



# The Oregon Psychologist

BULLETIN OF THE OREGON PSYCHOLOGICAL ASSOCIATION

August 2024 | Q3

## Legislative Update

*Robin Henderson, PsyD, OPA Legislative Chair, Past President, OPA*

In the Legislative Calendar, we are fast approaching one of the busiest seasons of the year—the run up to the Long Session in 2025. Thank you to those of you who took the time to respond to our latest survey of Legislative priorities. We wanted to give you an update on where things are at in the major response areas:

### **Board of Psychology issues**

1. Reduce Psychologist licensing fees: This was a popular item in the survey. While fees have been going down, Oregon is still one of the most expensive places to hold a license. The Regulatory workgroup has identified a few key proposals to lower fees:
  - o a. Consider consolidating all investigation services for all healthcare providers in one agency. This is a tactic that other states have used, and would remove the investigators from the Oregon Board of Psychology (OBOP) oversight (and from the Mental Health Regulatory Agency) and place them in a separate agency either within the Oregon Health Authority (OHA) or the Department of Administrative Services (DAS) or some other agency. This may speed the investigation process and would definitely remove some of the real or perceived conflicts that have arisen.
  - o b. Standardize how investigations are managed. There is a wide variety of practices for investigating what should be standard issues. A great example are investigations related to Continuing Education Units (CEUs) being late or incomplete. This should be a fine with no investigation—very simple and very standard. We believe this could be managed through consolidating the investigation process as described above.

2. Legal Safeguards and Protections for Psychologists: The Task Force identified the following areas that we need to discuss with the new OBOP Executive Director to determine how we want to move forward. These include:

- o a. Review of OARs: Examine existing Oregon Administrative Rules (OARs) and other legal statutes that govern the procedures and conduct of OBOP investigations and disciplinary actions to identify protections for psychologists.
- o b. Legal Protections: Ensure psychologists have clear rights and procedural safeguards during investigations, such as the right to legal representation, to be informed of the charges, to have a fair hearing, to be notified of clear timelines for investigations, to access evidence, and to have transparent decision-making processes.

- c. Objective Guidelines: Encourage OBOP to develop a more objective and standardized operating manual for Board investigations, detailing specific criteria for sanctions to minimize subjective judgment and ensure consistency.
- d. Appeals Process: Ensure an accessible appeals process for psychologists who feel they have been unfairly treated or that the disciplinary actions are unjust.

3. Bias and OBOP Organizational Culture: The Task Force also identified concerns with bias and organizational culture. They offered the following recommendations which will be discussed with the new OBOP Executive Director:

- a. Orientation for New Members: Develop and implement a comprehensive orientation program for new Board members that includes training on the impact of bias and strategies for mitigating it.
- b. Bias Training and Awareness: Mandatory training on recognizing and mitigating bias in decision-making for Board members and those involved in investigations and disciplinary processes.
- c. Diversity, Equity, and Inclusion (DEI)/Organizational Culture Consultancy: External investment in organizational culture (e.g., third party or consulting firm) for the Board to engage in work to address issues of bias/DEI, including in regard to how bias may impact investigations as well as how they interact together as a board.

### **PSYPACT/EPPP2**

It is very apparent that PSYPACT (the interjurisdictional compact for psychologists) and the Examination for the Professional Practice of Psychology- Part 2 (EPPP-2) issues are interrelated and connected. There are historical judicial opinions in Oregon about PSYPACT that need to be revisited in light of current practice in a post pandemic world. The OPA Board is very interested in understanding this issue more deeply and in exploring how we can move forward so that Oregon psychologists can experience the benefits of reciprocity in this fast-changing environment without the inherent dangers that also exist if this process isn't managed with thought and care. This also has impact on other issues of concern including residency/licensure requirements. There has been a lot of feedback on shifting the point of licensure for psychologists so they are licensed at the point of graduation and completion of the EPPP. We are investigating a provisional licensure status that would allow individuals to be licensed at the point of completion of EPPP but still required to complete a year of supervision under the OBOP to receive their full and unencumbered license. This would allow them to bill commercial insurance and be fully credentialed, opening up the opportunity for increased income at the key point of practice when student loan payments and other obligations come due.

