technology is advancing at a dizzying pace and is becoming increasingly central to the provision of psychological services. From portable devices to digital records to interjurisdictional practice to mental health apps, technology has brought remarkable benefits to our work; and at the same time created an increasingly complex set of ethical, legal, and regulatory challenges. In this rapidly evolving environment, the need to maintain an active risk management strategy is perhaps even more central than ever.



IPA Key Dates 2019

April 12-13 – Spring Conference, Hilton Garden Inn Des Moines/Urbandale

June 21 – IPA Trust Workshop, Hilton Garden Inn Des Moines/Urbandale

Oct. 11 – Fall Conference, Des Moines University

Info & registration: iowapsychology.org.

This workshop is a next-generation discussion of digital world issues. After a brief introduction describing The Trust Risk Management Philosophy and Strategy, this workshop will provide a review and update on the ethical, legal, and risk management dimensions of technology. We will focus broadly on these issues related to digital record keeping, telepsychology, digital communications, and social media. The workshop is applicable to all sites where health services are provided.

About the Speaker: Amanda D. Zelechowski is a licensed clinical and forensic psychologist and attorney. Dr. Zelechowski received her B.A. from the University of Notre Dame, her M.S. and Ph.D. from Drexel University, and her J.D. from Villanova University School of Law. She completed a postdoctoral fellowship at The Trauma Center at Justice Resource Institute (Brookline, MA) and is board certified in Clinical Child and Adolescent Psychology. She has worked clinically with adults, children, and families in inpatient, outpatient, and forensic settings.

The conference will include 6 total CEUs.

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Accommodations: Hotel rooms are reserved at the Hilton Garden Inn Des Moines/Urbandale (8600 Northpark Dr, Johnston, IA 50131) at the group rate of \$109/night plus tax for the night of June 20, 2019. Breakfast is not included in the rate. Hotel rooms may be reserved by contacting the hotel directly at 515-270-8890. Reservations need to be made by May 30, 2019 to receive the block rate.

Please complete the online registration process. Registration will close on June 19, 2019 at 9am. There will no refunds or cancellations after June 16, 2019. Register at ow.ly/t0eF30nGG5Z.

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Save the Date: 2019 IPA Fall Conference

Please save the date for the 2019 IPA Fall Conference focusing on the theory and practice of cognitive behavioral therapy for insomnia (CBT-I) taking place October 11 at Des Moines University.

This workshop is designed to provide participants with the core elements of cognitive-behavioral treatment for insomnia. The course starts by grounding participants in the basics of sleep medicine that undergird the practice of CBT-I. It goes on to present systematic, empirically validated treatment methods and essential information about the pathophysiology and etiology of insomnia necessary to inform assessment, diagnosis, treatment, and the handling of treatment resistance.

Insomnia is widely recognized to be the most common sleep problem and is also a leading complaint in primary care settings. The consequences and morbidity associated with chronic insomnia can be substantial across several domains and can include increased health care utilization, impaired quality of life, increased risk of falls and hip fractures, increased risk of medical and behavioral disorders, and ultimately worse outcomes for all co-morbid disorders.

Effective treatment of insomnia not only improves sleep quality and daytime functioning but has also now been shown to have direct beneficial

impact on depression, anxiety, PTSD, chronic pain, and other behavioral and medical disorders. In addition, cognitive-behavioral treatments for insomnia have been shown to be of equal or greater effectiveness when compared to sedative hypnotic medication. These findings suggest that CBT-I should be considered a trans-diagnostic therapy that should be in every clinician's tool box.

About the Speaker: Dr. Donn Posner works as a clinical/research psychologist at the Palo Alto VA and consults on a number of grants exploring the effects of CBT-I in Gulf War Veterans and Veterans with insomnia and Mild Traumatic Brain Injury. In the previous 5 years, he also served as an Adjunct Clinical Associate Professor in the Department of Psychiatry and Behavioral Sciences Stanford University School of Medicine.

Prior to his role at the VA he spent 25 years serving as the Director of Behavioral Sleep Medicine for the Sleep Disorders Center of Lifespan Hospitals and was a Clinical Associate Professor in the Department of Psychiatry and Human Behavior at the Warren Alpert School of Medicine at Brown University. Dr. Posner is a member of the American Academy of Sleep Medicine and is one of the first Certified Behavioral Sleep Medicine specialists recognized by that group. He is also a founding member of the Society of Behavioral Sleep Medicine and he has also now achieved the status of Diplomate with the SBSM.

