

STATE OF HAWAII | KA MOKU'ĀINA 'O HAWAII
**DEPARTMENT OF CORRECTIONS
AND REHABILITATION**
**Ka 'Oihana Ho'omalua Kalaima a
Ho'oponopono Ola**
1177 Alakea Street
Honolulu, Hawaii 96813

TOMMY JOHNSON
DIRECTOR

Melanie Martin
Deputy Director
Administration

Vacant
Deputy Director
Correctional Institutions

Sanna Muñoz
Deputy Director
Rehabilitation Services
and
Programs

No. _____

AMENDED
**TESTIMONY ON SENATE BILL 760
RELATING TO PSYCHOLOGISTS**
By
Tommy Johnson, Director

Senate Committee on Health and Human Services
Senator Joy A. Buenaventura, Chair
Senator Henry J.C. Aquino, Vice Chair

Friday, January 26, 2024; 1:00 p.m.
State Capitol, Conference Room 225 and via Videoconference

Chair Buenaventura, Vice Chair Aquino, and Members of the Committee:

The Department of Corrections and Rehabilitation (DCR) has reviewed Senate Bill (SB) 760, which requires the Board of Psychology to establish a pilot program to grant prescriptive authority to qualified psychologist applicants statewide.

The Department supports SB 760, but we respectfully provide restrictions for the legislature to consider including in this measure. The mental health needs of our incarcerated detainees would be assisted by any positive outcomes from the program. The previous approval of prescriptive authority being granted to other licensed health care professionals has proved to be an effective solution to health care barriers. The DCR recognizes the oppositional concerns by some psychologists regarding licensure under "non-traditional means and substandard training" which is why we concur with the DOH's recommendation for conditional support with the following conditions:

- No black box prescriptions for minors despite guardians' approval.
- No AMHD consumers without prior approval.

Testimony on SB 760

Senate Committee on Health and Human Services

January 26, 2024

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- Collaborative practice agreement with a physician.

In conclusion the DCR respectfully defers to the expertise of the Department of Commerce and Consumer Affairs (DCCA) and Board of Psychology on the assessment and requirements of the proposed program.

Thank you for the opportunity to provide testimony in **support** of SB 760.

Testimony of the Board of Psychology

**Before the
Senate Committee on Health and Human Services
Friday, January 26, 2024
1:00 p.m.
Conference Room 212 and Videoconference**

**On the following measure:
S.B. 760, RELATING TO PSYCHOLOGISTS**

Chair San Buenaventura and Members of the Committee:

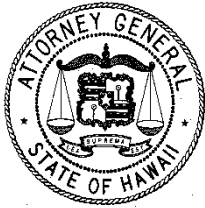
My name is Christopher Fernandez, and I am the Executive Officer of the Board of Psychology (Board). The Board offers comments on this bill.

The purpose of this bill is to require the Board of Psychology to establish a pilot program to grant prescriptive authority to qualified psychologist applicants statewide.

The Board will review this bill at its scheduled meeting on February 9, 2024. In the meantime, the Board's legislative committee (Committee) offers the following comments:

This bill is substantially similar to bills related to the prescriptive authority of qualifying psychologists in past legislative sessions including: S.B. 677 from the 2023 legislative session, and S.B. 131 from the 2021 legislative session. The Committee acknowledges that S.B. 677 did not seek to establish a pilot program, but both it and S.B. 131 establish the same criteria for training and education to acquire prescriptive authority. The Board previously supported S.B. 677 and S.B. 760 during the 2023 legislative session, noting a potential need to add or specify that a member of the Board holds prescriptive authority.

Thank you for the opportunity to testify on this bill.



**TESTIMONY OF
THE DEPARTMENT OF THE ATTORNEY GENERAL
KA 'OIHANA O KA LOIO KUHINA
THIRTY-SECOND LEGISLATURE, 2024**

ON THE FOLLOWING MEASURE:
S.B. NO. 760, RELATING TO PSYCHOLOGISTS.

BEFORE THE:
SENATE COMMITTEE ON HEALTH AND HUMAN SERVICES

DATE: Friday, January 26, 2024 **TIME:** 1:00 p.m.

LOCATION: State Capitol, Room 225 & Videoconference

TESTIFIER(S): Anne E. Lopez, Attorney General, or
Andrew I. Kim or Bryan C. Yee, Deputy Attorneys General

Chair San Buenaventura and Members of the Committee:

The Department of the Attorney General provides the following comments on this bill.

This bill requires the Board of Psychology to establish a pilot program to grant prescriptive authority to qualified psychologist applicants statewide.

This bill may contain an unlawful delegation of legislative power by incorporating future publications of the Diagnostic and Statistical Manual of Mental Disorders (DSM) into the statute. Page 8, lines 13-18, provides: “‘Serious mental illness’ means bipolar I disorder, bipolar II disorder, delusional disorder, major depressive disorder with psychotic features, psychosis secondary to substance use, schizophrenia, schizophreniform disorder, and schizoaffective disorder, as defined by the most current version of the Diagnostic and Statistical Manual of Mental Disorders.” (emphasis added). Page 16, lines 15-18, similarly provides: “A prescribing psychologist shall only prescribe and administer medications for the treatment of mental health disorders as defined by the most current version of the Diagnostic and Statistical Manual of Mental Disorders.” (emphasis added). As currently drafted, this bill would incorporate future hypothetical changes that are made to the DSM automatically. This empowerment of private persons to decide what the law will be may be invalid as an unlawful delegation of legislative power. See State v. Christie, 70 Haw. 158, 171, 766 P.2d 1198, 1205 (1988) (“legislation empowering ‘private persons to decide what the law shall be’ may

be invalid.”); cf. State v. Tengan, 67 Haw. 451, 463, 691 P.2d 365, 373 (1984) (“state legislation which adopts by reference *future* legislation, rules, or regulations, or amendments thereof, which are enacted, adopted, or promulgated by another sovereign entity, [would constitute] an unlawful delegation of legislative power.”).

Accordingly, we recommend amending the above language (page 8, lines 17-18 and page 16, lines 17-18), as follows: “as defined by [~~the most current version of~~] the Diagnostic and Statistical Manual of Mental Disorders[-], Fifth Edition, Text Revision (DSM-5-TR), or as may be provided by the board by rule.” Including a provision that would allow revision through agency rule-making as updates to the DSM become available would obviate the need for future legislation.

Thank you for the opportunity to offer comments.

OFFICE OF THE MAYOR

DEREK S.K. KAWAKAMI, MAYOR

REIKO MATSUYAMA, MANAGING DIRECTOR



Testimony of Derek S.K. Kawakami

Mayor, County of Kaua'i

Before the

Senate Committee on Health and Human Services

January 26, 2024; 1:00 PM

Conference Room 225 & Videoconference

In consideration of

Senate Bill 760 Relating to Psychologists

Honorable Chair San Buenaventura, Vice Chair Aquino, and Members of the Committee:

The County of Kaua'i is in **strong support** of SB 760 which Requires the Board of Psychology to establish a pilot program to grant prescriptive authority to qualified psychologist applicants statewide.

The December 2023 Hawai'i Physician Workforce Assessment Project continues to indicate a significant shortage of doctors throughout our state and especially on our outer islands. Included in this shortage is a substantial deficiency of psychiatrists. With a lack of access to appropriate mental health treatment, the consequences are devastating and too often end in suicide.

In recent years, Idaho, Iowa, Illinois, Louisiana, and New Mexico have adopted legislation authorizing prescriptive authority for advanced trained psychologists as a means of addressing the shortage of adequate evaluation and treatment for their mental health patients and have had success with this practice.

We look forward to the implementation of this pilot program providing prescriptive authority to qualified psychologists statewide.

Thank you for your consideration of this important mental health service.



January 25, 2024

INETMED RX2 INC.

• 575-636-2506 • 1635 S. Don Roser, Las Cruces, NM 88011

The Prescribing Psychologist program is a commendable initiative aimed at addressing the mental health needs of underserved populations. Mental health disparities have long plagued marginalized communities, and this program strives to bridge the gap by providing accessible and quality care.

New Mexico, with its diverse demographic makeup and rural landscapes, often faces challenges in delivering mental health services to those in need. The iNetMed Rx2 organizations utilizes technology to connect mental health professionals with underserved communities, transcending geographical barriers. Through telehealth, providers can offer psychiatric and psychological care, and support, allowing individuals to receive assistance without the need to travel long distances.

This initiative does not just tackle accessibility; it also emphasizes cultural competence. Providers acknowledge the importance of understanding and respecting the cultural backgrounds of the population they serve. By recognizing the unique experiences and challenges faced by different communities, iNetMed Rx2 clinical leadership ensures that mental health services provided are relevant and sensitive to cultural nuances, thus increasing their effectiveness.

Collaboration is at the core of iNetMed Rx2's success. The providers coordinate care with physicians, clinics and community organizations that address economic and social disparities. This collaborative approach not only strengthens the organization's outreach but also fosters a sense of community involvement and ownership in addressing mental health issues.

With the prescribing psychology law in New Mexico, iNetMed Rx2 has provide since 2017:

1. 63, 404 Visits
2. 5,128 Total new patients
3. 150 Avg Visits per week
4. 2005 Total workdays

The company continues to expand psychiatric services throughout the state (see attached).

Dr. Jo Velasquez, PhD, MSCP, COO



To: Committee on Health and Human Services

Hearing Date/Time: Friday, January 26, 2024 at 1:00 pm

Re: Testimony to Strongly Support of SB 760

From: Heather Lusk, Hawaii Health & Harm Reduction Center

Dear Chair Senator Joy A. San Buenaventura, Vice Chair Senator Henry J.C. Aquino, and members of the committees.

The Hawaii Health & Harm Reduction Center (HHRC) supports SB 760 which would provide a pathway for psychologists to be granted prescriptive authority for a pilot project at FQHCs. Hawai'i is in a crisis with access to mental health providers - especially those who can prescribe medications. This pilot project has requirements and guardrails to ensure adequate training and support which would result in many more of our island residents getting access to life-changing medications. This discussion has been ongoing for years, as our community continues to suffer from untreated mental illness on the streets and in our families. The time has come to conduct a pilot and demonstrate that this concept will save lives.

HHRC's mission is to *reduce harm, promote health, create wellness, and fight stigma in Hawai'i and the Pacific*. We focus our efforts on those disproportionately affected by social determinants of health, including but not limited to: people living with and/or affected by HIV, hepatitis, substance use, and the transgender, LGBTQ and the Native Hawaiian communities. We support increased access to mental health services, but strongly feel these services should be outside the correctional setting.

HHRC is lucky to have a psychiatrist on staff and knows firsthand the challenges of not having enough capacity to support medication management and especially the clinical support of both mental health and substance use disorders. We need more capacity as a system, and this bill will provide much-needed access and will demonstrate that prescribing can be done safely and effectively with psychologists who have the proper training and support.

Thank you for the opportunity to testify.

Heather Lusk, LCSW, MSW
Executive Director
Hawaii Health & Harm Reduction Center

Hawai'i Psychological Association

LATE

For a Healthy Hawai'i

P.O. Box 833
Honolulu, HI 96808

www.hawaiipsychology.org

Phone: (808) 521-8995

COMMITTEE ON HEALTH AND HUMAN SERVICES

Senator Joy A. San Buenaventura, Chair

Senator Henry J.C. Aquino, Vice Chair

January 26, 2024 1:00 P.M. – Rm 225 and via VIDEO CONFERENCE

Testimony in Strong Support of SB760 RELATING TO PSYCHOLOGISTS

The Hawaii Psychological Association **strongly supports SB760**. This bill would create a demonstration project that will allow advanced trained psychologists to prescribe and dispense medication within the scope of practice of psychology as defined by Hawai'i Law – **and only in consultation and collaboration with a patient's primary care provider**.

For over three decades, clinical psychologists in the State of Hawai'i have proposed this action as an important and necessary tool to improve access to mental health care, particularly to those in underserved and un-served areas.

We support this bill for numerous reasons:

1. Most importantly, SB760 would vastly increase access to care for members of the Native Hawaiian community. The number of prescribing psychiatrists available to the community in the state of Hawai'i is not adequate. Psychiatry has the highest opt-out rate of any specialty in Medicare and Medicaid.¹
2. In Hawai'i, a huge void in available mental health care can be safely filled by granting prescription privileges to already licensed clinical psychologists who go on to obtain extensive advanced training in clinical psychopharmacology.
3. Psychologists have been prescribing medications since 1974. They have done so in state systems, in the Indian Health Service, and in the Department of Defense (Army, Navy, and Air Force) with few adverse effects or safety concerns.
4. There are now approximately 300 psychologists who have been licensed to prescribe in New Mexico, Louisiana, Illinois, Iowa, Idaho and Colorado with demonstrated increases in access to care and no major safety issues. **In New Mexico, for example, prescribing psychologists have increased access to care among Medicaid patients by 60%.** In both New Mexico and Louisiana, after almost 20 years of practice, there have been zero verdicts against medical psychologists regarding prescribing.
5. There are now over 1,425 graduates from APA designated Master of Science in Clinical Psychopharmacology (MSCP) programs and another 241 current students. The number of

¹ <https://www.kff.org/medicare/issue-brief/how-many-physicians-have-opted-out-of-the-medicare-program/>

people interested in Prescribing Psychology has skyrocketed in the last five years. Membership in national and regional prescribing groups have increased as much as 2.5 times in the last five years.

6. The education and training outlined in this bill, based in part on the already proven training of the U.S. Department of Defense Psychopharmacology Demonstration Project, and consistent with the American Psychological Association's Recommended Post-Doctoral Training in Psychopharmacology for Prescription Privileges, will provide psychologists with the core knowledge in medicine and psychopharmacology they will need to prescribe psychotropic medications safely and effectively.
7. The training usually occurs after a psychologist has completed a doctoral degree and is licensed, and all costs are covered by the individual psychologist, with no appropriation needed.
8. Recent Studies indicate that psychologists prescribe less than psychiatrists.²
9. Recent Studies indicate that psychologists make fewer errors than psychiatrists.³
10. Psychologists perform well on pharmacology exams - at rates that are on par with psychiatrists and psychiatric nurse practitioners.⁴
11. There have been no/few lawsuits related to medical malpractice by prescribing psychologists according to insurance claims.
12. Suicide rates have been reduced by 5-7% in New Mexico and Louisiana after implementing prescriptive authority for psychologists.⁵
13. In a head-to-head comparison of didactic and clinical training protocols, Prescribing Psychologists receive training very similar to that of Psychiatrists; and more than Nurse Practitioners, Physician Assistants, Podiatrists, Dentists and Optometrists.⁶

² Phillip Hughes, personal communication and testimony submitted for SB760 and SB2049

³ Phillip Hughes, personal communication and testimony submitted for SB760 and SB2049

⁴ Cooper, Ryan R. 2020. Comparing Psychopharmacological Prescriber Training Models via Examination of Content-Based Knowledge. Master's thesis, Harvard Extension School. (See <https://nrs.harvard.edu/URN-3:HUL.INSTREPOS:37365636>)

⁵ Phillip M. Hughes, Robert E. McGrath, Kathleen C. Thomas. In press. Evaluating the impact of prescriptive authority for psychologists on the rate of deaths attributed to mental illness. *Research in Social and Administrative Pharmacy*. Choudhury AR, Plemmons A. Deaths of despair: prescriptive authority of psychologists and suicides. Published online <https://www.thecgo.org/research/deaths-of-despair/>; September 28, 2021.

⁶ Linda, W. P., & McGrath, R. E. (2017). The current status of prescribing psychologists: Practice patterns and medical professional evaluations. *Professional Psychology: Research and Practice*, 48(1), 38–45. <https://doi.org/10.1037/pro0000118>

14. In a 2007 study conducted by the Hawaii State Legislative Reference Bureau, it was reported on p. 73 that:

“Community health centers in Hawaii have indicated support for prescribing psychologists as a way to increase access to mental health services needed by their clients. Furthermore, some community health centers have indicated that their clients' mental health needs may be better served by hiring mental health care providers other than psychiatrists.”⁷

In conclusion, this bill will enable psychologists with the requisite training and credentials to provide a full range of mental health services to Hawai'i's unserved and underserved communities – **and only in consultation and collaboration with a patient's primary care provider**. Please help our communities by supporting SB760.

Thank you for your consideration.

Sincerely,



Raymond A Folen, Ph.D., ABPP.
Executive Director

Chart 1: Prescribing Professionals in Pennsylvania
Comparisons in Education Prior to Licensure

Psychiatrist	Primary Care Physician	Physician Assistant	Nurse Practitioner	Prescribing Psychologist	Podiatrist	Optometrist	Dentist
Bachelor's Degree	Bachelor's Degree	Bachelor's Degree	Bachelor's Degree	Bachelor's Degree	Bachelor's Degree	Bachelor's Degree	Bachelor's Degree
Doctoral Degree	Doctoral Degree	Master's Degree	Master's Degree	Doctoral Degree	Doctoral Degree	Doctoral Degree	Doctoral Degree
Licensing Exam	Licensing Exam	Licensing Exam	Licensing Exam	Licensing Exam	Licensing Exam	Licensing Exam	Licensing Exam
Grad Med Trainee License	Grad Med Trainee License	PA-C License	CRNP License	Psychology License	Podiatry License	Optometry License	Dental License
Residency (4 years)	Residency (3 years)			Additional Master's Degree			
Licensing Exam	Licensing Exam			National Examination			
Physician License	Physician License			Prescribing Certificate			
Prescribe Any Medication	Prescribe Any Medication	Prescribe medications under physician co-signature	Prescribe medications with collaborative agreement	Prescribe psychotropic medication only with collaborative agreement	Prescribe medications relative to speciality	Prescribe medications relative to speciality	Prescribe medications relative to speciality

⁷ <https://library.lrb.hawaii.gov/cgi-bin/koha/opac-retrieve-file.pl?id=8c6778bed86b5b58668fe2edb4dc383c>

Good morning, Madame Chair and members of the Committee. Thank you for the opportunity to testify today.

