A BILL FOR AN ACT

RELATING TO BEHAVIOR ANALYSIS.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF HAWAII:

- 1 SECTION 1. The legislature finds that behavior analysis
- 2 means the design, implementation, and evaluation of
- 3 instructional and environmental modifications to produce
- 4 socially significant improvements in human behavior. The
- 5 practice of behavior analysis includes the empirical
- 6 identification of functional relations between behavior and
- 7 environmental factors, known as functional assessment and
- 8 analysis, as well as the use of contextual factors, motivating
- 9 operations, antecedent stimuli, positive reinforcement, and
- 10 other consequences to help people develop new behaviors,
- 11 increase or decrease existing behaviors, and emit behaviors
- 12 under specific environmental conditions.
- The legislature further finds that Act 199, Session Laws of
- 14 Hawaii 2015, established the behavior analyst program within the
- 15 department of commerce and consumer affairs and established
- 16 licensing requirements for behavior analysts. Licensing of
- 17 behavior analysis services was made concurrent with mandated



S.B. NO. 2520 S.D. 1

- 1 insurance coverage for diagnosis and treatment related to autism
- 2 disorders.
- 3 The legislature additionally finds that many students
- 4 enrolled in department of education schools would benefit from
- 5 the expansion of behavior analysis services throughout Hawaii's
- 6 public school system, including students with autism disorders.
- 7 Accordingly, the purpose of this Act is to fund behavior
- 8 analysis services performed by licensed behavior analysts for
- 9 public school students.
- 10 SECTION 2. There is appropriated out of the general
- 11 revenues of the State of Hawaii the sum of \$ or so
- 12 much thereof as may be necessary for fiscal year 2018-2019 to
- 13 provide behavior analysis services to public school students by
- 14 contracting with licensed behavior analysts as defined in
- 15 section 465D-2, Hawaii Revised Statutes.
- 16 The sum appropriated shall be expended by the department of
- 17 education for the purposes of this Act.
- 18 SECTION 3. This Act shall take effect on July 1, 2050.

S.B. NO. 2520 S.D. 1

Report Title:

Behavior Analysis; DOE; Appropriation

Description:

Appropriates funds to the department of education for behavior analysis services performed by licensed behavior analysts for public school students. Effective 7/1/2050. (SD1)

The summary description of legislation appearing on this page is for informational purposes only and is not legislation or evidence of legislative intent.



STATE OF HAWAII DEPARTMENT OF EDUCATION

P.O. BOX 2360 HONOLULU, HAWAI'I 96804

> Date: 03/19/2018 Time: 03:10 PM Location: 309

Committee: House Education

Department: Education

Person Testifying: Dr. Christina M. Kishimoto, Superintendent of Education

Title of Bill: SB 2520, SD1 RELATING TO BEHAVIOR ANALYSIS.

Purpose of Bill: Appropriates funds to the department of education for behavior analysis

services performed by licensed behavior analysts for public school

students. Effective 7/1/2050. (SD1)

Department's Position:

The Hawaii State Department of Education (Department) supports the intent of SB 2520 SD1. The Department recognizes building internal staff capacity to provide behavior analysis services to students will take time; therefore, contracted services by private providers will be needed. The additional funding proposed in this measure will assist the Department to address contracted service costs.

The Department appreciates additional program funding provided the passage of SB 2520 SD1 does not replace or adversely impact priorities as indicated in our BOE-approved budget.

Thank you for the opportunity to provide testimony on this measure.

The Hawaii State Department of Education seeks to advance the goals of the Strategic Plan which is focused on student success, staff success, and successful systems of support. This is achieved through targeted work around three impact strategies: school design, student voice, and teacher collaboration. Detailed information is available at www.hawaiipublicschools.org.



1200 Ala Kapuna Street * Honolulu, Hawaii 96819 Tel: (808) 833-2711 * Fax: (808) 839-7106 * Web: www.hsta.org

> Corey Rosenlee President Justin Hughey Vice President Amy Perruso Secretary-Treasurer

TESTIMONY BEFORE THE HOUSE COMMITTEE ON EDUCATION

Wilbert Holck Executive Director

RE: SB 2520, SD 1 - RELATING TO BEHAVIOR ANALYSIS

MONDAY, MARCH 19, 2018

COREY ROSENLEE, PRESIDENT HAWAII STATE TEACHERS ASSOCIATION

Chair Woodson and Members of the Committee:

The Hawaii State Teachers Association strongly supports SB 2520, SD 1, relating to behavior analysis.