The conference will include 6 total CEUs.

Accommodations: Hotel rooms are reserved at the Holiday Inn Downtown at Mercy Campus (1050 6th Ave, Des Moines, IA 50314) at the group rate of \$109/night plus tax for the night of October 10, 2019. Hotel rooms may be reserved by calling 515-283-0151. Reservations need to be made by September 19, 2019 to receive the block rate.

Please complete the online registration process. Registration will close on October 3, 2019 at 9am. There will no refunds or cancellations after October 3, 2019.

Notice to Readers

The Iowa Psychologist newsletter editorial staff is seeking peer reviewers who are willing to read a small number of manuscripts and offer feedback as needed to authors. Reviewers will help form decisions on acceptance of materials.

Please contact Stewart Ehly (stewart-ehly@uiowa.edu) to indicate interest.

Shifting Gender Trends Within Psychological Training Program Sub-Disciplines

Cara L. Solness

Editor's Note: The author is a student member of the IPA Diversity and Social Justice Committee. References for this article are available from the editor upon request.

Psychology has a long history at the University of Iowa; one that is dotted with notable names and significant contributions to the profession. For example, Albert Bandura and Social Cognitive Theory (SCT; Bandura, 1986); Everett Franklin Lindquist and Iowa Test of Basic Skills and ACT; four APA Presidents, Carl E. Seashore, 1911 educated at Yale; and three educated at Iowa, Albert Bandura, 1974, Janet T. Spence, 1984, and Charles Spielberger, 1991 (“APA presidents”, 2018). The University of Iowa was founded in 1847, notably the first in the country to be coeducational from its inception; the first students (69 men and 55 women) sat for classes in 1855. In 1887 George T. W. Patrick established the psychology lab, only the seventh in the country at the time (Kendler, 1991) and at an institution that did not yet have a separate psychology department. That transition came under Iowan Carl E. Seashore in 1927 (“University archives: History”, 2018).

The University of Iowa can claim some notable firsts with respect to inclusion of women and minorities. For example, Mary B. Wilkinson earned her Bachelor's degree in Law in 1873, potentially making her the first woman to receive a law degree in the United States. In 1879 the first law degree conferred to an African American was awarded to Alexander Clark Jr., and Iowa was the first to recognize an LGBTB Student organization in 1970 (“University archives: Resources”, 2018).

Even so, the inclusion of women within PhD level psychology programs appears to follow what is ostensibly a typical trajectory, from the first Doctorate being awarded in 1902, when the department was still under philosophy, to the various sub-disciplines discussed here. What is observed is that the proportions of women do not begin to



approach equal representation until the late 80's (Figure A1) and some sub-disciplines appear to be indicative of what could be called male flight.

Regarding the history of gender more broadly,

GENDER TRENDS IN PSYCHOLOGY SUB-DISCIPLINES

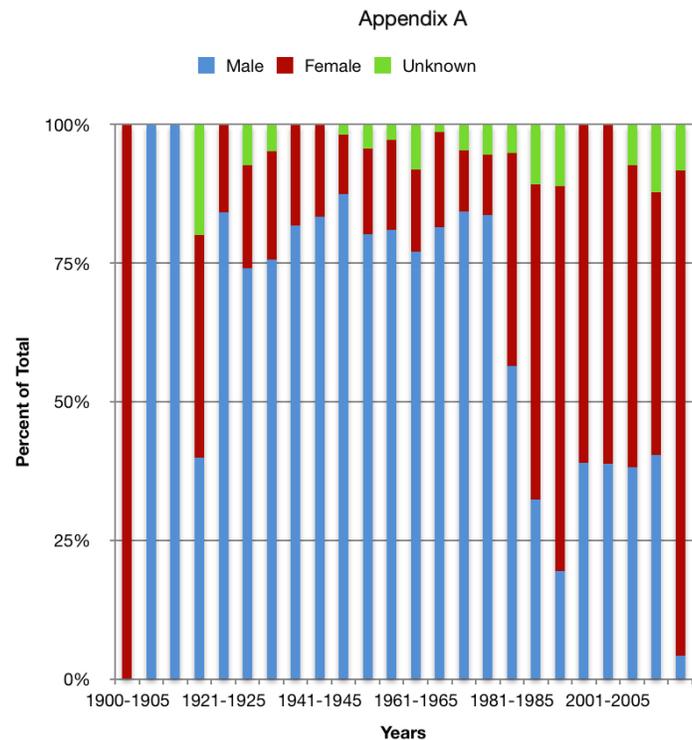


Figure 1. Overall proportion of males and females receiving PhD degrees from the Department of Psychological and Brain Sciences.

