



DAVID Y. IGE
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**STATE OF HAWAII
OFFICE OF THE DIRECTOR
DEPARTMENT OF COMMERCE AND CONSUMER AFFAIRS**

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Testimony of the Department of Commerce and Consumer Affairs

**Before the
Senate Committee on Health
Friday, February 4, 2022
1:00 p.m.
Via Videoconference**

**On the following measure:
S.B. 2829, RELATING TO MENTAL HEALTH**

Chair Keohokalole and Members of the Committee:

My name is Rochelle Araki, and I am the Executive Officer of the Department of Commerce and Consumer Affairs' (Department) Professional and Vocational Licensing Division (Division) Marriage and Family Therapy Program and Social Worker Licensing Program. The Department appreciates the intent of and offers comments on this bill.

The purposes of this bill are to: (1) establish provisional or associate level licensure requirements for marriage and family therapists and psychologists and authorizes insurance reimbursements in certain circumstances; and (2) allow psychologist license applicants to sit for the licensing examination before completing other requirements.

The Department limits its comments to Part I and Part III of this bill as follows:

S.B. 2829 requires the Department to grant, upon application and payment of proper fees, provisional licensure as an associate marriage and family therapist who meet certain requirements to obtain reimbursement for services rendered. While the Department appreciates the intent of this measure, the creation of this new license type

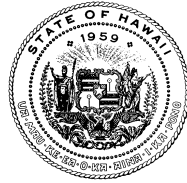
appears contrary to the provisions of Hawaii Revised Statutes section 26H-2, which provides, in part, that “the regulation and licensing of professions and vocations shall be undertaken only where reasonably necessary to protect the health, safety, or welfare of consumers of the services; the purpose of regulation shall be the protection of the public welfare and not that of the regulated profession or vocation.” A new licensure scheme should not be implemented for purposes of reimbursement only.

Further, there may be unintended consequences by regulating or requiring licensure of a currently exempted population of professionals who provide mental health services. The cost of services provided by these individuals may increase and could possibly be passed to consumers.

Regarding part III of this bill, the Department expresses similar concerns that authorizing reimbursements to a currently exempted population of professions, social work interns, could have unintended consequences such as higher costs for services rendered. These costs could be passed to consumers.

Should the Committee consider passing this bill out, the Department respectfully requests additional staffing and funding for the Professional and Vocational Licensing Division to implement this measure as well as a delayed implementation date of July 1, 2024.

Thank you for the opportunity to testify on this bill.



STATE OF HAWAII
DEPARTMENT OF HEALTH
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Testimony in SUPPORT of SB2829
RELATING TO MENTAL HEALTH

SENATOR JARRETT KEOHOKALOLE, CHAIR
SENATE COMMITTEE ON HEALTH

Hearing Date: February 4, 2022

Room Number: Via Videoconference

1 **Department Position:** The Department of Health **SUPPORTS** this bill to expand access to
2 quality mental health services.

3 **Department Testimony:** The subject matter of this measure falls within the scope of the
4 Department's Behavioral Health Administration (BHA) whose statutory mandate is to assure a
5 comprehensive statewide behavioral health care system by leveraging and coordinating public,
6 private and community resources.

7 There is currently a lack of mental health professionals in Hawaii, especially in rural areas
8 throughout the state. With the current difficulties the nation is facing in this global pandemic, it
9 has become increasingly more difficult to provide mental health care in our community, as it has
10 been difficult to retain and recruit mental health providers to our state. The passage of this bill
11 would reduce financial hardship for early career psychologists and those seeking licensure in the
12 field of mental health by allowing for reimbursement under a provisional license and while under
13 the supervision of a licensed supervisor.

1 Additionally, this bill would allow for psychologists who have completed their doctoral training
2 to take the national licensing exam. This would alter existing administrative rules requiring
3 psychologists to complete 1-year of postdoctoral training before being allowed to take this exam.

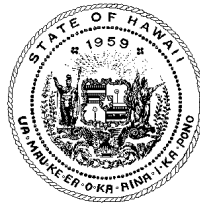
4 Both these provisions are common in many other states and may cause practitioners trained and
5 residing in our state to seek employment in a state that better supports them in obtaining their
6 license and obtaining reimbursement while seeking licensure. Please consider passing this bill to
7 support the improved and much-needed provision of mental health services in our state by
8 qualified professionals.

9 **Offered Amendments:** None

10 **Fiscal Implications:** None for the Department of Health (DOH).

11 Thank you for the opportunity to provide testimony.

DAVID Y. IGE
GOVERNOR



STATE OF HAWAII
DEPARTMENT OF PUBLIC SAFETY
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MAX N. OTANI
DIRECTOR

Maria C. Cook
Deputy Director
Administration

Tommy Johnson
Deputy Director
Corrections

Jordan Lowe
Deputy Director
Law Enforcement

No. _____

WRITTEN TESTIMONY ONLY

TESTIMONY ON SENATE BILL 2829
RELATING TO MENTAL HEALTH.

by

Max N. Otani, Director
Department of Public Safety

Senate Committee on Health
Senator Jarrett Keohokalole, Chair
Senator Rosalyn H. Baker, Vice Chair

Friday, February 04, 2022; 1:00 p.m.
Via Videoconference

Chair Keohokalole, Vice Chair Baker, and Members of the Committee:

The Department of Public Safety (PSD) offers comments on Senate Bill (SB) 2829, which seeks to establish provisional or associate level licensure requirements for marriage and family therapists and psychologists, authorize insurance reimbursements in certain circumstances, and allow psychologist license applicants to sit for the licensing examination before completing other requirements.

Over the last five years, PSD focused psychologist recruitment efforts on recent graduates from American Psychological Association (APA)-accredited doctoral level clinical and counseling psychology programs. In addition to the employment of post-doctoral psychologists, PSD currently offers two APA-accredited psychology internship sites as a member of the Hawaii Psychology Internship Consortium. With the Department's noted experience, PSD respectfully offers comment on HRS 465-7.6 Licensure of state employed clinical psychologists.

Subsection a (2) of the statute requires a psychologist employed in a civil service clinical psychologist position to obtain licensure within two years from the date of employment and subsection b requires the unlicensed civil service clinical psychologist to immediately cease and desist the practice of psychology until a license is obtained. The time limit for the practice of psychology for the civil service employee unfairly applies a law to a single group of mental health practitioners, civil servants, who would be allowed to continue to practice psychology while under the clinical supervision of a licensed psychologist in any other circumstance.

Like other entities throughout the State, PSD is also experiencing a high demand for mental health services. In order to meet the needs of individuals in custody, the Department respectfully requests removal of the two-year limit if an unlicensed psychologist employed in a civil service clinical psychologist position continues the practice of psychology while under the clinical supervision of a licensed psychologist.

Thank you for the opportunity to provide testimony on SB 2829.



Justin Miller

Licensed Mental Health Counselor (LMHC)
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808 638-3870

February 2, 2022

URGENT: The Mental Health Bill 'as is' does not include Licensed Mental Health Counselors. This is very easy to remedy (see attached).

My name is Justin Miller and I am a Licensed Mental Health Counselor, here in the state of Hawai'i, in private practice and I accept insurance reimbursement.

Please find the attached document to this testimony from page 33 onwards - simply adding this section will rectify this omission and create a much better bill.

Regarding insurance reimbursement, insurance companies recognize providers who provide Psychotherapy. This is the term used by any mental health professional when billing insurance. This is designated by a code called CPT 90837.

Psychotherapy in Hawaii is provided by Licensed Mental Health Counselors, Marriage and Family Therapists, Social Workers and Psychologists. The coding is exactly the same. **As such, it would be arbitrary and against the spirit of the legislation to not equally include Licensed Mental Health Counselors.**

If this bill were to pass as law in its current form, **it would create a tiered system of Mental Health Providers in the state of Hawai'i which would create a dangerous precedent.**

Across the USA, **in states that do provide associate level licensure, Licensed Mental Health Counselors are always included.**

There is no good reason to exclude Licensed Mental Health Counselors from the bill and as mentioned is easily fixed by using the attached language. Please be inclusive and respectful of all mental health practitioners licensed in Hawai'i. **Again, PLEASE read through the attached document which easily fixes this problem.**

Sincerely yours,
Justin Miller, Licensed Mental Health Counselor

S.B. NO.

1 ¹ §451J- Provisional license; associate marriage and
2 family therapist; services reimbursable. (a) The department
3 shall grant, upon application and payment of proper fees,
4 provisional licensure as an associate marriage and family
5 therapist to an individual who:

6 (1) Has completed a master's degree or doctoral degree
7 from an accredited educational institution in marriage
8 and family therapy or in an allied field related to
9 the practice of mental health counseling that includes
10 or is supplemented by graduate level course work
11 comprising a minimum of thirty-three semester hours,
12 or forty-four quarter hours in the following course
13 areas:

14 (A) Marriage and family studies--nine semester hours
15 or twelve quarter hours;

16 (B) Marriage and family therapy studies--nine
17 semester hours or twelve quarter hours;

18 C Human development--nine semester hours or twelve
19 quarter hours;

20 D Ethical and professional studies--three semester
21 hours or four quarter hours; and

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- 1 (E) Research--three semester hours or four quarter
2 hours;
- 3 (2) Has one-year practicum with three hundred hours
4 supervised client contact;
- 5 (3) Engages in practice under the clinical supervision of
6 a licensed marriage and family therapist during the
7 period of time necessary to fulfill the necessary
8 requirements for licensure as a marriage and family
9 therapist pursuant to section 451J-7; provided that
10 the licensed marriage and family therapist is in good
11 standing with the department; and
- 12 (4) Has passed the National Marriage and Family Therapy
13 Exam in accordance with section 451J-8.
- 14 (b) Each provisional license shall include the name and
15 title of the licensed marriage and family therapist or
16 therapists described in subsection (a) (3). A provisional
17 licensee or licensed associate marriage and family therapist may
18 only practice marriage and family therapy under the direct
19 supervision of the licensed marriage and family therapist.
- 20 (c) A provisional license issued pursuant to this section
21 shall be valid for one year from the date of issuance and may be

1 renewed for an additional one-year period if needed to fulfill
2 the requirements for licensure as a marriage and family
3 therapist pursuant to section 451J-7.

4 (d) Services provided by a supervised licensed associate
5 marriage and family therapist shall be eligible for insurance
6 reimbursement; provided that the supervising licensed marriage
7 and family therapist's services are eligible for reimbursement
8 as a contracted provider; and provided further that the billed
9 rate for the licensed associate marriage and family therapist is
10 commensurate with the requisite level of training."

11 SECTION 3. Section 451J-1, Hawaii Revised Statutes, is
12 amended as follows:

13 1. By adding a new definition to be appropriately inserted
14 and to read:

15 "Associate marriage and family therapist" or "licensed
16 associate marriage and family therapist" means a person who:

17 (1) Has completed all educational requirements stipulated
18 in section 451J- (a) (1) ;

19 (2) Has been issued a provisional license under this
20 chapter; and

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1 qualified supervisor of the provision of marriage and family
2 therapy services."

3 3. By deleting the definition of "marriage and family
4 therapy intern".

5 [" "Marriage and family therapy intern" means a person 'Hho
6 has completed all educational requirements stipulated in section
7 451J 7(1) (A) and who is currently earning supervised clinical
8 experience in marriage and family therapy under clinical
9 supervision."]

10 SECTION 4. Section 451J-3, Hawaii Revised Statutes, is
11 amended to read as follows:

12 **"§451J-3 Powers and duties of the director.** In addition
13 to any other powers and duties authorized by law, the director
14 may:

- 15 (1) Examine and approve the qualifications of all
16 applicants under this chapter, and issue a license to
17 each successful applicant granting permission to use
18 the title of marriage and family therapist [er]
19 licensed marriage and family therapist, associate
20 marriage and family therapist, or licensed associate
21 marriage and family therapist in this State pursuant

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1 to this chapter and the rules adopted under this
2 chapter;

3 (2) Adopt, amend, or repeal rules pursuant to chapter 91;

4 (3) Administer, coordinate, and enforce this chapter and
5 rules;

6 (4) Discipline a person licensed as a marriage and family
7 therapist or associate marriage and family therapist
8 for any cause described by this chapter, or for any
9 violation of rules, or refuse to license a person for
10 failure to meet licensing requirements or for any
11 cause that would be grounds for disciplining a
12 licensed marriage and family therapist^[7] or licensed
13 associate marriage and family therapist; and

14 (5) Appoint an advisory committee of licensed marriage and
15 family therapists and members of the public to assist
16 with the implementation of this chapter and the rules;
17 except that the initial members of the committee who
18 are marriage and family therapists shall not be
19 required to be licensed pursuant to this chapter."

20 SECTION 5. Section 451J-5, Hawaii Revised Statutes, is
21 amended to read as follows:



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1 **"§451J-5 Prohibited acts.** Except as specifically provided
2 elsewhere in this chapter, no person shall use the title
3 marriage and family therapist [er] licensed marriage and family
4 therapist, associate marriage and family therapist, or licensed
5 associate marriage and family therapist without first having
6 secured a license under this chapter. The department shall
7 investigate and prosecute any individual using the title of
8 marriage and family therapist [er] licensed marriage and family
9 therapist, associate marriage and family therapist, or licensed
10 associate marriage and family therapist without being properly
11 licensed as a marriage and family therapist[] or associate
12 marriage and family therapist. Any person who violates this
13 section shall be subject to a fine of not more than \$1,000 per
14 violation. Each day's violation shall be deemed a separate
15 offense. Any action taken to impose or collect the fine imposed
16 under this section shall be a civil action."

17 SECTION 6. Section 451J-6, Hawaii Revised Statutes, is
18 amended to read as follows:

19 **"§451J-6 Exemptions.** (a) Licensure shall not be required
20 of:

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- 1 (1) A person doing work within the scope of practice or
2 duties of the person's profession that overlaps with
3 the practice of marriage and family therapy; provided
4 the person does not purport to be a marriage and
5 family therapist [er] licensed marriage and family
6 therapist[,], associate marriage and family therapist,
7 or licensed associate marriage and family therapist;
8 or
- 9 (2) Any student enrolled in an accredited educational
10 institution in a recognized program of study leading
11 toward attainment of a graduate degree in marriage and
12 family therapy or other professional field; provided
13 that the student's activities and services are part of
14 a prescribed course of study supervised by the
15 educational institution and the student is identified
16 by an appropriate title including but not limited to
17 "marriage and family therapy student or trainee",
18 "clinical psychology student or trainee", "clinical
19 social work student or trainee", or any title which
20 clearly indicatestraining status[--; ---er



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1 expired within one year of the renewal deadline shall be
2 required to pay a restoration fee in addition to all renewal
3 fees.¹¹

4 SECTION 8. Section 451J-10, Hawaii Revised Statutes, is
5 amended by amending subsection (a) to read as follows:

6 ¹¹ (a) [Licenses] Except as provided in section 451J-
7 licenses shall be renewed triennially on or before December 31,
8 with the first renewal deadline occurring on December 31, 2001.
9 Failure to renew a license shall result in a forfeiture of the
10 license. Licenses that have been forfeited may be restored
11 within one year of the expiration date upon payment of renewal
12 and restoration fees, and in the case of marriage and family
13 therapists or licensed marriage and family therapists audited
14 pursuant to subsection (f), documentation of continuing
15 education compliance. Failure to restore a forfeited license
16 within one year of the date of its expiration shall result in
17 the automatic termination of the license. Persons with
18 terminated licenses shall be required to reapply for licensure
19 as a new applicant.¹¹

20 SECTION 9. Section 451J-12, Hawaii Revised Statutes, is
21 amended to read as follows:



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1 "[4]§451J-12[] **Confidentiality and privileged**
2 **communications.** No person licensed as a marriage and family
3 therapist[,] or associate marriage and family therapist, nor any
4 of the person's employees or associates, shall be required to
5 disclose any information that the person may have acquired in
6 rendering marriage and family therapy services except in the
7 following circumstances:

8 (1) As required by law;
9 (2) To prevent a clear and immediate danger to a person or
10 persons;

11 (3) In the course of a civil, criminal, or disciplinary
12 action arising from the therapy where the therapist is
13 a defendant;

14 (4) In a criminal proceeding where the client is a
) defendant and the use of the privilege would violate
15 the defendant's right to a compulsory process of the
16 right to present testimony and witnesses in the
17 defendant's own behalf;

18
19 (5) In accordance with the terms of a client's previously
20 written waiver of the privilege; or



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1 (6) Where more than one person in a family jointly
 2 receives therapy and each family member who is legally
 3 competent executes a written waiver; in that instance,
 4 a therapist may disclose information received from any
 5 family member in accordance with the terms of the
 6 person's waiver."

7 SECTION 10. Section 451J-13, Hawaii Revised Statutes, is
 8 amended to read as follows:

9 ~~II[-(-] §451J-13 [-3-]~~ **Therapist prohibited from
 10 testifying in**
 11 **alimony and divorce actions.** If both parties to a marriage have
 12 obtained marriage and family therapy by a licensed marriage and
 13 family therapist[,]
 14 or licensed associate marriage and family
 15 therapist, the therapist shall be prohibited from testifying in
 16 an alimony or divorce action concerning information acquired in
 17 the course of therapy. This section shall not apply to custody
 18 actions whether or not part of a divorce proceeding. "

PART II

18 SECTION 11. Chapter 465, Hawaii Revised Statutes, is
 19 amended by adding a new section to be appropriately designated
 20 and to read as follows:



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1 "§465- Provisional license; associate psychologist;
 2 services reimbursable. (a) The board shall grant, upon
 3 application and payment of proper fees, provisional licensure as
 4 an associate psychologist to an individual who:

- 5 (1) Possess a doctoral degree from:
- 6 (A) An American Psychological Association approved
 7 program in clinical psychology, counseling
 8 psychology, school psychology, or programs
 9 offering combinations of two or more of these
 10 areas; or
- 11 (B) A professional psychology training program,
 12 awarded by an institution of higher education, or
 13 from a regionally accredited institution; and
- 14 (2) Is engaging in post-doctoral supervised experience in
 15 health service psychology pursuant to an organized
 16 health service training program approved by the
 17 director.

18 (b1 Each provisional license shall include the name and
 19 title of the supervising licensed psychologist or psychologists
 20 in the program described in subsection (a)(2). A provisional
 21 licensee or licensed associate psychologist may only practice



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1 psychology under the direct supervision of the licensed
2 psychologist; provided that the licensed psychologist is in good
3 standing with the department.

4 (c) A provisional license issued pursuant to this section
5 shall be valid for two years from the date of issuance and may
6 be renewed for an additional one-year period if needed to
7 fulfill the requirements for full licensure as a psychologist
8 under section 465-7.

9 (d) Services provided by a supervised licensed associate
10 psychologist shall be eligible for insurance reimbursement;
11 provided that the supervising licensed psychologist's services
12 are eligible for reimbursement as a contracted provider; and
13 provided further that the billed rate for the licensed associate
14 psychologist is commensurate with the requisite level of
15 training.¹¹

16 SECTION 12. Section 465-1, Hawaii Revised Statutes, is
17 amended by adding a new definition to be appropriately inserted
18 and to read as follows:

19 "Associate psychologist" or "licensed associate
20 psychologist" means a person who:

- 1 1 Has completed all educational requirements stipulated
2 in section 465- (a) (1) ;
3 (2) Has been issued a provisional license under this
4 chapter; and
5 (3) Is currently engaging in post-doctoral supervised
6 experience in health service in psychology pursuant to
7 an organized health service training program approved
8 by the director."