### **Parity and Reimbursement**

Psychologists are not alone in their concerns that Oregon's Mental Health Parity legislation is not being enforced. We are recommending that OPA join forces with others and form a coalition under the direction of the National Alliance on Mental Illness (NAMI) Oregon to enforce Oregon statutes for Medicaid and commercial insurers, and to improve practices so that providers can provide meaningful information to agencies overseeing the implementation.

The OPA Legislative Committee has many other initiatives that we are watching as we approach the 2025 Legislative Session. We have an hour on the next OPA Board agenda to discuss these issues and gain more clarity on how OPA wants to advocate for our profession. We're always looking for additional members to join our efforts. If you are interested in any of these issues, or in advocacy in general, please reach out to the OPA Legislative Committee and to me at [Robin.Henderson@Providence.org](mailto:Robin.Henderson@Providence.org).



# Fall Professional Development for Counselors & Therapists

Center for Community Engagement at Lewis & Clark Graduate School

## **Conversations about Race and Ethnicity in Clinical Supervision**

Friday, September 27, 9 a.m.-12:30 p.m., Online • 3 CEUs  
Lana Kim, PhD, LMFT

## **Sensory Integrative Processing, Behavior, and Regulation: Implications for Autism and ADHD**

Friday, October 4, 9 a.m.-1:30 p.m., Online • 4 CEUs  
Ashley Taylor, PsyD; and Jamie Chaves, OTD, OTR/L, SWC

## **Rupture and Repair in Relationships: Using IFS to Reconnect after Conflict**

Tuesday, October 15, 9 a.m.-12 p.m., Online • 3 CEUs  
Jory Agate, LMHC, MDiv, MA, IFS Certified

## **Confidently Responding When a Client is at Risk for Suicide**

Thursday, October 17, 1-5 p.m., Online • 4 CEUs  
Crystal Larson, LCSW; and Amy White, LCSW

## **Exploring Gender Diversity Using Art Therapy**

Wednesday, November 13, 2-4:30 p.m., Online • 2.5 CEUs  
BA Short, LCAT, ATR-BC, ATCS

View additional training opportunities at [go.lclark.edu/cce/catalog](https://go.lclark.edu/cce/catalog)

## **Confidential Peer Support Committee**

What Is The Difference Between A Consultation With The Ethics  
Committee And Consultation With The Confidential Peer Support  
Committee?

The [OPA Ethics Committee](#) offers consultation regarding concerns about professional ethics. They offer a collaborative discussion in which members can think through the ethical issues of a situation, supporting the clarification of the relevant [APA ethics principles and codes](#). They may help identify legal issues and refer to Paul Cooney, OPA's general counsel. Consultations may also illuminate other clinical concerns that result in encouragement to consult with the [Confidential Peer Support Committee](#).

The mission of the Confidential Peer Support Committee is to provide members with consultation on a range of issues, including conflicts with colleagues, clinical concerns, potential complaints or lawsuits, venting, concern about impairment, client suicide, colleague behavior, family conflicts, problems in the business of psychology, and any distress affecting the capacity or enjoyment for work. We are here to provide support and help avert impairment. Although these experiences may also be informed by guidelines and principles of the APA ethics code, our focus is not specific or limited to the code of conduct.

READ MORE

## Retirement Recognition

In our profession there are no fireworks when one is retiring. Historically, the retirement of an Oregon Psychologist has been unrecognized. Close colleagues are aware, perhaps a personal mention appears on the OPA Listserv, although basically it's a disappearing act. The CPSC discussed the lack of a venue for highlighting the retirement of an OPA colleague and looked at options.