the dynamics that shaped society during the mid- to late-nineteenth and early twentieth century when psychology was getting its start were paralleled

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within the ranks of the professional and opportunities for attaining advanced educational. A relevant consequence of these social dynamics was the exclusion of women in general from Universities in the United States and from professional positions as well as from positions of prestige once they were earning advanced degrees (Rutherford & Granek, 2010). It is true that the gender biases and imbalances of the past have been addressed within the profession and that all genders are now contributing in meaningful ways to research and social change. Arguably, that is not happening in an equitably valued manner, as is evidenced by where research dollars go as well as publication trends, however, that discussion is outside the scope of this article. The purpose of this article is to present a preliminary exploration of historical trends in gender representation within the different specialties of doctoral-level programs, specifically at the

University of Iowa, and to draw attention to these trends and shifts as having the potential to be subtle indicators of potentially changing prestige and therefore gender-based inequality.

In presenting this article as a discussion that includes only two genders, there is a risk of reinforcing the marginalization of those who identify outside the binary. It is my expectation that our profession will continue to grow in how we report identities of all of our worthy contributors and that we will continue to move toward a more inclusive discourse of gender. Unfortunately, due to the nature of this article being an examination of historical data, that inclusion is not possible here.

It is important that professional psychology remain aware of the influence of public discourse (Shields, 2007) and work to mitigate the effects of biases and assumptions that serve to categorize certain pursuits as more/less suited to any particular gender. This type of bias was present during the early years of the profession when child psychology research was seen as woman's work (Johnson, 2015;

Rutherford & Granek, 2010), and the data here will suggest that similar assumptions may still be having an influence, albeit in less-predictable directions. What is obvious from this data is that compared to a past that "tracked [women] into less scientific careers" (Johnson, 2015, p. 185), women are increasing in numbers in the fields that could be viewed as the most scientific (Figure A2). Given that,

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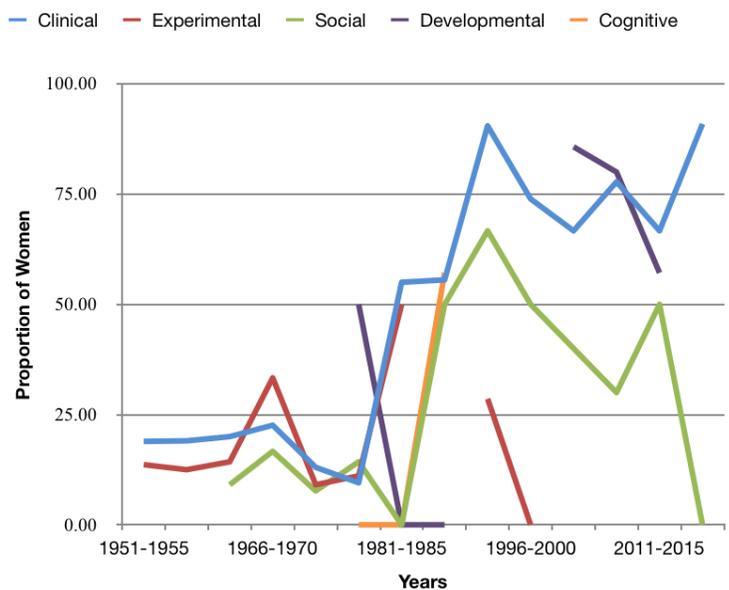


Figure 2. Proportion of PhD degrees conferred to female students from the Department of Psychological and Quantitative Foundations. Degrees conferred before 1951 or numbering less than four have been excluded.

the profession as a whole values a broader definition of what constitutes scientific, and a more appropriate classification might be to say the disciplines that are presumed to place more emphasis on quantitative methodology.

The five specialty areas that will be discussed under what is now the Department of Psychological and Brain Sciences are: Clinical, Social, Developmental, Experimental, and Cognitive Psychology. Under the College of Education three programs are considered: Counseling, School, and Educational Psychology. Other psychology specialties have appeared throughout the course of the Iowa timeline, however, only those with more than four degrees conferred are included.