9 SECTION 13. Section 465-2, Hawaii Revised Statutes, is
10 amended to read as follows:

11 "**§465-2 License required.** Except as otherwise provided in
12 this chapter, it shall be unlawful to represent one's self as a
13 psychologist or associate psychologist or engage in the practice
14 of psychology without having first obtained a license as
15 provided in this chapter. ¹¹

16 SECTION 14. Section 465-3, Hawaii Revised Statutes, is
17 amended by amending subsection (a) to read as follows:

18 ¹¹ (a) This chapter shall not apply to:

- 19 (1) Any person teaching, lecturing, consulting, or
20 engaging in research in psychology insofar as the
21 activities are performed as part of or are dependent

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1 supervision in a training institution or facility and
2 who is designated by a title as "psychology trainee",
3 "psychology student", "psychology intern", or
4 "psychology resident", that indicates the person's
5 training status]; provided that the person shall not
6 identify the person's self as a psychologist or
7 associate psychologist, or imply that the person is
8 licensed to practice psychology;

9 (5) Any person who is a member of another profession
10 licensed under the laws of this jurisdiction to render
11 or advertise services, including psychotherapy, within
12 the scope of practice as defined in the statutes or
13 rules regulating the person's professional practice;
14 provided that, notwithstanding section 465-1, the
15 person does not represent the person's self to be a
16 psychologist or associate psychologist or does not
17 represent that the person is licensed to practice
18 psychology;

19 (6) Any person who is a member of a mental health
20 profession not requiring licensure; provided that the
21 person functions only within the person's professional

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1 capacities; and provided further that the person does
2 not represent the person to be a psychologist[,] or
3 associate psychologist, or the person's services as
4 psychological;

5 (7) Any person who is a duly recognized member of the
6 clergy; provided that the person functions only within
7 the person's capacities as a member of the clergy; and
8 provided further that the person does not represent
9 the person to be a psychologist[,] or associate
10 psychologist, or the person's services as
11 psychological; or

12 (8) Any psychologist employed by the United States
13 Department of Defense, while engaged in the discharge
14 of the psychologist's official duty and providing
15 direct telehealth support or services, as defined in
16 section 431:10A-116.3, to neighbor island
17 beneficiaries within a Hawaii National Guard armory on
18 the island of Kauai, Hawaii, Molokai, or Maui;
19 provided that the psychologist employed by the United
20 States Department of Defense is credentialed by
21 Tripler Army Medical Center[-; -- e-r



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1 +9+ Any supervisee of a licensed psychologist as defined
2 in section 465D 7J ¹¹

3 SECTION 15. Section 465-3.5, Hawaii Revised Statutes, is
4 amended by amending subsection (a) to read as follows:

5 ¹¹ (a) Notwithstanding other provisions in this chapter the
6 director of health may certify that there is an absence or
7 shortage of licensed psychologists or associate psychologists
8 for government employment in a particular locality. Upon
9 receiving certification of the absence or shortage, the board
10 shall authorize the director to hire and retain persons
11 currently in government employment to fill the absence or
12 shortage; provided that persons hired or retained have been duly
13 licensed as a psychologist by written examination under the laws
14 of another state or territory of the United States prior to
15 1977."

16 SECTION 16. Section 465-6, Hawaii Revised Statutes, is
17 amended to read as follows:

18 "**§465-6 Powers and duties.** In addition to any other
19 powers and duties authorized by law, the board shall:

- 20 (1) Examine the qualifications of applicants for licensing
21 under this chapter to determine their eligibility for

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- 1 (1) The applicant for licensure shall possess a doctoral
2 degree from:
- 3 (A) An American Psychological Association approved
4 program in clinical psychology, counseling
5 psychology, school psychology, or programs
6 offering combinations of two or more of these
7 areas; or
- 8 (B) A professional psychology training program,
9 awarded by an institution of higher education, or
10 from a regionally accredited institution;
- 11 (2) The applicant for licensure shall demonstrate that the
12 applicant has completed one year of post doctoral
13 supervised experience in health service in psychology,
14 and:
- 15 (A) An internship approved by the American
16 Psychological Association; or
- 17 (B) One year of supervised experience in health
18 service in psychology, in an internship or
19 residency program in an organized health service
20 training program; [a-oo]



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1 (3) The applicant for licensure has passed an examination
2 as may be prescribed by the board[]; provided that
3 the applicant shall not be required to complete the
4 requirements of paragraph (2) before applying to sit
5 for the examination."

6 SECTION 18. Section 465-7.6, Hawaii Revised Statutes, is
7 amended to read as follows:

8 " **§465-7.6 Licensure of state employed clinical**

9 **psychologists.** (a) A psychologist employed in a civil service
10 clinical psychologist position in this State after January 1,
11 1988, shall be licensed subject to:

12 (1) Meeting the requirements of section 465-7; and

13 (2) Obtaining licensure within two years from the date of
14 employment[]

15 provided that, if the psychologist is not able to obtain
16 licensure within two years, the board may grant a waiver if the
17 psychologist can demonstrate the delay was caused by
18 circumstances beyond their control.

19 (b) [After] Absent a waiver obtained pursuant to
20 subsection (a), after the time period in subsection (a) (2) has
21 expired, a psychologist, employed in a civil service clinical



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1 psychologist position rendering diagnostic or treatment
2 services, who has not obtained a license, shall immediately
3 cease and desist the practice of psychology until a license is
4 obtained pursuant to this chapter. ¹¹

5 SECTION 19. Section 465-8, Hawaii Revised Statutes, is
6 amended to read as follows:

7 **"§465-8 Licenses, issuance, display.** Upon the board
8 forwarding to the director the name of each applicant who is
9 entitled to a license under this chapter and upon receipt of the
10 prescribed fee, the director shall promptly issue to each
11 applicant a license authorizing the applicant to engage in the
12 practice of psychology for a period of two years. The license
13 shall be in the form as the director shall determine. A
14 licensed psychologist or associate psychologist shall display
15 the license in a conspicuous place in the psychologist's or
16 associate psychologist's principal place of business[]
17 provided that a provisional license shall include the name and
18 title of the supervising licensed psychologist or
19 psychologists.¹¹

20 SECTION 20. Section 465-11, Hawaii Revised Statutes, is
21 amended as follows:



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1 1. By amending subsection (a) to read:

2 " (a) Every license issued under this chapter shall be
3 renewed biennially on or before June 30 of each even-numbered
4 year. Failure to renew a license shall result in forfeiture of
5 the license; provided that a psychologist whose license has been
6 forfeited for one year or less for failure to renew may restore
7 the license by payment of the renewal fee and, in the case of a
8 psychologist who is audited, pursuant to subsection (g),
9 submission of documentation of continuing education compliance,
10 for the biennium in which the failure occurred]; provided
11 further that the board may grant waivers or extensions if the
12 licensee can demonstrate a delay was due to circumstances beyond
13 their control. If licensing has lapsed for more than one year,
14 the person may reapply for a license in the manner prescribed in
15 this chapter. "

16 2. By amending subsection (d) to read:

17 " (d) First-time licensees and provisional licensees
18 pursuant to section 465- shall not be subject to the
19 continuing education requirement established under subsection
20 (c) (2) for the first license renewal."¹¹



S.B. NO.

1 SECTION 21. Section 465-15, Hawaii Revised Statutes, is
2 amended by amending subsection (a) to read as follows:

3 (a) No person shall:

4 (1) Use in connection with the person's name any
5 designation tending to imply that the person is a
6 licensed psychologist or license associate
7 psychologist unless the person is duly licensed and
8 authorized under this chapter;

9 (2) Represent oneself as a licensed psychologist or
) licensed associate psychologist during the time the
10 person's license issued under this chapter is
11 suspended or revoked;

12 Advertise or make a representation, either publicly or
13 (3) privately, as being a psychologist[,] or associate
)

14
15 psychologist, licensed or otherwise, or as being able
16 to perform professional services described in section
17 465-1, except as otherwise provided in this chapter,
18 without having a valid unrevoked license or temporary
19 permit issued by the director; or

20. (4) Otherwise violate this chapter."

21 PART III

S.B. NO.

1 SECTION 22. Section 467E-7, Hawaii Revised Statutes, is
2 amended to read as follows:

3 ¹¹ §467E-7 Licensing requirements[.]; insurance

4 reimbursement. (a) Every applicant for a license as a social
5 worker shall submit evidence satisfactory to the director that
6 the applicant meets the following requirements:

7 (1) For the licensed bachelor social worker, the
8 applicant:

9 (A) Holds a bachelor's degree from a college or
10 university in a social work program accredited by
11 or deemed to be equivalent to a program
12 accredited by the Council on Social Work
13 Education; and

14 (B) Has passed the basic level national examination
15) given by the Association of Social Work Boards;

16 (2) For the licensed social worker, the applicant:

17 (A) Holds a master's degree from a college or
18 university in a social work program accredited by
19 or deemed to be equivalent to an accredited
20 program by the Council on Social Work Education
21 or a doctoral degree from a doctoral degree



S.B. NO.

1 hundred hours of client-centered advocacy,
2 consultation, and evaluation; and at least one
3 hundred hours of supervision as follows:

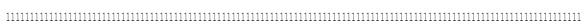
4 (i) At least sixty of the one hundred hours of
5 direct face-to-face supervision shall have
6 been individualized supervision; and

7 (ii) Not more than forty hours of direct face-to-
8 face supervision may have been under small
9 group (up to six supervisees) supervision.

10 An applicant who submits evidence of
11 certification as a qualified clinical social
12 worker or diplomate in clinical social work by
13 the National Association of Social Workers or as
14 a board certified diplomate by the American Board
15 of Examiners shall be deemed to have satisfied
16 the experience requirements of this subparagraph;

17 (D) For the purposes of subparagraph (C), shall have
18 had clinical supervision as follows:

19 (i) The supervisor shall have been a licensed
20 clinical social worker with at least four



S.B. NO.

1 thousand five hundred hours of post masters
2 clinical social work experience;

3 (ii) For the first five years after July 1, 2004,
4 the following individuals shall be deemed to
5 have satisfied the requirements of a
6 supervisor: a person with a master's degree
7 in social work with at least four thousand
8 five hundred hours post masters clinical
9 social work experience; an individual who
10 holds a diplomate in clinical social work or
11 a board certified diplomate certification;
12 or a board certified psychiatrist,
13 psychologist, advanced practice registered
14 nurse who has a minimum of four thousand
15 five hundred hours of post masters clinical
16 experience in assessment, clinical
17 diagnosis, and psychotherapy; and

18 (iii) Supervision shall have included review of
19 assessment, clinical diagnosis, and
20 psychotherapy; and



S.B. NO.

1 (E) In collaboration with the supervisor, may elect
2 to fulfill some or all of the supervision
3 requirements set forth in subparagraph (C)
4 through face-to-face supervision that is
5 conducted electronically through a video
6 conference service that is compliant with all
7 federal and state privacy, security, and
8 confidentiality laws, including the Health
9 Insurance Portability and Accountability Act of
10 1996. Prior to making such an election, it is
11 incumbent upon the applicant to review the laws
12 and rules of other jurisdictions to determine the
13 impact, if any, that electronic supervision may
14 have on license by endorsement in other states.

15 (b) Services provided by a supervised social work intern
16 obtaining post masters clinical social work experience under the
17 supervision of a licensed clinical social worker or individual
18 identified in section 467E-7(a)(3)(D) in order to qualify for a
19 license as a licensed clinical social worker shall be eligible
20 for insurance reimbursement; provided that the supervising
21 licensed clinical social worker's services are eligible for



S.B. NO.

- 1 reimbursement as a contracted provider; provided further that
- 2 the billed rate for the social work intern is commensurate with
- 3 the requisite level of training."

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1

PART IV

2 SECTION 23. Chapter 453D, Hawaii Revised Statutes, is
3 amended by adding a new section to be appropriately designated
4 and to read as follows:



S.B. NO.

Pages 34 - 51 LMHC Inclusion Addendum

1 §453D- Provisional license; associate mental health
2 counselor; services reimbursable. (a) The department
3 shall grant, upon application and payment of proper fees,
4 provisional licensure as an associate mental health
5 counselor to an individual who:
6 (1) Has completed a master's degree or doctoral degree
7 from an accredited educational institution in
8 counseling or in an allied field related to
9 the practice of mental health counseling that includes
10 or is supplemented by graduate level course work
11 comprising a minimum of forty-eight semester hours,
12 or seventy-two quarter hours in the following course
13 areas:
14 (A) Human growth and development, including but not
15 limited to the study of life span development,
16 strategies to facilitate that development and
17 transitions, theories of learning and personality
18 development, and human behavior to include crisis,
19 disabilities, addictive behavior, and
20 environmental factors;
21 (B) Social and cultural foundations, including but
22 not limited to the study of issues and trends in

S.B. NO.

1 a multicultural and diverse society, including
2 characteristics of diverse groups that may
3 include but are not limited to age, race,
4 religious or sexual preference, physical
5 disability, ethnicity and culture, gender,
6 socioeconomics, intellectual ability, and
7 individual, family, and group strategies with
8 diverse populations;

9 (c) Counseling theories and applications, including
10 but not limited to counseling and consultation,
11 including both individual and systems
12 perspectives, interviewing, assessment, and
13 counseling skills, as well as applying principles,
14 methods, and theories of counseling, treatment and
15 counseling of mental and emotional disorders, and
16 educational techniques aimed at preventing these
17 disorders with individuals and families;

18 (D) Group theory and practice, including but not
19 limited to principles of group dynamics, group
20 process, group leadership styles, theories and
21 methods of group counseling, and the
22 application of theory to the group processes;

S.B. NO.

- 1 (E) Career and lifestyle development, including
2 but not limited to the study of vocational
3 development theories and decision-making
4 models, assessment instruments, and
5 techniques, types, sources, and uses of
6 occupational and educational information
7 systems, career development applications, and
8 career counseling processes, techniques, and
9 resources;
- 10 (F) Appraisal of human behavior, including but
11 not limited to assessment and diagnosis of
12 disorders with an emphasis on DSM categories
13 and an understanding of these disorders
14 relative to the counseling context;
- 15 (G) Tests and measurements, including but not
16 limited to theoretical and historical bases
17 for assessment techniques, and assessment
18 methods, including analysis of various types
19 of tests to select, administer, interpret,
20 and use assessment and evaluation instruments
21 and techniques in counseling;
- 22 (H) Research and program evaluation,
23 including but not limited to research

S.B. NO.

1 design and methods, statistical analysis,
2 principles, practices, and application of
3 needs assessment, and program evaluation;

4 (I) Professional orientation and ethics,
5 including but not limited to the history of
6 the helping profession, professional roles
7 and functions, ethical standards,
8 confidentiality, professional organizations,
9 and the public policy process, including
10 advocacy on behalf of the profession and its
11 clientele; and

12 (2) At least two academic terms of supervised
13 mental health practicum intern experience for
14 graduate credit of at least six semester
15 hours or ten quarter hours in a mental health
16 counseling setting, with a total of three
17 hundred hours of supervised client contact.
18 The practicum experience shall be completed
19 under the clinical supervision of a person
20 who is licensed as a mental health counselor,
21 psychologist, clinical social worker,
22 advanced practice registered nurse with a
23 specialty in mental health, marriage and
24 family therapist, or physician with a
25 specialty in psychiatry;

S.B. NO.

1 (3) Completion of not less than three thousand hours of post
2 graduate experience in the practice of mental health
3 counseling, with one hundred hours of face-to-face clinical
4 supervision that shall be completed in no less than two years
5 and in no more than four years, under the clinical supervision
6 of a person who is a licensed mental health counselor,
7 psychologist, clinical social worker, advanced practice
8 registered nurse with a specialty in mental health, marriage
9 and family therapist, or physician with a specialty in
10 psychiatry. In collaboration with the supervisor, the applicant
11 may elect to fulfill some or all of the supervision
12 requirements through face-to-face supervision that is conducted
13 electronically through a videoconference service that complies
14 with all federal and state privacy, security, and
15 confidentiality laws, including the Health Insurance
16 Portability and Accountability Act of 1996; provided that the
17 applicant shall review the laws and rules of other
18 jurisdictions to determine the impact, if any, that electronic
19 supervision may have on licensure by endorsement or reciprocity
20 in other states prior to electing electronic supervision; and
21 (4) Has passed the National Counselor Examination for
22 Licensure and Certification in accordance with section 453D-7.

S.B. NO.

1 (5) Each provisional license shall include the name and
2 title of the licensed mental health counselor or
3 counselors described in subsection(a)(3). A provisional
4 licensee or licensed associate mental health counselor may
5 only practice mental health counseling under the direct
6 supervision of the licensed mental health counselor.

7 (6) A provisional license issued pursuant to this section shall
8 be valid for two years from the date of issuance and may be

S . B . NO .

1 renewed for an additional two year period if needed to fulfill
2 the requirements for licensure as a mental health counselor
3 pursuant to section 453D-7.

4 (7) Services provided by a supervised licensed associate
5 mental health counselor shall be eligible for insurance
6 reimbursement; provided that the supervising licensed mental
7 health counselor's services are eligible for reimbursement
8 as a contracted provider; and provided further that the billed
9 rate for the licensed associate mental health counselor is
10 commensurate with the requisite level of training."

11 SECTION 24. Section 453D-1, Hawaii Revised Statutes, is
12 amended as follows:

13 1. By adding a new definition to be appropriately inserted
14 and to read:

15 "Associate mental health counselor" or "licensed
16 associate mental health counselor means a person who:

17 (1) Has completed all educational requirements stipulated
18 in section 453D- (a) (1) ;

19 (2) Has been issued a provisional license under this
20 chapter; and

1 qualified supervisor of the provision of mental health
2 counseling services."

3 SECTION 25. Section 453D-3, Hawaii Revised Statutes, is
4 amended to read as follows:

5 "**§453D-3 Powers and duties of the director.** In addition
6 to any other powers and duties authorized by law, the director
7 shall have the powers and duties to:

8 (1) Grant permission to use the title "licensed
9 mental health counselor," "associate mental health
10 counselor," or "licensed associate mental health counselor"
11 or a description one is a licensed mental health counselor,
12 associate mental health counselor, or licensed associate
13 mental health counselor in this State pursuant

1 "**§453D-5 Prohibited acts.** Except as specifically provided
2 in this chapter, no person shall engage in the practice of mental
3 health counseling or use the title of "licensed mental health
4 counselor," ~~for~~ "mental health counselor," associate mental
5 health counselor, or licensed associate mental health counselor
6 without a valid license issued under this chapter.
7 Any person who violates this section shall be subject to a fine
8 of not more than \$1,000 per violation. Each day of each violation
9 shall constitute a separate offense. Any action taken to impose
10 or collect the fine imposed under this section shall be a civil
11 action."

12 SECTION 27. Section 453D-6, Hawaii Revised Statutes, is
13 amended to read as follows:

14 "**§453D-6 Exemptions.** (a) Licensure shall not be required
15 of:

S.B. NO.

1 (1) A person doing work within the scope of practice or
2 duties of the person's profession that overlaps with the
3 practice of mental health counseling; provided that no such
4 person shall use a title stating or implying that the person
5 is a "licensed mental health counselor," ~~for~~ "mental
6 health counselor," associate mental health counselor, or
7 licensed associate mental health counselor, or describe or
8 refer to the person's services as mental health counseling;

9 (2) Any person who is a duly recognized member of the clergy;
10 provided that the person functions only within the person's
11 capacity as a member of the clergy; and provided further that
12 the person does not represent the person to be a "licensed
13 mental health counselor," ~~for~~ "mental health counselor",
14 "associate mental health counselor," or "licensed associate
15 mental health counselor, or describe or refer to the person's
16 services as mental health counseling;

17 (3) Any student enrolled in an accredited educational
18 institution in a recognized program of study leading towards
19 attainment of a graduate degree in mental health counseling



1 or other professional field; provided that the student's
2 activities and services are part of a prescribed course of
3 study supervised by the accredited educational institution and
4 the student is identified by an appropriate title, including but
5 not limited to "mental health counseling student" or "trainee",
6 "clinical psychology student" or "trainee", "social work
7 student" or "trainee", "marriage and family counseling student"
8 or "trainee", or any title that clearly indicates training
9 status; or any individual who uses the title "mental health
10 counselor intern" for the purpose of obtaining clinical
11 experience in accordance with section 453D-7(3).

12 (b) Nothing in this chapter shall be construed to prevent
13 qualified members of other licensed professions as defined by
14 any law, rule, or the department, including but not limited to
15 social workers, registered nurses, psychologists, marriage and
16 family therapists, or physicians, from providing mental health
17 counseling or advertising that they provide mental health
18 counseling to individuals, couples, or families consistent with
19 the accepted standards of their respective licensed professions;
20 provided that no such persons shall use a title stating or



1 implying that they are licensed mental health counselors,
2 associate mental health counselors, or licensed associate mental
3 health counselors unless the persons are licensed pursuant to
4 this chapter.

5 (c) Nothing in this chapter shall be construed to supersede the
6 regulation of registered rehabilitation specialists from the
7 department of labor and industrial relations. Further, no registered
8 rehabilitation specialist shall use a title stating or implying that
9 the registered rehabilitation specialist is a licensed mental health
10 counselor, associate mental health counselor, or licensed associate
11 mental health counselor unless the person is licensed pursuant to
12 this chapter.

