### Submission to Law Amendments Committee Re: Bill 334 Nova Scotia's Health Services and Insurance Act

#### Submitted by: Erica Baker, PhD, Registered Psychologist on behalf of the Council of Psychology Practice Owners

#### October 23, 2023

My name is Dr. Erica Baker. I'm a Clinical Psychologist who has been practicing for 20 years.

I'm here as part of the Council of Psychology Practice Owners. This group of practice owners represents more than 150 psychologists in private practice in Nova Scotia, with the expertise and resources to assess and treat mental health problems.

As Psychologists, we have significant concerns about the potential impact of BILL 334.

Specifically, we believe that BILL 334 will impact the quality of mental health services provided to the public.

We urge the government to make use of our specialized knowledge in implementation of any expansion of access.

The government has suggested that BILL 334 will enable more individuals who are in need of mental health services to access diagnosis, assessment, and treatment by leveraging the capacity that exists in the private sector.

We represent a significant portion of those who provide such services, and we do not share that view.

I own and operate a private practice specializing in the assessment and diagnosis of conditions including Autism Spectrum Disorder, ADHD, intellectual disability, traumatic brain injury, PTSD, complex trauma, Anxiety Disorders, Mood Disorders and Learning Disorders. My practice has 25 psychologists and our waitlist is extensive. Most of my colleagues in other practices also have substantial waitlists. It is clear that both Public and Private sector waitlist times are too long.

This wait time significantly impacts the care Nova Scotians are receiving.

Under BILL 334, we believe that the private sector is not able to increase access to care and reduce pressure on the public system.

The complexity and number of clients with multiple mental health problems continues to increase in this province. Nova Scotians report one of the highest lifetime prevalence rates of mental health disorders in Canada: 41.7 percent compared to 33.1 percent in Canada as a whole. Nova Scotia needs more Psychologists who can provide DSM diagnostic, assessment and treatment services for the most vulnerable clients, with the most complicated mental health care needs.

Our group believes increased access to mental-health care requires increases in educational and residency programs in Psychology. Increasing capacity requires more Psychologists to be educated, trained, and then stay and work in this Province.

In the government's own words "the right service, from the right provider, at the right time" is essential. A psychologist who works in both public and private practice told me the story this weekend of a client who came to him after being treated unsuccessfully for years in community mental health by multiple clinicians, who provided her with counselling services for anxiety. The psychologist conducted a DSM diagnostic interview, never before conducted, and identified that the client had unipolar depression. Following this accurate diagnosis, treatment was tailored to her clinical profile and within 10 sessions, the client was successfully discharged. This type of approach saves time and money, and provides quality care.

So what I am saying is, if clients' psychological needs are not properly identified from the beginning, comprehensively diagnosed, and treated by the appropriate mental health professional, there will be an additional burden placed upon our healthcare system.

We believe BILL 334 will result in wasting resources and extending wait times if clients are not properly identified, diagnosed and assessed.

In order for BILL 334 to be more than a good news story and to work, psychologists in private and public settings must be consulted extensively as good intentions are shaped into successful programs.

But the speed with which BILL 334 was formulated and presented, and the sweeping and open-ended changes it empowers, lead us to be concerned that this legislation could further jeopardize the state of mental health care in this province.

The citizens of Nova Scotia will pay the price of poor care.

As psychologists, the focus must be on access to services while providing meaningful and high-quality services to Nova Scotians. Psychologists have an ethical requirement under our Code of Ethics of Responsible Caring. <u>We must develop</u> and use methods that minimize harms and maximize benefits, which particularly suits us to a significant role in the development of models for expanding care.

BILL 334 is important and ambitious in its scope, but we worry that the ship is sailing before it is fully built.

Ongoing consultation with front line mental health clinicians will allow use of this important legislation to create meaningful, positive change for Nova Scotians.

Psychologists will be doing much of this work and we urge the government of Nova Scotia to give us a meaningful voice and contribute our knowledge in designing the infrastructure needed to administer mental health and addictions services under BILL 334 that will serve the people of Nova Scotia.

In sum, we have significant concerns that the government's laudable intention to increase access to mental health services may not be met. We do not believe the private sector currently has the capacity to relieve the high demand that is experienced in the public sector: We need more psychologists, which means we need more educational and residency programs. And we want to be involved, to bring our unique training, expertise and experience to bear on future steps.

Specific concerns about Bill 334 are presented in the letter that was sent from this Council to Premier Tim Houston, Honourable Brian Comer, leaders of the Liberal and NDP parties and Dr. Samuel Hickcox and are attached with this submission. Additional concerns are also attached.

Thanks for the opportunity to speak to you today.

# Appendix A

### Submission to Law Amendments Committee, Re: Bill 334 Nova Scotia's Health Services and Insurance Act Copy of Letter submitted on October 18, 2023 with Questions Re: Bill 334 Submitted by Erica Baker, PhD, Registered Psychologist on behalf of the Council of Psychology Practice Owners

October 18, 2023

Honourable Tim Houston, Premier of Nova Scotia Honourable Brian Comer, Minister of Addictions and Mental Health Zach Churchill, Leader of the Liberal Party of Nova Scotia Claudia Chender, Leader of the Nova Scotia NDP Dr. Samuel Hickcox, Nova Scotia Health Authority physician lead for addictions medicine

[Halifax], [Nova Scotia] - A Council of Psychology Practice Owners representing practices with over 100 psychologists express their concerns regarding Bill 334. We wholeheartedly support efforts to enhance access to clinical services for Nova Scotians on an equitable basis. We recognize that substantial time and effort have gone into the proposed legislation, and we believe the government is attempting to act with the best interests of psychologists, other health professionals and the general public in mind. However, we have reservations about aspects of the bill and its potential implications for the provision of mental health services in our province.