The first trend that appears is that the proportion of women receiving PhD degrees from the sub-disciplines located in the College of Education is consistently higher (across years and three disciplines; Average = 72.3% women) than

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those in the Psychology Department (across equivalent years and five sub-disciplines; Average = 58.7% women). The next observable trend comes from an examination of the Psychology Department alone. As shown in Figure 2, there is a sharp drop off of males receiving PhD's starting at the beginning of the 1980's until there was a slight rebalancing starting in 1996-2000. This roughly coincides and follows the more concentrated emergence of feminist psychologists such as Naomi Weisstein, Karen Horney, Sandra Bem, and others, and the coalescence of psychology of women as a distinct field (Rutherford & Granek, 2010). This included the founding of APA Division 35, Psychology of Women in 1974 and the emergence of prominent journals dedicated to women's psychology; *Sex Roles* was first published in 1975, *Psychology of Women Quarterly* in 1977, *Women in Therapy* in 1982, and *Feminism and Psychology* in 1991 (McCreary & Chrisler, 2010).

With respect to the trends observed within the University of Iowa data, more research would be needed in order to examine the question of whether this drastic change represents a decrease in males interested in the different disciplines, an influx of women psychologists, socially aware admissions practices, or other influences. Regardless, the trend shows a significant shift in the gender composition in the program overall.

When looking specifically at the sub-disciplines within the psychology department another notable shift is apparent. After the point when the proportion of women and men reached near equality (1980's to 1990's depending on the discipline) there is an overall upward trend in the proportion of women in the Clinical subdiscipline, starting in the late 1970's, and an overall downward

trend in Social since its peak in the early 1990's (Figure A2). Cognitive and Developmental are more complex pictures which make commenting on trend less informative at this time.

Comparing this to the trends within the College of Education disciplines (Figure A3), there appears to be a more consistently equitable proportion of men and women obtaining degrees in Counseling Psychology, whereas the trends are more variable for

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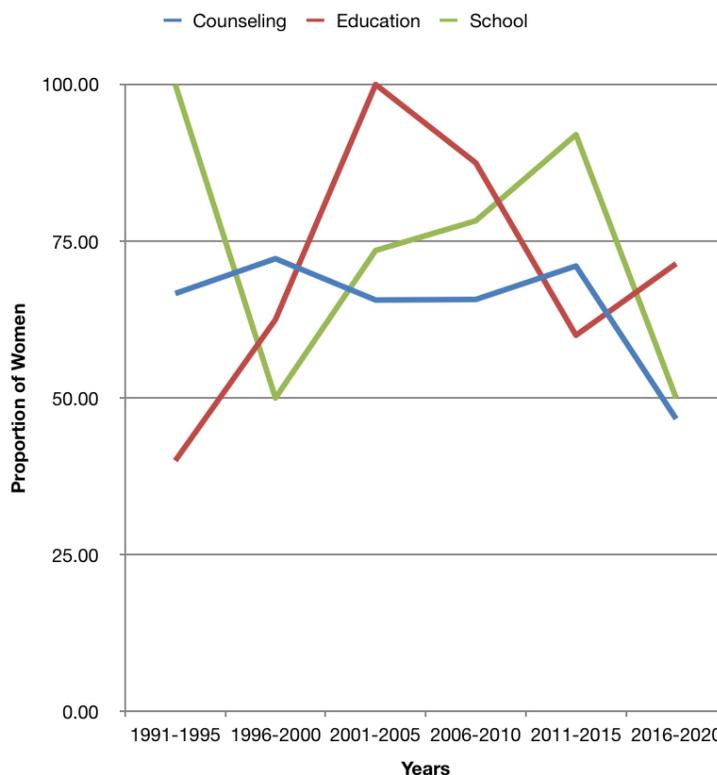


Figure 3. Proportion of PhD degrees conferred to female students from the College of Education. Degrees conferred before 1951 or numbering less than four have been excluded.

both Educational and School Psychology with an overall higher proportion of women across the years in the latter two (65%, 71%, and 74% respectively). This is not surprising given the history of child psychology mentioned above, however, as will be discussed next, the higher proportion of women is problematic with respect to equal access to status and influence for those within women-dominated specialties.