The CPSC is developing a forum in cooperation with The Oregon Psychologist to recognize and highlight the retirement of an OPA colleague. We want to honor your contribution to the field of psychology supporting this milestone in your life. Most of us go through our days quietly and diligently doing our work, not seeking recognition. The CPSC wants to facilitate the opportunity to let your work shine.

If you retired in 2020-2023 or if you have or will retire in 2024, please consider a self-submission for online publication in The Oregon Psychologist. The parameters for self-submissions are simple:

- Your name, location, date of retirement.
- Suggested areas of focus: identify the work you've been engaged in as a psychologist, your contributions, and accomplishments; your plans for retired life; and anything else you'd like to share.
- Please send to [opa.cpssc@gmail.com](mailto:opa.cpssc@gmail.com), subject line Retirement Recognition.
- The next newsletter will be published at the beginning of November 2025, so please get submissions in by the third week of October 2025

Please forward this information if you know of an OPA member who has retired and may not receive news of the program.

The CPSC extends its gratitude to OPA leadership for wholeheartedly endorsing this program, and to Cathy Miller, PhD, ABPP The Oregon Psychologist Editor. Hopefully, the OPA CPSC Retirement Recognition program will become a tradition where all future OPA retirees can shine.

*Rebecca Martin-Gerhards, EdD, PC*

## Public Education Committee (PEC)

*Paige Vazquez (Reohr)*

The PEC has been busy organizing a presence for OPA at various summer events. We enjoyed having a space at the Portland Pride Waterfront Festival in July to distribute educational information and engage with community members, and we were thrilled to be joined by other OPA members. More recently, the PEC attended Sundae in the Park, a local community event in Sellwood Park in SE Portland. We provided resources on family and youth mental health and received lots of positive feedback. We will have plenty of other opportunities coming this fall for OPA members who would like to join in on various forms of public education, including local Pride and other types of events, and leading free mental health workshops.



More exciting news from the PEC: we are opening a call for PEC Chair nominations! This is a great opportunity for someone interested in expanding their involvement with OPA and who values public education in our field. The PEC meets virtually every month to discuss upcoming ideas and report past-month efforts. Our core committee is very collaborative and the new Chair will be well-supported and mentored into the role. If you are interested or have a colleague you would like to nominate, please email

us at [opapecc@opa.org](mailto:opapecc@opa.org). There is no requirement that nominees must have served on the committee previously. The time commitment is generally a few hours per month to complete reporting, attend board meetings as you can, lead the monthly committee meetings, and be engaged in community education activities. You are also welcome to email Paige Vazquez, the current Chair, at [drpaigevazquez@gmail.com](mailto:drpaigevazquez@gmail.com) with any questions. **Nominations are due August 30, 2024**



## Professional Affairs Corner

Susan Rosenzweig, PsyD  
Director of Professional Affairs (DPA)

Usually, my August notes to the OPA membership is full of the energy I gain from attending APA Convention. This year, when APA was held in our backyard (Seattle), I was unable to attend APA because I'm preparing to send my only child off to college. I did, however, get to spend 2 ½ hours on Zoom with my fellow DPAs and APA staff who were attending Convention (news without the energy)!

What we are talking about in DPA-land, both in Oregon & in the country:

### • Parity evaluation

In the spring, a large report came out from RTI (Research Triangle Institute) examining how mental health parity implementation is going on the ground. In a national and state by state analysis, the authors looked at how often patients seek out of network (OON) care in behavioral health versus in medical-surgical health, as a marker of whether we are accomplishing parity. The authors noted that patients went OON 3.5 times more often for all behavioral health visits than for medical-surgical appointments, and that patients went OON *10.6 times more often for psychologist visits than for all medical-surgical visits*. Furthermore, the most prominent reason for this disparity is that **underpayment of behavioral health providers creates disincentives for behavioral health providers to participate in-network**. The problem is not too few providers in behavioral health; the problem is that by keeping behavioral health reimbursement much lower than medical-surgical reimbursement, patients lose access to high quality in-network behavioral health professionals. The report looked at provider reimbursement, using percentage of Medicare rates as the comparison, and found the following:

