Michele Wang

Assistant Professor, Department of Psychiatry John A. Burns School of Medicine 1356 Lusitana St. 4th floor Honolulu HI 96813

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SENATE COMMITTEE ON HEALTH

DATE: Tuesday, February 5, 2019

TIME: 9:45 a.m.

HB 1566 RELATING TO PRESCRIPTIVE AUTHORITY FOR CERTAIN CLINICAL

PSYCHOLOGISTS

POSITION: OPPOSE

My testimony is submitted in opposition to HB1156, relating to psychologists.

I am opposed to this measure because:

- 1. The proposal does not follow a medical model of training and only offers a cap of training which is not sufficient. Thirty years ago legislation requesting prescriptive authority for psychologists was declined. Nurses, osteopaths, optometrists and dentists have all been able to expand their scope of practice based on strength of training. Psychologists have been continuously denied due to a demonstrated lack of a medical curriculum, lack of standardization in training, and lack of regulation in schools of psychology.
- 2. The John A. Burns School of Medicine, the Hawaii Psychiatric Medical Association, and the Department of Health make reducing system barriers to mental health access a priority. I am new faculty with the Department of Psychiatry and have a specialty in Public Psychiatry which focuses on mental health care for the Severely Mentally Ill population. I believe part of my appeal as a new hire is the fact that I have interest mental health and access to care. I have had many discussion with collaborators about ways in which to expand service through Telemedicine.
- 3. Hawaii has already increased mental health access in ways proven to be safe and effective, including Telemedicine, ECHO, and Collaborative Care. Telepsychiatry, ECHO, and Collaborative Care models are proven and their development should be expanded and supported.
- 4. Although the two states of New Mexico and Louisiana have passed legislation approving psychologist prescribing practices in hopes of improving access to care, there is no evidence that access to care in those states have improved, particularly in rural areas. New York state has passed legislation actually banning psychologist prescribing practices.

5. Above all, as an advocate for those who cannot speak for themselves, mental health consumers deserve to receive the same quality of healthcare as all others. This includes knowing that the provider who prescribes medications for them has had appropriate training to prescribe medications safely. In a health care system where there is already some erosion of public trust in health care providers and health care delivery, it would be a misdirection to the public and potentially cause decreased faith in fully trained medical professionals if we were to allow an untrained equivalent to have the same practice privileges, especially if there is a negative outcome for our patients.

Thank you for your consideration to HOLD HB1566 in committee.

Michele Wang, MD Assistant Professor, Department of Psychiatry John A. Burns School of Medicine 1356 Lusitana St. 4th floor Honolulu HI 96813

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Testimony of the Board of Psychology

Before the House Committee on Health Tuesday, February 5, 2019 9:45 a.m. State Capitol, Conference Room 329

On the following measure: H.B. 1566, RELATING TO THE PRESCRIPTIVE AUTHORITY FOR CERTAIN CLINICAL PSYCHOLOGISTS

Chair Mizuno 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, as it has not had an opportunity to review and discuss this bill at a publicly noticed Board meeting. However, the Board has supported the intent of similar measures in the past and provided comments and recommendations.

The purposes of this bill are to: (1) authorize and establish procedures and criteria for prescriptive authority for clinical psychologists who meet specific education, training, and registration requirements; (2) require the Board to submit a report to the Legislature, prior to the Regular Session of 2021, on the authorization of prescriptive authority to prescribing psychologists who meet specific education, training, and registration pursuant to this bill, if enacted; and (3) repeal the prescriptive authority for clinical psychologists on August 31, 2025.

While the Board has not yet reviewed this bill, its language closely mirrors that of S.B. 384, S.D. 2 (Regular Session of 2017). The Board supported S.B. 384 and recommended the following amendments to strengthen the experience and supervision requirements:

The minimum experience requirement should be increased from 400
hours completed within a 48-month period to 800 hours completed within
a 56-month period. The Board felt that the increase in hours would
benefit the individual receiving the training and ensure patient safety.

- The experience requirement should include a minimum of 8 weeks of rotation in each of the following areas: (1) internal medicine/family medicine; (2) women's health; (3) pediatrics; and (4) geriatrics.
- The supervision requirement of one hundred patients should include the following: (1) geriatrics; (2) pediatrics; and (3) pregnant women. The Board believed that clinical experience that includes these vulnerable populations would help provide a better breadth of training in appropriate prescribing.
- The Board requested a delayed implementation date to allow the Board time to handle other administrative responsibilities set forth in the bill, before it could grant or renew the prescriptive authority, including, but not limited to: prescribing application forms and fees; developing and implementing procedures to review the educational and training credentials of an applicant; and determining the exclusionary formulary for prescribing psychologists.

Thank you for the opportunity to testify on this bill.