Behavior analysis means the design, implementation, and evaluation of instructional and environmental modifications to produce socially significant improvements in human behavior. The practice of behavior analysis includes the empirical identification of functional relations between behavior and environmental factors, known as functional assessment and analysis, as well as the use of contextual factors, motivating operations, antecedent stimuli, positive reinforcement, and other consequences to help people develop positive behaviors.

Act 199, Session Laws of Hawaii 2015, established the behavior analyst program within the Department of Commerce and Consumer Affairs and created licensing requirements for behavior analysts. Licensing of behavior analysis services was made concurrent with mandated insurance coverage for diagnosis and treatment related to autism disorders, with which nearly 1,500 public school students are currently diagnosed.

Unfortunately, the DOE is experiencing a shortage of licensed behavior analysts and, in 2016, successfully sought an amendment to state law to allow teachers to perform behavior analysis and prescribe services. Yet, teachers are not trained or qualified to make behavioral diagnoses, and being commanded to do so—some teachers have been threatened with termination for refusing to complete behavioral diagnoses for which they have no professional training—interferes with their ability

to provide a quality learning environment for their students, taking time away from lesson planning, professional development and collaboration, delivery of personalized learning, and more. This measure would eliminate the need to have teachers perform behavior analysis by providing the DOE with funding to hire licensed behavior analysts, either as employees of the department or by contracting with the many private providers who are currently being denied access to the children they're qualified to serve.

According to Report on Behavior Analyst and Certification Requirements Implementation, released by the DOE on January 5th, 2018, the department is supporting efforts for 39 DOE personnel to become BCBAs in an approved program, and assisting another 145 departmental personnel in becoming Registered Behavior Technicians (RBTs) by 2019. We need to continue in this direction, rather than further weakening Luke's Law.

To improve the learning experiences of our most vulnerable keiki, the Hawaii State Teachers Association asks your committee to **support** this bill.

46-063 Emepela Pl. #U101 Kaneohe, HI 96744 · (808) 679-7454 · Kris Coffield · Co-founder/Executive Director

TESTIMONY FOR SENATE BILL 2520, SENATE DRAFT 1, RELATING TO BEHAVIOR ANALYSIS

House Committee on Education Hon. Justin H. Woodson, Chair Hon. Sam Satoru Kong, Vice Chair

Monday, March 19, 2018, 3:10 PM State Capitol, Conference Room 309

Honorable Chair Woodson and committee members:

I am Kris Coffield, representing IMUAlliance, a nonpartisan political advocacy organization that currently boasts over 400 members. On behalf of our members, we offer this testimony in strong support of Senate Bill 2520, SD1, relating to behavior analysis.

Hawai'i's special needs students are performing below grade level in both reading and mathematics. For the 2016-2017 school year, the statewide achievement gap between high needs students—which includes special education children, English language learners, and economically disadvantaged students—and non-high needs students was 33 percent for language arts and 28 percent for math. While State Superintendent Christina Kishimoto and the Hawai'i State Board of Education have made closing the achievement gap between special needs and general education students their top priority, doing so requires investing in additional resources for special education students, including behavior analysis services.

IMUAlliance is one of the state's largest victim service providers for survivors of sex trafficking. Over the past 10 years, we have provided comprehensive direct intervention services to 130 victims, successfully emancipating them from slavery and assisting in their restoration, while providing a range of targeted services to over 1,000 victims in total. Each of the victims we have assisted has suffered from complex and overlapping trauma, including post-traumatic stress disorder, depression and anxiety, dissociation, parasuicidal behavior, and substance abuse. Trafficking-related trauma can lead to a complete loss of identity. A victim we cared for in 2016, for example, had become so heavily trauma bonded to her pimp that while under his grasp, she couldn't remember her own name.