- Average reimbursement for *medical/surgical specialist physician office visits* was 24.9% higher than for *psychiatrist office visits* (135.3% of Medicare as compared to 108.4% of Medicare, respectively), and 28.8% higher than for *psychologist office visits* (135.3% as compared to 105.1% of Medicare, respectively).
- Average reimbursement for physician assistant office visits was 22.4% higher than for psychologists (105.1% of Medicare for psychologists as compared to 128.7% for physician assistants) and average reimbursement for nurse practitioners was 11.5% higher than for psychologists (117.2% as compared to 105.1%).
- The report also details these kinds of comparisons on a state by state basis.

**ACTION:** We need to get this report in front of legislators and administrators in the Insurance Division, as well as in front of Federal legislators and administrators. I will be working with the OPA Legislative Committee on strategies & plans, and if this kind of report fires you up as much as it fires me up, please reach out to me and let's get you involved. My email is:

[drsusan@centerforpsychologyandhealth.com](mailto:drsusan@centerforpsychologyandhealth.com) You can read the full [RTI report here](#).

- Another national report just dropped from the National Academies of Sciences, Engineering, and Medicine (NASEM) titled *Expanding Behavioral Health Care Workforce Participating in Medicare, Medicaid, and Marketplace Plans*. Several psychologists worked on that report, including Washington State Psychological Association DPA, Dr. London Breedlove, and former APA President, Dr. Jennifer Kelly. The report was commissioned by the Centers for Medicaid & Medicare Services (CMS) and the Substance Abuse and Mental Health Services Administration (SAMSHA). Their recommendations include the following:

- reduce barriers to behavioral health provider participation through restructuring funding of graduate education & training mechanisms,
- allow behavioral health trainees to bill Medicare & Medicaid in a manner similar to how medical trainee services are billed,
- streamline credentialing & enrollment processes statewide,
- simplify telehealth regulations and encourage cross-state telehealth practice,
- reduce barriers to multi-state licensing in behavioral health,
- reduce administrative burden, especially reducing low-value prior authorization requirements, and set Medicare and Medicaid fee-for-service reimbursement rates to ensure adequate access and correct previous undervaluing of behavioral health services by Medicare and Medicaid, ensure that insurers comply with prompt payment statutes, and address MedAdvantage plans' inappropriate payment denials.

You can read the full [NASEM report here](#).

- **Change Healthcare breach fallout:** I am continuing to track the fallout from the Change Healthcare breach and the payment problems that resulted.

- **Medicare facility/non-facility payment errors:** I am continuing to track this. Although Medicare entities (in Oregon, that's Noridian) have corrected the payment errors, Medicare secondary payors are just now starting to issue corrected payments as well.

- I continue to serve on the **OPA Legislative Committee**, discussing statewide issues through a practice lens, evaluating legislative concepts & asks through that lens, and working with the Legislative Committee and the OPA Board to set our agenda for the next few years.

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## Council Rep Corner

### Updates from Your APA Council Representative

*Eleanor Gil-Kashiwabara, PsyD*

Hello OPA Members!

As your APA Council Representative, I recently returned from the APA Council Meeting, which was held in Seattle, Washington August 5th through 7th right before the APA Convention. I will be providing a summary soon about what was discussed and voted on during the APA Council Meeting in the next newsletter and on the OPA listserv as soon as APA's summary is released (which I then combine with my own notes to provide the update to OPA Membership). Please stay tuned for those updates soon! For this newsletter issue, I want to provide some other related updates.