My name is Dr. Petros Levounis. I am President of the American Psychiatric Association (APA), the national medical specialty representing nearly 39,000 psychiatric physicians across the country, including Hawaii.

We urge the Committee to oppose SB 760, which would establish a pilot program to allow psychologists to prescribe medications to patients seen through federally qualified health centers.

If enacted, SB 760 would jeopardize patient safety in Hawaii. We are opposed for the following reasons:

Training: Psychologists are trained in behavioral intervention but are not medically trained. Alternatively, psychiatrists have 4 years of medical school and 4 years of residence and 12,000 hours of clinical training.

Patient Safety: Medical training is an essential component of prescribing, especially for our most vulnerable and underserved patients with complex medical needs.

Comorbidity: Patients needing more than one drug at a time for other physical conditions, such as both heart disease or diabetes and mental illness, are at risk for potentially serious drug interactions

Health Disparities: Adding prescribers who are not medically trained could further stigmatize already underserved patients by creating a two-tiered system that could exacerbate health disparities.

Access: There is a workforce shortage of psychologists in rural and underserved areas. This will not increase access but instead jeopardize patient safety in these areas.

We strongly encourage the committee to protect patient safety by focusing on solutions such as expanding audio-only telehealth services and access to the Collaborative Care Model.

Thank you.



Senator Joy San Buenaventura, Chair
Senator Henry Aquino, Vice-Chair
Senate Committee on Health and Human Services
Hawaii State Capitol, Room 225

Friday, January 26, 2024
1:00 PM
Re: SB 760 - Relating to Psychologists

Chair San Buenaventura, Vice-Chair Aquino, and members of the Committee:

The Hawaii Psychiatric Medical Association (HPMA) is a professional, non-profit corporation serving psychiatrists in Hawaii. It is organized for the purpose of supporting professionalism in the practice of psychiatry and promoting top quality mental health care. HPMA fulfills a dual role, serving as a state association which focuses on local issues and as a district branch of the American Psychiatric Association (APA) linking HPMA members with developments in mental health care taking place regionally and nationally. We represent nearly 200 Psychiatrists, 30 of whom are Resident Physicians (Psychiatrists in Training).

HPMA is in opposition to SB 760. This bill requires the Board of Psychology to establish a pilot program to grant prescriptive authority to qualified psychologist applicants statewide. We urge the Committee to oppose SB 760. If passed, this bill could endanger the lives of Hawaii's most vulnerable citizens – our Keiki, rural populations, and Kupuna – by allowing psychologists to prescribe potentially dangerous medications.

Psychologists are an important part of our behavioral health teams, but they have no medical training. Medicine is a science, whereas psychology is one of the humanities. Most patients with mental illness also have medical conditions. Thus, **it is essential that a medical professional consider the entire patient.** For example, a lawsuit in Louisiana arose when a prescribing psychologist failed to consider a four-year-old child's seizure disorder and prescribed stimulants with long-term consequences. In a separate lawsuit, a psychologist wrongly diagnosed a post-operative condition as depression; prescribed both an antidepressant and a stimulant, and the patient suffered a heart attack.

Hawaii residents also share our concerns. A 2022 APA poll found that nearly 80% of Hawaii residents believe only individuals who have a medical degree and a state license to practice medicine should be allowed to prescribe psychotropic medications.

We urge you to consider alternatives to safely expand access to mental health care:

1. Psychologists can enroll in medical school, physician assistant or APRN school.
2. Lower the excise tax burden and increase Medicaid reimbursements for Hawaii (lowest in the 50 states) for physicians who accept Medicare/ Medicaid.
3. Expedite licensure for US continent MDs to practice in Hawaii in person and by telehealth.
4. Expand access to integrated care models, such as the Collaborative Care Model.

For your further information, we have attached a chart illustrating the differences in education requirements between psychiatrists, psychologists, nurse practitioners, and physician assistants.

Thank you for the opportunity to express our concerns on this important issue for our community.

Mahalo,
Gerald Busch, MD, President
Hawaii Psychiatric Medical Association

	UNDER-GRADUATE	GRADUATE			POST-GRADUATE			ASSESSMENT	
	Undergraduate degree	Prerequisites for entry into medical school or graduate program	Entrance exam	Postgraduate schooling	Post-graduate residency and duration	Total patient hours required through training in post-graduate education	Minimum completion time (including undergraduate)	Licensing Exam	Maintenance of Certification (MOC)/ Recertification
PSYCHIATRIST	Standard 4-year BA/BS	Some pre-med courses required at all programs; some programs also have additional recommended courses	Medical College Admission Test (MCAT)	4 year doctoral program (M.D. or D.O.)	4-7 year psychiatry residency	12,000-16,000 hours	12 years	USMLE Part 1; USMLE Part 2, Clinical Skills; USMLE Part 2, Clinical Knowledge; USMLE Part 3; ABPN Clinical Skills Verified; ABPN written knowledge exams	For Maintenance of Certification: 30 CME per year, Self-Assessment every 3 years, Professional Standing every 3 years, Performance in Practice (PIP) every 3 years, Cognitive Expertise written exam every 10 years
PSYCHOLOGIST	Standard 4-year BA/BS	Some programs have recommended, but not required	Graduate Record Examinations (GRE) (Not uniformly required)	2-3 year Master's program (MA/MS) OR 5-7 year Doctoral program (PsyD/PhD)	1 year	1 year or 1,500 – 6,000 post doctorate supervised clinical practice hours	7 years PhD	Examination for Professional Practice in Psychology (EPPP): 225 multiple choice test	If certified before 2015, can waive MOC. If certified after 2015, must do a self-evaluation every 10 years to fulfill MOC
PHYSICIAN ASSISTANT	Standard 4-year BA/BS (Not uniformly required)	Many programs have science prerequisites, but not uniform	Graduate Record Examinations (GRE) (Not uniformly required)	2-2 ½ year master's program (some award a bachelor's, certificate of completion or associate)	None required	2,000 hours	6 years	Physician Assistant National Certifying Exam (PANCE): 300 multiple choice question	CME and 6-year (soon to be 10-year) recertification assessment called PANRE
NURSE PRACTITIONER	Current and future students: 4-year Bachelor's degree (BSN). Previously, a two-year associate degree (ADN) or a diploma from an approved nursing program was acceptable and there are NPs still practicing with this background.	Be a licensed RN. Some programs require 1,000 patient care, but not uniform requirement	No standard requirements	No minimum length required; usually 1.5-3 years. Didactic components of the NP programs surveyed ranges from 30 to 40 credit units. Master's (MSN) or doctoral (DNP) degree program	None required	500 hours	5.5 years	Family Nurse Practitioner (FNP) exam: 150-200 question exam, depending on which organization one chooses for certification	Option 1: Recertify every 5 years via proving 1,000 clinical hours of practice over 5 years plus 100 CE hours over 5 years. Option 2: Recertify by examination



Hawaii Medical Association

1360 South Beretania Street, Suite 200 • Honolulu, Hawaii 96814
Phone: 808.536.7702 • Fax: 808.528.2376 • hawaiimedicalassociation.org

SENATE COMMITTEE ON HEALTH & HUMAN SERVICES

Senator Joy A San Buenaventura, Chair

Senator Henry JC Aquino, Vice Chair

Date: January 26, 2024

From: Hawaii Medical Association

Beth England MD, Chair- HMA Public Policy Committee

RE SB 760 Relating to Psychologists - Board of Psychology; Psychologists; Prescriptive Authority; Prescribing Psychologists; Pilot Program

Position: Oppose

This measure would establish a five-year pilot program to allow qualified psychologists limited authority to prescribe psychotropic medications to patients under the care of the psychologist at a federally qualified health center.

Hawaii experiences high rates of mental illness including depression, anxiety and substance abuse. Hawaii Medical Association (HMA) is deeply concerned about the impact of mental illness across the state. Problems are exacerbated by decreased federal and state mental health programs, and our severe physician shortage. The widening gaps of healthcare disparities are evident in our minority neighborhoods, and there are resultant delayed diagnoses and negative outcomes for our patients.

HMA recognizes the vital role of psychologists for patients with mental disorders, learning disabilities, and behavioral problems. Psychologists are well trained in diagnostic psychological testing and to providing psychotherapy.

Mental illness does not exist in a vacuum. As many as 50% of patients suffering from mental illness also suffer from medical illness, and when assessing for mental illness, a physician must always first rule out nonpsychiatric physical illness. HMA has serious concerns regarding the safety of psychologists' independent prescriptive authority. The proposed training lacks the extensive general medical education required of physicians. This comprehensive training allows doctors to perform a multi-organ system evaluation necessary to manage drug side effects, drug interactions, interactions with other health problems, etc.

(continued)

2024 Hawaii Medical Association Officers

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2024 Hawaii Medical Association Public Policy Coordination Team

Beth England, MD, Chair
Linda Rosehill, JD, Government Relations • Marc Alexander, Executive Director

HMA strongly advocates for all means of expansion of access for our mental health patients that maintain the highest standards of quality and safety, especially for those patients most vulnerable. Specifically, HMA supports:

1. Increased collaborative care agreements and behavior health integration programs such as Queens Clinical Integrated Physician Network and University of Hawaii's Project ECHO.
2. Expansion of telemedicine initiatives that prioritize cultural competency, infrastructure, and broadband internet technical support for remote and rural areas. This includes insurance coverage of behavioral telehealth care delivered via video or audio only visits at parity with in-person care.
3. Growth and retention of the Hawaii physician behavioral health workforce with interstate licensure, payment reform, loan forgiveness, and new residency and training programs.

Comprehensive evidence-based strategies with telehealth and collaborative care can have a significant impact on the accessibility of mental health services. These high-quality care solutions are growing to meet the patient needs in Hawaii. The HMA urges our state leaders to augment all collaborative efforts to serve our patient ohana, maintaining the highest standards for safe mental healthcare.

Thank you for allowing the Hawaii Medical Association to testify on this issue.

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Philippine Medical Association of Hawai'i

94-837 Waipahu Street, Waipahu, HI 96797

P.O.Box 1294, Pearl City, Hawai'i 96782 • Ph: 888-674-7624

• Fax: 888-391-7624 pmahinfo@gmail.com • www.pmah-hawaii.org

Rhea Bautista, MD
Executive Director

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SENATE COMMITTEE ON HEALTH & HUMAN SERVICES

Senator Joy A San Buenaventura, Chair

Senator Henry JC Aquino, Vice Chair

Date: January 23, 2024

From: Philippine Medical Association of Hawaii

Lyla Cachola Prather, President, PMAH

The **Philippine Medical Association of Hawaii** is issuing this statement to express our profound concerns regarding the recent bills being considered by the Senate Committee on Health and Human Services (**RE SB 760 and SB 2049**) that proposes to grant prescribing privileges to clinical psychologists.

The Philippine Medical Association of Hawaii, with 200 member physicians is deeply committed to ensuring the highest standards of patient care and safety. We believe that the proposed bill, while well-intentioned in its efforts to address the mental health needs of our communities, may inadvertently compromise patient safety and the quality of mental health care.

Our concerns are primarily rooted in the following areas:

1. Training and Expertise: The rigorous training and extensive education that medical doctors, especially psychiatrists, undergo to prescribe medications is unparalleled. This includes in-depth knowledge of pharmacology, diagnosis, and management of complex medical conditions. Psychologists, while highly skilled in psychological assessment and therapy, traditionally do not receive this level of medical training. Granting them prescribing privileges raises significant concerns about their preparedness to handle the complexities of medication management and its implications on physical health.

2. Patient Safety: The lack of comprehensive medical training in drug interactions, side effects, and management of physical health conditions could pose a risk to patient safety. Psychiatric medications often require careful monitoring and an understanding of the patient's overall health, something that medical professionals are uniquely qualified to provide.

3. Interdisciplinary Collaboration: The proposed bill could disrupt the collaborative model of mental health care, where psychologists and physicians work together, each bringing their specialized expertise to patient care. This synergy is crucial for holistic treatment.

4. Impact on Healthcare Systems: The bill could have significant implications for healthcare systems, including regulatory, educational, and financial aspects. The need for additional training programs and oversight mechanisms would also be a substantial consideration.

While we recognize and support the need for improved access to mental health care, particularly in underserved areas, we believe that patient safety and quality of care must remain paramount. We advocate for alternative solutions that enhance collaborative care models, improve psychiatric training and resources, and increase access to mental health services without compromising professional standards and patient safety.

We strongly urge the Committee on Health and Human Services to reject the proposed measures. Maintaining the responsibility of medical treatment, including the prescribing of medications, within the realm of medically trained physicians and healthcare providers ensures that safeguards are in place to protect the quality of mental health care received. This approach ensures that the complexities of pharmacological interventions are managed by those with the most comprehensive and relevant medical training. We believe this is paramount in safeguarding the overall well-being of our patients. To break from this standard of care poses significant risks to patient safety and risks undermining the necessary team approach needed to appropriately treat and address the complex needs of patients in need of mental health treatment.

Respectfully,

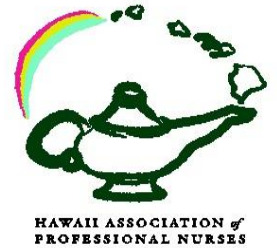


Lyla Cachola Prather, MD, DABIM, DNBPAS
President, Philippine Medical Association of Hawaii



Rainier Dennis D. Bautista MD, DABFM, FAAFP
President-Elect, Philippine Medical Association of Hawaii

Hawai'i Association of Professional Nurses (HAPN)



To: The Honorable Senator Joy San Buenaventura Chair of the Senate Committee on Health and Human Services

From: Hawaii Association of Professional Nurses (HAPN)
Subject: SB760 – Relating to Psychologists

Hearing: February 23, 2024, 1p.m.

Aloha Senator San Buenaventura, Chair; Senator Aquino, Vice Chair; and Committee Members

We present this testimony with the utmost respect for the legislative process and in opposition to Senate Bill 760. The Hawaii Association of Professional Nurses (HAPN) upholds a commitment to enhancing patient healthcare access and advancing the professional recognition of Advanced Practice Registered Nurses (APRNs) in our state. Our experience, particularly in the wake of the Covid-19 pandemic, has underlined the critical importance of mental health awareness and the vital role telehealth services play in this domain.

The pandemic has catalyzed a societal shift, bringing mental health into the open, thereby reducing stigma and allowing for more comprehensive care. Our APRNs and Psychiatrists have leveraged this momentum to expand the reach and efficacy of their services, including the establishment of clinics dedicated entirely to telemental health.

Despite these advances, SB760 presents concerning constraints, particularly regarding the proposed educational prerequisites and oversight for prescribing psychologists. The foundational education in the medical sciences that nurses and physicians receive is a cornerstone of safe and effective medication management, especially for psychiatric medications that often carry the weight of severe risks, including life-threatening side effects. Our Psychiatric Mental Health Nurse Practitioners and Psychiatric Clinical Nurse Specialists, many of whom have transitioned from in-depth roles in nursing within in-patient and community mental health settings, have cultivated a robust expertise in pharmacology, patient assessment, clinical decision-making, and ongoing monitoring – skills imperative to the safe administration of psychiatric medications.

In contrast to the pathway suggested by SB760, we advocate for psychologists to consider the established and scientifically grounded route of psychiatric APRN programs to gain the qualifications necessary for prescription authority. This pathway not only emphasizes the medical sciences but also prepares practitioners to recognize and address potential medical complications of psychiatric medications.

Mental health is an integral component of holistic care, particularly for our most vulnerable populations. Psychologists fulfill an indispensable role in this ecosystem, and their collaboration with APRNs and MD/DOs is both valued and essential. However, the expansion of prescribing rights must be approached with caution and a firm grounding in medical education and clinical experience.

HAPN is an advocate not just for APRNs but for the health of our community at large. Through direct patient care and the establishment of specialized clinics, we strive to meet the growing needs of our population. As such, we respectfully urge the committee to consider the gravity of this matter and the potential implications of SB760.

We thank you for your attention to our concerns and for your continued support of the nursing profession in the beautiful state of Hawaii.

Respectfully,
Dr. Jeremy Creekmore, APRN
HAPN President

SB-760

Submitted on: 1/25/2024 9:54:11 AM

Testimony for HHS on 1/26/2024 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Ashley K. Dorsey, MS	Individual	Support	Remotely Via Zoom

Comments:

As a doctorate student in clinical psychology, I strongly support SB760, which establishes a five-year pilot program to allow qualified psychologists with limited authority to prescribe psychotropic medications to patients under the care of a psychologist at a federally qualified health center.

The Lahaina fires of August 2023 caused catastrophic trauma to the citizens of Lahaina and the entire island of Maui. Medical and Mental Health providers from around the state are using all of their training to address the shortfall of providers; however, even before the fires, we were already taxed.

Hawai'i communities across the state were suffering even before the fires because of the lack of access to comprehensive mental health care. Our most vulnerable citizens are unable to obtain the care needed to live healthy and functional lives. According to NAMI (2021), 187,000 adults in Hawai'i suffer from a mental health condition and 41,000 of our citizens experience a serious mental illness. Almost 70 percent of Hawai'i's youth ages 6-17 who have depression did not receive any care in the past year.