One metric that can be used to illustrate the disproportionate access to power for women is

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representation within the ranks of APA presidents. Using 1970 as an arbitrary cutoff related to the insurgence of women psychologist, male and female APA presidents number 34 and 14 respectively. Looking at the areas of specialty listed from APA presidents for the same time period, 21 of the 48 (44%) list Clinical Psychology, only 3 of which were women.

This preliminary exploration of the data from a single institution provides a glimpse into the possibility that gender trends exist within sub-disciplines of PhD-level psychology and that as more women enter a sub-discipline, equal representation is not necessarily maintained; instead, men appear to migrate to other specialties. The problem that arises if these trends continue and/or are ubiquitous across programs, is that instead of approaching gender equality and access to equitably respected careers, new women's spheres (Shields, 2007) are effectively being demarcated.

Previous research suggests that perceptions of masculine and feminine careers continue to persist and that "feminine" careers are more negatively valenced by men (Callahan, 2017). Given this, it is not unreasonable to imagine that some men would consciously or subconsciously seek out careers with masculine status, the perception of which are likely affected by the overall representation of women. There is research supporting this idea outside of psychology.

There are, however, several obvious problems with using this initial exploration as a statement of trends. First, more data and more sophisticated statistical analysis are necessary in order to support this preliminary look at gender trends and to make more definitive statements about the potential effects. One more sophisticated exploration would be to nest graduate specialty areas under advisors in order to help explain some of the trends. Second, this article represents only one institution, the division of sub-disciplines within which are dependent on research interests and availability of faculty advisors. Some advisors are more rigid than others with respect to advisees contributing within their focus area which impacts who applies for and

graduates under particular advisors/disciplines. Additionally, advisors actively select who they are going to mentor. A more nuanced exploration would look at gender composition of qualified applicants (again, possibly nested under specific advisors) as well as graduation career outcomes such as publications, place of employment, awards, professional memberships, and leadership positions.

A more nuanced examination would also include intersections of identity which could be accomplished with more complete data that includes additional important identity information such as race/ethnicity, gender identity, and sexual orientation.

Future work in this realm should examine other factors that influence sub-discipline selection for all genders. Additionally, it is important to ask if an increasing proportion of women within a discipline affect men's motivation to seek out other, seemingly higher-status career paths within psychology? Psychologists are uniquely positioned to comment on this question given the specialized skills-set required to investigate such trends and the important biopsychosocial influences acting on individuals. Psychology also presents a unique opportunity to follow career outcomes given the framework of sub-specialties and the variety of career outcomes.

As one of the professions charged with attending to issues of social justice, it is important for all to be aware of the potential negative effects of shifting gender trends at the training level. Additionally, with PhD level being the starting point for careers in psychology, academic institutions and admission committees must remain vigilant to the subtle shifts in gender representation that could have the potential to reinforce a social discourse regarding "women's work" as well as to shape the future of the profession in ways that inequitably confer status capitol. Without this attention and intentional equalizing of identities our profession risks recapitulating the gendered career paths of our past and obfuscating the value of different specialty areas. The momentum gained by women with respect to equality of status, recognition, and prestige risks being minimized if as it is gained men do not maintain equal representation.

Invitation to Iowa Colleges & Universities

All psychology programs in Iowa are invited to submit manuscripts on undergraduate and graduate activities, including educational, research, and service programs. Please feel free to contact the editor, Stewart Ehly (stewart-ehly@uiowa.edu), to receive additional information. All submissions are in electronic form (Microsoft Word if possible) and can be attached to an email sent to the editor.

The Price of Privatization

Tom Rigg

Editor's note: Rigg is a student in the Counseling Psychology program at the University of Iowa.

In 2015, Governor Terry Branstad ordered the privatization of Iowa's Medicaid program in order to save an estimated \$228 million in fiscal year 2018 (Leys, 2018). Medicaid is a government program that provides medical insurance for disabled or impoverished people, as well as residents of nursing homes. Nearly 40 other states have made similar movements to privatize Medicaid, however there are notable cases of this model failing. For example, Kansas' privatized Medicaid plan was recently ordered reversed for being 'substantively out of compliance with Federal statutes and regulations' (Lowry & Woodall, 2017). Kansas was unable to effectively oversee its program after moving to a privatized model, which is one of the main critiques of privatization, given that oversight is split between multiple companies instead of the state government. In a state like Iowa, which currently ranks as the second worst in the country for mental healthcare coverage, changing how Medicaid is managed to a model associated with documented risks could have the effect of reducing the quality of care that Iowa Medicaid provides (Surrency, 2016).