13 SECTION 28. Section 453D-10, Hawaii Revised Statutes, is
14 amended to read as follows:

15 " **[\$453D-10] Licensure fees.** A license shall be
16 issued to a person deemed to be qualified under
17 section 453D-7 upon the payment of a license fee to be
18 determined by the department and shall be valid for
19 three years[,] provided that provisional licenses shall
20 be renewed pursuant to section 453D.



1 SECTION 29. Section 453D-11, Hawaii Revised Statutes, is amended
2 to read as follows:

3 "[Renewal of license; fees] Except as provided in section 451D-
4 licenses shall be renewed, upon the payment of a renewal fee,
5 triennially not earlier than ninety days before June 30, with the
6 first renewal deadline occurring on June 30, 2008. Failure to
7 renew a license shall result in a forfeiture of the license.
8 Licenses that have been forfeited may be restored within one year
9 of the expiration date upon payment of renewal and restoration
10 fees. Failure to restore a forfeited license within one year of
11 the date of its expiration shall result in the automatic
12 termination of the license and the person may be required to
13 reapply for licensure as a new applicant. All renewal and
14 restoration fees shall be determined by the department.

15 SECTION 30. Section 453D-13, Hawaii Revised Statutes, is
16 amended to read as follows:



1 "[4]§453D-13[] **Confidentiality and privileged**
2 **communications.** No person licensed as a mental health
3 counselor~~+~~ or associate mental health counselor, nor any
4 of the person's employees or associates, shall be required to
5 disclose any information that the person may have acquired in
6 rendering mental health counseling services except in the
7 following circumstances:

8 (1) As required by law;

9 (2) To prevent a clear and immediate danger to a person or
10 persons;

11 (3) In accordance with the terms of a previously written
12 waiver of the privilege where the waiver is executed by the
13 client or by the client's legally recognized representative;

14 (4) Where more than one person jointly receives counseling
15 and each person who is legally competent executes a written
16 waiver. In that instance, a mental health counselor may
17 disclose information from any person in accordance with that
18 person's waiver; or (5) In the course of a disciplinary
19 action or pursuant to a duly authorized subpoena issued by
20 the department.



1 SECTION 31. Section 453D-14, Hawaii Revised Statutes, is
 2 amended to read as follows: ~~II[-(-] §453D-14 [-3-] Mental~~
 3 **health counselor prohibited from testifying in alimony and**
 4 **divorce actions.** If both parties to a marriage have obtained
 5 mental health counseling from a licensed mental health counselor~~+~~
 6 or licensed associate mental health counselor, the counselor shall
 7 be prohibited from testifying in an alimony or divorce action
 8 concerning information acquired in the course of therapy. This
 9 section shall not apply to custody actions whether or not part of a
 10 divorce proceeding. "

11

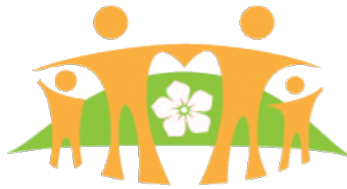
12 **PART V (Formerly Part IV)**

13 SECTION 32. **(Formerly Section 23)** Statutory material to be
 repealed is bracketed and stricken. New statutory material is
 underscored.

14 SECTION 33 **(Formerly Section 24)** This Act shall take effect
 upon its approval; provided that any provision in this Act
 authorizing insurance reimbursement for services shall be subject
 to approval by the Centers for Medicare and Medicaid Services.

INTRODUCED BY: _____





The Hawaiian Islands Association
for Marriage and Family Therapy
(HIAMFT)

We know systems.
We know relationships.
We know FAMILY MATTERS.

[COMMITTEE ON HEALTH](#)

Senator Jarrett Keohokalole, Chair
Senator Rosalyn H. Baker, Vice Chair

DATE: February 4, 2022 1:00 P.M. - VIA VIDEO CONFERENCE

Testimony in Strong Support of SB2829 RELATING TO MENTAL HEALTH

The Hawaiian Islands Association for Marriage and Family Therapy (HIAMFT) strongly supports SB2829 as a critical tool in improving access and meeting the overwhelming demand for quality mental health services, particularly during and following the prolonged pandemic. Here's a snapshot of current ratios of clients/patients to mental health providers in Hawai'i:

Hawai'i 320:1

Honolulu 370:1

Kauai 480:1

Maui 550:1

Moloka'i has no registered providers.

Obviously, this demand far exceeds the viable supply of mental health providers. Among other provisions to remove administrative barriers and increase the speed with which trained and qualified practitioners can enter the workforce, SB2829 would establish provisional/associate-level licensure requirements for Marriage and Family Therapists (MFTs) and Psychologists. This would ensure a regulatory framework that would encourage relevant and quality training to associate-level providers by authorizing insurance reimbursement for supervised care provided by these post-degree/pre-licensed mental health professionals during the 12 to 24-month period in which they are completing required supervised practice hours under the mentorship and guidance of an independently licensed mental health professional.

In 23 other states, associate-level licensure is already established as common practice. This regulatory approach not only expands clients' access to providers, it also creates a viable career path for would-be providers: Hawai'i residents interested in pursuing careers as mental health professionals (of which there is a 10,000-15,000 shortage), but who might otherwise not be able to actualize such a career due to outdated statutes that often force post-graduate/pre-licensed providers to work for sub-par wages or even pro bono (while also paying a supervisor to oversee their work, costing MFT supervisees anywhere from

\$10,000-\$30,000 for 1,000 hours of supervised direct care during their 2-year post-degree period) and/or in contexts that do not provide sufficiently relevant clinical experience (e.g., prisons, substance abuse centers, case management, etc.) to ensure providers are ready for independent licensure.

This bill would update Hawai'i's licensing statutes in ways that would not only modernize our processes, but ultimately improve the quality and utilization of mental health care provided in our state by creating a more robust system of clinical accountability/training and a financially viable career path for local would-be providers who have a deep understanding of local cultures/customs and who in turn, may be better able to connect with clients, who in turn will be more likely to actually utilize available mental health services.

Moreover, this bill will reduce the loss of potential future mental health professionals to other careers or one of the other 23 states that have already modernized their licensing laws. In turn, this will contribute to the state economy through associate licensing fees, taxes from wages earned by associate-level licensees, and local purchases made by these licensees.

Overall, many aspects of our mental health system are deeply flawed, understaffed, and are in no way prepared to manage the onslaught of mental health issues that the general population are experiencing during and after this pandemic. The consequences of this pandemic, both short- and long-term, in terms of mental health, could be significant and could weaken the Hawai'i health care system.

If we don't develop the means to stave off and/or treat these mental health issues, individuals and families will suffer even more than they already have/do. In all areas of life, untreated mental health issues can become chronic and with crippling, long-term effects – for individuals, families, and communities.

These circumstances call for a change in the paradigm and practices of mental health care in Hawai'i. Our current model of mental health care does not adequately address the complex challenges of modern living. Let's re-vision current models of mental health care delivery by learning from other states and being creative and flexible in how we provide mental health services. To protect our community now and in the future, let's take appropriate action now. Mental health care cannot be an afterthought.

Thank you for the opportunity to provide this testimony in strong support of this bill.

Sincerely,

A handwritten signature in black ink that reads "John Souza, Jr. LMFT, DMFT". The signature is written in a cursive style with a large, stylized initial "J".

Dr. John Souza, Jr., LMFT, DMFT, President
The Hawaiian Islands Association for Marriage and Family Therapy



Hawai'i Psychological Association

For a Healthy Hawai'i

P.O. Box 833
Honolulu, HI 96808

www.hawaiipsychology.org

Phone: (808) 521 -8995

COMMITTEE ON HEALTH

Senator Jarrett Keohokalole, Chair
Senator Rosalyn H. Baker, Vice Chair

DATE: February 4, 2022 1:00 P.M. - VIA VIDEO CONFERENCE

Testimony in Strong Support of SB2829 RELATING TO MENTAL HEALTH

The Hawai'i Psychological Association (HPA) strongly supports SB2829 as a critical tool in meeting the burgeoning demand for quality mental health services – and is especially timely as the emotional and mental toll of the pandemic is felt by all our residents, prolonged now for over two years. The aftermath effects on our public behavioral health is immeasurable.

This bill expands access to much-needed high quality mental health services provided by local practitioners, and will significantly increase the speed with which trained, qualified, credentialed, and culturally cognizant practitioners can enter the workforce and meet Hawaii's demands. There is a critical shortage of mental health professionals in Hawaii, particularly in rural areas; and this bill helps to reduce some arbitrary and/or administrative obstacles to practicing here.

To become licensed as a psychologist, Hawaii Revised Statutes requires candidates to have completed a doctoral degree (Ph.D. or Psy.D.) in psychology including practicum experience comprised of a full time one-year psychology internship; followed by at least one year of supervised practice experience after completing the degree; and then a passing score on a rigorous national examination.

This proposal helps to alleviate several financial hardships psychology trainees in Hawaii typically face while on this path. New professionals seeking to complete their hours of supervised practice are having tremendous difficulty managing financially - due to Hawaii's very high cost of living.

The associate licensing framework in this bill will authorize insurance reimbursement for work done by pre-licensed, "post-doc" psychology trainees. Post-docs often work in an agency or other setting where they are supervised closely by a licensed psychologist, but insurance plans vary greatly on whether they will reimburse the agency or supervisor for services provided in this way. Some post-docs end up working for free, while maintaining other jobs to survive. Many leave the state – to other states where associate-level licensure is already in place.

Another issue that causes financial hardship and delay during this post-doctoral period is the timing of the license application process. Currently, according to the Board of Psychology's administrative rules, applicants must complete their 1-year post-doctoral experience; apply for licensure; then be "seated" for the required examination (the EPPP); then pass it before they can

be licensed. This process can lead to a many-month delay before they are allowed to practice as a psychologist. Many licensure candidates apply to take the exam in another state (incurring further personal expense) so that they can expedite the board of psychology review process by having their passing grade in hand when their application is reviewed by the Hawaii Board. Accordingly, this proposal requires the board to allow licensure candidates to take the exam as soon as they complete their doctorate.

SB2829 also addresses unnecessary administrative barriers experienced by state-employed psychology post-docs. Current law allows non-licensed individuals who have earned their doctoral degree to be hired into state psychologist positions before licensure; however, these employees must obtain licensure within two years of hire, and then cease practicing if the license is not obtained in that time period. The state has interpreted this to mean they must be terminated from their state position if this occurs.

During the pandemic, the Board of Psychology did not meet for a prolonged period to approve several candidates' licenses, and several state-employed psychologists lost their jobs due to no fault of their own. Those terminated included practitioners at the state hospital and in the Child and Adolescent Mental Health Division. This is a wholly avoidable hardship for these practitioners, and the clients they were serving. The language proposed in this bill would allow the board to give a state-employed psychologist more time to obtain their license under such extenuating circumstances; and would also help others who may need more time due to, for example, the need for maternity or other medical leave.

The pandemic has had devastating effects not only to our public health system and economies, but to our collective mental health. The disruptions, anxieties, depression, substance abuse, and chronic stress that COVID has created in our lives have brought many in our community to the brink of emotional collapse. The need for mental health services could not be more apparent or pressing; and we must all do what is necessary to improve access to professional treatment. We all deserve access to quality mental health treatment – and this bill is a highly effective, low-cost way of addressing this need which is in keeping with modern regulatory approaches in other jurisdictions.

Thank you for the opportunity to provide input on this important bill, and for your commitment to Hawaii's mental health.

Sincerely,

A handwritten signature in cursive script that reads "Alex Lichton, Ph.D.".

Alex Lichton, Ph.D.

Chair, HPA Legislative Action Committee

COMMITTEE ON HEALTH

Senator Jarrett Keohokalole, Chair,
Senator Rosalyn Baker, Vice Chair

DATE: February 4, 2022 1:00P.M. - VIA VIDEO CONFERENCE

Testimony in Support of SB 2829

The National Association of Social Workers – Hawai'i (NASW- HI) strongly supports SB2829 relating to health, which establishes associate level licenses for Psychologists and Marriage and Family Therapists, and clarifies the ability of a Licensed Social Worker to bill under the supervision of a Licensed Clinical Social Worker.

This bill does several important things:

It creates an Associate level of Licensure for Psychologists and Marriage and Family Therapists, based on the current LSW level of licensure for social workers, which will allow for a mechanism by which clinicians who have completed their graduate school courses can be compensated while they are receiving their required period of supervised practice.

It also clarified that a LSW social worker can bill insurance under the clinical license and supervision of an LCSW.

These steps will create the opportunity to open up more clinicians in supervision to see clients in the very near future, which is vital given the ongoing pandemic and the current shortage of clinical level mental health providers, and long wait times to get in to therapy as a client.

It also opens the door to more diverse candidates in the field of mental health. Few people can afford to work for two years either unpaid or underpaid, as they complete their clinical supervision, which leads to an overrepresentation in our profession of people from affluent backgrounds and an underrepresentation of Black, Indigenous, and People of Color (BIPOC) in the fields of social work, Psychology, and Marriage and Family Therapy.

This bill can help encourage people who have completed their graduate education in Hawai'i to stay and work here, if they can receive a living wage. We strive to educate students in cultural competency and the importance of understanding the community in which they practice, to create clinicians who will thrive here, then do very little to help keep them in state, after graduation.

It also provides the opportunity for those in supervision to get experience working in private practices and doing more direct therapy, under supervision, which serves to strengthen them as clinicians when they reach the level of independent practice.

Thank you for the opportunity to provide this testimony in support.

Sincerely,

 , MSW, LCSW

Sonja Bigalke-Bannan, MSW, LCSW
Executive Director,
National Association of Social Workers- Hawai'i Chapter



WPH
Wellness Partners Hawaii, Inc.

850 W Hind Dr., Suite 116
Honolulu, HI 96821
www.wellnesspartnershawaii.com
info@wellnesspartnershawaii.com
Office: 808.379.6656
Fax: 808.379.3750

To: The Honorable Senator Jarrett Keohokalole, Chair of the Senate Committee on Health

From: Wellness Partners Hawaii, Inc.

Subject: SB2829 – Relating to Mental Health

Hearing: February 4, 2022, 1p.m.

Aloha Senator Keohokalole, Chair; Senator Baker, Vice Chair; and Committee Members of the Senate Committee on Health,

Thank you for the opportunity to provide testimony on SB2829. Wellness Partners Hawaii, Inc. is in **strong support** of this bill. While our communities have been fighting the primary pandemic of Covid-19, it has been extremely clear that the secondary pandemic of mental health has risen to crisis levels in our State. This bill expands the number of eligible mental health providers to meet this growing need. **Our request for this bill would be to make it clear that these associate licenses would require employment** with a local company and not provide services as independent contractors as this could impact liability and safe patient/client care.

Wellness Partners Hawaii Inc. is the first nurse practitioner owned and operated telemental health clinic in the State of Hawaii. Our diverse team is comprised of psychiatric mental health nurse practitioners, psychologists, licensed clinical social workers, licensed marriage and family therapists, as well as licensed mental health counselors. We work with patients/clients on all islands. Our company significantly expanded our number of providers during the past two years to meet the growing need. While we have been approached by professionals who are working to meet their clinical hours requirements for licensure, we have regretfully turned these professionals away due to lack of licensure.

At this time, we have been forced to slow down on accepting new patients/clients because our therapists' schedules have nearly maxed out. We continue to work to recruit new qualified providers on a rolling basis, but the current pool of licensed providers is spread thin as it is. Our team has excellent mentors on staff that could provide the support and clinical mentorship needed for their success.

Wellness Partners Hawaii, Inc. will continue to provide excellent mental health care on all Hawaiian Islands and your support for this bill's passage will allow more professionals to help meet the growing mental health needed in our State.

Respectfully,
Dr. Bradley Kuo
Owner/Provider, Wellness Partners Hawaii, Inc.

SB-2829

Submitted on: 2/2/2022 1:20:14 PM

Testimony for HTH on 2/4/2022 1:00:00 PM

Submitted By	Organization	Testifier Position	Remote Testimony Requested
Toby Broido	Individual	Comments	Yes

Comments:

To Whom It May Concern,

University is costly. Even in state tuition. The people that pursue health and human services career do so because they care about the population at large, enjoy helping, and want to grant each individual in their community an opportunity to flourish and, at the very least, assist everyone in meeting their needs. Bar none, MHC's should be included in this bill not only for their benefit but for the benefit of the community. If you look around any city/larger town in Hawaii there is a very evident mental health crisis happening. There are people on the streets with dire psychological conditions, drug addiction, etc, who have run out of options within the current system. If this bill were to pass with the inclusion of Mental Health Counselors, it would be easier for those to people to find assistance, particularly if those MHC's were able to bill state insurance. This doesn't only help the chronically homeless though, this helps everyone in the state. It helps those looking for a therapist who have sought so tirelessly and are forced to go out of state and pay a higher price because of it. There are so few therapists in Hawaii taking new clients and potential clients are often placed on wait lists, sometimes for up to 5 months. If they are added to this bill it would allow these newly graduated students an opportunity to attain what they've just worked so hard for. There are practicum hours they must complete which are costly, rigorous, and wildly informative. They gain experience and put in the necessary time in order to gain a full scope of knowledge about what being a clinician entails. From my understanding, graduate school prepares MHC's to be billable counselors at the time of their graduation, and it should be reflected in this bill.

Samantha Bailo- Case Manager, Master's student

February 3, 2022

Testimony regarding Bill 2829

As a case manager at a mental health agency in our local community, I am aware of the massive need for mental health clinicians in both Hilo and the whole state. I am also a master's student at the University of Hawai'i, Hilo. The Counseling Psychology program prepares us to work as Mental Health Counselors in the state of Hawai'i.

One of the challenges post-graduation from mental health training programs is that you must earn 3,000 supervised hours to become licensed eligible. In many other states (such as Washington, California, and D.C.) a provisional license is granted once passing a state exam, then hours are accrued for up to two years and you apply for your state license. In the state of Hawaii we don't have a provisional license yet. The consequences to our community due to this gap in licensure are endless. **Many private and group practice providers are unable to hire unlicensed providers because they cannot bill insurance companies for their services.** This means graduates are typically forced to take low/underpaid positions in larger agencies (some of these are wonderful positions but the options are limited). 30% of these graduates wind up leaving the field due to not making enough money to support themselves.

This bill would allow MFTs and Psychologists to earn an associate/provisional license so that they can bill insurance companies for their work (provided they are supervised, payment may be less than fully licensed providers). This is an important piece of legislation as it will open the doors to more opportunities for trained mental health professionals and it increases access to mental health care to the citizens of the State.

Licensed Marriage and Family Therapists, Licensed Mental Health Counselors, Licensed Clinical Social Workers, and Licensed Psychologists all use the "Psychotherapy" CPT code for insurance billing purposes.

However, Mental Health Counselors are not currently included in the current bill. I am in support of bill SB2829 with the amendment to include Mental Health Counselors (future Licensed Mental Health Counselors- LMHCs) to this bill. An amendment has been submitted as testimony by Justin Miller, LMHC in the state of Hawaii.

If this bill is to increase access to mental health services, then it is imperative that Mental Health Counselors are not left out in this bill.

Thank you for your time,

Samantha Bailo

Testimony of the Hawaii Board of Psychology

**Before the
Senate Committee on Health
Friday, February 4, 2022
1:00 p.m.
Via Videoconference**

**On the following measure:
S.B. 2829, RELATING TO MENTAL HEALTH**

WRITTEN TESTIMONY ONLY

Chair Keohokalole and Members of the Committee:

My name is Jill Oliveira Cabbab, and I am the Legislative Committee (Legislative Committee) Chairperson of the Board of Psychology (Board). I apologize for not being able to attend the hearing to present the Board's testimony. The Board is meeting during this hearing.

The purposes of this bill are to: (1) establish a provisional or associate level licensure requirements for marriage and family therapists and psychologists and authorizes insurance reimbursements in certain circumstances; and (2) allow psychologist license applicants to sit for the licensing examination before completing other requirements.

The Board will review this bill at its next publicly noticed meeting on February 4, 2022. In the meantime, the Legislative Committee offers the following comments on Part II of the bill only:

- 1) Section 11 of the bill creates a new license type with the inclusion of a provisional associate license for purposes of reimbursement. For the Committee's information, Hawaii Revised Statutes section 26H-2, provides that "the regulation and licensing of professions and vocations shall be undertaken only where reasonably necessary to protect the health, safety, or welfare of consumers of the services; the purpose of regulation shall be the protection of the public welfare and not that of the regulated profession or vocation." Creating a license for the purpose of reimbursement is not consistent with HRS section 26H-2. Further, the Legislative Committee

would like to note that the implementation of any new license would require additional staffing and funding for the Department of Commerce and Consumer Affairs' Professional and Vocational Licensing Division.