Kris Coffield (808) 679-7454 imuaalliance@gmail.com

Sex trafficking is a profoundly violent crime. The average age of entry into commercial sexual exploitation is 13-years-old, with 60 percent of trafficked children being under the age of 16. Approximately 150 high-risk sex trafficking establishments operate in Hawai'i. An estimated 1,500-2,500 women and children are victimized by sex traffickers in our state annually. Over 120,000 advertisements for Hawai'i-based prostitution are posted online each year, a number that is rapidly increasing as technology continues to outpace the law. More than 80 percent of runaway youth report being approached for sexual exploitation while on the run, over 30 percent of whom are targeted within the first 48 hours of leaving home. With regard to mental health, sex trafficking victims are twice as likely to suffer from PTSD as a soldier in a war zone. Greater than 80 percent of victims report being repeatedly raped and 95 percent report being physically assaulted, numbers that are underreported, according to the United States Department of State and numerous trauma specialists, because of the inability of many victims to recognize sexual violence. As one underage survivor told IMUAlliance prior to being rescued, "I can't be raped. Only good girls can be raped. I'm a bad girl. If I want to be raped, I have to earn it."

The victims with whom we work often do not meet the stereotypical profile of a special needs student. They are frequently children who, prior to being enslaved, were academic all-stars. They were honor students, cheerleaders, athletes, and campus role models. Now, however, they are highly traumatized, often learning disabled, and in need of major behavioral modification. Our survivors struggle when they go back to school because their trauma leaves them with a range of emotional and cognitive challenges that make the classroom setting difficult to navigate. They require school accommodations, comprehensive wraparound services, and the behavioral assistance that behavior analysts are uniquely qualified to provide. They demand our help. They deserve our heart.

To support our most vulnerable children, we ask your committee to support this bill.

Sincerely, Kris Coffield Executive Director IMUAlliance

SB-2520-SD-1

Submitted on: 3/16/2018 7:41:14 PM

Testimony for EDN on 3/19/2018 3:10:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
Louis Erteschik	Hawaii Disability Rights Center	Support	Yes

Comments:

We certainly support the bill. We believe strongly in the value of applied behavior analysis as the most effective treatment for children with autism spectrum disorders. We were very involved in the effort a few years ago which led to the legislative mandate for private insurance to cover it. We then successfully brought a court action to force DHS to cover it under the Medicaid EPSDT program. In the past few years since ABA was mandated, DOE has been an incredible obstacle to its implementation in the schools. Despite a ruling from the 9th Circuit which specifies that ABA is the presumptively appropriate therapy to be provided to children with autism spectrum disorders in their IEPs under the IDEA, the DOE consistently refuses to implement it. Somehow, despite the evidence submitted by parents in these IEPs, the DOE often seems to find some pretextual justification to support their position that it is "not necessary". Despite the fact that state law requires that functional behavioral assessments be performed by licensed behavior analysts, the DOE often refuses to do so. Most recently, despite the mandate under Medicaid law that medically necessary ABA services be provided in the schools, the DOE refuses to allow providers to come onto campuses to do so. These providers are paid from Medicaid funds and so allowing them to come into the schools would have zero impact on the DOE budget.It would not cost them one penny. Yet, they refuse to allow it under the guise of "non DOE employees are not allowed on campus", despite the fact the protocols are currently in place for providers such as skills trainers to come to the schools to work with children. In terms of the overall state budget, these "medically necessary services" are funded by Medicaid which means that half the costs are paid by the federal government. So, if it truly is a matter of the DOE lacking the resources to implement ABA, then this bill could be a tremendous help to a lot of students. If, however, the DOE position is really based on an antithetical view of ABA, then a mere appropriation will not be sufficient and the legislature in that case would be better advised to consider stronger measures to reign in a DOE that seems to lack the will to want to provide appropriate services to children with autism. Along those lines, we would specifically like to see the bill provide that the DOE shall not prevent Medicaid EPSDT providers from coming onto school campuses for the purpose of providing medical necessary ABA services.