Prescribing Psychologists receive more psychopharmacology training than primary care physicians and physician assistants. They receive integrative medical and biopsychosocial training from physicians, psychiatrists, nurse practitioners, prescribing/medical psychologists, and pharmacists. Prescribing Psychologists have provided safe and effective mental health care, including pharmacotherapy, for over thirty years. They already prescribe for the Army and Navy in Hawai'i. They can provide care at Pearl Harbor or other federal facilities to military personnel and their families, just not across the street to HI citizens. States in which Prescribing Psychologists practice have seen a five to seven percent reduction in the rate of suicide.

There are now five MSCP programs that have received designation status from the American Psychological Association and one additional program that is under review. Two of these six programs are housed in pharmacy schools. As many as four new programs will launch their MSCP programs in 2024 or 2025; of these, one is in a medical school, two are in pharmacy schools, and one is a collaboration between a psychology department and a nursing school.

The numbers are simple. There are not enough psychiatrists to care for the people of Hawai'i, especially on neighbor islands. Hawai'i Island has the most significant deficit in the number of psychiatrists needed to care for island residents (75.1%), followed by Kauai County with a 71.2

percent shortage, and then Maui County with a 50.4 percent shortage before the August 2023 fires.

SB-760

Submitted on: 1/25/2024 11:30:29 AM

Testimony for HHS on 1/26/2024 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Gerald Busch	Individual	Oppose	Remotely Via Zoom

Comments:

There is no objective public health evidence or other data-driven information that there is inadequate psychiatric service provision. All examples of inadequate psychiatric medication provision are anecdotal. There is a deficit of all mental health services. It is difficult for people of the state to find needed services, indicating a need for a centralized coordination of care at the state level, in addition to the current duties of HawaiiCares. The best route for a psychologist to become a prescriber is to take the premedical courses that help with the necessary understanding of human physiology and biological function needed for medical school admission. Following 4 years of medical education, a psychiatry residency of 4 years is needed to safely train a practitioner to provide medication. Less service than this creates a risk to the health of the people of Hawaii, an unnecessary risk, based upon false presumptions lacking data support.

SB-760

Submitted on: 1/25/2024 12:15:31 PM

Testimony for HHS on 1/26/2024 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Nainoa Fiddler	Individual	Oppose	In Person

Comments:

I believe that there are so many flaws in assuming that psychologists can safely prescribe medication to members of our community. Even with adequate training, prescribing a controlled substances to individuals must take years of dedicated education, knowledge, and research. By providing the ability for psychologists to prescribe these medicines will do harm not only to our community in the long term but will create a distrust between direct and indirect patients and medical professionals in general.

As a Native Hawaiian, I understand and observed how difficult it is for our people to receive medical treatment especially in rural areas. But creating this program will do harm that will not be noticed until years from now. Imagine this, your mother visits a psychologist because she is saying she's depressed. Rather than referring her for a second opinion to a professional who specializes in treating this, the psychologist who already has so much to do in terms of therapy, takes it upon themselves to prescribe an antidepressant not knowing that the case is due to a physical ailment. Not only did the physical ailment not get treated, but now she suffers from hallucinations. Since these hallucinations only started to occur after 3 months the psychologist thinks it worked and then starts prescribing these antidepressants to many patients who with the same. Now we have a problem greater than just one individual. Psychiatrists go to 4 years of Medical School and on the job training for at least 4 years. They would've have done more evaluations and discovery based on their education and experience to realize that this was physical and not mental. But it's too late, because an unqualified individual who does not specialize in treating mentally ill patients thought that this person, and possibly many more, only suffer from mental conditions because that's all they're used to seeing.

If the goal is to provide more access to medical treatment, I believe that we should invest more in creating a pipeline for additional medical professionals instead of providing a power to someone else who is not adequately trained.

SB-760

Submitted on: 1/24/2024 5:50:01 PM

Testimony for HHS on 1/26/2024 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Joseph E. Comaty, Ph.D., M.P.	Individual	Support	Written Testimony Only

Comments:

I strongly support SB760, which establishes a five-year pilot program to allow qualified psychologists with limited authority to prescribe psychotropic medications to patients under the care of a psychologist at a federally qualified health center.

Prescribing Psychologists receive more psychopharmacology training than primary care physicians and physician assistants. They receive integrative medical and biopsychosocial training from physicians, psychiatrists, nurse practitioners, prescribing/medical psychologists, and pharmacists. Prescribing Psychologists have provided safe and effective mental health care, including pharmacotherapy, for over thirty years. They already prescribe for the Army and Navy in Hawai`i as well as other military bases, US Public Health Service, and Indian Health Service. They can provide care at Pearl Harbor or other federal facilities to military personnel and their families, just not across the street to HI citizens. States in which Prescribing Psychologists practice have seen a five to seven percent reduction in the rate of suicide.

There are now five MSCP programs that have received designation status from the American Psychological Association and one additional program that is under review. Two of these six programs are housed in pharmacy schools. As many as four new programs will launch their MSCP programs in 2024 or 2025; of these, one is in a medical school, two are in pharmacy schools, and one is a collaboration between a psychology department and a nursing school.

The numbers are simple. There are not enough psychiatrists to care for the people of Hawai`i, especially on neighbor islands. Hawai`i Island has the most significant deficit in the number of psychiatrists needed to care for island residents (75.1%), followed by Kauai County with a 71.2 percent shortage, and then Maui County with a 50.4 percent shortage before the August 2023 fires.

SB760 offers a unique approach to proposing a five-year demonstration project. I recommend that the bill focus on Maui for the first year and then integrate the neighbor islands of Kauai, Hawai`i, and possibly areas on Oahu with severe shortages.

Prescriptive authority for specially trained doctors of psychology is a safe and already utilized option in Louisiana, New Mexico, Illinois, Iowa, and Idaho, in Federally Qualified Health Centers, in Native American-Indian Health Centers, and in the military. Prescribing psychologists have provided care for over thirty years and could make a difference today if you vote YES.

It is time for Hawai`i to take every step towards a better mental health care solution for our citizens. Please vote **YES** on SB760 to allow greater access to care for those most in need.

Respectfully submitted,

Joseph E. Comaty, PhD, MP

SB-760

Submitted on: 1/24/2024 6:44:39 PM

Testimony for HHS on 1/26/2024 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Anh Ho	Individual	Support	Written Testimony Only

Comments:

SENATE

THE THIRTY-SECOND LEGISLATURE

REGULAR SESSION OF 2024

To: COMMITTEE ON HEALTH & HUMAN SERVICES

Senator Joy San Buenaventura, Chair

Senator Henry J.C. Aquino, Vice Chair

Senator Jarrett Keohokalole

Senator Maile S.L. Shimabukuro

Senator Brenton Awa

HEARING: Friday, January 26, 2024, 1PM CR 225 and Videoconference

RE: Testimony in SUPPORT of SB 760: RELATING TO PSYCHOLOGISTS.

My name is Anh Lauren Ho, and I am a PhD clinical psychology student. I strongly support SB760, which establishes a five-year pilot program to allow qualified psychologists with limited authority to prescribe psychotropic medications to patients under the care of a psychologist at a federally qualified health center.

The Lahaina fires of August 2023 caused catastrophic trauma to the citizens of Lahaina and the entire island of Maui. Medical and Mental Health providers from around the state are using all of their training to address the shortfall of providers; however, even before the fires, we were already taxed.

Hawai'i communities across the state were suffering even before the fires because of the lack of access to comprehensive mental health care. Our most vulnerable citizens are unable to obtain the care needed to live healthy and functional lives. According to NAMI (2021), 187,000 adults in Hawai'i suffer from a mental health condition and 41,000 of our citizens experience a serious mental illness. Almost 70 percent of Hawai'i's youth ages 6-17 who have depression did not receive any care in the past year.

Prescribing Psychologists receive more psychopharmacology training than primary care physicians and physician assistants. They receive integrative medical and biopsychosocial training from physicians, psychiatrists, nurse practitioners, prescribing/medical psychologists, and pharmacists. Prescribing Psychologists have provided safe and effective mental health care, including pharmacotherapy, for over thirty years. They already prescribe for the Army and Navy in Hawai'i. They can provide care at Pearl Harbor or other federal facilities to military personnel and their families, just not across the street to HI citizens. States in which Prescribing Psychologists practice have seen a five to seven percent reduction in the rate of suicide.

There are now five MSCP programs that have received designation status from the American Psychological Association and one additional program that is under review. Two of these six programs are housed in pharmacy schools. As many as four new programs will launch their MSCP programs in 2024 or 2025; of these, one is in a medical school, two are in pharmacy schools, and one is a collaboration between a psychology department and a nursing school.

The numbers are simple. There are not enough psychiatrists to care for the people of Hawai'i, especially on neighbor islands. Hawai'i Island has the most significant deficit in the number of psychiatrists needed to care for island residents (75.1%), followed by Kauai County with a 71.2 percent shortage, and then Maui County with a 50.4 percent shortage before the August 2023 fires.

SB2049 offers a unique approach to proposing a five-year demonstration project. I recommend that the bill focus on Maui for the first year and then integrate the neighbor islands of Kauai, Hawai'i, and possibly areas on Oahu with severe shortages.

Prescriptive authority for specially trained doctors of psychology is a safe and already utilized option in Louisiana, New Mexico, Illinois, Iowa, and Idaho, in Federally Qualified Health Centers, in Native American-Indian Health Centers, and in the military. Prescribing psychologists have provided care for over thirty years and could make a difference today if you vote YES.

It is time for Hawai'i to take every step towards a better mental health care solution for our citizens. Please vote YES on SB760 to allow greater access to care for those most in need.

Respectfully submitted,

Anh Lauren Ho

Clinical psychology doctoral student

Fielding graduate university

SB-760

Submitted on: 1/25/2024 7:18:19 AM

Testimony for HHS on 1/26/2024 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Eric Silk, PhD, MSCP	Individual	Support	Written Testimony Only

Comments:

Committee on Health and Human Services Chair, Vice Chair, and Members,

I am the program director for the Idaho State University College of Pharmacy Clinical Psychopharmacology program (MSCP) and am writing as an individual citizen in support of SB760.

Prescriptive authority for psychologists was passed in Idaho in 2017 and we currently have 11 licensed prescribers in the state. That may not seem like a lot, but in a rural state with just over 100 psychiatrists, in a short time we have added a significant number of highly trained professionals. It is a slow process, but prescriptive authority for psychologists is making fundamental changes to mental healthcare in Idaho. I always stress that this is not just about prescribing medication, but the right to de-prescribe inappropriate medications and implement alternative psychotherapy strategies to address the root cause of the problems.

Of note, Idaho owes a great deal to the State of Hawai'i. As you know, Hawai'i has been a leader in the prescriptive authority movement for psychologists despite not have prescriptive authority in the state. Specifically notable are the efforts nationally by Senator Inouye beginning in 1985. After the MSCP training closed at the University of Hawai'i Hilo's College of Pharmacy, Idaho State University became the only MSCP program in a college of pharmacy, now joined by Drake University. Additionally, Idaho State University now trains US Navy Psychologists in the MSCP program - a distinction the University of Hawai'i Hilo previously had.

Hawai'i has contributed so much to the prescriptive authority for psychologists movement nationally, but has not overcome the hurdle to grant Hawai'i psychologists the right to prescribe. I urge you to support this bill to change the landscape of mental healthcare in Hawai'i as we have done in Idaho.

Eric Silk, PhD, MSCP

SB-760

Submitted on: 1/25/2024 7:40:13 AM

Testimony for HHS on 1/26/2024 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
María García-Ellis	Individual	Support	Written Testimony Only

Comments:

Aloha.

I strongly support SB760, which establishes a pilot program to give qualified psychologists the authority to prescribe psychotropic medications to patients under their care.

The Lahaina fires of August 2023 caused catastrophic trauma to the residents of Lahaina and the entire island of Maui. Medical and Mental Health providers from around the state are using all of their training to address the shortfall of providers; however, even before the fires, there was an unmet demand for services on the island.

Hawai'i communities across the state were suffering even before the fires because of the lack of access to comprehensive mental health care. Some of the most vulnerable citizens are unable to obtain the care needed to live healthy and functional lives. According to NAMI (2021), 187,000 adults in Hawai'i suffer from a mental health condition and 41,000 of its citizens experience serious mental illness. Almost 70 percent of Hawai'i's youth ages 6-17 who have been diagnosed with depression, did not receive any care in the past year.

Prescribing Psychologists receive more psychopharmacology training than primary care physicians and physician assistants. They receive integrative medical and biopsychosocial training from physicians, psychiatrists, nurse practitioners, prescribing/medical psychologists, and pharmacists. Prescribing Psychologists have provided safe and effective mental health care, including pharmacotherapy, for over thirty years. They already prescribe for the Army and Navy in Hawai'i. They can provide care at Pearl Harbor or other federal facilities to military personnel and their families, just not across the street to HI citizens. States in which Prescribing Psychologists practice have seen a five to seven percent reduction in the rate of suicide, which is often a result of depression.

There are now five Masters of Science in Clinical Psychopharmacology (MSCP) programs that have received designation status from the American Psychological Association and one additional program that is under review. Two of these six programs are housed in pharmacy schools. As many as four new programs will launch their MSCP programs in 2024 or 2025; of these, one is in a medical school, two are in pharmacy schools, and one is a collaboration between a psychology department and a nursing school.

The numbers are evident, and the need is obvious. There are not enough psychiatrists to care for the people of Hawai'i, especially on neighbor islands. Hawai'i Island has the most significant deficit in the number of psychiatrists needed to care for island residents (75.1%), followed by Kauai County with a 71.2 percent shortage, and then Maui County with a 50.4 percent shortage before the August 2023 fires.

Prescriptive authority for specially trained doctors of psychology is a safe and already utilized

option in Louisiana, New Mexico, Illinois, Iowa, and Idaho, in Federally Qualified Health Centers, in Native American-Indian Health Centers, and in the military. Prescribing psychologists have provided mental health care for over thirty years and could make a difference in Hawai'i, today, if you vote YES.

It is time for Hawai'i to take this necessary step towards a better mental health care solution for its citizens. Please vote YES on this measure to allow greater access to care for those most in need.

Thank You, for your time and consideration.

Maria Garcia-Ellis
Special Education Teacher

SENATE
THE THIRTY-SECOND LEGISLATURE
REGULAR SESSION OF 2024

To: COMMITTEE ON HEALTH & HUMAN SERVICES

Senator Joy San Buenaventura, Chair
Senator Henry J.C. Aquino, Vice Chair
Senator Jarrett Keohokalole
Senator Maile S.L. Shimabukuro
Senator Brenton Awa

HEARING: Friday, January 26, 2024, 1PM CR 225 and Videoconference

RE: Testimony in **SUPPORT** of SB 760: RELATING TO PSYCHOLOGISTS.

Aloha Senators San Buenaventura, Aquino, Keohokalole, Shimabukuro, and Awa,

I live and work on the island of O'ahu and I am a 2nd year doctoral student in Clinical Psychology with a concentration in Neuropsychology. With the shortage of mental care reach and the geographical constraints of Hawaii, I **strongly support SB760**, which establishes a five-year pilot program to allow qualified psychologists with limited authority to prescribe psychotropic medications to patients under the care of a psychologist at a federally qualified health center.

The Lahaina fires of August 2023 caused catastrophic trauma to the citizens of Lahaina and the entire island of Maui. Medical and Mental Health providers from around the state are using all of their training to address the shortfall of providers; however, even before the fires, we were already taxed.

Hawai'i communities across the state were suffering even before the fires because of the lack of access to comprehensive mental health care. Our most vulnerable citizens are unable to obtain the care needed to live healthy and functional lives. According to NAMI (2021), 187,000 adults in Hawai'i suffer from a mental health condition and 41,000 of our citizens experience a serious mental illness. Almost 70 percent of Hawai'i's youth ages 6-17 who have depression did not receive any care in the past year.

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There are now five MSCP programs that have received designation status from the American Psychological Association and one additional program that is under review. Two of these six programs are housed in pharmacy schools. As many as four new programs will launch their MSCP programs in 2024 or 2025; of these, one is in a medical school, two are in pharmacy schools, and one is a collaboration between a psychology department and a nursing school.

The numbers are simple. There are not enough psychiatrists to care for the people of Hawai'i, especially on neighbor islands. Hawai'i Island has the most significant deficit in the number of psychiatrists needed to care for island residents (75.1%), followed by Kauai County with a 71.2 percent shortage, and then Maui County with a 50.4 percent shortage before the August 2023 fires.

SB2049 offers a unique approach to proposing a five-year demonstration project. I recommend that the bill focus on Maui for the first year and then integrate the neighbor islands of Kauai, Hawai'i, and possibly areas on Oahu with severe shortages.

Prescriptive authority for specially trained doctors of psychology is a safe and already utilized option in Louisiana, New Mexico, Illinois, Iowa, and Idaho, in Federally Qualified Health Centers, in Native American-Indian Health Centers, and in the military. Prescribing psychologists have provided care for over thirty years and could make a difference today if you vote YES.

It is time for Hawai'i to take every step towards a better mental health care solution for our citizens. Please vote **YES** on SB760 to allow greater access to care for those most in need.

Respectfully submitted,

A handwritten signature in black ink, appearing to read "Nancy Eastwood", with a long horizontal line extending to the right.