- 2) Page 15, lines 4 to 8, provides that the provisional license be valid for up to three (3) years: two (2) years with the possibility of renewing said license f for an additional year. Currently, applicants for a permanent psychologist license are required to obtain one (1) year (1900 hours) of post-doctoral experience. This provision would provide the ability of provisional license holders to practice for an additional 2 years beyond what is required to obtain a permanent license.
- 3) Page 15, lines 9 to 15, authorizes a supervised licensed associate to be eligible for insurance reimbursement. The Legislative Committee is unsure whether practice sites with supervised licensed associate psychologists would be reimbursed by insurance providers.
- 4) Page 23, lines 2 to 5, allows a holder of a doctoral degree in clinical, counseling, and school psychology to sit for the required licensure examination required for licensure prior to meeting the pre-doctoral internship and postdoctoral experience requirements. This is very concerning and is in direct conflict with the Board's administrative rules.
- 5) Page 23, lines 15 to 18, the Legislative Committee seeks clarification regarding the length of time the waiver may be valid. As drafted, the waiver could be extended indefinitely.
- 6) Page 25, lines 10 to 13, authorizes the Board to grant waivers or extensions to licensees who are unable to comply with its continuing education requirements. The Legislative Committee notes that this language is unnecessary since HRS section 465-11(f) provides a remedy for such circumstances.

Thank you for the opportunity to testify on this bill.

SB-2829

Submitted on: 2/3/2022 11:20:08 AM

Testimony for HTH on 2/4/2022 1:00:00 PM

Submitted By	Organization	Testifier Position	Remote Testimony Requested
Vishwani Ram-Souza	Testifying for Elemental Guidance, LLC	Support	No

Comments:

[COMMITTEE ON HEALTH](#)

Senator Jarrett Keohokalole, Chair

Senator Rosalyn H. Baker, Vice Chair

DATE: February 4, 2022 1:00 P.M. - VIA VIDEO CONFERENCE

Testimony in Strong Support of SB2829 RELATING TO MENTAL HEALTH

I strongly support SB2829 as a critical tool in meeting the overwhelming demand for quality mental health services, particularly during and following the prolonged pandemic. Here's a snapshot of current ratios of clients/patients to mental health providers in Hawai'i:

Hawai'i 320:1

Honolulu 370:1

Kauai 480:1

Maui 550:1

Moloka'i has no registered providers.

Obviously, this demand far exceeds the viable supply of mental health providers. SB2829 would establish provisional or associate-level licensure requirements for Marriage and Family Therapists and Psychologists, creating a regulatory framework that would encourage relevant and quality training to associate-level providers by authorizing insurance reimbursement for supervised care provided by these post-degree/pre-licensed mental health professionals during the 1-2 year period they are completing required

supervised practice hours under the mentorship/guidance of an independently licensed mental health professional.

In 23 other states, associate-level licensure is already established as common practice and provides not only expands access for clients to providers, but also creates a viable career path for locals interested in pursuing a career as a mental health professional, but who otherwise might not be able to actualize this career due to current restrictions that often force post-graduate/pre-licensed providers to work in contexts that do not provide sufficiently relevant experience (e.g., prisons, substance abuse centers, case management, etc.) and/or they must work for sub-part wages or pro bono (while also paying a supervisor to oversee their work).

The current bill would be a critical reform to Hawai'i's licensing statutes that would not only modernize our processes, but ultimately improve the quality of care provided to state residents by creating a systemic of accountability, a viable career path for locals who can better connect with local clients, and who in turn, will be more likely to actually utilize mental health services. Moreover, this bill will reduce the loss of potential future mental health professionals to other careers or one of the other 23 states that have already modernized their licensing laws, which in turn will contribute to the state economy through associate licensing fees, taxes from wages earned by associate-level licensees, and local purchases made by these licensees.

Overall, many aspects of our mental health system are deeply flawed, understaffed, and are in no way prepared to manage the onslaught of mental health issues that the general population are experiencing during and after this pandemic. The consequences of this pandemic, both short- and long-term, in terms of mental health, could be significant and could weaken the Hawai'i health care system.

If we don't develop the means to stave off and/or treat these mental health issues, individuals and families will suffer even more than they already do. In all areas of life, untreated mental health issues can become chronic and with crippling, long-term effects.

These circumstances call for a change in the paradigm and practices of mental health care. Our current model of mental health care does not adequately address the complex challenges of the existing circumstances. We need to re-vision current models of mental health care delivery. To do this, we let's be creative and flexible in how we provide mental health services to protect our community, by taking appropriate action now and quickly. Mental health care cannot be an afterthought.

Thank you for the opportunity to provide this testimony in strong support of this bill.

Sincerely,

Vishwani Ram-Souza, MA, LMFT
Elemental Guidance, LLC



The Hawaiian Islands Association
for Marriage and Family Therapy
(HIAMFT)

We know systems.
We know relationships.
We know FAMILY MATTERS.

[COMMITTEE ON HEALTH](#)

Senator Jarrett Keohokalole, Chair
Senator Rosalyn H. Baker, Vice Chair

DATE: February 4, 2022 1:00 P.M. - VIA VIDEO CONFERENCE

Testimony in Strong Support of SB2829 RELATING TO MENTAL HEALTH

The Hawaiian Islands Association for Marriage and Family Therapy (HIAMFT) strongly supports SB2829 as a critical tool in meeting the overwhelming demand for quality mental health services, particularly during and following the prolonged pandemic. Here's a snapshot of current ratios of clients/patients to mental health providers in Hawai'i:

Hawai'i 320:1

Honolulu 370:1

Kauai 480:1

Maui 550:1

Moloka'i has no registered providers.

Obviously, this demand far exceeds the viable supply of mental health providers. SB2829 would establish provisional or associate-level licensure requirements for Marriage and Family Therapists and Psychologists, creating a regulatory framework that would encourage relevant and quality training to associate-level providers, as well as increase the availability of therapists to our state population.

In 23 other states, associate-level licensure is already established as common practice and provides not only expanded access for clients to providers, but also creates a viable career path for locals interested in becoming a mental health professional, but who otherwise might not be able to actualize this career due to current restrictions. These statutory restrictions often force post-graduate/pre-licensed providers to work in contexts that do not provide sufficiently relevant therapy experience (e.g., prisons, substance abuse centers, case management, etc.). Oftentimes, these post-graduate/pre-licensed providers must work for sub-par wages or pro bono (while also paying a supervisor to oversee their work).

Authorizing some level of insurance reimbursement for supervised care provided by these post-degree/pre-licensed mental health professionals during the 1-2 year period they are completing required supervised practice hours under the mentorship/guidance of an independently licensed mental health professional would help increase the pool of therapists to help meet the mental health needs of Hawai'i residents.

This current bill would be a critical reform to Hawai'i's licensing statutes that would not only modernize our processes, but ultimately improve the quality of care provided to state residents by creating a system of accountability and a more viable career path for local therapists who understand local culture and can better connect with local clients. Moreover, this bill will reduce the loss of potential future mental health professionals to other careers or to one of the other 23 states that have already modernized their licensing laws. Providing an increased level of support to these developing therapists would in turn allow them to contribute to the state economy through associate licensing fees, taxes from wages earned by associate-level licensees, and local purchases made by these licensees.

Overall, many aspects of our mental health system are deeply flawed, understaffed, under-resourced, and are in no way prepared to manage the onslaught of mental health issues that the general population are experiencing now and after this pandemic. The consequences of this pandemic, both short- and long-term, in terms of mental health, could be significant and could weaken the overall Hawai'i health care system. If we don't develop the means to stave off and/or treat these mental health issues, individuals and families will suffer even more than they already have. In all areas of life, untreated mental health issues can become chronic with crippling, long-term effects.

These circumstances call for a change in the paradigm and practices of mental health care. Our current model of mental health care does not adequately address the complex challenges of the existing circumstances. We need to re-vision current models of mental health care delivery. To do this, we are asking the larger community to be creative and flexible in how we provide mental health services to better protect our people, by taking appropriate action now and quickly. Mental health care cannot be an afterthought.

Thank you for the opportunity to provide this testimony in strong support of this bill.

Sincerely,

S. Joy Quick, MA, LMFT, CSAC

Secretary, The Hawaiian Islands Association for Marriage and Family Therapy



COMMITTEE ON HEALTH

Senator Jarrett Keohokalole, Chair
Senator Rosalyn H. Baker, Vice Chair

DATE: February 4, 2022 1:00 P.M. - VIA VIDEO CONFERENCE

Testimony in Strong Support of SB2829 RELATING TO MENTAL HEALTH

Ho'oulu Counseling strongly supports SB2829 as a critical tool in meeting the overwhelming demand for quality mental health services, particularly during and following the prolonged pandemic. Here's a snapshot of current ratios of clients/patients to mental health providers in Hawai'i:

Hawai'i 320:1

Honolulu 370:1

Kauai 480:1

Maui 550:1

Moloka'i has no registered providers.

This demand far exceeds the viable supply of mental health providers. SB2829 would establish provisional or associate-level licensure requirements for Marriage and Family Therapists and Psychologists, creating a regulatory framework that would encourage relevant and quality training to associate-level providers by authorizing insurance reimbursement for supervised care provided by these post-degree/pre-licensed mental health professionals during the 1-2 year period they are completing required supervised practice hours under the mentorship/guidance of an independently licensed mental health professional.

In 23 other states, associate-level licensure is already established as common practice and provides not only expands access for clients to providers, but also creates a viable career path for locals interested in pursuing a career as a mental health professional, but who otherwise might not be able to actualize this career due to current restrictions that often force post-graduate/pre-licensed providers to work in contexts that do not provide sufficiently relevant experience (e.g., prisons, substance abuse centers, case management, etc.) and/or they must work for sub-part wages or pro bono (while also paying a supervisor to oversee their work).

The current bill would be a critical reform to Hawai'i's licensing statutes that would not only modernize our processes, but ultimately improve the quality of care provided to state residents by creating a systemic of accountability, a viable career path for locals who can better connect with local clients, and who in turn, will be more likely to actually utilize mental health services. Moreover, this bill will reduce the loss of potential future mental health professionals to other careers or one of the other 23 states that have already modernized their licensing laws, which in turn will contribute to the state economy through associate licensing fees, taxes from wages earned by associate-level licensees, and local purchases made by these licensees.

In rural communities of Hawaii, access to appropriate mental health services is challenging for those that require continued and on-going support. That, and in light of the consequences of the COVID-19 pandemic, current licensed providers have difficulty filling the community's needs. Untreated mental health issues can become chronic and crippling with long-term effects.

We call for a change in the paradigm and practices of mental health care. Our current model of mental health care does not adequately address the complex challenges of the existing circumstances. We need to re-vision current models of mental health care delivery. To do this, we let's be creative and flexible in how we provide mental health services to protect our community, by taking appropriate action now and quickly. Mental health care cannot be an afterthought

Sincerely,

A handwritten signature in black ink that reads "Catherine Okumura". The script is cursive and fluid.

Catherine Okumura, LMFT

Ho'oulu Counseling LLC

(808) 465-3005

Fax (808) 204-1717

www.hooulucounseling.com

SB-2829

Submitted on: 2/3/2022 12:36:29 PM

Testimony for HTH on 2/4/2022 1:00:00 PM

Submitted By	Organization	Testifier Position	Remote Testimony Requested
Damien Young	Testifying for Kauhale Healing LLC	Support	No

Comments:

To Whom it May concern:

My name is Damien Young and I am a licensed marriage and family therapist in the state of Hawaii practicing out of Kailua Kona. I am writing in support of SB2829 and feel strongly that passing this bill will be in the best interest of all Hawaii residents. It is currently and historically difficult for many residents to obtain mental health services due to a lack of providers and a limited number of available providers who can bill insurance. The majority of therapists on the big island have full practices with waiting lists, especially those who take insurance. As such, mental health support that should be readily available and accessible to all residents instead is a rare commodity, which is devastating to our community especially in these times when mental health issues are more prevalent than ever. Experienced providers like myself are ready and willing to take on pre-licensed interns and supervise and mentor them towards their licensure, meanwhile increasing the available providers in our area, however our inability to bill insurance for services rendered essentially makes this impossible except for those who are wealthy and can afford to pay out of pocket. The state of Hawaii has already deemed it legal and ethical for a pre-licensed provider to provide mental health services as long as they are being supervised, and additionally the state of Hawaii allows the billing of insurance for these services as long as they are provided to a minor. We are seeking to expand what is allowed thus enabling pre-licensed providers under supervision to serve our communities that are in desperate need of more mental health services.

Thank you for your consideration.

SB-2829

Submitted on: 2/1/2022 2:23:16 PM

Testimony for HTH on 2/4/2022 1:00:00 PM

Submitted By	Organization	Testifier Position	Remote Testimony Requested
david sprouse	Individual	Support	No

Comments:

Aloha,

Thank you for considering this bill. The journey to becoming a fully licensed clinician is long, expensive and painstaking. Only 8-15% of the population obtains a graduate degree which is required in this field en route to licensure. Traditionally, after the graduate degree is complete, there are 2 to 3 years of supervised experience required before an exam and additional processing. While this process is time-honored and respected, it does often sadly leave some otherwise skilled future clinicians without a path to see that come to fruition. During the pandemic, the need for mental health services has become higher and abundantly critical. Having an associate license would serve the community well. It would help the future counselor gain access to paid employment at a rate closer to a living wage by being able to bill insurance for their service. This would help clients access funded care during a time of high need. This would be a win-win for the community, clinician and employers while still respecting the process of full licensure by having a feasible option in the interim between completion of graduate education and the eventual full licensure.

Mahlao for your considering to this opportunity to help the community as a whole.

SB-2829

Submitted on: 2/1/2022 2:51:53 PM

Testimony for HTH on 2/4/2022 1:00:00 PM

Submitted By	Organization	Testifier Position	Remote Testimony Requested
Britt Young	Individual	Support	No

Comments:

Aloha!

Thank you for reading my testimony.

I am in support of this bill for many reasons, but most importantly because it will increase access to mental health care for our community and provide better training and supervision for upcoming mental health professionals.

Currently, most Post-Masters Graduates are only allowed to work in privately-funded agencies or the prison system. Unfortunately, the retention is low because of the low pay, and many leave the mental health industry altogether because they cannot afford to get this much needed experience and live a comfortable life. Because individuals need approximately 2,000 hours of Post-Masters Graduate experience to be fully-licensed, they must work at these agencies or prisons for about two years.

As a business manager at Xplor Counseling, LLC, I get inquiries all the time from excited Post-Masters Graduates who are eager to work with us. However, I must turn them away because insurers will not reimburse for their services (and, in Hawaii, most clients seeking mental health services use private or public insurance). Simultaneously, I put needy clients on a 3-4 month wait list for a Licensed clinician.

The benefits are wide-ranging:

--These Associate level clinicians can see clients who would otherwise be sitting on 3-5 month wait lists (which is the current wait list for many practices)

--They have already finished all their coursework INCLUDING a practicum, where they have worked directly with clients. They have also passed a National Exam.

--They would learn how to work in a private practice setting, which is where many will be after they complete their hours

--Clients in-need would have the services they desperately need, especially those in low income brackets. Currently, not-fully-licensed clinicians see clients on a self pay basis, but only those with the financial means can afford this.

--Group practices would be able to hire those Associate Level clinicians as Licensed Clinicians after they complete their hours at the practice, and, therefore, clients would have continuity of care

--Associate Level clinicians could make a livable wage and be motivated to stay in the mental health industry

--If this were in place, more undergraduates would be motivated to enroll in Masters programs in mental health

--Post-Masters Graduates would have more choice about where they would like to work after graduation

We are in a mental health crisis, and we need every qualified mental health professional trying to help our community. This is an important way toward that goal, as many states have successfully implemented this Licensure status. Please consider creating and supporting legislation that would create this important Licensure track, as we all know good mental health is a cornerstone of a successful community.

Mahalo,

Britt Young, M.A., LMFT

SB-2829

Submitted on: 2/1/2022 4:42:18 PM

Testimony for HTH on 2/4/2022 1:00:00 PM

Submitted By	Organization	Testifier Position	Remote Testimony Requested
Jodie E. Gerson	Individual	Support	No

Comments:

As a current doctoral student, allowing postdocs to sit for the EPPP allows us more opportunity to take the directly following internship, when the academic material is still fresh. By allowing us to take the exam early will not prevent us or hinder us from continue to accumulate past doc hours. Those hours are vital to our education and specialities. By allowing us the opportunity to sit for the exam following completion of internship, it allows us to receive higher stipend than what we receive as a post doc.

SB-2829

Submitted on: 2/1/2022 9:06:15 PM

Testimony for HTH on 2/4/2022 1:00:00 PM

Submitted By	Organization	Testifier Position	Remote Testimony Requested
Tamar Kreps	Individual	Oppose	No

Comments:

I am a Mental Health Counselor-in-training, and I cannot understand why Mental Health Counselors have specifically been left out of this bill. We do precisely the same work as other clinicians. Our license should not be left out of the opportunity to support ourselves and address the very great need in Hawaii for high quality mental health services. Do NOT pass this bill and then plan to add the MHC license later; why should we be specifically excluded instead of being added from the beginning? The mental health profession as well as the public both suffer when mental health practitioners are barred from being able to provide the care and service we are trained to give and so fervently wish to give to our communities. Let's do this right and include ALL the professionals who are willing and able to support the people of Hawai'i!

Tamar Kreps
Student, UH Hilo MA in Counseling Psychology

SB-2829

Submitted on: 2/1/2022 9:34:03 PM

Testimony for HTH on 2/4/2022 1:00:00 PM

Submitted By	Organization	Testifier Position	Remote Testimony Requested
Janet Breckenridge	Individual	Comments	No

Comments:

Please include mental health counselors. We are helpers, too. We fulfill the same needs that other MFT's, social workers, and psychologists provide. As someone who is studying to be licensed as a MHC, it would be greatly appreciated if we could seek payment during our internship journey to become licensed. I urge you to include mental health counselors in this bill so that more people can be helped and can be benefitted.

SB-2829

Submitted on: 2/2/2022 8:24:12 AM

Testimony for HTH on 2/4/2022 1:00:00 PM

Submitted By	Organization	Testifier Position	Remote Testimony Requested
Hannah LeMans	Individual	Support	No

Comments:

Aloha e,

My name is Hannah LeMans and I am currently a student at the University of Hawai'i at Hilo under the Counseling master's program, planning to graduate this May 2022. I am writing this testimony in support of bill SB2829. After graduating, I will be working full time as a master's level mental health counselor at the current agency I am working for as an unpaid intern. As many residents of Hawai'i know, the cost of living is extraordinarily high. Being that an unlicensed mental health counselor is currently unable to bill for insurance, this severely limits the capacity to continue to assist those desperately needing services and continued support when they themselves cannot afford to pay out of pocket. If this bill were to be passed and extended to mental health counselors, this could greatly affect the amount of practitioners who stay in the field to assist those in our community who need the assistance. I myself may be limited in what I can offer until I am able to be licensed, despite years of experience in the field as a mental health professional outside of my current program. If I were to have the ability to bill for insurance, I could continue to work with those who by no means do not have the financial means to pay for counseling out of pocket when they can barely afford the cost of living in this state. By passing SB2829 and including mental health counselors, the residents of Hawai'i may receive the support and treatment they need which will overall make a positive impact on our community.

Mahalo for your consideration,

Hannah LeMans

SB-2829

Submitted on: 2/2/2022 11:23:21 AM

Testimony for HTH on 2/4/2022 1:00:00 PM

Submitted By	Organization	Testifier Position	Remote Testimony Requested
Devin Yuen	Individual	Support	No

Comments:

My name is Devin Yuen, I am currently on Internship to complete the Doctorate in Clinical Psychology program at Hawaii School of Professional Psychology at Chaminade University. I am in support of this bill as it has an impact on not only my own career path, but also the paths that my classmates follow. I am currently facing issues of securing a postdoctoral training position due to training sites requiring a license to help fund the position. I have received my Master's degree through my doctoral program and due to the education plan being geared to the doctoral level license, I am having difficulty qualifying for the LMHC licensing. I have already completed the educational course requirements required for the doctoral license and I will have acquired more postgraduate hours of experience in the field than required for the LMHC license. Having a provisional or an associate-level license would aid in all graduates of an APA accredited doctoral program to secure postdoctoral training positions.