Due to term limits, the State Representatives for APA Council are able to serve as state reps for two consecutive 3-year terms (if elected). Well, it is hard to believe but this last Council meeting was the last meeting of my second term -- the end of my 6-year run as Oregon's Council Representative to APA! It has been an absolute honor to serve in this capacity and I thank you for electing me to be your Council Representative. In my time as Council Representative, I have had the opportunity to engage in numerous aspects of Council work including serving in a leadership role on the Ethnic Minority Issues in Psychology Caucus and as a co-Chair on the former Council Diversity Workgroup, which is now the Racial and Ethnic Diversity Task Force. Both groups were focused on assuring that equity perspectives were included in the discussions and work of Council. As well, I have been part of the Continuing Education (CE) Committee for Council, working with two other Council Representatives to create a mechanism for CE to be obtained for the extensive time Council members spend preparing for and attending the meeting, which involves rigorous work addressing the key issues in our field. One of the best parts of the experience has been having the opportunity to engage with the most current happenings in our field and bringing that information back to all of you, the members of OPA.

As I cycle out of my role as your Council Representative, I have been elected to serve as Member-At-Large for the Council Leadership Team (CLT). The CLT is a group of 11 people, all current or former Council members who are responsible for numerous leadership tasks related to Council. A few (but not all) of these tasks include assisting the APA president in determining the priorities for Council and the order of business for meetings of Council. As well, CLT provides recommendations to Council on all motions brought before Council for its consideration. CLT also regularly reviews the structure and function of Council and handles complaints about Council functions and operations. So, I will still be involved in Council but in a different role.

The most important update I have is about your incoming, newly elected APA Council Representative for Oregon: Dr. Martha Villegas-Gutiérrez. I am thrilled that Dr. Villegas-Gutierrez is stepping into this role and I know she is going to do a fabulous job bringing Oregon's voice to the APA table. Dr. Villegas-Gutiérrez is both a school and clinical psychologist and has provided therapy and psychological evaluation services to a wide age range of clients. Her main area of expertise is in bilingual/multicultural assessment and she has extensive experience completing developmental disability evaluations including Autism Spectrum Disorder (ASD) and Intellectual Disability (ID) evaluations for children, adolescents, college students, and adults. She has impacted the arena of multicultural assessment (in Oregon and beyond) in a number of important ways, including her instrumental role in updating and revising the 2007 and 2015 Oregon Department of Education Special Education Assessment Process for Culturally and Linguistically Diverse Students. She opened her private practice in 2018, where she provides culturally and linguistically appropriate assessments to mostly Spanish-speaking children and families. She currently also works part-time with the Canby School District, where she consults and collaborates with school psychologists in the provision of Special Education evaluation services to Spanish-speaking students who are in the process of learning English. Dr. Villegas-Gutiérrez also has the Culturally and Linguistically Specific Behavioral Health Services (CLSS) provider designation in Oregon, which further reflects her expertise in the field of multicultural assessment. Most recently she co-founded a consulting practice with the specific scope of work for training and consultation related to bilingual assessment.

It's clear that Dr. Villegas-Gutiérrez has her pulse on what is happening in our field in Oregon, and this is one of many reasons she is a great fit for the role of Council Representative. In addition to her professional accomplishments and expertise areas, I can say that I know first-hand about her professionalism and her heart because I have had the good fortune of working with her for many years and am her consulting practice partner. She brings so much care to the communities with whom she works here in Oregon and beyond.

Again, it has been an honor serving as your Council Representative. My term ends on December 31st and



I will transition to CLT on January 1, 2025. Dr. Villegas-Gutiérrez will officially be your Council

Representative beginning January 1, 2025. She will represent the Council.

**FURNISHED OFFICE FOR LEASE**  
Newly remodeled suite with large bright windows, separate Waiting Room and Kitchen. The office has new laminated flooring and all new furniture and decorations. Includes all utilities, copy machine, central heat and air, daily janitorial and high-speed Internet. Located one minute from 205 Fwy Exit 6, at 1750 Blankenship Rd, West Linn. The office is on the ground floor of a Class A four story office building with lots of on-site parking. For details call Mary Resnick, PhD (971) 419-6799.