Nancy Eastwood
Clinical Psychology PhD Student
Fielding Graduate University

SB-760

Submitted on: 1/25/2024 6:11:14 AM

Testimony for HHS on 1/26/2024 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Teresa Juarez	Individual	Support	Written Testimony Only

Comments:

SENATE

THE THIRTY-SECOND LEGISLATURE

REGULAR SESSION OF 2024

To: COMMITTEE ON HEALTH & HUMAN SERVICES

Senator Joy San Buenaventura, Chair

Senator Henry J.C. Aquino, Vice Chair

Senator Jarrett Keohokalole

Senator Maile S.L. Shimabukuro

Senator Brenton Awa

HEARING: Friday, January 26, 2024, 1PM CR 225 and Videoconference

RE: Testimony in **SUPPORT** of SB 760: RELATING TO PSYCHOLOGISTS.

As a current mental health clinician and a PhD doctoral student in clinical psychology, I have seen the growing need for mental health care. However, as a community member who grew up on the Leeward Coast, I could already see the need in my community—for years! There is a disconnect between public policy concerning services for mental health providers who are properly trained (e.g., years of education, internships, qualifying exams) and the need for care in the community. In Hawaii, there are specially trained psychologists who have additional

education in psychopharmacology and are willing and able to help fill in the gaps if allowed. Upon completing my studies, I also intend to return to the islands to become a prescriber.

I strongly support SB760, which establishes a five-year pilot program to allow qualified psychologists with limited authority to prescribe psychotropic medications to patients under the care of a psychologist at a federally qualified health center.

The Lahaina fires of August 2023 caused catastrophic trauma to the citizens of Lahaina and the entire island of Maui. Medical and Mental Health providers from around the state are using all of their training to address the shortfall of providers; however, even before the fires, we were already taxed.

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Centers, in Native American-Indian Health Centers, and in the military. Prescribing psychologists have provided care for over thirty years and could make a difference today if you vote YES.

It is time for Hawai`i to take every step towards a better mental health care solution for our citizens. Please vote **YES** on SB760 to allow greater access to care for those most in need.

Respectfully submitted,

Teresa Juarez

SENATE
THE THIRTY-SECOND LEGISLATURE
REGULAR SESSION OF 2024

To: COMMITTEE ON HEALTH & HUMAN SERVICES

Senator Joy San Buenaventura, Chair
Senator Henry J.C. Aquino, Vice Chair
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Senator Brenton Awa

HEARING: Friday, January 26, 2024, 1PM CR 225 and Videoconference

RE: Testimony in **SUPPORT** of SB 760: RELATING TO PSYCHOLOGISTS.

I **strongly support SB760**, which establishes a five-year pilot program to allow qualified psychologists with limited authority to prescribe psychotropic medications to patients under the care of a psychologist at a federally qualified health center.

The Lahaina fires of August 2023 caused catastrophic trauma to the citizens of Lahaina and the entire island of Maui. Medical and Mental Health providers from around the state are using all of their training to address the shortfall of providers; however, even before the fires, we were already taxed.

Hawai'i communities across the state were suffering even before the fires because of the lack of access to comprehensive mental health care. Our most vulnerable citizens are unable to obtain the care needed to live healthy and functional lives. According to NAMI (2021), 187,000 adults in Hawai'i suffer from a mental health condition and 41,000 of our citizens experience a serious mental illness. Almost 70 percent of Hawai'i's youth ages 6-17 who have depression did not receive any care in the past year.

Prescribing Psychologists receive more psychopharmacology training than primary care physicians and physician assistants. They receive integrative medical and biopsychosocial training from physicians, psychiatrists, nurse practitioners, prescribing/medical psychologists, and pharmacists. Prescribing Psychologists have provided safe and effective mental health care, including pharmacotherapy, for over thirty years. They already prescribe for the Army and Navy in Hawai'i. They can provide care at Pearl Harbor or other federal facilities to military personnel and their families, just not across the street to HI citizens. States in which Prescribing Psychologists practice have seen a five to seven percent reduction in the rate of suicide.

There are now five MSCP programs that have received designation status from the American Psychological Association and one additional program that is under review. Two of these six

programs are housed in pharmacy schools. As many as four new programs will launch their MSCP programs in 2024 or 2025; of these, one is in a medical school, two are in pharmacy schools, and one is a collaboration between a psychology department and a nursing school.

The numbers are simple. There are not enough psychiatrists to care for the people of Hawai'i, especially on neighbor islands. Hawai'i Island has the most significant deficit in the number of psychiatrists needed to care for island residents (75.1%), followed by Kauai County with a 71.2 percent shortage, and then Maui County with a 50.4 percent shortage before the August 2023 fires.

SB2049 offers a unique approach to proposing a five-year demonstration project. I recommend that the bill focus on Maui for the first year and then integrate the neighbor islands of Kauai, Hawai'i, and possibly areas on Oahu with severe shortages.

Prescriptive authority for specially trained doctors of psychology is a safe and already utilized option in Louisiana, New Mexico, Illinois, Iowa, and Idaho, in Federally Qualified Health Centers, in Native American-Indian Health Centers, and in the military. Prescribing psychologists have provided care for over thirty years and could make a difference today if you vote YES.

It is time for Hawai'i to take every step towards a better mental health care solution for our citizens. Please vote **YES** on SB760 to allow greater access to care for those most in need.

Respectfully submitted,

Linda Teramoto

Your Name

Organization or credentials

SB-760

Submitted on: 1/25/2024 10:44:02 AM

Testimony for HHS on 1/26/2024 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
amanda abbie	Individual	Support	Written Testimony Only

Comments:

SENATE

THE THIRTY-SECOND LEGISLATURE

REGULAR SESSION OF 2024

To: COMMITTEE ON HEALTH & HUMAN SERVICES

Senator Joy San Buenaventura, Chair

Senator Henry J.C. Aquino, Vice Chair

Senator Jarrett Keohokalole

Senator Maile S.L. Shimabukuro

Senator Brenton Awa

HEARING: Friday, January 26, 2024, 1PM CR 225 and Videoconference

RE: Testimony in SUPPORT of SB 760: RELATING TO PSYCHOLOGISTS.

I strongly support SB760, which establishes a five-year pilot program to allow qualified psychologists with limited authority to prescribe psychotropic medications to patients under the care of a psychologist at a federally qualified health center.

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Hawai'i communities across the state were suffering even before the fires because of the lack of access to comprehensive mental health care. Our most vulnerable citizens are unable to obtain the care needed to live healthy and functional lives. According to NAMI (2021), 187,000 adults in Hawai'i suffer from a mental health condition and 41,000 of our citizens experience a serious mental illness. Almost 70 percent of Hawai'i's youth ages 6-17 who have depression did not receive any care in the past year.

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There are now five MSCP programs that have received designation status from the American Psychological Association and one additional program that is under review. Two of these six programs are housed in pharmacy schools. As many as four new programs will launch their MSCP programs in 2024 or 2025; of these, one is in a medical school, two are in pharmacy schools, and one is a collaboration between a psychology department and a nursing school.

The numbers are simple. There are not enough psychiatrists to care for the people of Hawai'i, especially on neighbor islands. Hawai'i Island has the most significant deficit in the number of psychiatrists needed to care for island residents (75.1%), followed by Kauai County with a 71.2 percent shortage, and then Maui County with a 50.4 percent shortage before the August 2023 fires.

SB2049 offers a unique approach to proposing a five-year demonstration project. I recommend that the bill focus on Maui for the first year and then integrate the neighbor islands of Kauai, Hawai'i, and possibly areas on Oahu with severe shortages.

Prescriptive authority for specially trained doctors of psychology is a safe and already utilized option in Louisiana, New Mexico, Illinois, Iowa, and Idaho, in Federally Qualified Health Centers, in Native American-Indian Health Centers, and in the military. Prescribing psychologists have provided care for over thirty years and could make a difference today if you vote YES.

It is time for Hawai'i to take every step towards a better mental health care solution for our citizens. Please vote YES on SB760 to allow greater access to care for those most in need.

Respectfully submitted,

amanda abbie

SB-760

Submitted on: 1/25/2024 11:47:16 AM

Testimony for HHS on 1/26/2024 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Amy Daley	Individual	Support	Written Testimony Only

Comments:

Aloha. I am writing in support of SB760 giving prescriptive authority to appropriately trained psychologists. I am a clinical psychologist who recently completed post-doctoral training in clinical psychopharmacology. While I do not yet live in Hawai'i, I have been to your beautiful state and would certainly consider re-locating should prescribing privileges be granted to psychologists.

I am particularly concerned for communities impacted by the Lahaina fires of August 2023 as well as Hawai'i communities across the state that were suffering even before the fires because of the lack of access to comprehensive mental health care.

Prescribing Psychologists receive more psychopharmacology training than primary care physicians and physician assistants. They receive integrative medical and biopsychosocial training from physicians, psychiatrists, nurse practitioners, prescribing/medical psychologists, and pharmacists. Prescribing Psychologists have provided safe and effective mental health care, including pharmacotherapy, for over thirty years. They already prescribe for the Army and Navy in Hawai'i. They can provide care at Pearl Harbor or other federal facilities to military personnel and their families, just not across the street to HI citizens. States in which Prescribing Psychologists practice have seen a five to seven percent reduction in the rate of suicide.

There are now five Masters of Science in Clinical Psychopharmacology (MSCP) programs that have received designation status from the American Psychological Association and one additional program that is under review. Two of these six programs are housed in pharmacy schools. As many as four new programs will launch their MSCP programs in 2024 or 2025; of these, one is in a medical school, two are in pharmacy schools, and one is a collaboration between a psychology department and a nursing school.

The numbers are simple. There are not enough psychiatrists to care for the people of Hawai'i, especially on neighbor islands. Hawai'i Island has the most significant deficit in the number of psychiatrists needed to care for island residents (75.1%), followed by Kauai County with a 71.2 percent shortage, and then Maui County with a 50.4 percent shortage before the August 2023 fires.

Prescriptive authority for specially trained doctors of psychology is a safe and already utilized option in Louisiana, New Mexico, Illinois, Iowa, and Idaho, in Federally Qualified Health Centers, in Native American-Indian Health Centers, and in the military. Prescribing

psychologists have provided care for over thirty years and could make a difference today if you vote YES.

It is time for Hawai`i to take every step towards a better mental health care solution for our citizens. Please vote YES on this measure to allow greater access to care for those most in need.

Respectfully submitted,

Amy Daley, PhD, ABPP, MSCP

SB-760

Submitted on: 1/25/2024 12:26:02 PM

Testimony for HHS on 1/26/2024 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Jeffrey D. Stern, Ph.D.	Individual	Support	Written Testimony Only

Comments:

" Aloha. I strongly support SB760, which establishes a pilot program to give qualified psychologists the authority to prescribe psychotropic medications to patients under their care. "

Hawai'i communities across the state were suffering even before the wildfires ravaged Lahaina, because of a lack of access to comprehensive mental health care. Our most vulnerable citizens are unable to obtain the behavioral healthcare needed to live healthy and functional lives. According to NAMI (2021), 187,000 adults in Hawai'i suffer from a mental health condition and 41,000 of our citizens experience a serious mental illness. Almost 70 percent of Hawai'i's youth ages 6-17 who have depression did not receive any care in the past year.

Prescribing Psychologists receive more psychopharmacology training than primary care physicians and physician assistants. They receive integrative medical and biopsychosocial training from physicians, psychiatrists, nurse practitioners, prescribing/medical psychologists, and pharmacists. Prescribing Psychologists have provided safe and effective mental health care, including pharmacotherapy, for over thirty years. They already prescribe for the Army and Navy in Hawai'i. They can provide care at Pearl Harbor or other federal facilities to military personnel and their families, just not across the street to HI citizens. States in which Prescribing Psychologists practice have seen a five to seven percent reduction in the rate of suicide.

There are now five Masters of Science in Clinical Psychopharmacology (MSCP) programs that have received designation status from the American Psychological Association and one additional program that is under review. Two of these six programs are housed in pharmacy schools. As many as four new programs will launch their MSCP programs in 2024 or 2025; of these, one is in a medical school, two are in pharmacy schools, and one is a collaboration between a psychology department and a nursing school.

The numbers are simple. There are not enough psychiatrists to care for the people of Hawai'i, especially on neighbor islands. Hawai'i Island has the most significant deficit in the number of psychiatrists needed to care for island residents (75.1%), followed by Kauai County with a 71.2 percent shortage, and then Maui County with a 50.4 percent shortage before the August 2023 fires.

Prescriptive authority for specially trained doctors of psychology is a safe and already utilized option in Louisiana, New Mexico, Illinois, Iowa, and Idaho, in Federally Qualified Health

Centers, in Native American-Indian Health Centers, and in the military. Prescribing psychologists have provided care for over thirty years and could make a difference today if you vote YES.

It is time for Hawai'i to take every step towards a better mental health care solution for our citizens. Please vote YES on this measure to allow greater access to care for those most in need.

Mahalo for the opportunity to share my mana'o.

me ka ha'aha'a,

Jeffrey D. Stern, PhD

SB-760

Submitted on: 1/25/2024 12:27:39 PM

Testimony for HHS on 1/26/2024 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Alec Lara	Individual	Support	Written Testimony Only

Comments:

Aloha. I strongly support SB760, which establishes a five-year pilot program to allow qualified psychologists with limited authority to prescribe psychotropic medications to patients under the care of a psychologist at a federally qualified health center. SB2049 offers a unique approach by proposing a five-year demonstration project. I recommend that the bill be revised to focus on Maui for the first year and then integrate the neighbor islands of Kauai, Hawai'i, and possibly areas on Oahu with severe shortages.

The Lahaina fires of August 2023 caused catastrophic trauma to the residents of Lahaina and the entire island of Maui. Medical and Mental Health providers from around the state are using all of their training to address the shortfall of providers; however, even before the fires, we were already taxed. Hawai'i communities across the state were suffering even before the fires because of the lack of access to comprehensive mental health care. Our most vulnerable citizens are unable to obtain the care needed to live healthy and functional lives. According to NAMI (2021), 187,000 adults in Hawai'i suffer from a mental health condition and 41,000 of our citizens experience a serious mental illness. Almost 70 percent of Hawai'i's youth ages 6-17 who have depression did not receive any care in the past year. Prescribing Psychologists receive more psychopharmacology training than primary care physicians and physician assistants. They receive integrative medical and biopsychosocial training from physicians, psychiatrists, nurse practitioners, prescribing/medical psychologists, and pharmacists. Prescribing Psychologists have provided safe and effective mental health care, including pharmacotherapy, for over thirty years. They already prescribe for the Army and Navy in Hawai'i. They can provide care at Pearl Harbor or other federal facilities to military personnel and their families, just not across the street to HI citizens. States in which Prescribing Psychologists practice have seen a five to seven percent reduction in the rate of suicide.

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Respectfully submitted, Alec Lara

SENATE
THE THIRTY-SECOND LEGISLATURE
REGULAR SESSION OF 2024

To: COMMITTEE ON HEALTH & HUMAN SERVICES

Senator Joy San Buenaventura, Chair

Senator Henry J.C. Aquino, Vice Chair

Senator Jarrett Keohokalole

Senator Maile S.L. Shimabukuro

Senator Brenton Awa

HEARING: Friday, January 26, 2024, 1PM CR 225 and Videoconference

RE: Testimony in **SUPPORT** of SB 760: RELATING TO PSYCHOLOGISTS.

I **strongly support SB760**, which establishes a five-year pilot program to allow qualified psychologists with limited authority to prescribe psychotropic medications to patients under the care of a psychologist at a federally qualified health center.

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It is time for Hawai'i to take every step towards a better mental health care solution for our citizens. Please vote **YES** on SB760 to allow greater access to care for those most in need.

Respectfully submitted,

Xaviera Gadpaille

SB-760

Submitted on: 1/25/2024 4:59:25 PM

Testimony for HHS on 1/26/2024 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Dr. Derek Phillips	Individual	Support	Written Testimony Only

Comments:

Aloha. I strongly support SB760, which establishes a pilot program to give qualified psychologists the authority to prescribe psychotropic medications to patients under their care.

"The Lahaina fires of August 2023 caused catastrophic trauma to the residents of Lahaina and the entire island of Maui. Medical and Mental Health providers from around the state are using all of their training to address the shortfall of providers; however, even before the fires, we were already taxed.

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It is time for Hawai`i to take every step towards a better mental health care solution for our citizens. Please vote YES on this measure to allow greater access to care for those most in need.

Respectfully submitted,

Dr. Derek Phillips, Licensed Prescribing Psychologist in IL

SB-760

Submitted on: 1/25/2024 3:49:52 PM

Testimony for HHS on 1/26/2024 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Lilnetria Johnson	Individual	Support	Written Testimony Only

Comments:

SENATE

THE THIRTY-SECOND LEGISLATURE

REGULAR SESSION OF 2024

To: COMMITTEE ON HEALTH & HUMAN SERVICES

Senator Joy San Buenaventura, Chair

Senator Henry J.C. Aquino, Vice Chair

Senator Jarrett Keohokalole

Senator Maile S.L. Shimabukuro

Senator Brenton Awa

HEARING: Friday, January 26, 2024, 1PM CR 225 and Videoconference

RE: Testimony in SUPPORT of SB 760: RELATING TO PSYCHOLOGISTS.

SENATE

THE THIRTY-SECOND LEGISLATURE

REGULAR SESSION OF 2024

To: COMMITTEE ON HEALTH & HUMAN SERVICES

Senator Joy San Buenaventura, Chair

Senator Henry J.C. Aquino, Vice Chair

Senator Jarrett Keohokalole

Senator Maile S.L. Shimabukuro

Senator Brenton Awa

HEARING: Friday, January 26, 2024, 1PM CR 225 and Videoconference

RE: Testimony in SUPPORT of SB 760: RELATING TO PSYCHOLOGISTS.

I, Lilnetria Johnson, a graduate student in the field of clinical psychology, strongly support SB760, which establishes a five-year pilot program to allow qualified psychologists with limited authority to prescribe psychotropic medications to patients under the care of a psychologist at a federally qualified health center.