SB-2829

Submitted on: 2/2/2022 11:34:51 AM

Testimony for HTH on 2/4/2022 1:00:00 PM

Submitted By	Organization	Testifier Position	Remote Testimony Requested
Isabella Arrieta	Individual	Comments	No

Comments:

My testimony is in regards to Mental Health Counselors being left out of this bill as it does pertain and would help bring in more Licensed Mental Health Counselors to the state of Hawai'i, which has been seen as a need not only due to recent events with the coronavirus pandemic in 2019 but with the increase in mental health dialogue. As many of you know, one of the challenges post-graduation from mental health training programs is that you must earn 3,000 supervised hours to become licensed eligible. However, many private and group practice providers are unable to hire unlicensed providers because they cannot bill insurance companies for their services. This means graduates are typically forced to take low/underpaid positions in larger agencies (some of these are wonderful positions but the options are limited). This bill would allow MFTs and Psychologists to earn an associate/provisional license so that they can bill insurance companies for their work (provided they are supervised, payment may be less than fully licensed providers). This is an important piece of legislation as it will open the doors to more opportunities for trained mental health professionals and it increases access to mental health care to the citizens of the State. The addition of Mental Health Counselors would be beneficial to the entire state of Hawai'i.

SB-2829

Submitted on: 2/2/2022 11:44:40 AM

Testimony for HTH on 2/4/2022 1:00:00 PM

Submitted By	Organization	Testifier Position	Remote Testimony Requested
Christina Swafford	Individual	Comments	No

Comments:

To Whom it May Concern,

My name is Christina Swafford, and I am a current student in the Univeristy of Hawaii at Hilo's master's in counseling psychology program. As I enter my second semester, I have been considering where I will be after I graduate next year. While including MFTs and Psychologists in this bill is an excellent move in the right direction, I find it interesting that aspiring LMHCs have not been included. The inclusion of those who have received a degree in counseling in this associate/provisional license would be extremely helpful for individuals, like myself, who plan to work toward full licensure after graduation. Not only would this be important for aspiring counselors, but it would increase accessibility to mental health resources for the wider community. I hope that you take my testimony into consideration when discussing this bill.

Thank you for your time and consideration,

Christina Swafford

SB-2829

Submitted on: 2/2/2022 12:01:00 PM

Testimony for HTH on 2/4/2022 1:00:00 PM

Submitted By	Organization	Testifier Position	Remote Testimony Requested
Andrew N. Polloi	Individual	Support	No

Comments:

Aloha,

I am submitting my written testimony in support of SB2829. I am a licensed mental health counselor in the State of Hawaii and believe this bill will allow recent graduates to immediately work in the state to help with the growing need for mental health professionals. I would like to also propose that LMHC's be included in the bill so that they too can benefit from being able to join the mental health work field immediately after graduation as they work towards their licensure. Please consider amending the bill to include LMHCs. Mahalo for you time and God bless.

Andrew N. Polloi

Steve Herman, Ph.D.

February 2, 2022

In Consideration of SB2829

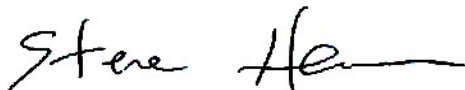
I am a professor in the Psychology Department at the University of Hawaii at Hilo and a licensed Hawaii psychologist. I teach graduate students in our Master's Program in Counseling Psychology. Our program prepares graduates to apply for licensure as Licensed Mental Health Counselors (LMHCs). Like graduates of master's programs in Marriage and Family Therapy (MFTs), our graduates are currently required to have at least two post-graduation years of supervised work experience before they can apply for full licensure.

SB2829 aims to establish provisional or associate level licensure requirements for MFTs and Psychologists in the years prior to full licensure. A primary purpose of the Bill is to authorize insurance reimbursements to associate license holders in certain circumstances. Amending this bill to provide provisional associate licensure to graduates of master's programs that prepare students for licensure as LHMCs would benefit the people of the State of Hawaii for exactly the same reasons that providing this opportunity to graduates of MFT programs does.

Therefore, I am writing **in strong support of SB2829 as long as it is amended to also cover graduates of master's programs that meet Hawaii standards for the training of LHMCs.**

Furthermore, to make this bill consistent with HRS Chapter 453D, I urge you to ensure that the amended Bill includes language that authorizes holders of associate-level LHMC licenses to receive clinical supervision from licensed Hawaii mental health professionals who are either LHMCs, psychologists, clinical social workers, advanced practice registered nurses with a specialty in mental health, marriage and family therapists, or physicians with a specialty in psychiatry (<https://cca.hawaii.gov/pvl/files/2013/08/453D-MENTAL-HEALTH-COUNSELORS-111620.pdf>).

Mahalo,



Steve Herman, Ph.D.

Associate Professor of Psychology, the University of Hawaii at Hilo

SB-2829

Submitted on: 2/2/2022 12:31:09 PM

Testimony for HTH on 2/4/2022 1:00:00 PM

Submitted By	Organization	Testifier Position	Remote Testimony Requested
Angela Chronis	Individual	Comments	No

Comments:

Many private and group practice providers are unable to hire unlicensed providers because they cannot bill insurance companies for their services. This means graduates are typically forced to take low/underpaid positions in larger agencies (some of these are wonderful positions but the options are limited). This bill would allow MFTs and Psychologists to earn an associate/provisional license so that they can bill insurance companies for their work (provided they are supervised, payment may be less than fully licensed providers), however **Mental Health Counselors should be added to the bill.** This is an important piece of legislation as it will open the doors to more opportunities for trained mental health professionals and it increases access to mental health care to the citizens of the State but please **add mental health counselors to the bill.**

SB-2829

Submitted on: 2/2/2022 12:39:00 PM

Testimony for HTH on 2/4/2022 1:00:00 PM

Submitted By	Organization	Testifier Position	Remote Testimony Requested
Shaila Lawrence	Individual	Comments	No

Comments:

I am writing in strong support of SB2829 as long as it is amended to also cover graduates of master's programs that meet Hawaii standards for the training of LHMCs.

CHARMAINE HIGA-MCMILLAN, PHD
LICENSED PSYCHOLOGIST, #1010
HILO, HI 96720

In Consideration of SB2829

February 2, 2022

I am a licensed psychologist and I am a professor in the Department of Psychology at the University of Hawaii at Hilo. I am also currently serving as the Director of the [MA Program in Counseling Psychology \(Clinical Mental Health Specialization\)](#) at the UH Hilo. Our program began in 2005 and coincided with the creation of the Mental Health Counselor license in the State (both were created to try to address the lack of qualified mental health providers). We have a rigorous 60 credit program that is designed to prepare students to help meet the mental health service needs of the diverse and multicultural populations in Hawai'i, and we were recently nationally reaccredited through the [Masters in Psychology and Counseling Accreditation Council](#) (through June 2029).

SB2829 aims to establish provisional or associate level licensure requirements for Marriage and Family Therapists (MFT) and Psychologists in the years prior to full licensure. A primary purpose of the Bill is to authorize insurance reimbursements to associate license holders in certain circumstances. This Bill not only creates more job opportunities for pre-licensed MFT and Psychologists, but it will also improve access to mental health care for the citizens of Hawaii. Unfortunately, the Bill in its current form, has left off Mental Health Counselors.

Amending this bill to provide provisional associate licensure to graduates of master's programs that prepare students for licensure as LHMCs would benefit the people of the State of Hawaii for exactly the same reasons that providing this opportunity to graduates of MFT programs does. Therefore, **I am writing in strong support of SB2829 as long as it is amended to also cover graduates of master's programs that meet Hawaii standards for the training of LHMCs.**

SB-2829

Submitted on: 2/2/2022 1:22:22 PM

Testimony for HTH on 2/4/2022 1:00:00 PM

Submitted By	Organization	Testifier Position	Remote Testimony Requested
Rex Like	Individual	Comments	No

Comments:

I am writing in strong support of SB2829 as long as it is amended to also cover graduates of master`s programs that meet Hawaii standards for the training of LHMCs.

Thank you,

Rex Like (808)-640-9988

SB-2829

Submitted on: 2/2/2022 1:37:04 PM

Testimony for HTH on 2/4/2022 1:00:00 PM

Submitted By	Organization	Testifier Position	Remote Testimony Requested
Stephanie Whiting	Individual	Support	No

Comments:

The purpose of SB2829 is to expand access to high quality mental health services for the citizens of Hawaii. It is critical that SB2829 include **mental health counseling graduates**. This inclusion would allow a greater number of provisional licensed mental health practitioners to meet ongoing and acute community needs especially during this pandemic. I am a Hawaii Licensed Mental Health Counselor. I see the needs everyday. Please consider adding **mental health counselng graduates** to SB2829.

SB-2829

Submitted on: 2/2/2022 1:38:31 PM

Testimony for HTH on 2/4/2022 1:00:00 PM

Submitted By	Organization	Testifier Position	Remote Testimony Requested
Madalyn Freedman	Individual	Comments	No

Comments:

I am writing in strong support of SB2829 as long as it is amended to also cover graduates of master's programs that meet Hawaii standards for the training of LHMCs. I am a candidate for the MA in Counseling Psychology offered by the University of Hawaii at Hilo, expected graduation May 2023, currently working towards licensure as a mental health counselor.

SB-2829

Submitted on: 2/2/2022 1:54:05 PM

Testimony for HTH on 2/4/2022 1:00:00 PM

Submitted By	Organization	Testifier Position	Remote Testimony Requested
Bryan Kim, Ph.D.	Individual	Comments	No

Comments:

Dear Lawmakers:

I am a professor of psychology at the University of Hawaii at Hilo and a core faculty members in our MA Program in Counseling Psychology in which we train Mental Health Counselors who are eligible for licensure in the state of Hawaii and other states (<http://counseling.uhh.hawaii.edu/>). Their license title is "Licensed Mental Health Counselor." While I applaud the intent of the bill, it leaves out an important service providers in that it does not include Licensed Mental Health Counselors. Our program began in 2005 and it has graduated over 120 mental health counselors, most of whom are licensed and serving the resides of Hawaii. Please revise the bill to include Licensed Mental Health Counselors. Mahalo.

Sincerely,

Bryan S. K. Kim, Ph.D.

SB-2829

Submitted on: 2/2/2022 2:08:01 PM

Testimony for HTH on 2/4/2022 1:00:00 PM

Submitted By	Organization	Testifier Position	Remote Testimony Requested
Bria Beale	Individual	Comments	No

Comments:

I am writing in strong support of SB2829 only if it is amended to include and cover graduates of master's programs that meet Hawaii standards for the training of Licensed Mental Health Counselors.

SB-2829

Submitted on: 2/2/2022 3:47:35 PM

Testimony for HTH on 2/4/2022 1:00:00 PM

Submitted By	Organization	Testifier Position	Remote Testimony Requested
Tara Myers	Individual	Comments	No

Comments:

Good Afternoon,

I am writing in strong support of SB2829 as long as it is amended to also cover graduates of master's programs that meet Hawaii standards for the training of Licensed Mental Health Counselors (LMHCs).

Thank you for your time and consideration,

Tara Myers

SB-2829

Submitted on: 2/2/2022 4:15:51 PM

Testimony for HTH on 2/4/2022 1:00:00 PM

Submitted By	Organization	Testifier Position	Remote Testimony Requested
Meriah Nichols	Individual	Comments	No

Comments:

February 2, 2022

Testimony Regarding SB2829

I am a Counseling Psychology graduate student at the University of Hawaii at Hilo and will be graduating in May 2022. Our program prepares us to be Licensed Mental Health Counselors through rigorous coursework and carefully supervised 300 hours of internships. Upon graduation, we need to complete 3,000 hours of supervised counseling before we can sit for our licensure examinations and (after passing), becoming Licensed Mental Health Counselors.

As interns and as pre-licensed counselors, we serve people in Hawai'i who desperately need us. We consult with cases related to anxiety, depression, mental anguish, a plethora of disabilities. We ameliorate suicide ideation, help clients recover from eating disorders, harming themselves – and others. We make quantifiable, real differences in the lives of those with whom we counsel.

Currently, we are not paid for the counseling that we do. We are not paid while we intern, nor are we paid for direct counseling during the two years that we spend gaining the hours necessary to sit for the licensure examination and become licensed.

I am a single mother with full custody of 3 kids. Two of my kids have disabilities and I am deaf. As the sole provider of my children, I struggle to make ends meet. With graduation approaching, I have been thrown into real anxiety over how exactly I will be able to support my family while gaining the practical experience that I need. **SB2829 – if amended to cover graduates of master's programs that meet Hawaii standards for the training of Licensed Mental Health Counselors (LMHC) – would allow me to support myself and my children while gaining the hours needed for licensure.**

I urge you to amend this Bill to include us, graduates that meet Hawaii standards for the training of Licensed Mental Health Counselors. I also urge you to pass this Bill. People in Hawaii deserve to access to us, associate-level Licensed Mental Health Counselors, and we deserve to have access to living wages and fair opportunities for clinical supervision.

Thank you for listening, thank you for your time and consideration. Thank you for amending this Bill, including us, and for making mental health in Hawaii a priority.

Mahalo nui loa,

Meriah Nichols

SB-2829

Submitted on: 2/2/2022 4:17:47 PM

Testimony for HTH on 2/4/2022 1:00:00 PM

Submitted By	Organization	Testifier Position	Remote Testimony Requested
Sheena Galutira	Individual	Support	No

Comments:

Aloha e,

I am a Licensed Mental Health Counselor in the State of Hawaii and I support this bill with the addition of including Licensed Mental Health Counselors for a provisional license of associate mental health counselor and licensed associate mental health counselor. There are many Licensed Mental Health Counselors in the State of Hawaii and it would only benefit our community to also include Mental Health Counselors into this bill.

Mahalo,

Sheena Galutira

SB-2829

Submitted on: 2/2/2022 4:24:02 PM

Testimony for HTH on 2/4/2022 1:00:00 PM

Submitted By	Organization	Testifier Position	Remote Testimony Requested
Christine Park	Individual	Comments	No

Comments:

The intent of SB 2829 is to expand the quality of mental health services by allowing provisional/associate-level licensure for mental health practitioners. Allowing graduate-level professionals working toward full licensure to obtain a provisional/associate license will increase the number of qualified professionals in the mental health field. However, this bill fails to acknowledge the expertise and capacity of Mental Health Counselors, who also provide mental health services in the State of Hawaii and undergo rigorous training as part of graduate level coursework. I support this bill, however, only if graduate level master's programs (that meet Hawaii standards for the training of Licensed Mental Health Counselors) are added. If the intent is to expand mental health services, graduate-level trained Mental Health Counselors should also be included in the language of this bill. State licensure language for the education and training requirements for Mental Health Counselors has already been established. It would not be too much to add language to SB2829 to include graduates of mental health counseling programs who meet licensure education and training standards. I also encourage the examination of the amount of graduate level course work hours mentioned in this bill. Many mental health graduate level programs require more credit hours to ensure proper training and competence. 48-60 semester credit hour (or equivalent quarter hour) programs have become the standard in the mental health profession.

SB-2829

Submitted on: 2/2/2022 4:54:11 PM

Testimony for HTH on 2/4/2022 1:00:00 PM

Submitted By	Organization	Testifier Position	Remote Testimony Requested
Amanda Webster	Individual	Comments	No

Comments:

I am writing in **strong** support of SB2829 as long as it is amended to also include graduates of master's degree programs that meet Hawaii standards for the training of Licensed Mental Health Counselors. This modification will enable the state of Hawaii to better meet the demand for services and enable people between graduation with a master's degree and eligibility for licensure to gain employment and better support themselves financially.

SB-2829

Submitted on: 2/2/2022 5:02:58 PM

Testimony for HTH on 2/4/2022 1:00:00 PM

Submitted By	Organization	Testifier Position	Remote Testimony Requested
Sarala Dandekar	Individual	Comments	No

Comments:

I am writing in strong support of SB2829 as long as it is amended to also cover graduates of master's programs that meet Hawaii standards for the training of Licensed Mental Health Counselors.

Thank you for your consideration and making mental health more accessible in Hawai'i

SB-2829

Submitted on: 2/2/2022 7:37:58 PM

Testimony for HTH on 2/4/2022 1:00:00 PM

Submitted By	Organization	Testifier Position	Remote Testimony Requested
Tifaine Crivello	Individual	Comments	No

Comments:

I am writing in strong support of SB2829 as long as it is amended to also cover graduates of master's programs that meet Hawaii standards for the training of Licensed Mental Health Counselors (LMHCs).

Mahalo!

SB-2829

Submitted on: 2/2/2022 7:56:00 PM

Testimony for HTH on 2/4/2022 1:00:00 PM

Submitted By	Organization	Testifier Position	Remote Testimony Requested
joseph nunes, PhD	Individual	Oppose	No

Comments:

Unless this bill includes provisions for Licensed Mental Health Counselors it should not pass. There is no difference in the qualifications of LMFT that would justify their inclusion and LMHC exclusion.

SB-2829

Submitted on: 2/2/2022 8:47:14 PM

Testimony for HTH on 2/4/2022 1:00:00 PM

Submitted By	Organization	Testifier Position	Remote Testimony Requested
Marina Galvan	Individual	Support	No

Comments:

As a graduate student in the field of mental health, I think we should encourage more people to pursue training and education and incentivize some of the more challenging hurdles to licensure, such as making associate-level licensing possible.

This field is SO NEEDED in the wake of covid-19, and in the growing cultural drive to improve our relationships and our quality of life. There is no reason to deny this bill that only encourages trainees down the path of becoming fully licensed clinicians. Help us help you to serve the community!

SB-2829

Submitted on: 2/2/2022 9:07:46 PM

Testimony for HTH on 2/4/2022 1:00:00 PM

Submitted By	Organization	Testifier Position	Remote Testimony Requested
Steven P. Katz	Individual	Oppose	No

Comments:

I am opposed to this bill because it excludes Mental Health Counselors and it would disincentivize MFTs like myself to go on and get fully licensed,

SB-2829

Submitted on: 2/2/2022 9:13:13 PM

Testimony for HTH on 2/4/2022 1:00:00 PM

Submitted By	Organization	Testifier Position	Remote Testimony Requested
Susana Ming Lowe	Individual	Oppose	No

Comments:

While I do agree there is a dire need to increase access to quality mental health care as we are now in year three of the pandemic, I feel apprehensive about insurance companies reimbursing for sessions provided by unlicensed practitioners. I do believe that therapists under clinical supervision have been and will continue to provide vital mental health services in the community. Those of us who are currently licensed all have the experience of clocking hours as therapists before licensure. However, the required supervision hours are there for a reason. It is a statement that there is a bar to be met for practice hours before one can be trusted to provide independent therapy. Once therapists are ostensibly able to earn an independent living pre-licensure (provided they get supervision), it would expand liability for clinical supervisors with the increase of those seeking to have professional supervision over a full practice and diminish the value of licensure itself.

I am also concerned that insurance companies will, in future, take advantage of this clause to lower compensation to licensed therapists. If insurance companies can pay less to unlicensed clinicians, they may eventually prefer it. Especially in a time when insurance members are utilizing expensive hospital care, I do not doubt that insurance companies are looking for ways to reduce cost. They would do so at the expense of quality of care consumers would receive.

Health care systems all over the world are suffering from the pandemic, causing overloads of work on busy fatigued staff. This bill is not the answer to the problem. Already, states have made exceptions to allow remote therapy with licensed professionals over state lines. Unlicensed trainees also currently provide services at agencies and clinics that have licensed clinical supervisors and infrastructure to support trainees, should crisis issues arise.

I have been practicing as a psychologist for 30 years, and have worked at agencies and in private practice. Agencies provide a large measure of fail safes that independent clinical supervisors cannot. There are multiples supervisors, administrative staff, and a system for crisis care. Independent practices do not have that. Clinical supervisors who would consent to oversee unlicensed practitioners with a full load of clients are not likely to be able to be available as much as agency staff can. This poses major risks to the safety of those seeking mental health services.

Please vote no on Bill SB2829.

Susana Ming Lowe, PhD

SB-2829

Submitted on: 2/2/2022 9:20:28 PM

Testimony for HTH on 2/4/2022 1:00:00 PM

Submitted By	Organization	Testifier Position	Remote Testimony Requested
Jessica Rosenfeld	Individual	Oppose	No

Comments:

I am particularly concerned about the exclusion of Licensed Mental Health Counselors from this legislation. Given our community's need for mental health professionals, I worry about the impact this measure may have on the availability of qualified counselors.