We have attempted to understand this bill and have many questions:

- Which mental health professionals will fall under this new legislation (e.g., psychologists, social workers, occupational therapists, registered counselling therapists, psychotherapists)?
- Will all mental health issues, or only some mental health issues, be covered if this legislation is enacted?
- The development of a manual to identify covered services was mentioned in a news release by government. We request that this manual be provided to health professionals and the public in order to have a fulsome discussion before this legislation comes into effect.
- What form of coverage is anticipated to cover services? Will MSI billing codes be used for mental health services?
- What steps have been taken or will be taken to ensure that a NS Health plan will not impact private and group insurance coverage (e.g., Blue Cross, Canadalife) for mental-health services?
- Will mental health professionals be provided a choice of whether to offer services under the plan? Can health professionals opt in or out of this public/private initiative?
- Several pilot projects are being conducted to help determine whether a private/public model would work effectively in our province. Why is this legislation moving forward prior to evaluating the results from the pilot projects?
- Government is stating that they have an accurate understanding of capacity for mental health service provision in the province. We request that government share their data.

The Association of Psychologists of Nova Scotia has shared with government data collected from its members that indicated that there is little to no capacity within the private sector.

- Why has the role of Governor in Council been diminished in this bill? We are concerned that without the Governor in Council there may not be appropriate oversight of the Ministers, or avenues to present concerns as they arise.
- What procedures are planned to evaluate changes as they are rolled out? What is the timeline and process for assessing impacts? Will there be a formal legislative review of the Act's effectiveness in meeting its purposes?

Although we have several concerns, our primary concern with this bill revolves around the quality of care provided to clients. The quality of care provided to clients is dependent upon psychologists' independent professional competencies, and we are concerned that having the range and delivery of those services potentially prescribed by others compromises the integrity and safety of services. It has already been the experience of some psychologists that NSHA has attempted to specify what tests can be used in private practice assessments that were commissioned.

We are aware that many of our concerns are shared by psychologists in the public sector.

We understand, and applaud, the government's intention to reduce waiting lists and secure mental health care services for all, but we believe that the approach taken must prioritize the provision of meaningful, high-quality services over the long-term. If not carefully implemented, this legislation could result in an additional burden being placed upon our healthcare system resulting in both suboptimal care for individuals and families while not leading to meaningful change in wait times.

In conclusion, this Council of Psychology Practice Owners requests that the government meet with us to discuss this bill and our concerns before it is enacted into legislation. Until we have more information, we are unable to support this bill. It is important to focus on providing meaningful and high-quality services to Nova Scotians. We are advocating for the continued availability of accessible and exemplary psychological services within the private system moving forward.

Respectfully Submitted,

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Erica Baker, PhD Registered Psychologist on behalf of the Council of Psychology Practice Owners

c. APNS NSBEP

### Appendix B

# Submission to Law Amendments Committee, Re: Bill 334 Nova Scotia's Health Services and Insurance Act

# Additional Questions Re: Bill 334, submitted by Erica Baker, PhD, Registered Psychologist on behalf of the Council Of Psychology Practice Owners

- Will all addictions and mental health services be considered insured services?
- What are the insured professional services outside the scope of the MSI plan that are referred to in Clause 11 b?
- Who has assisted with the development of the service code manual the government has mentioned which will identify the specific disciplines, outcomes, and specific services ?
- Given that psychologists in private practice will likely be providing specific services as
  part of this Act, were there any psychologists in private practice, who were consulted in
  the development of the service code manual? If not, we would welcome the
  opportunity for a member of the Council of Psychology Practice Owners to review and
  offer suggestions regarding the manual prior to its completion.
- Will psychologists be provided an opportunity to opt in/opt out of the MSI covered programs or will all psychologists automatically fall under Nova Scotia's insurance program?
- Will private insurers (e.g., Blue Cross, Canadlife) use this Act as an excuse to cover less services and pay lower amounts?
- We understand there are several pilot projects in addition to the 1) Dal Clinical Psychology Clinic and 2) ADHD and ASD assessment pilot projects that are underway. Could the nature of these projects be shared with both psychologists and the public?
- In Clause 5 (b) and (d) will the Minister agree that when determining the extent to which residents are entitled to an insured service, and the extent to which insured services are insured under this Act that psychologists will not have to compromise their ethical code of responsible caring?
- In Clause 5 (c) will the Minister agree that the circumstances and conditions under which residents are entitled to an insured service will not result in psychologists having to compromise their ethical code of responsible caring?
- Will the Minister agree that the amounts payable to Psychologists, in respect of the provision of insured services in private practice, will be consistent with the rate set by the Association of Psychologists in Nova Scotia?
- Why does Clause 8 state that any power of the Minister under this Section may be exercised retroactively to a date not earlier than September 1, 1973?
- Can you provide more clarification with respect to Clause 15 (2): "A provider referred to in subsection (1) who has charged for the provider's service shall, where requested by the resident or other person acting on the resident's behalf, immediately complete the claim form prescribed for that purpose or provide the resident with sufficient information to enable the resident to complete the form in a manner satisfactory to the Department."
- Can you provide more clarification with respect to Clause 18(a): "an employer of a provider who with the consent of the employee, has assigned to the employer the provider's right to collect the provider's fees under the MSI Plan or otherwise in respect of insured professional services".