The Lahaina fires of August 2023 caused catastrophic trauma to the citizens of Lahaina and the entire island of Maui. Medical and Mental Health providers from around the state are using all of their training to address the shortfall of providers; however, even before the fires, we were already taxed.

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in Hawai`i. They can provide care at Pearl Harbor or other federal facilities to military personnel and their families, just not across the street to HI citizens. States in which Prescribing Psychologists practice have seen a five to seven percent reduction in the rate of suicide.

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SB2049 offers a unique approach to proposing a five-year demonstration project. I recommend that the bill focus on Maui for the first year and then integrate the neighbor islands of Kauai, Hawai`i, and possibly areas on Oahu with severe shortages.

Prescriptive authority for specially trained doctors of psychology is a safe and already utilized option in Louisiana, New Mexico, Illinois, Iowa, and Idaho, in Federally Qualified Health Centers, in Native American-Indian Health Centers, and in the military. Prescribing psychologists have provided care for over thirty years and could make a difference today if you vote YES.

It is time for Hawai`i to take every step towards a better mental health care solution for our citizens. Please vote YES on SB760 to allow greater access to care for those most in need.

Respectfully submitted,

Lilnetria Johnson

Graduate Student, Fielding Graduate University

SB-760

Submitted on: 1/25/2024 5:37:05 PM

Testimony for HHS on 1/26/2024 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Alexander Kraft	Individual	Support	Written Testimony Only

Comments:

Aloha.

it is with renewed excitement that I strongly support SB760, which establishes a pilot program to give qualified psychologists the authority to prescribe psychotropic medications to patients under their care.

As a former kama‘āina I look forward to achieving the goal of Hawaii psychologists with specialty train in clinical psychopharmacology to receive prescription authority. And should this be achieved I am prepared to return to Hawaii as a prescriber.

Currently I practice as prescribing psychologist in NM. I am also a former prescriber for the DoD.

sincerely

Dr Alexander Kraft

prescribing psychologist

SB-760

Submitted on: 1/25/2024 11:18:46 AM

Testimony for HHS on 1/26/2024 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Brandon Henscheid	Individual	Support	Written Testimony Only

Comments:

I strongly support SB2049, which establishes a five-year pilot program to allow qualified psychologists with limited authority to prescribe psychotropic medications to patients under the care of a psychologist at a federally qualified health center.

SB2049 offers a unique approach by proposing a five-year demonstration project. I recommend that the bill be revised to focus on Maui for the first year and then integrate the neighbor islands of Kauai, Hawai'i, and possibly areas on Oahu with severe shortages.

I am a prescribing psychologist in Idaho and would consider re-locating to Hawaii if this bill passes.

SENATE
THE THIRTY-SECOND LEGISLATURE
REGULAR SESSION OF 2024

To: COMMITTEE ON HEALTH & HUMAN SERVICES
Senator Joy San Buenaventura, Chair
Senator Henry J.C. Aquino, Vice Chair
Senator Jarrett Keohokalole
Senator Maile S.L. Shimabukuro
Senator Brenton Awa

HEARING: Friday, January 26, 2024, 1PM CR 225 and Videoconference

RE: Testimony in **SUPPORT** of SB 706: RELATING TO PSYCHOLOGISTS.

My name is Dr. Bracken Gott, and I am a Licensed Clinical Psychologist living and serving the people of Hawaii for over ten years now. **I am writing in strong support of SB706.** I live on the windward side of Oahu and have been providing services to both Oahu and Hawaii Island. I understand the unmet needs of our people regarding quality mental health care. In addition to 7 years of graduate school, I have also attended the extremely rigorous training at UH Hilo and obtained a master's degree in clinical Psychopharmacology (2 years, full time, hybrid, in person and online). As part of the training, I completed a one-year practicum (800 hours) in prescribing under the supervision of a local psychiatrist. I have spent many additional years learning how to prescribe in order to better serve my patients/our people. I plead your support in SB706 to allow Specially Trained Psychologists (Prescribing Psychologists) to help the mental health crisis facing the people of Hawaii.

Hawai'i communities across the state were suffering even before the fires because of the lack of access to comprehensive mental health care. Our most vulnerable citizens are unable to obtain the care needed to live healthy and functional lives. According to NAMI (2021), 187,000 adults in Hawai'i suffer from a mental health condition and 41,000 of our citizens experience a serious mental illness. Almost 70 percent of Hawai'i's youth ages 6-17 who have depression did not receive any care in the past year.

Prescribing Psychologists receive more psychopharmacology training than primary care physicians and physician assistants. In addition to the master's degree in Psychopharmacology, Prescribing Psychologists MUST pass a nationally accredited psychopharmacology exam (PEP) to be licensed to prescribe. They receive integrative medical and biopsychosocial training from physicians, psychiatrists, nurse practitioners, prescribing/medical psychologists, and pharmacists. Prescribing Psychologists have provided safe and effective mental health care, including pharmacotherapy, for over thirty years. They already prescribe for the Army and Navy in Hawai'i. They can provide care at Pearl Harbor or other federal facilities to military personnel and their families, just not across the street to HI citizens. States in which Prescribing Psychologists practice have seen a five to seven percent reduction in the rate of suicide.

There are now five MSCP programs that have received designation status from the American Psychological Association and one additional program that is under review. Two of these six programs are housed in pharmacy schools. As many as four new programs will launch their MSCP programs in 2024 or 2025; of these, one is in a medical school, two are in pharmacy schools, and one is a collaboration between a psychology department and a nursing school.

The numbers are simple. There are not enough psychiatrists to care for the people of Hawai`i, especially on neighbor islands. Hawai`i Island has the most significant deficit in the number of psychiatrists needed to care for island residents (75.1%), followed by Kauai County with a 71.2 percent shortage, and then Maui County with a 50.4 percent shortage before the August 2023 fires.

Prescriptive authority for specially trained Doctors of Psychology is a safe and already utilized option in Louisiana, New Mexico, Illinois, Iowa, and Idaho, in Federally Qualified Health Centers, in Native American-Indian Health Centers, and in the military. Prescribing psychologists have provided care for over thirty years and could make a difference today if you vote YES.

It is time for Hawai`i to take every step towards a better mental health care solution for our citizens. Please vote **YES** on SB706 to allow greater access to care for those most in need.

Respectfully submitted,

Dr. Bracken Gott
Psy.D, MSCP

SB-760

Submitted on: 1/25/2024 8:12:03 AM

Testimony for HHS on 1/26/2024 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Ailea Apana	Individual	Oppose	Written Testimony Only

Comments:

I oppose this bill.

SB-760

Submitted on: 1/25/2024 8:13:04 AM

Testimony for HHS on 1/26/2024 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Jared Kim	Individual	Oppose	Written Testimony Only

Comments:

I'm concerned about patient safety and the risk of providing substandard psychiatric medical care, which is often times worse than no care at all, to our FQHC patients. Psychotropic medications do not exist in a vacuum; they have wide ranging metabolic and neurological (medical) side effects and complex interactions with other non-psychotropic medications, as well as non-psychiatry medical conditions. There is no way to only prescribe/adjust a patient's psychotropic medications without taking into account all of the medications they're currently taking and their underlying non-psychiatric medical conditions. Consequently, the current standard of training to prescribe medications (including psychotropic medications) involves several years of formal education and supervised clinical training. It is unclear how a crash course for non-medical prescribers to start prescribing and modifying medications will be able to meet these minimum training and education standards.

SB-760

Submitted on: 1/25/2024 8:38:37 AM

Testimony for HHS on 1/26/2024 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Blake Pinell	Individual	Oppose	Written Testimony Only

Comments:

As a physician specializing in psychiatry, I strongly oppose SB760. Psychiatric care is much more than prescribing medications. Complex interactions between mental and physical health conditions require advanced medical training to ensure high-quality clinical care. Many medical illnesses may also show symptoms that look similar to mental health conditions such as depression or anxiety to the untrained observer. If this legislation is passed, it could endanger the lives of Hawaii's most vulnerable citizens by allowing those with insufficient medical training to prescribe potentially dangerous medications.

SB-760

Submitted on: 1/25/2024 8:40:46 AM

Testimony for HHS on 1/26/2024 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Ashley	Individual	Oppose	Written Testimony Only

Comments:

I oppose Bill SB760. Psychiatrists currently undergo 4 years of medical school and 4 years of general psychiatry training. This includes work with pediatric, adult, and geriatric patients in inpatient, ER and outpatient settings. There are additional 1-2 year fellowships for specialization in specific populations such as geriatric and pediatric patients. In one year of training, there can be over 1000 hours of supervised patient care and over 1000 individual patient encounters. There is significant concern for patient safety if prescribing psychologists are completing only 800 hours and only needing to see 100 patients within a year of training. This is not adequate time or experience to learn to identify and manage serious psychotropic medication side effects or drug-drug interactions.

SB-760

Submitted on: 1/25/2024 8:50:18 AM

Testimony for HHS on 1/26/2024 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Chayanin Foongsathaporn	Individual	Oppose	Written Testimony Only

Comments:

I strongly disagree with psychologist prescribing medication. You need training in medical school and physiology and anatomy to be able to prescribe medication. Psychologist is great at what they are doing which is psychotherapy and should not prescribe medication.

SB-760

Submitted on: 1/25/2024 9:21:40 AM

Testimony for HHS on 1/26/2024 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Sunny Mah	Individual	Oppose	Written Testimony Only

Comments:

I am a psychiatrist practicing in the State of Hawaii and I STRONGLY OPPOSE SB 760.

SB-760

Submitted on: 1/25/2024 10:16:36 AM

Testimony for HHS on 1/26/2024 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Dilan Nakatomi	Individual	Oppose	Written Testimony Only

Comments:

I am a psychiatry resident in the state of Hawaii and strongly oppose SB 760. I do recognize I have self-interest in maintaining prescribing rights to providers as is the status quo, but I do believe that psychologists are not adequately trained to manage psychiatric medications. The knowledge to do so safely comes from a completely different background of training; we learn the medical implications of these medicines we prescribe from medical school. Prescribing without medical training would put patients at risk and furthermore, would not increase access to quality helathcare. We already have to fix medications for patients seeing providers in the community that aren't medical doctors, this bill would only add to the problem.

SB-760

Submitted on: 1/25/2024 10:39:31 AM

Testimony for HHS on 1/26/2024 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Junji Takeshita	Individual	Oppose	Written Testimony Only

Comments:

I am opposed to SB760 allowing psychologists who are non medical practitioners to prescribe psychotropics. There is already a mechanism with advanced practice nurses who have medical training to address the shortage of prescribing behavioral health providers. The suggested psychopharmacology courses for psychologists is insufficient to ensure safe prescribing.

SB-760

Submitted on: 1/25/2024 10:47:24 AM

Testimony for HHS on 1/26/2024 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Neil Gray	Individual	Oppose	Written Testimony Only

Comments:

Psychologists do not have the medical training necessary to prescribe medication. This bill represents a threat to the health of all Hawai'i residents.

SB-760

Submitted on: 1/25/2024 10:48:29 AM

Testimony for HHS on 1/26/2024 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Carrie Ip	Individual	Oppose	Written Testimony Only

Comments:

I am a pediatrician and I oppose psychologists prescribing. I receive 4 years of medical school and 3 years of pediatric residency training and consult my child and adolescent psychiatry colleagues for help with prescribing for children and adolescents.

SB-760

Submitted on: 1/25/2024 11:02:49 AM

Testimony for HHS on 1/26/2024 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Sean He	Individual	Oppose	Written Testimony Only

Comments:

As a resident psychiatrist, I strongly oppose this bill. Psychologists do NOT have, by any means, an equivalent knowledge base and experience as psychiatrists. Passing this bill would jeopardize the safety of our patients, most of whom are already a marginalized population.

SB-760

Submitted on: 1/25/2024 11:07:49 AM

Testimony for HHS on 1/26/2024 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Pablo Stewart, M.D.	Individual	Oppose	Written Testimony Only

Comments:

Allowing psychologists to prescribe psychotropic medications is a recipe for disaster. Psychiatric disorders are medical conditions that require treatment by a competent physician. I am a clinical professor in the Department of Psychiatry at JABSOM. Before our psychiatric trainees are allowed to practice independently, they must complete medical school and receive an additional FOUR years of supervised training. There is no way that a psychologist could ever achieve that degree of medical expertise that is required to meet the standard of care.

There are many other viable options to expand the professional pool of psychiatric providers in Hawaii. For example, expand funding for Nurse Practitioner training programs. Also, allow tax incentives for Psychiatrists and Nurse Practitioners to move to our state. Finally, if psychologists wish to be physicians, then they should have taken a rigorous pre-medical curriculum in college, completed medical school and psychiatric residency. The shortage of psychiatric providers does not warrant a lowering of the medical standard of care.

SB-760

Submitted on: 1/25/2024 11:19:25 AM

Testimony for HHS on 1/26/2024 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Carol Collier	Individual	Oppose	Written Testimony Only

Comments:

As I testified in regard to SB 2049, I do not feel that even with an additional few years of training psychologists should be prescribing medications to patients.

SB-760

Submitted on: 1/25/2024 11:41:24 AM

Testimony for HHS on 1/26/2024 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Christian Krause, MD	Individual	Oppose	Written Testimony Only

Comments:

As a resident psychiatrist, I strongly oppose this bill. Psychologists do NOT have, by any means, an equivalent knowledge base and experience as psychiatrists. Passing this bill would jeopardize the safety of our patients, most of whom are already a marginalized population.

SB-760

Submitted on: 1/25/2024 11:41:27 AM

Testimony for HHS on 1/26/2024 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Christopher Tokeshi	Individual	Oppose	Written Testimony Only

Comments:

Senator Joy San Buenaventura, Chair

Senator Henry Aquino, Vice-Chair

Senate Committee on Health & Human Services

DATE: Friday, January 26, 2024

TIME: 1:00 PM

Conference Room 225 & Videoconference

PLACE: State Capitol

415 South Beretania Street

Chair San Buenaventura, Vice-Chair Aquino, and members of the Committee:

As a physician specializing in child and adolescent psychiatry, I urge the Committee to oppose SB760. Comprehensive theoretical and applied medical training are necessary in order to prescribe psychotropics safely (at minimum, understanding of drug pharmacology and interactions, medical comorbidities and biologic factors that may affect patient’s symptoms). I believe the current proposed training requirements are insufficient. During our residency and fellowship training, we work with patients across various sites, including neighbor islands, major emergency departments across the state, and collaborate care with various state agencies. Access to medications represent a portion of the issue, however the greater disparity lies with other psychosocial aspects of care including access to individual psychotherapy, case management for patients/families and waitlists for community resources. Psychologists are extremely valuable resources, and the impact of a positive therapeutic relationship on a patient’s overall stability, prognosis and safety cannot be understated. To remain judicious with how we utilize our limited resources, I would consider strengthening existing resources and infrastructure (ie telepsychiatry, use of integrated care models, funding for residential programs, step-down

services and case management) to best support mental health issues for our vulnerable population.

Please vote against SB760. Thank you very much for your consideration.

Christopher Tokeshi MD

SB-760

Submitted on: 1/25/2024 11:45:50 AM

Testimony for HHS on 1/26/2024 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Jennifer Lyman	Individual	Oppose	Written Testimony Only

Comments:

This bill is well intentioned: to address a shortage of prescribing mental health care providers that can serve the community. But there are numerous oversights that I would like to point out.

My name is Jennifer Lyman; I was born and raised on the island of O'ahu, and I'm a graduate of Kamehameha Schools, Stanford University, the University of Hawai'i Public Health for my MPH and John A. Burns School of Medicine for my MD, I feel that I have invested a significant amount of my time dedicated to understanding the mental health challenges that are unique to our communities. Furthermore, I've recently completed my four year residency training at Queens Medical Center where I served as one of the Chief Psychiatry Residents.

This bill describes marked waiting times for getting access to psychiatric providers. FACT: I am at Waimanalo Health Center, and new patients can see me within a 1-2 week period. There has never been a delay in longer than this. In just calling a private care clinic this morning (1/25/24) that accepts private insurance, medicaid/medicare and offers psychiatric care, I was told that I could be seen tomorrow! If patients are experiencing a delay in care, this may be likely due to a lack of knowledge of where to get their services. This could be rectified with public health programs that could disseminate information properly. Additional truths: psychiatrists are not the only provider needed. Many patients are hesitant to take medications or do not wish to take medications. Many patients are simply not ill enough to warrant the initiation of medications. This is a huge patient population that could adequately be served by properly trained psychologists that provide their important service of talk therapy. One additional example: a call made to a clinic for a psychologist had me waiting 3-4 weeks prior to being seen. The delay in care that is reported here is not only erroneous but also not exclusive to psychiatrists. By taking away from the current psychologist population, this bill limits access in other ways.

This bill also stipulates that increasing the number of prescribing mental health providers is beneficial to the homeless population. FACT: many houseless individuals are resistant to medications. I've seen this countless times in my residency training and current practice at Waimanalo Health Center. It is perhaps not surprising that a large number of the houseless population come from indigenous and native communities. Their distrust in western medicine has perpetuated over the years as the result of generations of historical trauma. Assuming that they primarily need Western Medicine is a perspective that does not validate other traditional methods of healing that may be more beneficial for this population - or even resonate with them more! It is a narrow perspective that discounts cultural options that are aligned with what this population may actually desire.