## Ethics Committee

### Ethical and Effective Clinical Supervision: Unique Considerations for a Vital Role in Psychological Training

*Darcy Gist Zornes, MEd, MA; Heather Sheaffer, PhD; and the OPA Ethics Committee*

Supervision serves as a cornerstone of psychology training, and providing ethical and effective mental health care to patients is directly linked to ethical and effective supervisory practices. Clinical supervisors play a vital role in shaping the ethical and professional behavior of their supervisees as well as ensuring the protection of those their supervisees serve. The nature of the supervisory position is unique, as the supervisor is not only a teacher and mentor with responsibility to their trainee, but also a provider who is ultimately responsible for the wellbeing of the patient.

In 2015, the American Psychological Association (APA) published their Guidelines for Clinical Supervision in Health Service Psychology (inclusive of the specialties of clinical, counseling, and school psychology), which describes seven suggested domains of competence (Board of Educational Affairs Task Force on Supervision Guidelines, 2015). These domains are situated within a competency-based metatheoretical framework that “explicitly identifies the knowledge, skills and attitudes that comprise clinical competencies, informs learning strategies and evaluation procedures, and meets criterion-referenced competence standards consistent with evidence-based practices (regulations), and the local/cultural clinical setting” (p. 2).

[READ MORE](#)

The Ethics Committee is seeking new members to join our dynamic and dedicated group! Committee meets on the first Thursday of the month 4-6pm. Currently all meetings are virtual.

Benefits and responsibilities:

- Increase your ethical and clinical thinking skills
- Grapple with the challenging ethical, legal, and clinical issues of our profession within a supportive environment

- Participate in educating others about ethics throughout the state
- Publish in OPA's Bulletin
- Develop great camaraderie with colleagues across diverse professional settings
- Improve your own practice
- Must be an OPA member
- Strong preference for psychologists practicing outside the Portland-metro area
- Membership term is 3-5 years
- Ten meetings per year, plus presenting at OPA Conference.

Contact [opaethicscommittee@gmail.com](mailto:opaethicscommittee@gmail.com) with questions or to apply.

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## What to Expect When Consulting with the Ethics Committee

Hello OPA community! The OPA Ethics Committee (EC) would like to take this opportunity to explain our process for providing ethics consultations.

The primary function of the EC is to advise, educate, and consult regarding concerns about professional ethics. The services of the EC are offered as an OPA membership benefit and consultation is available to all OPA members. The EC receives approximately four to six consultation calls per month, which is a surprisingly low number given that more than 3000 psychologists are licensed in Oregon! In addition, we also accept calls from other mental health professionals.

All ethics consults are confidential and take multiple steps to address this. First, we document consultation calls with ID numbers rather than identifying information. Second, when discussing the calls in EC meetings, we do not share or include any identifying information. Third, upon learning of any potential conflict of interest, impacted EC members will recuse themselves from all activity related to the call. Fourth, we do not share any information outside of the EC. This includes not reporting any information to the Oregon Board of Psychologists. There has been some confusion in the past, based on [Oregon Revised Statutes \(ORS\) 676.150](#), which mandates that psychologists report prohibited or unprofessional conduct of their peers. As a Peer Review Body under [ORS 41.675](#), EC volunteers are exempt from reporting unprofessional conduct to the board.

[READ MORE](#)



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Oregon Political Action Committee

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**Confidential Peer Support Committee**

The Confidential Peer Support Committee (CPSC) works to provide support and avert impairment to members. We provide members with consultation on a range of issues including conflicts with colleagues, clinical concerns, potential complaints or lawsuits, venting, concern about impairment, client suicide, colleague behavior, family conflicts, problems in the business of psychology and any distress affecting the capacity or enjoyment for work. Members may reach the Confidential Peer Support Committee (CPSC) by contacting one of the members listed below, or via e-mail at [opa.cpsc@gmail.com](mailto:opa.cpsc@gmail.com). All responses will be encrypted and are kept strictly confidential.