March 19, 2018

HEARING BEFORE THE HOUSE OF REPRESENTATIVE COMMITTEE ON EDUCATION

TESTIMONY ON SB2520 RELATING TO BEHAVIOR ANALYSIS

Conference Room 309 3:10 pm

Aloha Chair Rep. Justin H. Woodson, Vice Chair Rep. Sam Satoru Kong, and Members of the Committee:

I am Kelsey Flynn; I am currently a Masters of Social Work candidate at the University of Hawaii at Manoa in the Myron B. Thompson School of Social Work concentrated in Mental Behavioral Health. Currently participating in a practicum placement at Makaha Elementary School, as apart of the Pilot Program Hi AWARE, where we suffer from high levels of trauma and mental behavioral health problems.

I strongly support SB2520, to fund behavior analysis services preformed by licensed behavior analysts for public school students according to Act 199. This will provide Makaha Elementary with the support needed to better serve their students by providing instructional and environmental modification to improve human behavior among the students. Offering improvement in behaviors of students by systematical interventions on the principles of learning theory, which will improve our student's significant social behaviors by allowing public school to have behavior analysts on campus.

I respectfully request your **strong support of SB 2520** which will positively affect mental behavioral health interventions for public school students in the state of Hawaii.

Kelsey E. Flynn

flynnk@hawaii.edu

Date: March 11, 2018

To: Rep. John Mizuno, Chair, and Rep. Bertrand Kobayashi, Vice- Chair

Committee on Health and Human Services

Hearing: March 13, 2018, 8:30 a.m., Room 329

From: Linda Hufano, Ph.D.

(808) 258-2250

Re: Testimony in Support of SB2925 SD1, Relating to the Practice of Behavior\

Analysis, with Amendments

I am a behaviorally-trained psychologist and since 1984 have worked as a Psychologist for the Hawaii Department of Education (HIDOE), Branch Chief/Psychologist for the Child Adolescent Mental Health Division (CAMHD), private practitioner in Honolulu and Leeward O'ahu, and have recruited, developed, trained and supervised providers of Applied Behavior Analysis (ABA) and other psychological services to work under contracts with the HIDOE and for the CAMHD, Developmental Disabilities Division, and Early Intervention Section of the Hawaii Department of Health.

Strong Support for SB2520_SD1

There is a workforce shortage of qualified professionals to provide ABA services in the school setting and this bill would provide the additional funding needed for the DOE to hire or contract qualified providers.

Unfortunately, the lack of clarification in ACT 199 has resulted in misinterpretations by state agencies and some insurance companies who interpret ACT 199 as "making it illegal" to use ABA-trained licensed psychologists and other qualified licensed or credentialed professionals <u>to continue to allow us</u> to design and supervise others in implementing ABA programs in the school setting and elsewhere even though this law expressly states our exemption from LBA licensure.

I strongly support of SB2520_SD1 with the amendment proposed by the Hawaii Psychological Association (HPA) which would include ABA-trained licensed psychologists, whose own recognized scope of practice overlaps with behavior analysis, in the current funding request.

Chapter 465 of the Hawaii Revised Statues expressly defines behavior analysis and therapy as within the scope of psychology, as well as our ability to supervise and direct others, such as postdoctoral fellows, unlicensed master's level professionals, who may in turn supervise paraprofessionals/direct support workers.

Why Individuals, Schools and Families Should Have Access to ABA-trained Mental Health Providers

Licensed psychologists and other mental health professionals are trained to work with the "whole" child. The board that certifies BCBA's does not require them to have training in mental health. Licensed psychologists and other mental health providers (e.g., licensed clinical social

workers, registered nurse practitioners), however, are trained in mental health, and are "legally qualified" to diagnose as well as treat autism as well as disorders that have been found to co-occur with autism 30-40% of the time, i.e., anxiety disorders, clinical depression, and externalizing disorders, such as attention-deficit and oppositional-defiant disorders.

Individuals with ASD and other developmental disorders are also at a significantly higher risk for post-traumatic stress disorder (PTSD) and suicide than their non-disabled counterparts. In light of recent events, many families are also expressing concern about the potential their child may have for violence against others. The knowledge and skill sets of mental health providers, which include family therapy/parent education, can be critical to designing an effective intervention program for students with co-occurring mental health problems. ABA-trained mental health providers can evaluate and modify programs that are not producing the desired outcomes because of a mental health diagnosis in addition to suggesting other types of treatment that may be beneficial to the student, including newer or non-ABA protocols.