The bill requires clinical experience from the psychologists that includes a minimum of eight hundred hours completed in a clinical prescribing practicum, completed in not less than twelve months and not more than fifty—six months, and consists of: Supervision of a minimum of one hundred patients, including geriatric, pediatric, and pregnant patients; a minimum of eighty hours completed in a physical assessment practicum in a primary care, family practice, community, or internal medicine setting; A minimum of one hundred hours of community service with homeless, veteran, or low—income populations; A minimum of two hours per week of supervision by a primary care provider or a prescribing psychologist; and Eight weeks of rotation in each of the following: (i) Internal and family medicine; (ii) Women's health; (iii) Pediatrics; and (iv) Geriatrics, etc.

FACT: As a current psychiatrist, I see one hundred patients over the time period of 7-8 days. Surely you do not wish to be seen by a physician who has only been trained with real patients over the time course of one week! The minimum length of additional training required of a physician - AFTER four years of medical school and completion of pre-medical reqs - is three years of residency training. Psychiatrists require FOUR years of residency training. **As you can imagine: one hundred patients is equivalent to 0.4% of the patient volume seen during this time period. An eighty hour practicum is equivalent to this same reduced volume.** At some points in my residency period, a 70 hour work week was expected! *If it unfathomable to think that this level of training for a psychologist (whom has not even completed the pre-medical coursework or medical school training) would yield them prepared to prescribe medications that impact all organ systems, interact with other medications that patients are taking and have long-lasting impacts.* It is enigmatic to think that with this level of preparation - they could enter the workforce with the confidence needed to sift through the diagnostic nuances with which mental health conditions present!

For the above, I'd also like to point out that psychiatrists are not only board certified in psychiatry but also in neurology. This is of importance b/c there are neurologic conditions that mimic psychiatric ones. Just the other week, I had a patient being erroneously treated for depression when it was pseudobulbar palsy, a neurological condition sometimes precipitated by strokes. I could provide a huge number of additional examples of medical conditions masqueraded by psychiatric ones that I have seen in my years as a psychiatrist including iatrogenically induced conditions, catatonia, anti nmda encephalitis, frontotemporal dementia, etc.

Please vote NO on SB760.

There is a disconnect between this legislation, the experience of our community and the training required to become a responsible & informed prescriber of psychiatric medications.

Jennifer Lyman, MD, MPH

SB-760

Submitted on: 1/25/2024 11:49:48 AM

Testimony for HHS on 1/26/2024 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
BRYANT YU	Individual	Oppose	Written Testimony Only

Comments:

Oppose

SB-760

Submitted on: 1/25/2024 12:06:14 PM

Testimony for HHS on 1/26/2024 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Dr Joy Andrade	Individual	Oppose	Written Testimony Only

Comments:

Hello,

I am submitting my opposition to SB 760 that would allow psychologist limited prescribing authority. I am a trained and licensed adult and child psychiatrist and have been practicing over 10 years in Hawaii. I understand and deal/manage the effects of limited to sometimes no access to psychiatry and child psychiatrist for our community. The answer to increasing accessibility is NOT to allow psychologist to be able to prescribe but to provide resources to psychiatrist and psychiatric specialist (child, geriatric, addiction, forensic, etc) to practice in Hawaii. Examples are increase funding for psychiatrist, especially those that choose to practice in areas with none to low numbers of psychiatrist, provide incentives to practice in these area, provide psychiatrist with resources to support their patients (e.g. access to AMHD, Hawaii State Hospital w/o needing to be criminal, CAMHD, Developmental disability services), community programs, accessing and navigating social services, access to therapy, mental health coordinators, case workers. Thinking that medication and having more prescribers is a narrow view of a larger problem to tackle mental health.

Every adult psychiatrist has undergone at least 8 years of training and education (4yrs medical school + 4 yrs of residency) to have the privilege and great responsibility to provide psychiatric/medical care to patients. For those like myself who choose to become a specialist in the field of psychiatry we have 1-3yrs additional training in an a speciality fellowship. I highlight this because to assume that any other profession like psychology which has absolutely no medical training, and their training is entirely different (doctorate study theories on various therapy) with a year or few months of pharmacology now has the knowledge and skill set to practice medicine by allowing the privilege of prescribing is an insult to profession of medicine and more importantly extremely dangerous. By allowing psychologist who again have NO medical training, basic human biology, anatomy, neurology, chemistry at all to prescribe we are essentially saying psychologist are allowed to practice medicine aka they are medical physicians. Prescribing medications is not a simple task. You need to have knowledge on how the body works, how medications interact, how illness behave, etc.. Psychiatry is complex. Also, psychiatric medications like all medications have the potential to be lethal and dangerous especially for those who have little understanding.

I strongly oppose this bill to allow psychologist to prescribe.

Sincerely,

Joy Andrade, M.D

Board Certified Adult and Child Psychiatrist

SB-760

Submitted on: 1/25/2024 12:48:27 PM

Testimony for HHS on 1/26/2024 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Megan Araujo, M.D.	Individual	Oppose	Written Testimony Only

Comments:

I oppose SB760. I am a child and adolescent psychiatry fellow in my final year of training who currently serves patients on the islands of O’ahu, Kaua’i, Maui, Molokai, and Hawai’i. I strongly oppose psychologists prescribing through the pilot program being proposed. If psychologists wish to prescribe they can pursue prescriptive authority through the MD/DO or APRN tracks. I pursued 4 years of medical school and 5 years of psychiatry residency and fellowship training to be able to safely prescribe medications and provide psychotherapy to children, adolescents, adults, and geriatric patients in our community.

This bill would allow psychologists to prescribe in a fraction of the time after seeing a fraction of patients which is truly unsafe. To crunch numbers, this bill proposes that a psychologist should be able to prescribe after a minimum of 800 hours and 100 patients in 12 months. Reviewing my duty hour and patient logs, during my first year of psychiatry residency training (so this does count the other required 4 years of medical school and 4 years of residency and fellowship), I worked over 2800 supervised hours and recorded over 1100 different patient encounters. To allow someone the same prescriptive authority with this significant level of imbalance in training is insulting and makes me very concerned for the people of Hawai’i. This is not nearly enough time or experience to learn to identify and manage serious psychotropic medication side effects or drug-drug interactions.

I was born and raised in Hawaii with roots from Kaua’i and Hawai’i island so I have personally seen and experienced the difficulty in accessing medical care, including mental health care, in our rural and underserved communities. However, families living in a rural and underserved area should not be subjected to lesser care from those less trained to try and “improve access.” Yes, there is a huge need and we want to improve access but safely! There are other initiatives such as telepsychiatry and the collaborative care model which have been shown to be effective at improving access to care without compromising safety. For the safety of our keiki and kupuna, **VOTE NO FOR SB760.**

SB-760

Submitted on: 1/25/2024 1:29:20 PM

Testimony for HHS on 1/26/2024 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Charlene Hsia	Individual	Oppose	Written Testimony Only

Comments:

As a resident physician, I strongly oppose this bill. The training of a psychologist differs significantly from that of a psychiatrist, as psychiatrists undergo the 8+ years of post-graduate training of a physician (MD or DO) needed to understand the complexities of prescribing medications. Psychiatric medications have many adverse effects and complex biochemical interactions with human physiology--knowledge that a psychologist does not learn during the course of their training. Therefore a psychologist would not be equipped to prescribe psychiatric medications. Passing this bill would jeopardize the safety of patients and be an act of gross negligence on the part of our legislators.

SB-760

Submitted on: 1/25/2024 3:59:52 PM

Testimony for HHS on 1/26/2024 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Alyssa	Individual	Oppose	Written Testimony Only

Comments:

As a resident psychiatrist, I strongly oppose this bill. Psychologists do NOT have, by any means, an equivalent knowledge base and experience as psychiatrists. Passing this bill would jeopardize the safety of our patients, most of whom are already a marginalized population.

SB-760

Submitted on: 1/25/2024 5:36:34 PM

Testimony for HHS on 1/26/2024 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Carrie lyman	Individual	Oppose	Written Testimony Only

Comments:

Please oppose SB760.

Thank you.

Please oppose SB760.

This proposed bill is irresponsible and one not to take lightly. Psychologists, although experts in their respected area, lack the medical knowledge and experience psychiatrists acquire through years of medical school and rigorous residency. Prescribing medicine is a well earned privilege psychiatrists receive once completing said medical school and residency.

Thank you.

SB-760

Submitted on: 1/25/2024 5:43:00 PM

Testimony for HHS on 1/26/2024 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Fenner-Marie Shupe	Individual	Oppose	Written Testimony Only

Comments:

Oppose!



January 25, 2024

Joy A. San Bonaventura, Chair
Henry J.C. Aquino, Vice Chair
Committee on Health and Human Service
Hawaii State Senate
Hawaii State Capitol
Honolulu, Hawaii

Re: SB760

Dear Chair San Bonaventura, Vice Chair Aquino, and members of the committee:

I appreciate the opportunity to submit information to this Committee, which is considering legislation to create a pilot program that would expand the scope of practice of licensed, doctorate-level clinical psychologists to grant them prescriptive authority.

I am a Senior Fellow at the Cato Institute, working in the Department of Health Policy Studies. In October 2022, the Cato Institute published my study, “Expand Access to Mental Health Care: Remove Barriers to Psychologists Prescribing Medications.”¹

I am also a general surgeon in private practice for over 40 years in Phoenix, AZ. Perhaps ironically, I can prescribe psychiatric meds to my patients even though it has been years since I received clinical psychopharmacology training or experience. In Arizona, as in most states, clinical psychologists with doctorate degrees must refer patients who need medication to assist with their therapy to licensed prescribers. These are usually psychiatrists. However, roughly 50 percent of psychiatrists nowadays don’t accept insurance, and it can be difficult and costly for patients to see psychiatrists. Psychologists can also refer their patients to primary care practitioners to prescribe psych meds or, as previously mentioned, even to general surgeons like me if a psychiatrist is unavailable.

In any case, patients are subjected to the inconvenience and added cost—in time and money—of seeing two health care providers to receive medication-assisted psychotherapy. This can cause hardships for people suffering from mental health problems in rural and underserved areas.

As my paper describes, more than 30 years ago, the U.S. Department of Defense trained doctorate-level clinical psychologists to prescribe psych meds to increase the workforce of prescribing psychotherapists. The American College of Neuropsychopharmacology reviewed the program for the Department of Defense. It concluded, “It seems clear that a two-year program—one year didactic, one year clinical practicum that includes at least six months of inpatient rotation—can transform licensed clinical psychologists into prescribing psychologists who can function effectively and safely and expand the delivery of mental health treatment to a variety of patients in a cost-effective way.” A Government Accounting Office review of the program concurred.

Today, prescribing psychologists (or RxPs) practice in several federal agencies, including the military, the U.S., Public Health Service Commissioned Corps, and the Indian Health Service. They have been practicing in the territory of Guam since 1999, in New Mexico since 2002, and in the states of Louisiana (2004), Illinois (2014), Iowa (2016), Idaho (2017), and, this year, Colorado.²

As I point out in my paper, the evidence shows that prescribing psychologists prescribe as safely as, and possibly more conservatively than psychiatrists. They also tend to continue to talk psychotherapy with their patients, whereas recent research shows less than 11 percent of psychiatrists engage in talk therapy these days—most primarily practice pharmacotherapy.

Researchers publishing in the August 2023 issue of the journal *Health Policy* used data from the National Vital Statistics System of the National Center for Health Statistics from 1999–2015 to evaluate suicide rates before and after New Mexico and Louisiana expanded psychologists' scope of practice to include prescriptive authority.³ The authors concluded:

Expanding the scope of practice of doctoral-level psychologists who have completed training in clinical psychopharmacology to include prescriptive authority is associated with a 5 to 7 pp [percentage point] decrease in suicides in New Mexico and Louisiana. The largest reductions in suicides are for male, white, married, single, and middle-aged sub-populations. The results are robust to several different additional specifications and frameworks.

And:

In the U.S., expanding scope of practice for specifically trained psychologists to include prescriptive authority may help address poor mental health care outcomes, such as suicides. Similar policy expansions may be useful for other countries where referral from a psychologist and prescription assignment from a psychiatrist are separated.

I encourage lawmakers to avoid making psychologists undergo unnecessary didactic or clinical training and to tailor requirements to what prescribing psychologists will face in their clinical practices. For example, in some states, representatives of the MD and DO professions have sought to make psychologists complete clinical rotations in surgery, internal medicine, obstetrics-gynecology, and even histology before they are granted prescriptive authority. Lawmakers should view such proposals as cynical attempts by entrenched incumbents to reduce competition by erecting barriers to psychologists seeking prescriptive authority.

It is also essential to make licensing criteria flexible enough to accommodate educational innovations that academics, politicians, and policymakers cannot foresee.

Some states grant provisional prescriptive authority to clinical psychologists, requiring them to practice in collaboration with a licensed prescriber for one or two years, after which the clinical psychologists' prescriptive authority becomes unrestricted. Lawmakers should avoid legislation requiring prescribing psychologists to maintain such collaborative agreements beyond two years. To do so would defeat the primary purpose of granting prescriptive authority to psychologists: minimizing the number of providers (and the attendant costs in time and money) that mental health patients need to see to obtain medication-assisted psychotherapy, thus helping improve access to mental health services.

Hawaii lawmakers can help increase access to medication-assisted mental health services without expending taxpayer dollars by granting prescriptive authority to qualified clinical psychologists.

Respectfully submitted,

Jeffrey A. Singer, MD, FACS
Senior Fellow
Cato Institute

¹ <https://www.cato.org/briefing-paper/expand-access-mental-health-care-remove-barriers-psychologists-prescribing> and https://www.cato.org/sites/cato.org/files/2022-10/BP_142_update.pdf

² <https://www.cato.org/blog/colorado-poised-become-sixth-state-allow-patients-access-prescribing-psychologists>

³ <https://www.sciencedirect.com/science/article/abs/pii/S0168851023001318#preview-section-introduction>

SB-760

Submitted on: 1/25/2024 3:54:20 PM

Testimony for HHS on 1/26/2024 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Jerris Hedges	Individual	Comments	Written Testimony Only

Comments:

For the Senate [COMMITTEE ON HEALTH AND HUMAN SERVICES](#) membership.

Regarding SB760:

I have reviewed the text of SB760 and am concerned that the overseeing board of psychology will be developing training, formulary, and experiential requirements for the prescriptive authority of psychoactive pharmaceutical use by clinical psychologists who have not been extensively trained in either the behavioral health applications of these drugs or the complications associated with these agents.

It is my recommendation that this bill incorporate language that specifically mandates that all prescriptive activity of clinical psychologists, whether as part of a pilot program or following the period of a pilot program, be under the direct supervision of a psychiatrist or general practice physician having clinical experience in such pharmacological therapy.

The minimalist training and clinical oversight outlined in this bill could put the general public at considerable risk. However, if the general concepts in this bill are complemented through appropriate ongoing physician oversight of the clinical psychologists' practice, this risk to the public could be greatly reduced.

Jerris Hedges, MD

LATE

SB-760

Submitted on: 1/25/2024 10:03:56 PM

Testimony for HHS on 1/26/2024 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Christina Uemura	Individual	Support	Written Testimony Only

Comments:

Aloha. I strongly support SB760, which establishes a pilot program to give qualified psychologists the authority to prescribe psychotropic medications to patients under their care.

Prescribing Psychologists receive more psychopharmacology training than primary care physicians and physician assistants. They receive integrative medical and biopsychosocial training from physicians, psychiatrists, nurse practitioners, prescribing/medical psychologists, and pharmacists. Prescribing Psychologists have provided safe and effective mental health care, including pharmacotherapy, for over thirty years. They already prescribe for the Army and Navy in Hawai`i. They can provide care at Pearl Harbor or other federal facilities to military personnel and their families, just not across the street to HI citizens. States in which Prescribing Psychologists practice have seen a five to seven percent reduction in the rate of suicide.

There are now five Masters of Science in Clinical Psychopharmacology (MSCP) programs that have received designation status from the American Psychological Association and one additional program that is under review. Two of these six programs are housed in pharmacy schools. As many as four new programs will launch their MSCP programs in 2024 or 2025; of these, one is in a medical school, two are in pharmacy schools, and one is a collaboration between a psychology department and a nursing school.

We don't have enough psychiatrists to serve those in need. Please allow neighbor islands to get prescriptive privileges.

LATE

SENATE
THE THIRTY-SECOND LEGISLATURE
REGULAR SESSION OF 2024

To: COMMITTEE ON HEALTH & HUMAN SERVICES
Senator Joy San Buenaventura, Chair
Senator Henry J.C. Aquino, Vice Chair
Senator Jarrett Keohokalole
Senator Maile S.L. Shimabukuro
Senator Brenton Awa

HEARING: Friday, January 26, 2024, 1PM CR 225 and Videoconference

RE: Testimony in SUPPORT of SB760: RELATING TO PSYCHOLOGISTS.

I write in strong support of SB760, which establishes a pilot program to allow qualified psychologists limited authority to prescribe psychotropic medications to patients under the care of the psychologist.

I am a prescribing psychologist, otherwise known as a medical psychologist by the U.S. Drug Enforcement Agency, and **I prescribe psychiatric medicine here in Hawaii**. In addition to my clinical psychology PhD, I have a medical degree that took close to 3 years to complete. You can only apply to this medical degree program if you already have a psychology PhD, which itself takes about 6 years to complete. Thus, I have about 9 years of total graduate education in mental health and psychiatric medicine. My medical degree courses covered clinical medicine, physical assessment, biochemistry, pharmacology, psychopharmacology, neurochemistry, neurophysiology, neuropathology and psychiatric treatment of special populations (child, geriatric, chronic pain, and racial differences). This medical degree is called a Postdoctoral Master of Science in Clinical Psychopharmacology, or MSCP. I have also passed a national board exam for medical psychologists. In addition to my medical degree, I spent 15 months in a supervised practicum prescribing psychiatric medicines. As an independent and fully credential provider, I have been prescribing medicine on my own for over 12 years.