SB-2829

Submitted on: 2/2/2022 9:28:18 PM

Testimony for HTH on 2/4/2022 1:00:00 PM

Submitted By	Organization	Testifier Position	Remote Testimony Requested
Rebecca Cowan	Individual	Oppose	No

Comments:

I oppose SB2829. Passage of this bill would allow circumvention of the standards in place to protect the public from unqualified mental health practitioners.

SB-2829

Submitted on: 2/3/2022 7:15:18 AM

Testimony for HTH on 2/4/2022 1:00:00 PM

Submitted By	Organization	Testifier Position	Remote Testimony Requested
Noelani Rodrigues	Individual	Oppose	No

Comments:

As a licensed clinical psychologist in the state of Hawaii I fully oppose this proposed law. Although, I am aware of recent challenges for people seeking mental health treatment this bill is definitely not the solution! Cutting corners on licensing, loosening the restrictions, etc. is more likely to cause much more harm than good. Please protect the public and the vulnerability of persons with mental health issues and vote NO on SB2829.

Mahalo.

SB-2829

Submitted on: 2/3/2022 7:51:05 AM

Testimony for HTH on 2/4/2022 1:00:00 PM

Submitted By	Organization	Testifier Position	Remote Testimony Requested
Patrick Kamakawiwoole	Individual	Comments	No

Comments:

I am in favor of individuals being able to sit for the psychologist licensure exam prior to completing post-doctoral hours.

I am in favor of expanding insurance reimbursement to include all licensed individuals in the mental health field who are able to practice in their areas of competencies - mental health counselors, marriage and family therapists, and psychologists.

Furthermore, I am not in favor of insurance reimbursement for individuals who are unlicensed, being supervised by a licensed person. Training should be a separate and specialized program, and trainees should be treated as trainees and not as an employee or a qualified provider under insurance. This will compromise reimbursement rates for licensed professionals who are already providing those services.

SB-2829

Submitted on: 2/3/2022 7:58:26 AM

Testimony for HTH on 2/4/2022 1:00:00 PM

Submitted By	Organization	Testifier Position	Remote Testimony Requested
Ekaterina Kapoustina	Individual	Support	No

Comments:

I am writing in strong support of SB2829 as long as it is amended to also cover graduates of master's programs that meet Hawaii standards for the training of Licensed Mental Health Counselors.

SB-2829

Submitted on: 2/3/2022 7:59:20 AM

Testimony for HTH on 2/4/2022 1:00:00 PM

Submitted By	Organization	Testifier Position	Remote Testimony Requested
Sarah Warfield	Individual	Oppose	No

Comments:

While I do not oppose the addition of provisional licensure for master and doctoral level graduates, I have concerns that this legislation does not include a provisional license for graduates of a mental health counseling program. Graduates of a mental health counseling program have similar standards of education and similar requirements and benefits regarding licensure to practice in Hawaii. It would benefit the citizens and residents of Hawaii to include provisional licensure for mental health counselors in addition to having provisional licensure for social workers and marriage and family therapists.

COMMITTEE ON HEALTH

Senator Jarrett Keohokalole, Chair
Senator Rosalyn H. Baker, Vice Chair

DATE: February 4, 2022 1:00 P.M. - VIA VIDEO CONFERENCE

Testimony in Strong Support of SB2829 RELATING TO MENTAL HEALTH

The Hawaiian Islands Association for Marriage and Family Therapy (HIAMFT) strongly supports SB2829 as a critical tool in meeting the overwhelming demand for quality mental health services, particularly during and following the prolonged pandemic. Here's a snapshot of current ratios of clients/patients to mental health providers in Hawai'i:

Hawai'i 320:1

Honolulu 370:1

Kauai 480:1

Maui 550:1

Moloka'i has no registered providers.

Obviously, this demand far exceeds the viable supply of mental health providers. SB2829 would establish provisional or associate-level licensure requirements for Marriage and Family Therapists and Psychologists, creating a regulatory framework that would encourage relevant and quality training to associate-level providers by authorizing insurance reimbursement for supervised care provided by these post-degree/pre-licensed mental health professionals during the 1-2 year period they are completing required supervised practice hours under the mentorship/guidance of an independently licensed mental health professional.

In 23 other states, associate-level licensure is already established as common practice and provides not only expands access for clients to providers, but also creates a viable career path for locals interested in pursuing a career as a mental health professional, but who otherwise might not be able to actualize this career due to current restrictions that often force post-graduate/pre-licensed providers to work in contexts that do not provide sufficiently relevant experience (e.g., prisons, substance abuse centers, case management, etc.) and/or they must work for sub-part wages or pro bono (while also paying a supervisor to oversee their work).

The current bill would be a critical reform to Hawai'i's licensing statutes that would not only modernize our processes, but ultimately improve the quality of care provided to state residents by creating a systemic of accountability, a viable career path for locals who can better connect with local clients, and who in turn, will be more likely to actually utilize mental health services. Moreover, this bill will reduce the loss of potential future mental health professionals to other careers or one of the other 23 states that have already modernized their licensing laws, which in turn will contribute to the state economy through associate licensing fees, taxes from wages earned by associate-level licensees, and local purchases made by these licensees.

Overall, many aspects of our mental health system are deeply flawed, understaffed, and are in no way prepared to manage the onslaught of mental health issues that the general population are

experiencing during and after this pandemic. The consequences of this pandemic, both short- and long-term, in terms of mental health, could be significant and could weaken the Hawai'i health care system.

If we don't develop the means to stave off and/or treat these mental health issues, individuals and families will suffer even more than they already. In all areas of life, untreated mental health issues can become chronic and with crippling, long-term effects.

These circumstances call for a change in the paradigm and practices of mental health care. Our current model of mental health care does not adequately address the complex challenges of the existing circumstances. We need to re-vision current models of mental health care delivery. To do this, we let's be creative and flexible in how we provide mental health services to protect our community, by taking appropriate action now and quickly. Mental health care cannot be an afterthought

Thank you for the opportunity to provide this testimony in strong support of this bill.

Sincerely,

Nozomi Lulker, MA in Marriage and family therapy, post graduate

SB-2829

Submitted on: 2/3/2022 8:59:48 AM

Testimony for HTH on 2/4/2022 1:00:00 PM

Submitted By	Organization	Testifier Position	Remote Testimony Requested
Lynn Sauler	Individual	Support	No

Comments:

DATE: February 4, 2022 1:00 P.M. - VIA VIDEO CONFERENCE

Testimony in Strong Support of SB2829 RELATING TO MENTAL HEALTH

The Hawaiian Islands Association for Marriage and Family Therapy (HIAMFT) strongly supports SB2829 as a critical tool in meeting the overwhelming demand for quality mental health services, particularly during and following the prolonged pandemic. Here's a snapshot of current ratios of clients/patients to mental health providers in Hawai'i:

Hawai'i 320:1

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Kauai 480:1

Maui 550:1

Moloka'i has no registered providers.

Obviously, this demand far exceeds the viable supply of mental health providers. SB2829 would establish provisional or associate-level licensure requirements for Marriage and Family Therapists and Psychologists, creating a regulatory framework that would encourage relevant and quality training to associate-level providers by authorizing insurance reimbursement for supervised care provided by these post-degree/pre-licensed mental health professionals during the 1-2 year period they are completing required supervised practice hours under the mentorship/guidance of an independently licensed mental health professional.

In 23 other states, associate-level licensure is already established as common practice and provides not only expands access for clients to providers, but also creates a viable career path for locals interested in pursuing a career as a mental health professional, but who otherwise might not be able to actualize this career due to current restrictions that often force post-graduate/pre-licensed providers to work in contexts that do not provide sufficiently relevant experience (e.g.,

prisons, substance abuse centers, case management, etc.) and/or they must work for sub-part wages or pro bono (while also paying a supervisor to oversee their work).

The current bill would be a critical reform to Hawai'i's licensing statutes that would not only modernize our processes, but ultimately improve the quality of care provided to state residents by creating a systemic of accountability, a viable career path for locals who can better connect with local clients, and who in turn, will be more likely to actually utilize mental health services. Moreover, this bill will reduce the loss of potential future mental health professionals to other careers or one of the other 23 states that have already modernized their licensing laws, which in turn will contribute to the state economy through associate licensing fees, taxes from wages earned by associate-level licensees, and local purchases made by these licensees.

Overall, many aspects of our mental health system are deeply flawed, understaffed, and are in no way prepared to manage the onslaught of mental health issues that the general population are experiencing during and after this pandemic. The consequences of this pandemic, both short- and long-term, in terms of mental health, could be significant and could weaken the Hawai'i health care system.

If we don't develop the means to stave off and/or treat these mental health issues, individuals and families will suffer even more than they already. In all areas of life, untreated mental health issues can become chronic and with crippling, long-term effects.

These circumstances call for a change in the paradigm and practices of mental health care. Our current model of mental health care does not adequately address the complex challenges of the existing circumstances. We need to re-vision current models of mental health care delivery. To do this, we let's be creative and flexible in how we provide mental health services to protect our community, by taking appropriate action now and quickly. Mental health care cannot be an afterthought.

Thank you for the opportunity to provide this testimony in strong support of this bill.

Sincerely, Lynn Sauler MFT graduating March 6th

SB-2829

Submitted on: 2/3/2022 9:01:19 AM

Testimony for HTH on 2/4/2022 1:00:00 PM

Submitted By	Organization	Testifier Position	Remote Testimony Requested
Maria Mitsioura	Individual	Comments	No

Comments:

I am writing in strong support of SB2829 as long as it is amended to also cover graduates of master's programs that meet Hawaii standards for the training of Licensed Mental Health Counselors.

SB-2829

Submitted on: 2/3/2022 9:07:57 AM

Testimony for HTH on 2/4/2022 1:00:00 PM

Submitted By	Organization	Testifier Position	Remote Testimony Requested
Chaynee Kuamo`o	Individual	Comments	No

Comments:

I am writing in strong support of SB2829 ONLY IF IT IS AMENDED to also include graduates of master's programs that meet Hawaii standards for the training of LICENSED MENTAL HEALTH COUNSELORS (LMHC). Many Master's programs in psychology across the nation provide the educational and training requirements for individuals to one day become Licensed Mental Health Counselors, including UH Hilo. The only psychology graduate program on the Big Island is UH Hilo and graduates from the Master's in Counseling Psychology and Clinical Mental Health at UH Hilo are eligible for Hawaii state licensure after completing necessary requirements. Therefore, once licensed, these individuals are considered Licensed Mental Health Counselors (LMHC) and have the ability to provide clinical mental health therapy to all or any individual. As a LMHC myself I can testify from experience that there are MANY LMHCs in our state that are currently serving through several different roles in the mental health field. Therefore, to exclude LMHCs from this bill will severely undermine a big portion of our state's mental health therapists and community counselors, most especially all individuals who will one day graduate from UH Hilo on the Big Island and seek a Hawaii state licensure.

SB-2829

Submitted on: 2/3/2022 9:12:56 AM

Testimony for HTH on 2/4/2022 1:00:00 PM

Submitted By	Organization	Testifier Position	Remote Testimony Requested
Brandon Dancer	Individual	Comments	No

Comments:

I am writing in strong support of SB2829 as long as it is amended to also cover graduates of master's programs that meet Hawaii standards for the training of Licensed Mental Health Counselors. A draft amended bill inclusive of Licensed Mental Health Counselors will be in the testimony for the bill. I am a graduate student in Counseling Psychology and I would be greatly benefitted by the inclusion of Licensed Mental Health Counselors in this bill, so I sincerely voice my position in hopes that this bill can be amended to include Licensed Mental Health Counselors. Thank you.

SB-2829

Submitted on: 2/3/2022 9:13:08 AM

Testimony for HTH on 2/4/2022 1:00:00 PM

Submitted By	Organization	Testifier Position	Remote Testimony Requested
David Trang	Individual	Comments	No

Comments:

I am in support of SB2829, but with one condition, that Licensed Mental Health Counselors (LMHC) are included in the bill. Considering 1) Hawai'i only has two institutes that provides mental health training, 2) there is a huge shortage of mental health counseling in the state, and 3) training counselors in Hawai'i is important as they will also be specialized to work with Pacific Island groups, it is imperative that this bill includes Licensed Mental Health Counselors. Leaving out LMHC could deprive the community of access to newly trained mental health couneslors while also potentially causing these newly trained counselors to leave the state due to lower pay (because of the lack of provisional-license) and increasing cost of living.

SB-2829

Submitted on: 2/3/2022 9:20:21 AM

Testimony for HTH on 2/4/2022 1:00:00 PM

Submitted By	Organization	Testifier Position	Remote Testimony Requested
Sean W. Scanlan, Ph.D.	Individual	Comments	No

Comments:

Overall, I can't support the bill because it contains changes to other professions. If psychologist issues were separated, I could support parts of the psychologist section.

In Part II, Section II

- I support lines 1-10 on page 14.
- I strongly oppose lines 11-13 on page 14 because ensuring that the standards of APA accreditation are met is especially critical in these circumstances. Not requiring this accreditation increases the burden on the licensing body to ensure the standards of training for these individuals. My understanding is that the processing of licensing applications is already complex.
- I strongly oppose lines 4-8 on page 15 (and subsequent referrals to it), especially if the licensing examination will be moved forward (i.e., not required AFTER one year of post-doc). Two years is more than sufficient.
- In section 13, lines 13-15 on page 16 should be amended to delineate the appropriate title for each (i.e., "psychologist", "associate psychologist"). As written, an associate psychologist can represent themselves as a psychologist.
- There is a typo on line 6 on page 26: ...or licensed...

Mahalo.

SB-2829

Submitted on: 2/3/2022 9:24:56 AM

Testimony for HTH on 2/4/2022 1:00:00 PM

Submitted By	Organization	Testifier Position	Remote Testimony Requested
rachel gibson	Individual	Comments	No

Comments:

I am a resident of Oahu and a recent graduate of the masters of counseling psychology program at UH Hilo. I am writing in strong support of SB2829 as long as it is amended to also cover graduates of master's programs that meet Hawaii standards for the training of Licensed Mental Health Counselors. Excluding graduates of programs that specialize in mental health counseling from this bill limits the number of locally trained and educated mental health professionals that could be employed to help meet immediate demand for behavioral and mental health care needs. Exclusion also negatively impacts and limits important employment and training opportunities for mental health counselors that are seeking licensure in Hawaii. I hope that you will strongly consider amending this bill to allow the people of Hawaii greater access to care, and to allow more opportunities for locally trained graduates to enter the mental health care field as professionals.

SB-2829

Submitted on: 2/3/2022 9:49:55 AM

Testimony for HTH on 2/4/2022 1:00:00 PM

Submitted By	Organization	Testifier Position	Remote Testimony Requested
Jiwei Tang	Individual	Comments	No

Comments:

I am writing in strong support of SB2829 as long as it is amended to also cover graduates of master's programs that meet Hawaii standards for the training of Licensed Mental Health Counselors.

SB-2829

Submitted on: 2/3/2022 9:50:48 AM

Testimony for HTH on 2/4/2022 1:00:00 PM

Submitted By	Organization	Testifier Position	Remote Testimony Requested
Diane Gehart	Individual	Support	No

Comments:

Testimony in Strong Support of SB2829 RELATING TO MENTAL HEALTH

I am a Licensed Marriage and Family Therapist in Hawai'i and California and have been a professor of family therapy and counseling for over 25 years. I am currently the Program Coordinator of the Marriage and Family Therapy Program at California State University, Northridge (please note: this testimony is entered as a private citizen and does not represent the position of my employer), and the Director of Therapy that Works Institute. My academic research has focused on developing competency-based training methods in the field.

The proposed legislation is an essential first step to help meet the mental health needs of Hawaii's diverse and vulnerable communities. Across the globe, there is a critical shortage of mental health professionals due to the pandemic, climate change disasters, and social inequities. In particular, the impact of the pandemic on Hawaii's youth, families, and young adults has staggering mental health consequences that professionals will be addressing for decades. Additionally, anyone who has lost a loved one due to COVID or any other form of loss during the pandemic is likely to be experiencing "complex grief," a difficult-to-treat and long-lasting form of grief. The long-term mental health effects of the pandemic will be seen in both students' academic success and the quality of the workforce for years to come.

Associate-level licensure that is insurance reimbursable is the most efficient means of meeting the state's mental health needs. Due to the dramatic increase in demand, many licensed therapists are leaving the lower-pay and hassle of being on an insurance panel because maintaining a thriving cash-only practice requires virtually no effort. As licensed practitioners leave panels, lower and middle-income families typically have significantly reduced access to care, further exacerbating existing inequities.

If public safety is a concern, requiring a post-degree law and ethics training (e.g., state-monitored 6-hour continuing education course) or a law and ethics jurisprudence exam upon graduation (as is required in California) would add a level of protection above that.

If the quality of care is a concern, there is little scientific evidence that post-degree licensure significantly increases a clinician's effectiveness. There is no scientific evidence to my knowledge (and I have searched the literature and asked other researchers) that passing a licensing exam is correlated with better clinical skills or improved client outcomes. Most of the research points to the quality of the therapeutic relationship being the most significant predictor

of clinical outcomes, and virtually all of those skills are developed in graduate school. Post-degree training and supervision are almost entirely focused on developing competence with theoretical models, which have less of an effect on client outcomes. Furthermore, length of experience in general (even when considering decades of experience post-licensure) is not clearly correlated with superior outcomes. Thus, there is nothing in the literature that I have ever found that indicates Associates have measurably poorer outcomes. In fact, the literature has yet to clearly support the idea that post-degree experience and licensure measurably improve client outcomes. At this point, post-degree supervision prior to licensure is standard practice that has surprisingly little empirical support. Nonetheless, I believe maintaining the current requirement for post-degree supervision and licensing exams are in the public's and new professionals' best interest, but for reasons other than improved client outcomes.

This legislation will go a long way in addressing the state's mental health needs. However, it will not solve it entirely. Hawai'i, like the rest of the world, will need to continue building a larger skilled mental health workforce to meet society's current and future needs, a trend that was well documented before the pandemic began.

SB-2829

Submitted on: 2/3/2022 10:29:16 AM

Testimony for HTH on 2/4/2022 1:00:00 PM

Submitted By	Organization	Testifier Position	Remote Testimony Requested
Andrew Littlejohn	Individual	Support	No

Comments:

To: Senator Jarrett Keohokalole, Chair and Senator Rosalyn H. Baker, Vice Chair

Testimony in Strong Support of SB2829 RELATING TO MENTAL HEALTH

As a member of the Hawaiian Islands Association for Marriage and Family Therapy (HIAMFT) I strongly support SB2829 as a critical tool in meeting the overwhelming demand for quality mental health services, particularly during and following the prolonged pandemic. Here's a snapshot of current ratios of clients/patients to mental health providers in Hawai'i:

Hawai'i 320:1

Honolulu 370:1

Kauai 480:1

Maui 550:1

Moloka'i has no registered providers.

Obviously, this demand far exceeds the viable supply of mental health providers. SB2829 would establish provisional or associate-level licensure requirements for Marriage and Family Therapists and Psychologists, creating a regulatory framework that would encourage relevant and quality training to associate-level providers by authorizing insurance reimbursement for supervised care provided by these post-degree/pre-licensed mental health professionals during the 1-2 year period they are completing required supervised practice hours under the mentorship/guidance of an independently licensed mental health professional.

In 23 other states, associate-level licensure is already established as common practice and provides not only expands access for clients to providers, but also creates a viable career path for locals interested in pursuing a career as a mental health professional, but who otherwise might not be able to actualize this career due to current restrictions that often force post-graduate/pre-licensed providers to work in contexts that do not provide sufficiently relevant experience (e.g., prisons, substance abuse centers, case management, etc.) and/or they must work for sub-part wages or pro bono (while also paying a supervisor to oversee their work).

The current bill would be a critical reform to Hawai'i's licensing statutes that would not only modernize our processes, but ultimately improve the quality of care provided to state residents by creating a systemic of accountability, a viable career path for locals who can better connect with local clients, and who in turn, will be more likely to actually utilize mental health services. Moreover, this bill will reduce the loss of potential future mental health professionals to other careers or one of the other 23 states that have already modernized their licensing laws, which in turn will contribute to the state economy through associate licensing fees, taxes from wages earned by associate-level licensees, and local purchases made by these licensees.