Indeed, the results of Iowa privatizing its Medicaid haven't lived up to the goals outlined for doing so given in 2015 by then-governor Terry Branstad. In a report prepared by the Department of Human Services, the state of Iowa saved \$119 million in fiscal year 2017 in what it would have paid for managing the Medicaid program through state offices, around half of the anticipated savings. Moreover, for the over 600,000 Iowans who currently benefit from Medicaid, the results have been delays in service and an increasing amount of red-tape to continue receiving existing services (Leys, 2018).

For providers of medical care, the results are similar. In a survey given to hundreds of medical providers around the state, 90% reported privatization has increased the administrative expenses, 79% reported that they are not being paid on time by the corporations now in charge of Iowa Medicaid, and 66% reported that when they are reimbursed, it is for lower than the price that was agreed upon (Bisignano, 2018). The impact of privatization on healthcare businesses is that it makes it more difficult for healthcare providers to deliver services to patients when those organizations have to worry about being paid on time, or even being paid for the agreed-upon amounts. In Iowa, which struggles with mental healthcare coverage in particular, any risk of healthcare businesses having to serve less patients or even close due to a lack of



stability in payments from private insurance companies leads, ultimately, to a worsening of healthcare service in Iowa.

The Des Moines Register reported a poignant story about Tatum Woods, 4, of Vinton Iowa which illustrates the real-life impacts that these changes to Medicare have had on hundreds of Iowans around the state (Clayworth, 2018). Tatum has a condition that makes walking on his own impossible, requiring the use of special walkers. After legislators moved Iowa Medicare to private providers, Tatum Woods was unable to obtain a new walker after outgrowing his old one, and his private provider refused to reimburse the cost of purchasing a new one. As a result, Tatum was forced to crawl for 6 months. The Register also reported how widespread the phenomenon of private insurance companies refusing to reimburse medical equipment is, with five medical equipment providers reporting billing problems with privately run Iowa Medicaid. With medical device companies unable to be assured of payment, they are forced to deny patients the devices they require in order to stay solvent as a business (Clayworth, 2018).

Beyond medical equipment, the Register's series on Medicaid privatization documents hundreds of cases around Iowa where Iowans enrolled in Medicare are caught in "endless appeals." Moreover, the number of Medicaid reimbursement appeals dropped from 28-45% compared to the five years prior to privatization, indicating the difficulty that Medicaid patients encounter when undergoing an internal appeal process at a managed care organization. The Register also reported about the experience of Kristie Woods, Tatum's mother, who spent "months and dozens of hours" to resolve the issue with their private provider, Amerigroup (Clayworth, 2018). Moreover, since Amerigroup had agreed to reimburse a fraction of the cost, instead of outright denying the claim, Kristie was unable to appeal the decision to a judge or independent party.

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This example also highlights how what a patient can expect from their healthcare provider becomes obscured when working with a private provider. Without state government oversight, patients may not have a clear path to dispute a private provider's decision, as in the case of Kristie Woods.

For mental health services, Iowans have experienced similar difficulties. Treatment Advocacy Center created a report on the trend of declining psychiatric care beds across the country. Iowa ranked as one of the worst states, with only two beds available per 100,000 residents, and 38 beds in total for the entire state, with a 2016 population of over 3.1 million people (Treatment Advocacy Center, 2016). In 2016, then-governor Terry Branstad ordered the closing of two mental health clinics in Iowa, prior to privatizing Iowa Medicaid. It was the closure of these facilities that brought Iowa down to current 2-per-100,000 levels. Compounding the problem is that psychiatric beds are often held for inmates with psychological concerns or risk of self-harm, with the same Treatment Advocacy Center report showing over 50 percent of Iowa psychiatric beds are occupied by incarcerated individuals, further lowering the availability for Iowans to receive psychiatric care.

Despite these limited resources, mental health is a widespread issue in Iowa. According to an article by the National Alliance on Mental Illness (NAMI), 1 in 5 adults in Iowa live with some form of mental illness, which is around 600,000 Iowans (NAMI Iowa, 2017). United Way reports similar figures, adding that only 1 in 3 of those adults with a diagnosable mental disorder actually receive psychological services in a given year. Additionally, of those who did not receive service for their mental illness, 43.7% reported they could not afford the cost of treatment, indicating how important Medicaid and other programs are in providing Iowans with the treatment that they need (United Way, 2018).