My medical training and education is the result of over almost 30 years of development in the safe and effective practice of medical psychology, which started with the U.S. military at their medical school, the Uniformed Services University of Health Sciences, where I hold a faculty position, and has continued in the states that have now fully legalized medical psychology: New Mexico, Louisiana, Illinois, Iowa Idaho and Colorado. In New Mexico and Louisiana medical psychologists have been prescribing for the greatest amount of time, about 20 years. During this time they have written over one million prescriptions and have had an excellent safety record.

I prescribe psychiatric medicine every day in Hawaii, but I can only do so on federal land. I have never had a malpractice case or a board complaint my entire career. I have treated all categories of patients including serious mental illness such as schizophrenia and bipolar disorders. Some of my psychiatrist colleagues here in Hawaii, who do not know me or my training, will tell you that medical psychologists are ill-trained and dangerous. But many physicians disagree with them. For example, the Board of Medicine in Louisiana, run by physicians to ensure the safe practice of medicine and prescribing, disagrees with psychiatry's position. The Board of Medicine in Louisiana supports medical psychology and have licensed me to practice psychiatric medicine with my patients every day, which I do, and which they do because they have full confidence in my medical training and abilities. And the U.S. Drug Enforcement Agency grants me a DEA number to prescribe even the most dangerous medicines, those in Schedules II through V, which I have also accomplished with a perfect safety record. Despite what psychiatrists may tell you, medical psychology has a proven treatment and safety record.

I prescribe psychiatric medicine to benefit my patients, who are my first concern, and who typically have difficulty, sometimes great difficulty, gaining access to a psychiatrist. It is for their sake that I became a medical psychologist. And I can tell you, my patients greatly appreciate this. Sometimes they ask me why there are not more like me, trained in both therapy and medicines, who are able to provide both types of treatment for them at one appointment?

And so, with sincere respect, I ask you the same question.

Please vote **YES** on SB2049 to allow greater access to safe and proven psychiatric treatment for those who most need it.

Respectfully submitted,

Samuel S. Dutton, PhD, MP
Medical Psychologist
Kane'ohe, HI
Louisiana Board of Medical Examiners License MP.000016

SB-760

Submitted on: 1/26/2024 4:31:29 AM

Testimony for HHS on 1/26/2024 1:00:00 PM



Submitted By	Organization	Testifier Position	Testify
Jaime Wilson	Individual	Support	Written Testimony Only

Comments:

Aloha. I strongly support SB760, which establishes a pilot program to give qualified psychologists the authority to prescribe psychotropic medications to patients under their care.

The Lahaina fires of August 2023 caused catastrophic trauma to the residents of Lahaina and the entire island of Maui. Medical and Mental Health providers from around the state are using all of their training to address the shortfall of providers; however, even before the fires, we were already taxed.

Hawai'i communities across the state were suffering even before the fires because of the lack of access to comprehensive mental health care. Our most vulnerable citizens are unable to obtain the care needed to live healthy and functional lives. According to NAMI (2021), 187,000 adults in Hawai'i suffer from a mental health condition and 41,000 of our citizens experience a serious mental illness. Almost 70 percent of Hawai'i's youth ages 6-17 who have depression did not receive any care in the past year.

Prescribing Psychologists receive more psychopharmacology training than primary care physicians and physician assistants. They receive integrative medical and biopsychosocial training from physicians, psychiatrists, nurse practitioners, prescribing/medical psychologists, and pharmacists. Prescribing Psychologists have provided safe and effective mental health care, including pharmacotherapy, for over thirty years. They already prescribe for the Army and Navy in Hawai'i. They can provide care at Pearl Harbor or other federal facilities to military personnel and their families, just not across the street to HI citizens. States in which Prescribing Psychologists practice have seen a five to seven percent reduction in the rate of suicide.

There are now five Masters of Science in Clinical Psychopharmacology (MSCP) programs that have received designation status from the American Psychological Association and one additional program that is under review. Two of these six programs are housed in pharmacy schools. As many as four new programs will launch their MSCP programs in 2024 or 2025; of these, one is in a medical school, two are in pharmacy schools, and one is a collaboration between a psychology department and a nursing school.

The numbers are simple. There are not enough psychiatrists to care for the people of Hawai'i, especially on neighbor islands. Hawai'i Island has the most significant deficit in the number of psychiatrists needed to care for island residents (75.1%), followed by Kauai County with a 71.2

percent shortage, and then Maui County with a 50.4 percent shortage before the August 2023 fires.

Prescriptive authority for specially trained doctors of psychology is a safe and already utilized option in Louisiana, New Mexico, Illinois, Iowa, and Idaho, in Federally Qualified Health Centers, in Native American-Indian Health Centers, and in the military. Prescribing psychologists have provided care for over thirty years and could make a difference today if you vote YES.

It is time for Hawai'i to take every step towards a better mental health care solution for our citizens. Please vote YES on this measure to allow greater access to care for those most in need.

Respectfully submitted,

Dr. Jaime Wilson

LATE

SB-760

Submitted on: 1/26/2024 5:42:27 AM

Testimony for HHS on 1/26/2024 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Samantha Salinas	Individual	Support	Written Testimony Only

Comments:

SENATE

THE THIRTY-SECOND LEGISLATURE

REGULAR SESSION OF 2024

To: COMMITTEE ON HEALTH & HUMAN SERVICES

Senator Joy San Buenaventura, Chair

Senator Henry J.C. Aquino, Vice Chair

Senator Jarrett Keohokalole

Senator Maile S.L. Shimabukuro

Senator Brenton Awa

HEARING: Friday, January 26, 2024, 1PM CR 225 and Videoconference

RE: Testimony in SUPPORT of SB 760: RELATING TO PSYCHOLOGISTS.

I strongly support SB760, which establishes a five-year pilot program to allow qualified psychologists with limited authority to prescribe psychotropic medications to patients under the care of a psychologist at a federally qualified health center. I am an advanced doctoral student in the field of school psychology. I believe that access to appropriate healthcare, especially in tragic times that this population are facing is critical and strongly needed.

The Lahaina fires of August 2023 caused catastrophic trauma to the citizens of Lahaina and the entire island of Maui. Medical and Mental Health providers from around the state are using all of their training to address the shortfall of providers; however, even before the fires, we were already taxed.

Hawai'i communities across the state were suffering even before the fires because of the lack of access to comprehensive mental health care. Our most vulnerable citizens are unable to obtain the care needed to live healthy and functional lives. According to NAMI (2021), 187,000 adults in Hawai'i suffer from a mental health condition and 41,000 of our citizens experience a serious mental illness. Almost 70 percent of Hawai'i's youth ages 6-17 who have depression did not receive any care in the past year.

Prescribing Psychologists receive more psychopharmacology training than primary care physicians and physician assistants. They receive integrative medical and biopsychosocial training from physicians, psychiatrists, nurse practitioners, prescribing/medical psychologists, and pharmacists. Prescribing Psychologists have provided safe and effective mental health care, including pharmacotherapy, for over thirty years. They already prescribe for the Army and Navy in Hawai'i. They can provide care at Pearl Harbor or other federal facilities to military personnel and their families, just not across the street to HI citizens. States in which Prescribing Psychologists practice have seen a five to seven percent reduction in the rate of suicide.

There are now five MSCP programs that have received designation status from the American Psychological Association and one additional program that is under review. Two of these six programs are housed in pharmacy schools. As many as four new programs will launch their MSCP programs in 2024 or 2025; of these, one is in a medical school, two are in pharmacy schools, and one is a collaboration between a psychology department and a nursing school.

The numbers are simple. There are not enough psychiatrists to care for the people of Hawai'i, especially on neighbor islands. Hawai'i Island has the most significant deficit in the number of psychiatrists needed to care for island residents (75.1%), followed by Kauai County with a 71.2 percent shortage, and then Maui County with a 50.4 percent shortage before the August 2023 fires.

SB2049 offers a unique approach to proposing a five-year demonstration project. I recommend that the bill focus on Maui for the first year and then integrate the neighbor islands of Kauai, Hawai'i, and possibly areas on Oahu with severe shortages.

Prescriptive authority for specially trained doctors of psychology is a safe and already utilized option in Louisiana, New Mexico, Illinois, Iowa, and Idaho, in Federally Qualified Health Centers, in Native American-Indian Health Centers, and in the military. Prescribing psychologists have provided care for over thirty years and could make a difference today if you vote YES.

It is time for Hawai'i to take every step towards a better mental health care solution for our citizens. Please vote YES on SB760 to allow greater access to care for those most in need.

Respectfully submitted,

Samantha Salinas

TWU Doctoral student in training

LATE

SB-760

Submitted on: 1/26/2024 7:17:14 AM

Testimony for HHS on 1/26/2024 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Cecilia Tuliloa Gay	Individual	Support	Written Testimony Only

Comments:

My name is Dr. Cecilia Tuliloa Gay. I'm originally from American Samoa but grew up for some time in Laie. I left for the military and returned again in 2012. I graduated from the Hawaii School of Professional Psychology. I left again in 2015 to finish graduate training in Colorado. I'm currently a clinical and health psychologist practicing in Pueblo. I completed a 2-year postdoc Masters degree in Clinical Psychopharmacology in 2020.

I'm here representing myself and asking you to vote YES for prescriptive authority. My main reason in advocating is for the welfare and safety of our people. Too many are suffering from persisting mental illness and waitlists are too long to get them in for services that could prevent significant and irreparable damage to their lives. I saw it in Hawaii and I see it here in Colorado. I joined the CO task force to advocate for prescriptive authority and the bill was signed by the governor in 2023. I had always planned to move back to Hawaii but now that CO has allowed psychologists to prescribe I may remain here in order to use my skills more fully. My preference is to return to my loved ones in HI and if prescribing authority is granted I'll come back sooner and ready to work. My aim is to serve the Polynesian communities and spread awareness about mental health and provide effective treatment that is culturally sensitive and tailored to each individual.

Prescribing psychologists can provide comprehensive evaluation and testing and offer appropriate therapeutic treatment that may or may not include medications. Specially trained psychologists can save the patient time and money as they would not have to go to several providers for these services. This brings quicker relief of symptoms and the person can go back to work, mend their relationships, prevent their suicide, and so on.

The model of prescribing psychology is already succesful in 6 other states, the territory of Guam, and federal agencies. Please vote YES on this important bill.

Mahalo and fa'afetai tele lave for considering my testimony and this legislation.

LATE

SB-760

Submitted on: 1/26/2024 8:33:48 AM

Testimony for HHS on 1/26/2024 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Jill	Individual	Support	Written Testimony Only

Comments:

Aloha. I strongly support SB760, which establishes a pilot program to give qualified psychologists the authority to prescribe psychotropic medications to patients under their care. There has been a critical shortage of prescribers in Hawaii for decades and our communities continue to suffer as a result.

Our most vulnerable citizens are unable to obtain the care needed to live healthy and functional lives. According to NAMI (2021), 187,000 adults in Hawai`i suffer from a mental health condition and 41,000 of our citizens experience a serious mental illness. Almost 70 percent of Hawai`i's youth ages 6-17 who have depression did not receive any care in the past year. According to recent research on the federal level, psychiatrists can only fill 18% of the need.

The numbers are simple. There are not enough psychiatrists to care for the people of Hawai`i, especially on neighbor islands. Prescribing Psychologists receive more psychopharmacology training than primary care physicians. They receive integrative medical and biopsychosocial training from physicians, psychiatrists, nurse practitioners, prescribing/medical psychologists, and pharmacists. Prescribing Psychologists have provided safe and effective mental health care, including pharmacotherapy, for over thirty years. They already prescribe for the Army and Navy in Hawai`i. They can provide care at Pearl Harbor or other federal facilities to military personnel and their families, just not across the street to HI citizens. States in which Prescribing Psychologists practice have seen a five to seven percent reduction in the rate of suicide.

There are now five Masters of Science in Clinical Psychopharmacology (MSCP) programs that have received designation status from the American Psychological Association and one additional program that is under review. Two of these six programs are housed in pharmacy schools. As many as four new programs will launch their MSCP programs in 2024 or 2025; of these, one is in a medical school, two are in pharmacy schools, and one is a collaboration between a psychology department and a nursing school.

Psychologists with Prescriptive Authority will help provide safe and appropriate care for those individuals who are without homes, who suffer from serious mental illness or from the stress associated with recent tragedies to include ongoing COVID-19 pandemic, Lahaina fires, and rising violent acts across the nation and within our home state. Psychologists already provide more access to care to Medicaid and Medicare patients than other prescribing mental health professionals and are part of the coalition to address homelessness and provide care alongside our colleagues and community partners.

Prescriptive authority for specially trained doctors of psychology is a safe and already utilized option in Louisiana, New Mexico, Illinois, Iowa, and Idaho, in Federally Qualified Health Centers, in Native American-Indian Health Centers, and in the military. Prescribing psychologists have provided care for over thirty years and could make a difference today if you vote YES.

It is time for Hawai`i to take every step towards a better mental health care solution for our citizens. Please vote **YES** on SB760 to allow greater access to care for those most in need.

Respectfully submitted,

Jill Oliveira Cabbab, Ph.D.

Licensed Clinical Psychologist

LATE

SB-760

Submitted on: 1/26/2024 10:00:24 AM

Testimony for HHS on 1/26/2024 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Bradley McConnell	Individual	Support	Written Testimony Only

Comments:

As a licensed psychologist in Hawaii (PSY-1663), I am in full support of this bill for the following reasons:

1. **Increased Access to Care:** In many regions, especially rural or underserved areas, there is a shortage of psychiatrists or other medical professionals who can prescribe medication. Granting prescription privileges to psychologists can help bridge this gap, allowing more patients to receive comprehensive mental health care, including both therapy and medication management, from a single provider.
2. **Holistic Treatment Approach:** Psychologists with prescription privileges can offer a more integrated approach to treatment. They are trained in both psychotherapy and psychopharmacology, allowing them to consider both medication and therapy in their treatment plans. This holistic approach can be beneficial in treating complex mental health issues.
3. **Reduced Stigma and Improved Continuity of Care:** When mental health treatment, including medication management, is provided by a psychologist, it may reduce the stigma sometimes associated with seeing multiple providers for mental health issues. It also ensures better continuity of care as the psychologist is already familiar with the patient's history and can closely monitor the effects of medication alongside psychotherapy.
4. **Specialized Knowledge in Mental Health:** Psychologists have extensive training in mental health conditions, and those with additional training in psychopharmacology can have a deep understanding of how medications impact mental health. This specialization can be particularly valuable in complex cases where mental health conditions intersect with psychological, social, and developmental factors.
5. **Cost-Effectiveness:** Having psychologists with RxP can potentially reduce healthcare costs. It could decrease the need for multiple appointments with different providers and reduce the overall time to treatment, as patients can receive medication and therapy from the same provider.
6. **Enhanced Collaboration in Healthcare:** Psychologists with prescription privileges can work more effectively in multidisciplinary teams. They bring a unique perspective to medication management, which can enhance collaborative care models alongside psychiatrists, general practitioners, and other health care providers.

LATE

SB-760

Submitted on: 1/26/2024 10:17:07 AM

Testimony for HHS on 1/26/2024 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Dr. Stephen Berger	Individual	Support	Written Testimony Only

Comments:

" Aloha. I strongly support SB760, which establishes a pilot program to give qualified psychologists the authority to prescribe psychotropic medications to patients under their care. "

LATE

IQBAL “IKE” AHMED, M.D., FRCPsych (U.K.)

1042 LOHO STREET
HONOLULU, HI 96822
TELEPHONE: (808) 554-4457
EMAIL: ahmedi96822@gmail.com

From: Iqbal “Ike” Ahmed, MD as an individual.

Hearing Date: January 26, 2024

Re: SB 760

Relating to Psychologists

Position: **OPPOSED**

Dear Chairperson San Buenaventura, Vice Chair Aquino, and members of the Senate Committee on Health and Human Services

Please vote NO on SB 760

I am writing to you not only as a concerned citizen of Hawaii, but as a psychiatrist practicing for more than 40 years. I have been a professor of psychiatry in four major medical schools. I am also a consultant, educator, and researcher in psychopharmacology. As a geriatric psychiatrist, I have primarily provided psychiatric services to our kupuna.

I am opposed to this bill because:

- That it could endanger the lives of Hawaii’s most vulnerable citizens, including our kupuna, by allowing individuals with insufficient medical training to prescribe potent and potentially risky medications to citizens of Hawaii with mental health disorders. Many of these disorders occur in the context of underlying medical problems and in vulnerable people such as our kupuna and keiki.
- There is a severe shortage of all types of mental health care providers, not primarily prescribing providers, available to serve the needs of the State’s residents in rural or medically underserved communities, especially in Hawai’i, Maui, and Kaua’i counties. This shortage has become even more critical with increasing mental health problems from the COVID pandemic.
- The lack of access to appropriate mental health treatment has serious and irrevocable consequences, including suicides, increased alcohol and substance use, and disability. Ultimately what we need is more access to good mental health care in rural areas by training more counselors and therapists, not more prescribers of medications. Innovative approaches such as training lay counselors are being tried in other parts of the country <https://www.statnews.com/2024/01/18/mental-health-therapist-shortage-lay-counselors-needed/>)
- Most psychiatric problems, including depression, anxiety and PTSD can be effectively treated by talk therapy and other psychological interventions. Often these therapies are more effective than even medication for the treatment of these disorders.
- Psychologists can help with access to safe and effective mental health care by providing valuable nonpharmacological treatments for the severely mentally ill such as crisis intervention, evidence based and effective psychotherapies such as cognitive behavior

therapy, psychosocial rehabilitation programs, and recovery programs. Therapies such as CBT are just as effective as medications for most anxiety disorders, depression, and PTSD without the associated side-effects of medications. Psychologists are well qualified to provide these services.

