



April 4, 2025

The Honorable Doug Collins
Secretary
U.S. Department of Veterans Affairs
810 Vermont Ave NW
Washington, DC 20420

Dear Secretary Collins,

On behalf of the American Association of Psychiatric Pharmacists (AAPP), we would like to congratulate you on your confirmation as Secretary of the U.S. Department of Veterans Affairs (VA). We look forward to a continued and successful partnership between the VA and the psychiatric pharmacists who provide essential care to veterans and their families. Our organization stands ready to support you and your team to improve care, reduce wait times, advance research and train tomorrow's workforce to ensure that veterans' mental health care needs are met today and well into the future.

AAPP is a professional association of nearly 3,000 specialty pharmacists, and most are Board Certified Psychiatric Pharmacists (BCPPs) who specialize in psychiatry, substance use disorders (SUDs), and psychopharmacology. With a significant shortage of mental health care professionals, psychiatric pharmacists offer another resource to improve outcomes for veterans with psychiatric conditions and/or SUDs.

Psychiatric pharmacists graduate with a Doctor of Pharmacy degree, requiring six to eight years of higher education to complete, and have more training specific to medication use than any other health care professional. Psychiatric pharmacists, a specialty within clinical pharmacy, are primarily board certified and residency-trained mental health care practitioners who have specialized training in providing direct patient care and medication management for the complete range of psychiatric disorders and SUDs.

The VA employs a network of nearly 600 clinical pharmacist practitioners in mental health (MH CPP). The MH CPP is a core team member providing comprehensive medication management expertise to veterans and MH teams. Mental Health CPPs are integrated into all levels of the Stepped Care Model of MH services across the continuum of care which includes general and specialty MH clinics, behavioral health clinics embedded in primary care, known as PCMH, residential rehabilitation treatment programs (RRTP), specialty MH programs, and on inpatient MH units. This care is provided primarily at the facility level, however, there has been expansion of gap coverage through the Clinical Resource Hubs. As part of the larger VA mental health workforce, these pharmacists work in tandem with psychiatrists, psychologists, social workers, and other healthcare professionals and peers to intervene and treat veterans in crisis and care thereafter. With the shortage of psychiatrists, psychologists, and other MH providers, the MH CPP provides critical services delivering nearly 485,000 mental health patient care visits in 2023 alone and another nearly 200,000 SUD patient care visits for the 12 months prior to February 2024.


Our members have been increasingly concerned with news of the dismissal of VA employees which will endanger veterans' access to benefits and care. Care of veterans with mental health and/or SUDs requires the integration of numerous professionals and services. The team of clinicians, VA administrative and support staff, crisis line staffers, and other mental health professionals are all required to work together at full capacity to support veterans to avoid scenarios such as emergency room admission or worse, premature death. Effective and evidence-based interventions are available, but the mental health team must be maintained to deliver these services.

Mental health CPP services are primarily delivered through virtual care with many VA employed MH CPPs working remotely through clinical resource hubs. These fully remote pharmacists are now required to report to a federal facility to continue their employment with the VA. For many of these employees, there is no VA facility within range of their current residences, and they are told to report to any federal facility, such as prisons or post offices, to conduct their virtual appointments with veterans. Some employees are stationed in cubicles where notable distractions and disruptions may occur during sensitive patient visits. Assurance of patient privacy is critical to veterans, but we are also concerned that the return to office mandate may have other unintended consequences, including increased wait times, reduced access to specialized mental health and substance use treatments, and increasingly negative impacts on veterans' health outcomes. Accordingly, our organization respectfully requests that you consider exceptions to some of the return-to-work mandates to avoid serious impact on veterans' mental health.

AAPP commends the VA on its recognition of MH CPPs as key members of the mental health and substance use disorder treatment team. VA MH CPPs practice at the height of their license and improve access, clinical outcomes, and cost effectiveness. Graduating over 80 psychiatric pharmacist residents annually, the VA is also critical in training and developing the next generation of psychiatric pharmacists contributing to a robust mental health workforce for all Americans. The power of the VA's integrated medical system and the benefits provided to the entire health care system cannot be understated.

Our organization highly values our collaboration with the VA and hopes that your team will carefully review the issues presented within this letter that will further erode the mental health workforce caring for American's veterans. Please contact Brenda Schimenti, Executive Director at bschimenti@aapp.org with any questions or for further discussion.

Sincerely,



Brenda Schimenti, Executive Director
American Association of Psychiatric Pharmacists

References:

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