However, there is pushback to these changes. Notably, at a gubernatorial debate in 2017, all five candidates, three democrats and two republicans, supported returning to a state-run Medicaid (Boshart, 2017). This, perhaps, is most emblematic of the sentiment in Iowa around mental health. The statistics don't lie; Iowa is one of the worst states in the country for mental health care coverage and has been for some years. What a majority of Iowans can agree on (64% in a December 2017 poll) is that the change to privatization has been for the worse (Quinn, 2018). The fact that citizens of both political

parties can agree that privatization has worsened Iowa Medicaid is representative of the distress and deterioration of care that Iowans around the state have endured.

Looking towards the future, moving back to a state-run Medicaid program has the potential to undo some of the damages caused by privatization. Increased stability of payments from the state government to healthcare businesses ensures that providers can deliver service to as many people as possible while still being reimbursed appropriately. During the runup to the 2018 midterms, healthcare was one of the most contentious issues, and the Des Moines Register named it as one of the top five most important issues in the 2018 legislature (Petroski, 2018). While there has been no definitive movement since the most recent election to reverse the managed-care model of Iowa Medicaid, the polls and stats are clear: Iowans across the political spectrum agree that privately managed Medicare has not benefited Iowans.

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With the White House Embracing Healthcare Technology

Pat DeLeon, Ph.D.

Editor's Note: Reprinted With Permission from March Newsletter

At the end of last year, the White House released a report entitled *Reforming America's Healthcare System Through Choice and Competition*, authored by the Secretaries of the Departments of Health and Human Services, Treasury, and Labor. "As health care spending continues to rise, Americans are not receiving the commensurate benefit of living longer, healthier lives. Health care bills are too complex, choices are too restrained, and the insurance premiums and out-of-pocket costs are climbing faster than wages and tax revenue. Health care markets could work more efficiently and Americans could receive more effective, high-value care if we remove and revise certain federal and state regulations and policies that inhibit choice and competition.... Reduced competition among clinicians leads to higher prices for health care services, reduces choice, and negatively impacts overall health care quality and the efficient allocation of resources. Government policies have suppressed competition by reducing the available supply of providers and restricting the range of services that they can offer. This report recommends policies that will broaden providers' scope of practice [SOP] while improving workforce mobility, including telehealth, to encourage innovation and to allow providers more easily to meet patients' needs."

Several salient conclusions include that government rules restrict competition if they keep healthcare providers from practicing to the "top of their license" – i.e., to the full extent of their abilities; given their education, training, skills, and experience -- consistent with the relevant standards of care. This includes restrictions on the appropriate use of telehealth technologies and the range of services providers can provide. Oftentimes, SOP restrictions limit provider entry and ability to practice in ways that do not address demonstrable or substantial risks to consumer health and safety. Further, there is a risk that healthcare professionals with overlapping skill sets will seek these restrictions as they view SOP restrictions as an easy, state-sanctioned opportunity to insulate themselves from competition. For example, the report found that Advanced Practice Registered Nurses, Physician Assistants, Pharmacists, Optometrists, and Dental Hygienists can safely and effectively provide some of the same services as physicians, in addition to providing complementary services, citing the Institute of Medicine (IOM) and the Federal Trade Commission (FTC). Interestingly, this extends to physician supervision and collaborative practice regulations,



which can be unreasonably restrictive. One specific recommendation: "States should consider changes to their scope-of-practice statutes to allow all healthcare providers to practice to the top of their license, utilizing their full skill set."

The report further addressed the related issues of licensure mobility and telehealth; both of which are highly relevant to psychology's practitioners and their vision for the future. State-based licensing requirements, by definition, inhibit provider mobility and often inhibit delivery of services across state lines by making it more difficult for qualified practitioners, who are licensed in one state to work in another state, even though most complete nationally certified education and training programs and sit for national qualifying exams. Appropriate standards of care do not differ from state to state; yet, the process of obtaining a license in another state is often slow, burdensome, and costly. There is little economic justification for this and it can inhibit the efficient development and use of telehealth, as well as in-person services. The report further noted that Interstate Compacts and model laws can mitigate the effects of state-licensing requirements. The compact approach has only recently been proposed, with nursing enacting the first in 1999.