Overall, many aspects of our mental health system are deeply flawed, understaffed, and are in no way prepared to manage the onslaught of mental health issues that the general population are experiencing during and after this pandemic. The consequences of this pandemic, both short- and long-term, in terms of mental health, could be significant and could weaken the Hawai'i health care system.

If we don't develop the means to stave off and/or treat these mental health issues, individuals and families will suffer even more than they already. In all areas of life, untreated mental health issues can become chronic and with crippling, long-term effects.

These circumstances call for a change in the paradigm and practices of mental health care. Our current model of mental health care does not adequately address the complex challenges of the existing circumstances. We need to re-vision current models of mental health care delivery. To do this, we let's be creative and flexible in how we provide mental health services to protect our community, by taking appropriate action now and quickly. Mental health care cannot be an afterthought.

Thank you for the opportunity to provide this testimony in strong support of this bill.

Sincerely,

Andrew Littlejohn
The Hawaiian Islands Association for Marriage and Family Therapy

SB-2829

Submitted on: 2/3/2022 10:34:41 AM

Testimony for HTH on 2/4/2022 1:00:00 PM

Submitted By	Organization	Testifier Position	Remote Testimony Requested
Haley Ferguson	Individual	Support	No

Comments:

Testimony in Strong Support of SB2829 RELATING TO MENTAL HEALTH

I, Haley Ferguson, strongly support SB2829 as a critical tool in meeting the overwhelming demand for quality mental health services, particularly during and following the prolonged pandemic. Here's a snapshot of current ratios of clients/patients to mental health providers in Hawai'i:

Hawai'i 320:1

Honolulu 370:1

Kauai 480:1

Maui 550:1

Moloka'i has no registered providers.

Obviously, this demand far exceeds the viable supply of mental health providers. SB2829 would establish provisional or associate-level licensure requirements for Marriage and Family Therapists and Psychologists, creating a regulatory framework that would encourage relevant and quality training to associate-level providers by authorizing insurance reimbursement for supervised care provided by these post-degree/pre-licensed mental health professionals during the 1-2 year period they are completing required supervised practice hours under the mentorship/guidance of an independently licensed mental health professional.

In 23 other states, associate-level licensure is already established as common practice and provides not only expands access for clients to providers, but also creates a viable career path for locals interested in pursuing a career as a mental health professional, but who otherwise might not be able to actualize this career due to current restrictions that often force post-graduate/pre-licensed providers to work in contexts that do not provide sufficiently relevant experience (e.g., prisons, substance abuse centers, case management, etc.) and/or they must work for sub-part wages or pro bono (while also paying a supervisor to oversee their work).

The current bill would be a critical reform to Hawai'i's licensing statutes that would not only modernize our processes, but ultimately improve the quality of care provided to state residents by creating a systemic of accountability, a viable career path for locals who can better connect with local clients, and who in turn, will be more likely to actually utilize mental health services. Moreover, this bill will reduce the loss of potential future mental health professionals to other careers or one of the other 23 states that have already modernized their licensing laws, which in

turn will contribute to the state economy through associate licensing fees, taxes from wages earned by associate-level licensees, and local purchases made by these licensees.

Overall, many aspects of our mental health system are deeply flawed, understaffed, and are in no way prepared to manage the onslaught of mental health issues that the general population are experiencing during and after this pandemic. The consequences of this pandemic, both short- and long-term, in terms of mental health, could be significant and could weaken the Hawai'i health care system.

If we don't develop the means to stave off and/or treat these mental health issues, individuals and families will suffer even more than they already. In all areas of life, untreated mental health issues can become chronic and with crippling, long-term effects.

These circumstances call for a change in the paradigm and practices of mental health care. Our current model of mental health care does not adequately address the complex challenges of the existing circumstances. We need to re-vision current models of mental health care delivery. To do this, we let's be creative and flexible in how we provide mental health services to protect our community, by taking appropriate action now and quickly. Mental health care cannot be an afterthought.

Thank you for the opportunity to provide this testimony in strong support of this bill.

Sincerely,

Haley Ferguson

SB-2829

Submitted on: 2/3/2022 10:41:28 AM

Testimony for HTH on 2/4/2022 1:00:00 PM

Submitted By	Organization	Testifier Position	Remote Testimony Requested
Bethany Anderson	Individual	Comments	No

Comments:

Aloha,

As a counseling psychology student at UH Hilo, I support the idea of providing provisional licenses to mental health practitioners, *if* licensed mental health counselors are included in the proposed SB2829 bill. In the state of Hawai'i 3000 supervised hours are required to become a licensed mental health counselor (or LMHC), with current legislature, these hours tend to be relatively underpaid for a master's level position.

As someone who was born and raised in Hawai'i I am familiar with how expensive it could be to live here, so I have some anxiety surrounding how I will make ends meet while living in my home town and paying off my student loans as I earn hours for licensure. I think it would also be in Hawai'i's best interest to make career establishment easier here, many local kids relocate to the mainland, and limited opportunities is a common reason I've encountered with friends who choose to leave. Addressing this problem by making it easier to establish a career in mental health seems like a possible good place to help address this struggle in our community.

All in all, I hope that this input is considered and mahalo.

Bethany.

I hope

SB-2829

Submitted on: 2/3/2022 10:42:33 AM

Testimony for HTH on 2/4/2022 1:00:00 PM

Submitted By	Organization	Testifier Position	Remote Testimony Requested
Marisa L. Fialho	Individual	Support	No

Comments:

I am in private practice as a licensed marriage and family therapist in the state of Hawaii. I've been a practicing, licensed therapist for the past 10 years. It breaks my heart every time I have to turn down someone who is reaching out to me to be taken on as a new client. My practice is simply overwhelmed and I just don't have the time. I would love to supervise associate clinicians and new graduates while giving them clients I can't take on myself but can't due to having my hands tied by the insurance companies. The system, as it is currently set up, is a lose-lose situation for everyone and something needs to be done! I implore you, please pass this bill. Mahalo,

-Marisa Fialho

SB-2829

Submitted on: 2/3/2022 10:44:28 AM

Testimony for HTH on 2/4/2022 1:00:00 PM

Submitted By	Organization	Testifier Position	Remote Testimony Requested
Monica Schmidt	Individual	Support	No

Comments:

Feb 4, 2022

Testimony Regarding Bill 2829

I am currently a masters student enrolled in the Counseling Psychology program at the University of Hilo, Hawaii. One of the many challenges post-graduation from mental health training programs is that you must earn 3,000 supervised hours to become licensed eligible. In other states, a provisional license can be granted once passing a state exam, then hours are accrued for up to two years, and then you can apply for your state license. However, in the state of Hawaii, we don't have the option of obtaining a provisional license. The consequences for our community due to this gap in licensure are endless. Many private and group practice providers are unable to hire unlicensed providers because they cannot bill insurance companies for their services. Because of this, graduates are usually forced to take low/underpaid positions in larger agencies (some of these are wonderful positions, but the options are limited). Roughly 30% of these graduates will leave the field due to not making enough money to support themselves.

Approval of this bill would allow MFTs and psychologists to earn an associate/provisional license, so they can bill insurance companies for their work (provided they are supervised, payment may be less than fully licensed providers). This is an important piece of legislation, as it will open the doors to more opportunities for trained mental health professionals and increase access to mental health care for the citizens of the State.

Licensed Marriage and Family Therapists, Licensed Mental Health Counselors, Licensed Clinical Social Workers, and Licensed Psychologists all use the "Psychotherapy" CPT code for insurance billing purposes.

However, Mental Health Counselors are not currently included in the current bill. I am in support of Bill SB2829 with the amendment to include Mental Health Counselors (future Licensed Mental Health Counselors- LMHCs) to this bill. Justin Miller, LMHC in Hawaii, has submitted an amendment as testimony.

If this bill is to increase access to mental health services, it is imperative that Mental Health Counselors are not left out in this bill.

Thank you for taking the time to read this,

Monica Schmidt

SB-2829

Submitted on: 2/3/2022 10:44:38 AM

Testimony for HTH on 2/4/2022 1:00:00 PM

Submitted By	Organization	Testifier Position	Remote Testimony Requested
Jessica Gacuma	Individual	Support	No

Comments:

I am in support of bill SB2829 with the amendment to include Mental Health Counselors (future Licensed Mental Health Counselors- LMHCs) to this bill. The need for Mental Health Counselors is more than a necessity for the citizens here in the Hawaiian Islands. Mental Health is of the utmost importance when navigating life's challenges. As advocates for all living beings, we should be able to provide support and receive recognition to be put on the bill. The need for Mental Health Counselors here in the state of Hawaii will create a positive impact on the citizens and provide coping mechanisms especially during these unforeseen times in the Pandemic. In addition, because we are of service to citizens- Insurance companies should be able to bill Mental Health Counselors as it is in relation to the health and medical field. Being of service to the citizens of Hawaii is our Kuleana (responsibility). Mahalo.

SB-2829

Submitted on: 2/3/2022 10:47:21 AM

Testimony for HTH on 2/4/2022 1:00:00 PM

Submitted By	Organization	Testifier Position	Remote Testimony Requested
jan ferguson	Individual	Support	No

Comments:

Testimony in Strong Support of SB2829 RELATING TO MENTAL HEALTH

I, Jan Ferguson, strongly support SB2829 as a critical tool in meeting the overwhelming demand for quality mental health services, particularly during and following the prolonged pandemic. Here's a snapshot of current ratios of clients/patients to mental health providers in Hawai'i:

Hawai'i 320:1

Honolulu 370:1

Kauai 480:1

Maui 550:1

Moloka'i has no registered providers.

Obviously, this demand far exceeds the viable supply of mental health providers. SB2829 would establish provisional or associate-level licensure requirements for Marriage and Family Therapists and Psychologists, creating a regulatory framework that would encourage relevant and quality training to associate-level providers by authorizing insurance reimbursement for supervised care provided by these post-degree/pre-licensed mental health professionals during the 1-2 year period they are completing required supervised practice hours under the mentorship/guidance of an independently licensed mental health professional.

In 23 other states, associate-level licensure is already established as common practice and provides not only expands access for clients to providers, but also creates a viable career path for locals interested in pursuing a career as a mental health professional, but who otherwise might not be able to actualize this career due to current restrictions that often force post-graduate/pre-licensed providers to work in contexts that do not provide sufficiently relevant experience (e.g., prisons, substance abuse centers, case management, etc.) and/or they must work for sub-part wages or pro bono (while also paying a supervisor to oversee their work).

The current bill would be a critical reform to Hawai'i's licensing statutes that would not only modernize our processes, but ultimately improve the quality of care provided to state residents by creating a systemic of accountability, a viable career path for locals who can better connect with local clients, and who in turn, will be more likely to actually utilize mental health services. Moreover, this bill will reduce the loss of potential future mental health professionals to other careers or one of the other 23 states that have already modernized their licensing laws, which in

turn will contribute to the state economy through associate licensing fees, taxes from wages earned by associate-level licensees, and local purchases made by these licensees.

Overall, many aspects of our mental health system are deeply flawed, understaffed, and are in no way prepared to manage the onslaught of mental health issues that the general population are experiencing during and after this pandemic. The consequences of this pandemic, both short- and long-term, in terms of mental health, could be significant and could weaken the Hawai'i health care system.

If we don't develop the means to stave off and/or treat these mental health issues, individuals and families will suffer even more than they already. In all areas of life, untreated mental health issues can become chronic and with crippling, long-term effects.

These circumstances call for a change in the paradigm and practices of mental health care. Our current model of mental health care does not adequately address the complex challenges of the existing circumstances. We need to re-vision current models of mental health care delivery. To do this, we let's be creative and flexible in how we provide mental health services to protect our community, by taking appropriate action now and quickly. Mental health care cannot be an afterthought.

Thank you for the opportunity to provide this testimony in strong support of this bill.

Sincerely,

Jan Ferguson

SB-2829

Submitted on: 2/3/2022 10:49:49 AM

Testimony for HTH on 2/4/2022 1:00:00 PM

Submitted By	Organization	Testifier Position	Remote Testimony Requested
Pansy Lindo-Moulds	Individual	Comments	No

Comments:

Please include coverage of Licensed Mental Health Counselors in Bill SB 2829. Like other mental health providers, such as social workers, we are licensed by the state of Hawaii, do similar work, and add value to our communities.

I write in support of SB2829 as long as licensed mental health counselors are included.

Mahalo nui loa.

SB-2829

Submitted on: 2/3/2022 10:57:54 AM

Testimony for HTH on 2/4/2022 1:00:00 PM

Submitted By	Organization	Testifier Position	Remote Testimony Requested
Meghan Chin	Individual	Support	No

Comments:

I am writing my testimony in strong support of SB2829 as long as it is amended to also cover graduates of master's programs that meet Hawaii standards for the training of Licensed Mental Health Counselors (LMHC). An amended bill has been drafted and will be proposed in other testimonies which includes LMHCs). Thank you so much.

SB-2829

Submitted on: 2/3/2022 10:58:04 AM

Testimony for HTH on 2/4/2022 1:00:00 PM

Submitted By	Organization	Testifier Position	Remote Testimony Requested
Hitomi "Mimi" Demura-Devore	Individual	Comments	No

Comments:

Hitomi Demura-Devore

Licensed Clinical Social Worker

500 University Ave. Apt 726

Honolulu, HI 96826

mdemuradevore@gmail.com

February 3, 2022

RE: SB 2829 Revising to add Licensed Mental Health Counselors in the bill

My name is Hitomi Demura-Devore, a Licensed Clinical Social Worker, providing psychotherapy in the state of Hawaii.

I ask you to include Licensed Mental Health Counselors in this bill (SB 2829) as the current bill does not include LMHCs who are providing psychotherapies to people in Hawaii like other mental health providers listed in the bill.

Thank you for supporting us, the mental health professionals, to provide care for people of Hawaii.

Sincerely Yours,

Hitomi Demura-Devore, LCSW

SB-2829

Submitted on: 2/3/2022 11:06:03 AM

Testimony for HTH on 2/4/2022 1:00:00 PM

Submitted By	Organization	Testifier Position	Remote Testimony Requested
Gay Leah Barfield, Ph.D., Lic. MFT	Individual	Comments	No

Comments:

Aloha and mahalo for hearing my comments herein on SB2829. A short background history is that I am a 25 year resident of the Big Island, former Adjunct Professor/Instructor at the UH HILO campus in the Masters Mental Health Counseling program from its inception in 2005 through 2010, and have since been associated informally as occasional periodic invited guest presenter, who continues to engage with program graduates as mentor/mentress/colleague informally as well in various venues. I submit this testimony on a personal basis, however.

I am also a long time member of the Marriage & Family Therapist professional organization here in Hawaii which is one of the Bill's sponsors. I am nearing a 50 year practice in the mental health field, primarily through the person/client-centered perspectives of Dr. Carl R. Rogers, with whom I was a long time colleague world-wide until his death in 1987. Now semi-retired and still licensed MFT (Hawaii License #51, 1999), I am deeply committed to our field through support of ALL of its various licensed professionals.

1. I submit this Testimony heartily in support of SB2829 with the added recommendation that this proposal also include among its wordings on licensed or provisional licenses, the Mental Health Counseling supervised interns as well. Our beloved State of Hawaii, and the entire nation as a whole, remain in desperate need of more professional therapeutic supports throughout our communities, at a time of multiple internal and external crises arising concurrently, which I believe will persist and be present long into the future, requiring a full range of therapeutic practitioners available to the public's need.

Additionally, I make this testimony on the basis of seeking equity across all licenses to accommodate the above, and due to this urgent, generalized much expanded need for caring of our troubled populations. Also, I offer this testimony as well from my own experience teaching in the Masters Program at UHH, and engaging professionally and personally with many of its excellent graduates now over 20 plus years, and personally working world-wide over decades with persons representing each and every license in our field.

1. While I highly recommend the inclusion of an Amendment that adds mental health counselors as mentioned above, please know that I am in full support of this Bill for all the reasons stated within it. With respect and appreciation, mahalo nui loa for positively considering my testimony. Aloha Gay Leah Barfield, Ph.D, Lic. MFT

From: Gay Barfield [<mailto:gbarfield@hawaii.rr.com>]

SB-2829

Submitted on: 2/3/2022 11:15:27 AM

Testimony for HTH on 2/4/2022 1:00:00 PM

Submitted By	Organization	Testifier Position	Remote Testimony Requested
Lauren Harrington	Individual	Comments	No

Comments:

I am writing in strong support of SB2829 as long as it is amended to also cover graduates of master's programs that meet Hawaii standards for the training of Licensed Mental Health Counselors.

Thank you,

Lauren Harrington

*Lesley A. Slavin, Ph.D.
317C Olomana Street
Kailua, HI 96734*

Testimony in strong SUPPORT of SB2829 RELATING TO MENTAL HEALTH

COMMITTEE ON HEALTH

Senator Jarrett Keohokalole, Chair
Senator Rosalyn H. Baker, Vice Chair

DATE: Friday, February 4, 2022
TIME: 1:00PM
PLACE: Via Videoconference

There is a critical shortage of mental health professionals in Hawaii, particularly in rural areas. This has been exacerbated by the COVID19 pandemic – which has led to a large increase in demand for mental health services. As a result, it is imperative to increase the mental health workforce in Hawaii, and one important way to do this is by reducing obstacles to practicing here – especially for early career Mental Health professionals whose early experiences often determine where they will build their careers. SB2829 is a complex bill that applies to several Mental Health professions, I will only address a few issues that apply specifically to psychologist in this testimony.

My testimony draws on my 18 years of experience as a psychologist working in the Hawaii State Child and Adolescent Mental Health Division (CAMHD). (I retired several months ago, and I do not represent CAMHD or DOH). In my role as chief psychologist there, I was intimately involved in efforts to hire and retain high quality psychologists to serve youth with severe emotional difficulties. I was part of a group of psychologists who developed a predoctoral internship training consortium in public service settings, and I also helped establish some post-doc training slots through the consortium to continue training for newly graduated individuals within CAMHD. The work of developing and maintaining an effective “pipeline” to attract and retain psychologists in CAMHD was difficult – in part because the licensure process in Hawaii is particularly arduous. There are several features of the law that make it difficult for new doctoral graduates to transition smoothly into paid employment.

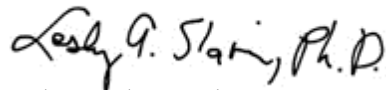
As you may imagine, young people trying to earn their credentials to practice psychology in Hawaii have difficulty managing financially due to our high cost of living. This is compounded by aspects of the licensing law that SB2829 seeks to change - related to the licensure process and insurance reimbursement for work done by trainees pre-licensure. Psychologists must gain a year of supervised practice experience after they complete an internship and obtain their doctoral degree. During this “post-doc” year, they are not eligible for any credential issued by the state that requires insurance reimbursement for their services. These “post-doc” trainees often work in an agency or other setting where they are supervised closely by a licensed psychologist. Insurance companies vary greatly in whether they will reimburse the agency or supervisor for services provided in this way. Some post-docs end up working for free and holding other jobs to survive while getting their required experience. Some leave the state to practice in one of the many other states that provides a pre-licensure credential. There is also a shortage of training/work opportunities for new graduates. Some agencies and psychologist who might otherwise be interested in taking on post-doctoral supervisees are dissuaded by the lack of assurance that they can be reimbursed.

SB2829 addresses this issue by creating a provisional license to be issued to post-docs who are under supervision by a licensed psychologist and requiring insurance companies to re-imburse supervisors and employers for the services they provide in this way. This provisional license would be issued for only two years, with a provision to allow an extension in extenuating circumstances such as maternity leaves and other medical issues.

Another issue that causes financial hardship and delay during this post-doctoral period is the timing of the license application process. Currently, according to the Board of Psychology's administrative rules, applicants must complete their 1-year post-doctoral experience, then apply for licensure, and then they can be "seated" for the required examination (the EPPP) which they must pass before they can be licensed. This can lead to a many-months delay before they are allowed to practice as a psychologist. Many licensure candidates apply to take the exam in another state (incurring expense) so that they can expedite the board of psychology review process by having their passing grade in hand when their application is reviewed by the Hawaii Board. The current bill includes a provision to require the board to allow licensure candidates to take the exam as soon as they complete their doctorate, so it should be possible for them to be licensed on completion of the post-doc training year.