- Suicide cannot be prevented by having psychologist prescribe medications. If anything, certain psychiatric medications, especially when not properly prescribed, may increase the risk of suicidal thoughts and behavior. That is the reason the FDA has issued “black box warnings” for suicide risk for all antidepressants. Ultimately what we need is more access to good mental health care in rural areas, not more prescribers of medications.
- If this bill passes, our most vulnerable citizens with mental illness will be unnecessarily exposed to risks from powerful psychiatric medications prescribed by the least trained prescribers of these medications. Every few weeks we learn more about the risks from the use of these psychiatric medications such as heart disease, sudden death, bleeding problems, strokes, falls, and interactions with medications prescribed for medical problems. Even psychiatrists and other physicians have to be cautious in the use of these medications. New warnings, including “black box warnings” (the highest level of warning), and other regulations for medical monitoring of people using these medications are being issued by the Food and Drug Administration (FDA) on a regular basis. .
- Does the legislature really want to get expose the people of Hawaii to unnecessary harm through unintended consequences of its action? Its time, energy, effort and resources can be spent to address the critical shortage of all mental health services in Hawaii.
- I hope you realize that there is a reason that no one other country in the world that has prescribing privileges for psychologist to address the mental health needs of its people.
- Hawaii is already ramped up access to some extent in ways proven safe and effective, including telemedicine and Collaborative Care. These proven and already implemented methods need to be expanded and supported.

Thank you for your consideration to please vote NO on **SB 760** .

Iqbal “Ike” Ahmed, M.D., FRCPsych (UK)

LATE

SB-760

Submitted on: 1/26/2024 10:33:16 AM

Testimony for HHS on 1/26/2024 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Diane Zelman	Individual	Support	Written Testimony Only

Comments:

RESPECTFULLY SUBMITTED TO THE HAWAI'I STATE LEGISLATURE:

Aloha. My name is Diane Zelman, PhD and I am a licensed clinical psychologist and professor in the State of California. I am submitting testimony as a private citizen.

In addition to my PhD training I earned a master's degree in Clinical Psychopharmacology in 2001 and since then, I have been teaching a graduate level course on what mental health counselors need to know about psychiatric medications to make appropriate referrals to physicians, to act as advocate for their patients, and to work in collaborative professional teams.

My students are being trained at mental health settings across California and they are aware of the profound need for psychiatric services. Even after they establish that their clients need to see psychiatrists for medication evaluation, it is extremely challenging to acquire psychiatric care for their clients. Psychiatrists are booked for months. Even when care is acquired, there is insufficient psychiatric time available for follow-up with patients and their families, and little time for collaboration with other mental health practitioners. Even families who are able to pay full fee for psychiatric care face difficulty finding it. Those dependent on health insurance and state funded health care have even greater difficulty finding care for themselves and their loved ones. This has created great burden on family medical practitioners who are themselves overwhelmed with supporting their regular medical practices. There is a huge need to create a cadre of well-trained psychologists in Hawai'i and nationally who can provide medication consultation, follow-up and related services for their clients. There is a way to begin to address the profound need for psychiatric medication care.

I strongly support SB760, which establishes a pilot program to give qualified psychologists the authority to prescribe psychotropic medications to patients under their care.

Prescriptive authority for specially trained doctors of psychology is a safe and already utilized option in Louisiana, New Mexico, Illinois, Iowa, and Idaho, in Federally Qualified Health Centers, in Native American-Indian Health Centers, and in the military. Prescribing psychologists have provided care for over thirty years and could make a difference today if you vote YES.

It is time for Hawai'i to take every step towards a better mental health care solution for our citizens. Please vote YES on this measure to allow greater access to care for those most in need.

Respectfully submitted.

*Diane Zelman, PhD
Professor, Alliant International University
1475 66th St STE 104
Emeryville, CA 94608
January 26, 2024*

LATE

SB-760

Submitted on: 1/26/2024 10:47:03 AM

Testimony for HHS on 1/26/2024 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Dr Jeffery Coker, CEO	Individual	Support	Written Testimony Only

Comments:

Aloha, I am currently the CEO of a psychological group in California serving underserved patients at a Federally Qualified Health Center for mental health services. I have also worked at state prisons & state forensic hospitals with severely mentally ill patients. I am acutely aware of the need for psychotropic medications for underserved patients as there is a shortage of prescribers in many parts of the country. I have completed a Master's program at Fairleigh Dickinson in clinical psychopharmacology. I have also completed psychology coursework at Harvard University, Columbia University and George Washington University. I can assure you the program at Fairleigh Dickinson was at a very high level regarding standards and requirements for graduation. I am eager to expand my practice to Hawaii and an integral aspect of that treatment will include prescribing of psychotropic medications in addition to psychotherapy if Hawaii adopts this necessary program following the pilot project. It is absurd there is pushback against psychologist prescription privileges this day and age as there are severe shortages of psychiatrists in many parts of the country and unmet needs means much more suffering and increased rates of suicide. There is considerable empirical research supporting the implementation of psychologist prescription privileges and its effectiveness. This program is about serving the patients more humanely. I hope the legislators will see through the political smoke and take action to implement this program for the sake of the patients/consumers of mental health treatment in Hawaii.

January 26, 2024

Aloha.

This is a letter of support for SB760. I am an Affiliate Faculty member in the PsyD Clinical Psychology Program at Antioch University, Seattle, a Licensed Clinical Psychologist with Lifespan Psychological Services on Bainbridge Island, WA, and Certified Prescribing Psychologist in New Mexico. In addition, I am President of the American Psychological Association's Division 55, Society for Prescribing Psychology.

Since 2017, I have commuted monthly to New Mexico to provide pediatric psychology prescribing services in Family Medicine at Memorial Medical Center in Las Cruces, NM. In New Mexico, and elsewhere, prescribing psychologists have demonstrated prescribing practices that are safe and effective. We also increase access since many of our prescribers have a diverse population of patients from all areas of the state. As an indicator of safety, when I became a prescriber, my malpractice insurance rate only increased \$94. If we were deemed unsafe by the insurance companies, I am certain that our rates would be much higher.

The Lahaina fires of August 2023 resulted in even more stress to a mental health system experiencing a shortfall of prescribers. SB760 helps alleviate this stress by establishing a pilot program to grant prescriptive authority to qualified psychologist applicants statewide. There cannot be much risk given that six states have already legalized prescriptive authority for psychologists with success. These new prescribers can immediately help those in need.

It is time for Hawai'i to take every step towards a better mental health care solution for our citizens. Please vote YES on this measure to allow greater access to care for those most in need.

Sincerely,



Steve Curtis, PhD, NCSP, MSCP
Affiliate Faculty in PsyD Clinical Psychology Program

Certified Prescribing Psychologist
Family Medicine
Memorial Medical Center
Las Cruces, NM

Licensed Psychologist
Lifespan Psychological Services
Bainbridge Island, WA

President of APA Division 55 (Society for Prescribing Psychology)

COMMITTEE ON HEALTH AND HUMAN SERVICES
Senator Joy A. San Buenaventura, Chair
Senator Henry J.C. Aquino, Vice Chair

January 26, 2024 1:00 P.M. – Rm 225 and via VIDEO CONFERENCE

Testimony in Strong Support of SB760

The National Association of Social Workers – Hawai'i (NASW- HI) strongly supports SB760 Relating to Psychologists, which would establish a pilot program to grant prescriptive authority to qualified psychologist applicants statewide.

Our membership of social workers, licensed at multiple levels and in working multiple settings across the state - can attest to the dire shortage of prescribing psychiatrists to address crisis-level needs.

We know, first-hand, that oftentimes the best, most effective and efficient intervention for those we serve with mental disorders is simply the proper medication. This proposal promises to alleviate concerns that most mental health professionals understand; but are not authorized to address. Those who can are too few in number; and not available where the needs are greatest.

There is well-established precedent in several other states -New Mexico, Louisiana, Illinois, Iowa, Idaho, and Colorado, as well as in the Public Health Service, the Indian Health Service, the U.S. military, and the U.S. territory of Guam – which shows that empowering psychologists with prescriptive authority – with proper consult and collaboration with psychiatrists and other primary care providers – works, and works well without detrimental consequences.

It is also a more compassionate approach to help our most vulnerable and underserved.

We thank you for your careful attention to this critical mental health access bill.

Sincerely,

 MSW, LCSW

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



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

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

LATE

COMMITTEE ON HEALTH AND HUMAN SERVICES

Senator Joy A. San Buenaventura, Chair

Senator Henry J.C. Aquino, Vice Chair

January 26, 2024 1:00 P.M. – Rm 225 and via VIDEO CONFERENCE

Testimony in Strong Support of SB760 RELATING TO PSYCHOLOGISTS

The Hawaiian Islands Association for Marriage and Family Therapy (HIAMFT) strongly supports SB760 as a critical tool in improving access and meeting the overwhelming demand for quality mental health services, particularly for those needing medical intervention. This proposal would grant prescriptive authority to qualified psychologists, who've undergone robust educational and clinical training; but who are also under the supervision of those traditionally qualified, but low in number. The need is particularly acute on the neighbor islands. Demand for services far exceeds the viable supply of mental health providers. Here's a snapshot of recently recorded 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.

In our work with family systems, and through our training and experience, we often understand where medical intervention can be most effective. However, our hands are tied because we do not have the authority or credentials to provide many needed services and interventions. Yet, we are unable to get our patients to someone who can because the shortage of prescribing mental health professionals is so dire.

Several other states -New Mexico, Louisiana, Illinois, Iowa, Idaho, and Colorado, as well as in the Public Health Service, the Indian Health Service, the U.S. military, and the U.S. territory of Guam – are filling these needs by granting psychologists with robust training and experience with such prescriptive authority. Many of these approaches are done in consultation and collaboration with medical doctors, including psychiatrists and other primary care providers. We believe this approach is effective – and most compassionate.

Please pass this bill all mental health professionals can work together to address the needs of our most vulnerable and underserved. Thank you for the opportunity to provide this testimony in strong support of this bill.

Sincerely,

Mary A Navarro

Mary A. Navarro, MA, LMFT, President
The Hawaiian Islands Association for Marriage and Family Therapy

LATE

SB-760

Submitted on: 1/26/2024 12:03:48 PM

Testimony for HHS on 1/26/2024 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Steven R Williams, MD	Individual	Oppose	Written Testimony Only

Comments:

As a previous practicing pediatrician and a now practicing psychiatrist, I cannot emphasize enough the complexities and overlap between numerous non-psychiatric diagnoses and psychiatric diagnoses. How will a prescriber without adequate medical training recognize the difference between symptoms and signs related to a medical illness and side effects from a psychotropic medication? There are now an adequate number of APRNs and psychiatrists in Hawaii to provide appropriate psychiatric medication services. I strongly oppose Bill 760 SB.

LATE

SB-760

Submitted on: 1/26/2024 12:07:31 PM

Testimony for HHS on 1/26/2024 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
nancy sidun	Individual	Support	Written Testimony Only

Comments:

"The Lahaina fires of August 2023 caused catastrophic trauma to the residents of Lahaina and the entire island of Maui. Medical and Mental Health providers from around the state are using all of their training to address the shortfall of providers; however, even before the fires, we were already taxed.

Hawai'i communities across the state were suffering even before the fires because of the lack of access to comprehensive mental health care. Our most vulnerable citizens are unable to obtain the care needed to live healthy and functional lives. According to NAMI (2021), 187,000 adults in Hawai'i suffer from a mental health condition and 41,000 of our citizens experience a serious mental illness. Almost 70 percent of Hawai'i's youth ages 6-17 who have depression did not receive any care in the past year.

Prescribing Psychologists receive more psychopharmacology training than primary care physicians and physician assistants. They receive integrative medical and biopsychosocial training from physicians, psychiatrists, nurse practitioners, prescribing/medical psychologists, and pharmacists. Prescribing Psychologists have provided safe and effective mental health care, including pharmacotherapy, for over thirty years. They already prescribe for the Army and Navy in Hawai'i. They can provide care at Pearl Harbor or other federal facilities to military personnel and their families, just not across the street to HI citizens. States in which Prescribing Psychologists practice have seen a five to seven percent reduction in the rate of suicide.

There are now five Masters of Science in Clinical Psychopharmacology (MSCP) programs that have received designation status from the American Psychological Association and one additional program that is under review. Two of these six programs are housed in pharmacy schools. As many as four new programs will launch their MSCP programs in 2024 or 2025; of these, one is in a medical school, two are in pharmacy schools, and one is a collaboration between a psychology department and a nursing school.

The numbers are simple. There are not enough psychiatrists to care for the people of Hawai'i, especially on neighbor islands. Hawai'i Island has the most significant deficit in the number of psychiatrists needed to care for island

residents (75.1%), followed by Kauai County with a 71.2 percent shortage, and then Maui County with a 50.4 percent shortage before the August 2023 fires.

Prescriptive authority for specially trained doctors of psychology is a safe and already utilized option in Louisiana, New Mexico, Illinois, Iowa, and Idaho, in Federally Qualified Health Centers, in Native American-Indian Health Centers, and in the military. Prescribing psychologists have provided care for over thirty years and could make a difference today if you vote YES.

It is time for Hawai'i to take every step towards a better mental health care solution for our citizens. Please vote YES on this measure to allow greater access to care for those most in need.

Respectfully submitted,

Nancy M. Sidun, PsyD, ABPP, ATR

LATE

SB-760

Submitted on: 1/26/2024 12:23:19 PM

Testimony for HHS on 1/26/2024 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Diane Logan	Individual	Support	Written Testimony Only

Comments:

Aloha. I strongly support SB760, which establishes a pilot program to give qualified psychologists the authority to prescribe psychotropic medications to patients under their care.

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Respectfully submitted,

Diane Logan, Ph.D., ABAP, CSAC, ICDAC

Clinical Psychologist

Board Certified in Addiction Psychology

Past-President, Hawai'i Psychological Association

Past-President, Hawai'i Island Psychological Association

LATE

SB-760

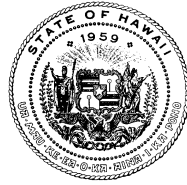
Submitted on: 1/26/2024 1:01:15 PM

Testimony for HHS on 1/26/2024 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Reilynn Yamane	Individual	Support	Written Testimony Only

Comments:

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STATE OF HAWAII
DEPARTMENT OF HEALTH
P. O. Box 3378
Honolulu, HI 96801-3378
doh.testimony@doh.hawaii.gov

**Testimony COMMENTING on SB760
RELATING TO PSYCHOLOGISTS.**

SEN. JOY SAN BUENAVENTURA, CHAIR
SENATE COMMITTEE ON HEALTH & HUMAN SERVICES

Hearing Date: January 26, 2024

Room Number: 225

1 **Fiscal Implications:** N/A.

2 **Department Testimony:** The Department of Health (DOH) recommends any pilot program
3 authorizing prescriptive authority for psychologists be limited in scope and require rigorous
4 measurement of outcomes.

5 The department recognizes the dual goals of increasing access to mental health care and ensuring
6 patient safety. Although psychologists report positive experiences, the limited evidence
7 described in the literature does not causally correlate that psychologist prescribing increases
8 access to care for vulnerable populations or improves mental health outcomes. It should be
9 noted that the absence of evidence of effectiveness is not evidence of ineffectiveness.

10 Given the lack of evidence of the net balance of benefit and harm, it is premature to proceed with
11 the pilot as proposed. The first option is to wait until more peer-reviewed evidence is published,
12 while simultaneously supporting efforts to increase prescription and management of patients
13 with mental health diagnoses by existing prescribing providers, such as primary care physicians
14 and Advanced Practice Registered Nurses with prescriptive authority (APRN-RX).

15 A second option would be for Hawaii's provider community to generate its own evidence, given
16 the uniqueness of our demographics, culture, and geography. Should the Legislature move
17 forward with a pilot program for prescribing psychologists, DOH recommends the following:

18 • Exclusion of all minors

- 1 • Exclusion of adults with serious mental illness;
- 2 • A formulary restricted to medications with high safety profiles such as selective serotonin
- 3 reuptake inhibitors and serotonin–norepinephrine reuptake inhibitors;
- 4 • Diagnoses of depression and anxiety only;
- 5 • No off-label use;
- 6 • No black box drugs;
- 7 • A collaborative practice agreement with a physician, preferably a primary care physician
- 8 or psychiatrist, or APRN-RX;
- 9 • Preference for an integrated practice setting, such as a multi-disciplinary clinic; and
- 10 • The requirement and resources to conduct a rigorous evaluation of quality and safety to
- 11 be submitted to a peer-reviewed journal.

12 Integrated primary and behavioral health care is ideal, however, the lack of supportive testimony
13 from primary care providers is notable. As such, DOH urges the Hawaii Psychological
14 Association or psychology community at large to engage with the physician and APRN-RX
15 community to develop meaningful collaborative practice agreements that balance quality of care,
16 patient safety, and provider liability. It is also important to consider unintended consequences
17 such as reductions in psychological interventions due to alternative financial incentives.

18 Lastly, the inclusion of and funding for qualified entity to design and measure this clinical
19 study/pilot project is essential. DOH recommends an appropriation of \$250,000 for this purpose.

20 Thank you for the opportunity to testify.