As current bills in the Senate and House seek to expand ABA services to students who do not have IEPs, it is important to consider what their needs are. Many may have undiagnosed emotional or behavioral disorders and would benefit from access to mental health professionals who have the background needed to design effective behavioral intervention programs, to supplement them with other treatment approaches, or to recommend a different evidence-based approach, as warranted.

The Workforce Issue

Every qualified provider is needed. It is clear in speaking with representatives of state agencies that there will be a significant lack of trained professionals and paraprofessionals to deliver ABA services if Chapter 465D of the Hawaii Revised Statute continues to be misinterpreted as restricted to LBA's and the persons they supervise. Parents have reported waitlists of up to three years for services covered by insurance, with at least one provider who works exclusively with children under six years of age ("the critical age" for ABA services) informing parents they are no longer maintaining a waitlist.

Thank you for the opportunity to submit testimony.

Date: March 17, 2018

To: Rep. Justin Woodson, Chair and Rep. Sam Satoru Kon, Vice Chair

Hearing: Monday, March 9, 2018, 3:10 p.m., Conference Room 309

Re: Testimony in Support of SB2520 SD1 as Amended by the Hawaii Psychological

Association (HPA)

From: Richard J. Kravetz, Ph.D.

(808) 258-2598

I have worked in Hawaii as a psychologist for over thirty years. My work has included training and supervising paraprofessionals, practicum students, interns, postdoctoral residents and master's level clinicians in providing applied behavior analysis (ABA) through contracts with the Hawaii Department of Education, Early Intervention Section and Developmental Disabilities Division since 1997.

I fully support the DOE's request for additional funding to address the shortage of qualified persons to assist the department in providing ABA services, <u>provided the funding request includes all qualified professionals</u>, including ABA-trained licensed psychologists and individuals working under their supervision, and other licensed or credentialed professionals whose own recognized scope of services overlaps with a licensed behavior analyst (LBA).

I would like to note that <u>no other state mandates that teachers or paraprofessional staff be certified as Registered Behavior Technicians (RBT's)</u>. This mandate denigrates the training and practice of licensed/credentialed teachers who have been trained in Applied Behavior Analysis (ABA) <u>prior</u> to obtaining their certification/licensure, and continue to receive training as employees of the DOE. It also affords an association to collect fees for certifying individuals who are already being overseen by DOE minimum entry-level, training and supervision standards. This is an unwarranted expense that no other state, to my knowledge, requires for its teachers and paraprofessional staff. Moreover, the board certifying RBT's requires that the individual continue to be supervised by a BCBA in order to maintain his/her certification, making it impossible for the classroom teacher to exercise his/her responsibility in the classroom with regard to the student. In addition to the extra costs to the state for supervision are the costs required for the RBT to maintain certification as monies must be paid for the holder of the certificate to submit documents attesting to frequency of supervision and an assessment by the supervising BCBA that he/she continues to demonstrate proficiency at an acceptable level.

It bears noting that there is no existing research that supports the use of RBT's over similarly trained paraprofessionals. As a psychologist who has used ABA with different ages of individuals, with different disabilities and in different settings, it is my belief that the state agencies be allowed to develop the content area and target the skills that are needed for the

paraprofessionals they employ/contract. Working with the 0 - 3 population is different than working with elementary age, high school or adult populations and requires a different knowledge base and skill set. Working in the school setting requires a different knowledge base and skill set than working in the community or work setting. Developing an ABA program for individuals with autism <u>and</u> a co-occurring anxiety disorder, clinical depression, or externalizing disorder (which are frequent comorbidities, occurring in 30-40% of children diagnosed with ASD) requires a professional who is trained in ABA and treating mental health issues, the latter of which LBA's are not licensed to treat.

Thank you for the opportunity to share my concerns. As a member of the HPA Task Force on ABA, I support this bill with an amendment that includes the funding of ABA-trained licensed psychologists and other ABA-trained licensed/credentialed professionals and their assistants. The DOE already has minimum-entry requirements, training and supervision standards for midtier and paraprofessional staff. Continuing education is important for all who provide services to students needing ABA services, and I would hope that our professional community can work together to address any and all workforce development and training needs that exist.