Finally, SB2829 addresses an important issue for state-employed psychology post-docs: There is a provision in the existing licensure statute that allows non-licensed individuals who have earned their doctoral degree to be hired into state psychologist positions before licensure. The statute stipulates that these employees must obtain licensure within two years of hire, and they must cease practicing if the license is not obtained in that time period. DHRD has interpreted this to mean they must be terminated from their state position if this occurs. During the pandemic, when the Board of Psychology did not meet for six months, several state-employed psychologists lost their jobs because they could not get licensed, including vital positions at the state hospital and in the CAMHD. This has been a real hardship for the units where these individuals worked, and the clients they were serving. When CAMHD leaders and HPA approached the board and other authorities about this problem at the time, we were told that there was no way anyone could waive this requirement because it is in statute. This has also been problematic when young psychologists have taken maternity leave and other medical leave - there is no way to provide additional time for them to obtain the license. SB2829 includes a provision that would allow the board to give a state-employed psychologist more time to obtain their license under such extenuating circumstances.

Respectfully submitted,

A handwritten signature in black ink that reads "Lesley A. Slavin, Ph.D." The signature is written in a cursive, flowing style.

Lesley A Slavin, Ph. D.
Hawaii Licensed Psychologist
Kailua, HI

SB-2829

Submitted on: 2/3/2022 11:46:55 AM

Testimony for HTH on 2/4/2022 1:00:00 PM

Submitted By	Organization	Testifier Position	Remote Testimony Requested
Ursula PLATTE	Individual	Support	No

Comments:

My name is Ursula Platte, I am a licensed MFT in Hawaii in private practice and I support the SB2829.

Aloha

SB-2829

Submitted on: 2/3/2022 11:56:52 AM

Testimony for HTH on 2/4/2022 1:00:00 PM

Submitted By	Organization	Testifier Position	Remote Testimony Requested
Jamaica Moake	Individual	Comments	No

Comments:

Jamaica Moake- Counseling/Clinical Psychology Intern, Master's student

February 3, 2022

Testimony regarding Bill 2829

As a an intern for a counseling/clinical psychology private practice in our local community, I am aware of the massive need for mental health clinicians in both Hilo and the whole state. I am also a master's student at the University of Hawai'i, Hilo. The Counseling Psychology program prepares us to work as Mental Health Counselors in the state of Hawai'i.

One of the challenges post-graduation from mental health training programs is that you must earn 3,000 supervised hours to become licensed eligible. In many other states (such as Washington, California, and D.C.) a provisional license is granted once passing a state exam, then hours are accrued for up to two years and you apply for your state license. In the state of Hawaii we don't have a provisional license yet. The consequences to our community due to this gap in licensure are endless. Many private and group practice providers are unable to hire unlicensed providers because they cannot bill insurance companies for their services. This means graduates are typically forced to take low/underpaid positions in larger agencies (some of these are wonderful positions but the options are limited). 30% of these graduates wind up leaving the field due to not making enough money to support themselves.

This bill would allow MFTs and Psychologists to earn an associate/provisional license so that they can bill insurance companies for their work (provided they are supervised, payment may be less than fully licensed providers). This is an important piece of legislation as it will open the doors to more opportunities for trained mental health professionals and it increases access to mental health care to the citizens of the State.

Licensed Marriage and Family Therapists, Licensed Mental Health Counselors, Licensed Clinical Social Workers, and Licensed Psychologists all use the "Psychotherapy" CPT code for insurance billing purposes.

However, Mental Health Counselors are not currently included in the current bill. I am in support of bill SB2829 with the amendment to include Mental Health Counselors (future Licensed Mental Health Counselors- LMHCs) to this bill. An amendment has been submitted as testimony by Justin Miller, LMHC in the state of Hawaii.

If this bill is to increase access to mental health services, then it is imperative that Mental Health Counselors are not left out in this bill.

Thank you for your time and consideration,

Jamaica A. Moake

SB-2829

Submitted on: 2/3/2022 12:00:26 PM

Testimony for HTH on 2/4/2022 1:00:00 PM

Submitted By	Organization	Testifier Position	Remote Testimony Requested
Laura Ellen Maile Pokipala	Individual	Comments	No

Comments:

Aloha,

I humbly request the passing of bill SB2829 with ammendments, as it pertains to the efforts being made to address the need for qualified Mental Health Professionals. The traumas that our community has suffered in the recent past has contributed to an increase of people in the State of Hawai‘i dealing with serious mental health issues. There is an immediate need to heal our people from the traumas of the past, present and prepare them to accept the unknown future in a healthy manner.

This bill would allow MFTs and Psychologists to earn an associate/provisional license so that they can bill insurance companies for their work (provided they are supervised, payment may be less than fully licensed providers). This is an important piece of legislation as it will open the doors to more opportunities for trained mental health professionals and it increases access to mental health care to the citizens of the State. However, Mental Health Counselors are not currently included in the current bill.

I am writing in strong support of SB2829 as long as it is amended to also cover graduates of master’s programs that meet the Hawai‘i standards for the training of Licensed Mental Health Counselors.

Mahalo,

Laura Ellen Maile Pokipala

SB-2829

Submitted on: 2/3/2022 12:07:44 PM

Testimony for HTH on 2/4/2022 1:00:00 PM

Submitted By	Organization	Testifier Position	Remote Testimony Requested
michael moake	Individual	Comments	No

Comments:

Michael Moake- counselor and concerned citizen

Testimony regarding Bill 2829

My wife is an intern for a counseling clinical psychology private practice in our local community and a masters student at University of Hawaii Hilo. I am aware of the massive need for mental health clinicians in both Hilo and the whole state. The Counseling Psychology program prepares its students to work as Mental Health Counselors in the state of Hawai'i.

One of the challenges post-graduation from mental health training programs is that you must earn 3,000 supervised hours to become licensed eligible. In many other states (such as Washington, California, and D.C.) a provisional license is granted once passing a state exam, then hours are accrued for up to two years and you apply for your state license. In the state of Hawaii we don't have a provisional license yet. The consequences to our community due to this gap in licensure are endless. Many private and group practice providers are unable to hire unlicensed providers because they cannot bill insurance companies for their services. This means graduates are typically forced to take low/underpaid positions in larger agencies (some of these are wonderful positions but the options are limited). 30% of these graduates wind up leaving the field due to not making enough money to support themselves.

This bill would allow MFTs and Psychologists to earn an associate/provisional license so that they can bill insurance companies for their work (provided they are supervised, payment may be less than fully licensed providers). This is an important piece of legislation as it will open the doors to more opportunities for trained mental health professionals and it increases access to mental health care to the citizens of the State.

Licensed Marriage and Family Therapists, Licensed Mental Health Counselors, Licensed Clinical Social Workers, and Licensed Psychologists all use the "Psychotherapy" CPT code for insurance billing purposes.

However, Mental Health Counselors are not currently included in the current bill. I am in support of bill SB2829 with the amendment to include Mental Health Counselors (future Licensed Mental Health Counselors- LMHCs) to this bill. An amendment has been submitted as testimony by Justin Miller, LMHC in the state of Hawaii.

If this bill is to increase access to mental health services, then it is imperative that Mental Health Counselors are not left out in this bill.

Thank you for your time,

Michael Moake

SB-2829

Submitted on: 2/3/2022 12:12:02 PM

Testimony for HTH on 2/4/2022 1:00:00 PM

Submitted By	Organization	Testifier Position	Remote Testimony Requested
Cindy Rote	Individual	Support	No

Comments:

Cindy Rote – UH Hilo Master’s student

February 3, 2022

Testimony regarding Bill 2829 - support with ammendment to include mental health counselors

As a student affairs professional in higher education working with collegiate student-athletes, I am well aware of the massive need of mental health services for college students and all populations in our community. After completing my doctorate degree, I felt compelled to pursue a second master degree in mental health counseling to be able to provide mental health services to both the students I currently work with and to volunteer my services in the community in the future.

One of the challenges post-graduation from mental health training programs is that you must earn 3,000 supervised hours to become licensed eligible. In many other states, such as Washington and California, a provisional license is granted once passing a state exam. Then the 3,000 required hours are accrued for up to two years. One may apply for their permanent state license after completing the required hours. In Hawaii a provisional license does not exist yet. A provisional license would benefit both the community members and those seeking their license.

The consequences to our community due to this gap in licensure are vast. Many private and group practice providers are unable to hire unlicensed providers because they cannot bill insurance companies for their services. Graduates tend to be limited to low paying positions in larger agencies while completing the required hours to obtain their license. It is estimated that 30% of graduates leave the counseling profession before completing the license requirements due to financial hardship and the opportunities to earn more in other professions while living in Hawai‘i with one of the highest costs of living in the country.

Senate bill 2829 would allow MFTs and Psychologists to apply for a provisional license. This is an vital piece of legislation as the need for licensed mental health professions in Hawaii is dire. Licensed Marriage and Family Therapists, Licensed Mental Health Counselors, Licensed Clinical Social Workers, and Licensed Psychologists all use the “Psychotherapy” CPT code for insurance billing purposes.

Mental Health Counselors are not included in the current bill and need to be added and included. I am in support of SB2829 with the amendment to include Mental Health Counselors (future Licensed Mental Health Counselors- LMHCs) to this bill. An amendment has been submitted as testimony by Justin Miller, LMHC (Hawai'i). If this bill is to increase access to mental health services, then it is imperative that Mental Health Counselors be included.

Thank you for your time and service.

Cindy Rote

SB-2829

Submitted on: 2/3/2022 12:35:34 PM

Testimony for HTH on 2/4/2022 1:00:00 PM

Submitted By	Organization	Testifier Position	Remote Testimony Requested
Rosemary Strong	Individual	Support	No

Comments:

I support the bill and would like to add associate Mental Health Counselors. This is a designation of individuals who have completed training in counseling, which is one of the major degree programs in Hawaii. To be left off this bill excludes a large population of clinicians who would be able to clinically support the population of Hawaii.

SB-2829

Submitted on: 2/3/2022 12:37:34 PM

Testimony for HTH on 2/4/2022 1:00:00 PM

Submitted By	Organization	Testifier Position	Remote Testimony Requested
Antonio Anagaran Jr	Individual	Comments	No

Comments:

Aloha,

As a current graduate student, planning on persuing licenture as a Licensed Mental Health Counselor, I am writing in strong support of SB2829 as long as it is amended to also cover graduates of master's programs that meet Hawaii standards for the training of Licensed Mental Health Counselors.

Thank you for your consideration,

Antonio Anagaran Jr.

SB-2829

Submitted on: 2/3/2022 12:49:33 PM

Testimony for HTH on 2/4/2022 1:00:00 PM

Submitted By	Organization	Testifier Position	Remote Testimony Requested
Christopher Naylor	Individual	Oppose	No

Comments:

Good Afternoon,

This bill excludes Licensed Mental Health Counselors (LMHCs). As such, I cannot support it in current form. Why did a mental health bill aimed to improve services for our state explicitly exclude our valuable Mental Health Counselors. Please add them into the bill.

Yours sincerely,

C Naylor

SB-2829

Submitted on: 2/3/2022 12:52:00 PM

Testimony for HTH on 2/4/2022 1:00:00 PM

Submitted By	Organization	Testifier Position	Remote Testimony Requested
Amber Nakihei	Individual	Comments	No

Comments:

February 3, 2022

Testimony regarding Bill 2829

As a master’s student at the University of Hawai’i at Hilo in the Counseling Psychology program, I, along with my fellow classmates are being prepared to work as Mental Health Counselors in the state of Hawai’i.

One of the challenges post-graduation from mental health training programs is that you must earn 3,000 supervised hours to become licensed eligible. In many other states (such as Washington, California, and D.C.) a provisional license is granted once passing a state exam, then hours are accrued for up to two years and you apply for your state license. In the state of Hawaii we don’t have a provisional license yet. The consequences to our community due to this gap in licensure are endless. **Many private and group practice providers are unable to hire unlicensed providers because they cannot bill insurance companies for their services.** This means graduates are typically forced to take low/underpaid positions in larger agencies (some of these are wonderful positions but the options are limited). 30% of these graduates wind up leaving the field due to not making enough money to support themselves.

This bill would allow MFTs and Psychologists to earn an associate/provisional license so that they can bill insurance companies for their work (provided they are supervised, payment may be less than fully licensed providers). This is an important piece of legislation as it will open the doors to more opportunities for trained mental health professionals and it increases access to mental health care to the citizens of the State.

Licensed Marriage and Family Therapists, Licensed Mental Health Counselors, Licensed Clinical Social Workers, and Licensed Psychologists all use the “Psychotherapy” CPT code for insurance billing purposes.

However, Mental Health Counselors are not currently included in the current bill. I am in support of bill SB2829 with the amendment to include Mental Health Counselors (future Licensed Mental Health Counselors- LMHCs) to this bill. An amendment has been submitted as testimony by Justin Miller, LMHC in the state of Hawaii.

If this bill is to increase access to mental health services, then it is imperative that Mental Health Counselors are not left out in this bill.

Thank you for your time,

Amber Nakihei

SB-2829

Submitted on: 2/3/2022 12:52:07 PM

Testimony for HTH on 2/4/2022 1:00:00 PM

Submitted By	Organization	Testifier Position	Remote Testimony Requested
Diane Logan	Individual	Support	No

Comments:

I am writing in strong support of SB2829. As a practicing psychologist working in an underserved community with limited resources, allowing provision licensure for psychology post docs would increase services while providing a living wage for our trainees, and allow supervisors familiar with our communities to work with students and develop cultural competence. This provision is allowed in multiple other states, and we see trainees leaving Hawaii to secure training experiences where they can be paid. This adds to our lack of providers compared with community need. I would personally love to support a postdoctoral trainee especially given my expertise in substance use disorder treatment, but there is no current financial support for me to train new providers. The community need is so great I am regularly turning away requests for treatment.

As President of the Hawaii Psychological Association (with Executive Committee approval) and president of the Hawaii Island Psychological Association, and a private practice psychologist, please support this bill.

SB-2829

Submitted on: 2/3/2022 12:54:23 PM

Testimony for HTH on 2/4/2022 1:00:00 PM

Submitted By	Organization	Testifier Position	Remote Testimony Requested
Christy Chadwick	Individual	Support	No

Comments:

I am a Marriage and Family Therapist - Intern, recent graduate with a Masters in Marriage and Family Therapy, and working in private practice in Hawai'i. I am testifying today in support of SB2829. Establishing a provisional or associate level license and reimbursement allowances for certain mental health practitioners and allowing psychologist license applicants to sit for licensure exam before completing other requirements. This would allow for greater access to necessary mental health services that many people in the state require. It also helps incoming therapists receive beneficial supervision, guidance, and reimbursement for their services as they help to provide these services.

In my practice, I turn away many people from services due to the inability to collect insurance and because they are unable to pay cash. I see many clients on a sliding scale or pro bono in order to meet the required hours towards licensure. This hinders my ability to offer quality care and quantity of care to the numerous people reaching out for services.

According to a Household Pulse Survey created by the Census Bureau, "over 45% of Americans aged 18 to 29 reported symptoms of anxiety or depression in the latest survey. Younger Americans generally report the highest rates of anxiety or depression symptoms, with rates decreasing for each subsequent age group."

Making a provisional or associate level license expands the ability for practitioners to reach clients and for people to receive the much needed mental health services they are seeking.

Thank you for the opportunity to submit testimony.

Respectfully submitted,

Christy Chadwick

SB-2829

Submitted on: 2/3/2022 1:00:54 PM

Testimony for HTH on 2/4/2022 1:00:00 PM



Submitted By	Organization	Testifier Position	Remote Testimony Requested
Matt McDonald	Individual	Support	No

Comments:

Testimony in Strong Support of SB2829 RELATING TO MENTAL HEALTH

I, Matt McDonald, strongly support SB2829 as a critical tool in meeting the overwhelming demand for quality mental health services, particularly during and following the prolonged pandemic. Here’s a snapshot of current ratios of clients/patients to mental health providers in Hawai’i:

Hawai’i 320:1

Honolulu 370:1

Kauai 480:1

Maui 550:1

Moloka’i has no registered providers.

Obviously, this demand far exceeds the viable supply of mental health providers. SB2829 would establish provisional or associate-level licensure requirements for Marriage and Family Therapists and Psychologists, creating a regulatory framework that would encourage relevant and quality training to associate-level providers by authorizing insurance reimbursement for supervised care provided by these post-degree/pre-licensed mental health professionals during the 1-2 year period they are completing required supervised practice hours under the mentorship/guidance of an independently licensed mental health professional.

In 23 other states, associate-level licensure is already established as common practice and provides not only expands access for clients to providers, but also creates a viable career path for locals interested in pursuing a career as a mental health professional, but who otherwise might not be able to actualize this career due to current restrictions that often force post-graduate/pre-licensed providers to work in contexts that do not provide sufficiently relevant experience (e.g., prisons, substance abuse centers, case management, etc.) and/or they must work for sub-part wages or pro bono (while also paying a supervisor to oversee their work).

The current bill would be a critical reform to Hawai’i’s licensing statutes that would not only modernize our processes, but ultimately improve the quality of care provided to state residents by creating a systemic of accountability, a viable career path for locals who can better connect with local clients, and who in turn, will be more likely to actually utilize mental health services. Moreover, this bill will reduce the loss of potential future mental health professionals to other careers or one of the other 23 states that have already modernized their licensing laws, which in

turn will contribute to the state economy through associate licensing fees, taxes from wages earned by associate-level licensees, and local purchases made by these licensees.

Overall, many aspects of our mental health system are deeply flawed, understaffed, and are in no way prepared to manage the onslaught of mental health issues that the general population are experiencing during and after this pandemic. The consequences of this pandemic, both short- and long-term, in terms of mental health, could be significant and could weaken the Hawai'i health care system.

If we don't develop the means to stave off and/or treat these mental health issues, individuals and families will suffer even more than they already. In all areas of life, untreated mental health issues can become chronic and with crippling, long-term effects.

These circumstances call for a change in the paradigm and practices of mental health care. Our current model of mental health care does not adequately address the complex challenges of the existing circumstances. We need to re-vision current models of mental health care delivery. To do this, we let's be creative and flexible in how we provide mental health services to protect our community, by taking appropriate action now and quickly. Mental health care cannot be an afterthought.

Thank you for the opportunity to provide this testimony in strong support of this bill.

Sincerely,

Matt McDonald

SB-2829

Submitted on: 2/3/2022 1:20:29 PM

Testimony for HTH on 2/4/2022 1:00:00 PM



Submitted By	Organization	Testifier Position	Remote Testimony Requested
Danni Sutana Gardner	Individual	Support	No

Comments:

The ratio of patients to therapist is 320:1 in Hawaii County. Hawaiians are waiting 4-6 months for a therapist. The associate license will allow more access to therapy without compromising quality. Currently, there are 23 states that recognize associate licenses for MFTs. The process to become a therapist is expensive. The average cost of education is \$80,000 and therapists in training are required to work for two years unpaid. Hawaii has the highest cost of living. Native Hawaiians interested in pursuing a career as a therapist cannot afford to do so. Many people cannot.

By passing the associate license bill, it will allow more therapists in training to enter the workforce and provide services those in need.

SB-2829

Submitted on: 2/4/2022 3:12:07 AM

Testimony for HTH on 2/4/2022 1:00:00 PM

LATE

Submitted By	Organization	Testifier Position	Remote Testimony Requested
Grace Bezilla	Individual	Support	No

Comments:

kāko‘o.

SB-2829

Submitted on: 2/4/2022 7:07:44 AM
Testimony for HTH on 2/4/2022 1:00:00 PM



Submitted By	Organization	Testifier Position	Remote Testimony Requested
shantee brown	Individual	Support	No

Comments:

the barriers to finding a counselor on hawai'i island are huge. once you break through the mental barrier that say's something is wrong with you for wanting to talk to a professional, you need to jump over the barriers of insurance coverage and finding a therapist who can take new patients. a friend in crisis recently said they called 4 therapists and is on a 2 month long waitlist. this is how people give up and take their lives. your vote in support of this bill can save lives, families, relationships. please support equitable qualifications as this current structure limits local people from stepping up to their calling as counselors and filling a need for our communities.

mahalo.

SB-2829

Submitted on: 2/4/2022 7:16:13 AM
Testimony for HTH on 2/4/2022 1:00:00 PM



Submitted By	Organization	Testifier Position	Remote Testimony Requested
Noel Shaw	Individual	Support	No

Comments:

Aloha,

There is an increased need for mental health support during this time. We need care providers at an increased rate. Covid 19 has heightened the need more so. Please pass this bill to help make it possible.

Mahalo,

Noel