CPSC offers the following programs to OPA members:

- Confidential consultations with members of the CPSC. Our names and contact information are listed below. You may call anyone on the committee.
- A panel of providers for therapy referrals, who are well versed in privacy and confidentiality concerns.

Questions and referral requests to the Confidential Peer Support Committee are confidential under ORS 41.675 and are not shared with OPA or OBOP. No demographic information is kept on callers.

**Confidential Peer Support Committee Members:**

Maura Sullivan, PsyD - Chair  
503.432.8470

Rebecca Martin-Gerhards, EdD  
503.243.2900

Charity Benham, PsyD  
503.550.7139

Ann Sola, PsyD  
503.329.8198

Jennifer Huwe, PsyD, LLC  
503.538.6045

## Join OPA's Listserv Community

Through APA's resources, OPA provides members with an opportunity to interact with their colleagues discussing psychological issues via the OPA listserv. The listserv is an email-based program that allows members to send out messages to all other members on the listserv with one email message. Members then correspond on the listserv about that subject and others. It is a great way to stay connected to the psychological community and to access resources and expertise. Joining is easy if you follow the steps below. Once you have submitted your request, you will receive an email that tells you how to use the listserv and the rules and policies that govern it.

How to subscribe:

1. Send an email to [listserv@lists.apapractice.org](mailto:listserv@lists.apapractice.org); leave the subject line blank.
2. In the message section type in the following: subscribe OPAGENL
3. Hit the send button, and that is it!

You will receive a confirmation via email with instructions, rules, and etiquette for using the listserv. Please allow some time to receive your confirmation after subscribing as the listserv administrator will need to verify your OPA membership before you can be added.

## OPA Mentorship Program

We are happy to announce that the OPA Mentorship program is up and running. We have two forms for the [Mentorship program](#) on the OPA website. The [first form](#) is for interested parties to give some details of their practice setting, training, interest and location. The [second form](#) is for Informed Consent, limits of confidentiality, etc. Please join your colleagues and offer to serve as a Mentor and to learn or ask questions as a Mentee. Monthly phone or in person meetings are set up by the Mentor and Mentee once a match is made. Enjoy a bit of colleague support, new information and conversation regardless of age, orientation or years of experience.

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## OPA Helpful Contacts

### OPA Lobbyist

Lara Smith - Lobbyist  
Smith Government Relations  
PO Box 86425  
Portland, Oregon 97286  
503.477.7230  
lsmith@smithgovernmentrelations.com

### OPA's Legal Counsel\*

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\*Through OPA's relationship with Cooney, Cooney and Madigan, LLC as general counsel for OPA, members are entitled to one free 30-minute consultation per year, per member. If further consultation or work is needed and you wish to proceed with their services, you will receive their services at discounted rates. When calling, please identify yourself as an OPA member.

The Oregon Psychologist  
*Catherine Miller, PhD, ABPP*  
*Professor, Editor*

The Oregon Psychologist is a newsletter published six times a year by the Oregon Psychological Association. Although OPA and The Oregon Psychologist strive to include all advertisements in the most current issue, we can offer no guarantees as to the timeliness or accuracy of ads, and OPA reserves the right not to publish advertisements or articles.

Articles do not represent an official statement by the OPA, the OPA Board of Directors, the OPA Ethics Committee or any other OPA governance group or staff. Statements made in this publication neither add to nor reduce requirements of the American Psychological Association Ethics Code, nor can they be definitively relied upon as interpretations of the meaning of the Ethics Code standards or their application to particular situations. The OPA Ethics Committee, Oregon Board of Psychologist Examiners, or other relevant bodies must interpret and apply the Ethics Code as they believe proper, given all the circumstances.

## Oregon Psychology Association

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