SB-2520-SD-1

Submitted on: 3/17/2018 10:42:34 PM

Testimony for EDN on 3/19/2018 3:10:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
Alexa Corideo	Individual	Support	Yes

Comments:

March 19, 2018

HEARING BEFORE THE

HOUSE OF REPRESENTATIVES COMMITTEE ON EDUCATION

TESTIMONY ON SB2520

RELATING TO BEHAVIOR ANALYSIS

Conference Room 309

3:10 pm

Aloha Chair: Justin H. Woodson, Vice Chair: Sam Satoru Kong, and Members of the committee: Richard P. Creaguan, Mark J. Hashem, Kaniela Ing, Lei R. Learmont, Angus L.K. McKelvey, Takashi Ohno, Richard H.K. Onishi, Sean Quinlan, and Lauren Kealohilani Matsumoto.

My name is Alexa Marie Corideo and I am currently a second year Masters of Social Work candidate at the University of Hawaii at Manoa in the Myron B. Thompson School of Social Work with a specialization in Behavioral Mental Health. My practicum site that I am currently placed in is alongside the Department of Education in the Honolulu District where the expansion of behavior analysis services is lacking and could sincerely benefit the students and their education experience.

I strongly support SB2520, and the legislators action to implement behavior analysis into the student's educational practice. Being a behavioral mental health practitioner currently, I value behavior analysis practice because it could be so beneficial to the student and improve human behavior to be able to acknowledge those environmental factors that can be contributing to there existing behaviors.

I respectfully request your **strong support of SB2520**, which will positively affect the public school students in the state of Hawaii with the use of behavioral analysis intervention skills.

Alexa M. Corideo

University of Hawaii at Manoa Myron B. Thompson School of Social Work Graduate Program

acorideo@hawaii.edu

<u>SB-2520-SD-1</u> Submitted on: 3/18/2018 3:09:44 PM

Testimony for EDN on 3/19/2018 3:10:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
Melodie Aduja	OCC Legislative Priorities Committee, Democratic Party of Hawai'i	Support	No

LATE TESTIMONY





Committee on Education Rep. Justin H. Woodson, Chair Rep. Sam Satoru Kong, Vice Chair Monday, March 19, 2018 3:10 pm Conference Room 309, State Capitol

SB 2520 Relating to Behavior Analysis--Testimony in SUPPORT

Honorable Chair Woodson, Vice Chair Kong, and members of the committee,

Hawai'i Association for Behavior Analysis (HABA) supports our teachers, our keiki, and Senate Bill 2520. As we have testified in previous years, and numerous times throughout this legislative session, applied behavior analysis (ABA) is a necessary treatment for many children within the Department of Education (DOE) and should be provided by those licensed and qualified to do so --as stated in Chapter 465-D. Despite collaborative efforts, HABA has not been able to work together with the administrators of the DOE in finding solutions to the barriers in implementing Chapter 465-D. Children in our public schools, in need of ABA, are currently receiving limited support, or no support at all, due to unnecessary barriers and a lack of collaboration. We respectfully request the committee consider this issue in light of the current bill and work with stakeholders to eliminate barriers to service in addition to allotting necessary funds for these positions. Medicaid is required to cover ABA services for children up to age 22. Medicaid school-based claiming should be available in Spring 2018, as mentioned in the Superintendent's memo dated 2/13/18. Upholding the expectation for direct support workers to become registered behavior technicians (RBTs), as Chapter 465-D states, would allow the HIDOE access to potentially millions of dollars in federal funds for our keiki.

If funding is truly the primary barrier in increasing the availability and accessibility of ABA within the DOE, then SB 2520 provides an solution. Once additional funding is made available, ABA should be more readily accessible to our children. If it is not, then we must look to barriers outside of funding. Thank you for introducing this bill in support of our teachers, our keiki, and SB 2520.