Telehealth is described as a significant innovation in healthcare services with mental health highlighted as an example of its usefulness. It increases the virtual supply of providers and extends their reach to new locations, promoting beneficial competition, reducing transportation expenses, and improving access to quality care and long-term quality outcomes. Nevertheless, a variety of regulatory barriers keep telehealth from reaching its full potential. Two specific recommendations: States should consider adopting licensure compacts or model laws that improve licensure mobility by allowing healthcare providers to more easily practice in multiple states, thereby creating

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additional opportunities for telehealth practice. And, States generally should consider allowing individual providers and payers to mutually determine whether and when it is safe and appropriate to provide telehealth services, including where there has not been a prior person-to-person visit.

For psychology, the key to the future is the vision of Steve DeMers, retired CEO, Mariann Burnett-Atwell, current CEO, and the Board of the Association of State and Provincial Psychology Boards (ASPPB). In 2015, ASPPB developed, with input from all major psychology stakeholders and some consumer organizations, and then approved PSYPACT (Psychology Interjurisdictional Compact) to provide for the legal and ethical practice of psychology across jurisdictions. PSYPACT will allow psychologists with an E.Passport certificate from a compact state to electronically provide psychological services into another compact state without having to get licensed in the remote state. It will also allow psychologists in a compact state with an IPC (interjurisdiction practice certificate) to physically go into another state to provide temporary in person, face-to-face psychological services without having to get licensed in that state. Individual psychologists in any compact state would apply for an E.Passport and/or IPC as a prerequisite to being able to practice under the authority of this compact. PSYPACT will vet all psychologists who apply for the E.Passport and/or IPC to make sure they have the requisite education, training, experience and do not have prior discipline, child abuse or criminal history.

PSYPACT will have the effect of increasing access to care for patients, increasing continuity of treatment if a patient moves out of state, decreasing licensure barriers for psychologists to practice, while ensuring the public is protected. Where there are conflicts of law between states (i.e., duty to warn laws), PSYPACT will help ensure both the psychologist and the patient will understand which laws govern the psychological interaction. To date, seven states (Arizona, Utah, Nevada, Colorado, Nebraska, Missouri, and Illinois) have adopted PSYPACT. So far in the 2019 legislative session, North Dakota (NDHB 1343), New Mexico (NMSB 141), New Hampshire (NHHB 484) and Georgia (GAHB 26) have all introduced PSYPACT legislation. We are anticipating that the District of

Columbia and Pennsylvania will introduce legislation soon. In Texas, PSYPACT is part of the Texas sunset legislation which will hopefully be introduced in the near future. Psychologists in the above states are encouraged to contact their legislators to support PSYPACT legislation. ASPPB has heard from several other states which have expressed an interest in pursuing PSYPACT legislation. For more information, please contact Alex Siegel at asiegel@asppb.org). The words of Steve Ragusea should be taken to heart by those who wish to ignore the changing healthcare environment: “Based on inflation, the amount I get paid through most third party payers today is one third less than I was getting in 1980.”

APA's Vision for the Future: “I recently attended the first meeting of APA's inaugural Advocacy Coordinating Committee as the sole student among fourteen members led by exceptional co-chairs former APA President Tony Puente and former APA Recording Secretary Jennifer Kelly. We received in-person support from another former President Jessica Daniel, President Rosie Bingham, and President-elect Sandy Shullman. Having the recent, current, and future APA Presidential trio in the room was inspiring. CEO Arthur Evans and Deputy CEO Jim Diaz-Granados spoke at the meeting, several key staff sat alongside us for the entire two days, and the Board of Directors joined us for dinner following the first day of the meeting. I was particularly pleased to learn the recommendations of Bob Frank who has served as a Robert Wood Johnson Fellow and President of the University of New Mexico.

“Joining this committee is my next step following what seems like years of involvement with APA Divisions, including serving as an APAGS Board representative and convention programming co-chair for Division 55. By sharing my experiences and perspective, I hope to help others see the value of student involvement in advocacy and for students to see a path to leadership roles. Visionary leader Ron Fox once said that as beneficiaries of the shared resources of higher education, we have an ethical obligation to engage in advocacy. The goal of this advocacy, as outlined in the mission statement in APA's newly drafted strategic plan, is ‘to benefit society and improve lives.’ The Committee is key to advancing APA towards fulfilling this mission (Joanna Sells, graduate student Uniformed Services University).”

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