Mahalo,

Kathleen Penland, M. Ed. BCBA, LBA

Kathleen Penland

President, Hawai'i Association for Behavior Analysis



Hawai'i Psychological Association For a Healthy Hawai'i

P.O. Box 833 Honolulu, HI 96808

www.hawaiipsychology.org

Email: hpaexec@gmail.com Phone: (808) 521-8995

COMMITTEE ON EDUCATION Rep. Justin H. Woodson, Chair Rep. Sam Satoru Kong, Vice Chair



March 18, 2018

Monday, March 19, 2018 3:10 p.m. Conference Room 309

Testimony

IN STRONG SUPPORT OF SB2520 WITH PROPOSED AMENDMENT RELATING TO BEHAVIOR ANALYSIS SERVICES

The Hawaii Psychological Association (HPA) recognizes that there is a shortage of qualified providers of behavioral services in the Department of Education. HPA supports expanding funding for behavioral services that includes psychologists. Unclear language in previous legislation unintentionally restricted the workforce of qualified ABA professionals by giving a monopoly to BCBAs. Thus, there have been unnecessary workforce shortages across agencies and across the islands. HPA asks to clarify that expanded funding for DOE includes psychologists recognizing that psychologists' additional education bring specialized training and qualifications that many licensed behavior analysts do not possess. Psychologists who are specifically trained in ABA have the advantage of being able to also address co-occurring disorders, including anxiety, depression, and ADHD, that are frequently comorbid with autism (e.g., 40% or more meet diagnostic criteria for anxiety disorders, as many as 34% experience clinical depression, and about 30% display externalizing disorders). LBA's generally are not trained in mental health. Psychologists can use their ABA training and their additional specialized knowledge and skills in designing behavioral interventions that include interventions for the other co-occurring disorders during the assessment, planning and monitoring phases of ABA service delivery.

We object to any language in any legislation that gives a monopoly to one credentialing agency (such as the proprietary terms of the Behavior Analyst Certification Board: BCBA's, BCBA-D, BCaBa, RBT's etc.) and which serves to exclude other nationally recognized licenses and certifying agencies.

The specific amendment we are proposing on page 2 Lines 8 - 10 is:

Accordingly, the purpose of this Act is to fund behavior analysis services performed by licensed behavior analysts <u>or psychologists.</u>

We strongly support SB 2520 with the proposed amendments which prevents an unnecessary narrowing of the behavioral health workforce within the school setting.

Tanya Gamby, Ph.D. President Hawaii Psychological Association

SB-2520-SD-1

Submitted on: 3/18/2018 10:09:00 PM Testimony for EDN on 3/19/2018 3:10:00 PM



Submitted By	Organization	Testifier Position	Present at Hearing
Amanda N Kelly	Individual	Support	No

Comments:

Aloha Chair, Vice Chair, and members of the Committee,

My name is Dr. Amanda Kelly. I am licensed behavior analyst and formerly a licensed teacher. As an educator and local advocate, I have seen firsthand how keiki in our public schools, in need of ABA, are receiving limited support, or no support at all, due to unnecessary barriers and a lack of collaboration. Currently the DOE does not provide applied behavior analysis (ABA) by Licensed Behavior Analysts (LBAs) or Registered Behavior Technicians (RBTs). As stated in the preamble of this bill, "the legislature finds that many students enrolled in department of education schools would benefit from the expansion of behavior analysis services throughout Hawaii's public school system, including students with autism disorders". As an advocate for keiki with special needs for nearly 20 years, I could not agree more. If funding is truly the primary barrier in increasing the availability and accessibility of ABA within the DOE, then SB 2520 provides a solution. Once additional funding is made available, ABA should be more readily accessible to our keiki. If it is not, then we must look to additional barriers aside from funding.

Mahalo for introducing this bill in support of our teachers, the Hawai'i State Teachers Association, and our keiki in need.

<u>SB-2520-SD-1</u> Submitted on: 3/19/2018 4:50:28 AM Testimony for EDN on 3/19/2018 3:10:00 PM



Submitted By	Organization	Testifier Position	Present at Hearing
Jeanette White	Individual	Support	No

<u>SB-2520-SD-1</u> Submitted on: 3/19/2018 5:34:39 AM

Testimony for EDN on 3/19/2018 3:10:00 PM



Submitted By	Organization	Testifier Position	Present at Hearing
Anne Lau	Individual	Support	No



<u>SB-2520-SD-1</u> Submitted on: 3/19/2018 9:59:17 AM

Testimony for EDN on 3/19/2018 3:10:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
Kristen Koba-Burdt	Aloha Behavioral Associates	Support	No