Helping Hawai'i Live Well

To: Representative John Mizuno, Chair, Representative Bertrand Kobayashi, Vice Chair, Members, House Committee on Health

From: Trisha Kajimura, Executive Director

Re: TESTIMONY IN SUPPORT OF HB 1566 RELATING TO PRESCRIPTIVE AUTHORITY FOR CERTAIN CLINICAL PSYCHOLOGISTS

Hearing: TUESDAY February 5, 2019, 9:45 am, CR 329

Thank you for hearing **HB 1566**, which authorizes the Board of Psychology to grant prescriptive authority to psychologists who meet specific education, training, and registration requirements. We strongly support this measure because it will help to alleviate the difficulty that people suffering from mental health problems have in accessing proper treatment and care.

Mental Health America of Hawaii is a 501(c)3 organization founded in Hawaii 77 years ago, that serves the community by promoting mental health through advocacy, education and service.

Not everyone dealing with mental health issues needs medication, but when someone who needs it is not able to get it in a timely manner, they can end up in a crisis that could have avoided. This type of crisis takes a terrible toll on the individual, their support system, and their overall health. Hawai'i has been dealing with a physician shortage for years and it is not getting better. Prescriptive authority for psychologists with advanced training is one of the solutions that will help to alleviate this dangerous prescriber shortage.

The language in this measure will provide the necessary safeguards to ensure only those psychologists with appropriate education, clinical training and registration will be authorized to prescribe from a limited formulary of psychiatric medications.

Passing HB 1566 will give properly trained and approved psychologists the ability to help consumers that otherwise would be unable to access the medication they need and should have a right to access. *Please help us improve mental health in Hawaii by passing HB 1566.*

Thank you for the opportunity to submit this testimony. You can reach me at trisha.kajimura@mentalhealthhawaii.org or (808)521-1846 if you have any questions.



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Administration Saul Levin, M.D., M.P.A. February 5, 2019

House Committee on Health Hawaii State Capitol 415 South Beretania Street Honolulu, HI 96813

Dear Chairman Mizuno, Vice Chair Kobayashi, and Honorable Members of the Committee,

On behalf of the American Psychiatric Association, a national medical specialty society representing more than 37,800 psychiatric physicians, as well as their patients and families, we urge you to oppose HB 1566 which would authorize clinical psychologists to prescribe powerful psychotropic drugs to Hawaii patients. While psychologists are experts in important behavioral interventions, they have no medical training. Giving them permission to prescribe would put the health and safety of Hawaii patients at risk.

There is often confusion about the difference between psychiatrists and psychologists. While psychologists are valuable mental health professionals and respected colleagues, only psychiatrists are medical doctors specializing in the diagnosis and treatment of mental disorders and substance abuse disorders. Just like surgeons or internists, psychiatrists are physicians who attend medical school (4 years), and then specialize through a medical residency. Psychiatrists complete a rigorous four-year medical residency in psychiatry after they complete medical school. This is over 12,000 hours of training specializing in medical treatment of mental health, including substance use disorders. Psychiatrists focus on the diagnosis, treatment and prevention of mental, emotional and behavioral disorders. Through their vast medical training, psychiatrists are able to conduct psychotherapy and prescribe medications and other medical treatments.

Psychologists treat mental disorders with psychotherapy and other behavioral interventions. A psychologist has an advanced degree, usually a Ph.D. in psychology or Doctor of Psychology (Psy.D.). Psychologists often have extensive training in research or clinical practice and in psychological testing and evaluation, but they <u>do</u> <u>not</u> have medical training.

HB 1566 would authorize psychologists to obtain a license to independently prescribe after completing as few as 400 clinical hours (including course work) and a one-year period of "clinical supervision." This course work can be done completely online.

Physicians spend years learning differential diagnoses, pharmacology, and honing their medical skills. This cannot be replicated in a 400-hour training period. Additionally, the "clinical supervision" does not have to be performed by a physician, which is disconcerting since psychologists have <u>no</u> medical training. HB 1566 would grant a psychologist prescriptive authority once they pass a 150-question multiple choice Psychopharmacology Exam for Psychologists (PEP). PEP is a product provided and administered by the American Psychological Association. <u>No</u> medical doctor's license and ability to prescribe was based solely on a multiple-choice exam, nor could their course work be completed online. Additionally, testing of physicians is performed by medical boards that are separate from professional medical associations in order to prevent conflicts of interest.

While we realize this legislation was intended to increase access to needed mental health care, granting psychologists prescriptive authority will not improve access. Proponents of psychologist prescribing claim that five states allow psychologists to prescribe and that this has increased access to mental health care in those states. However, while five states have enacted laws, only two states actually have active prescribing psychologists: Louisiana and New Mexico. Psychologists' claims that this will increase access have not materialized. After having gained prescriptive privileges, few psychologists in either of those states have become certified to prescribe psychotropic drugs, let alone practice in a rural or underserved area. Prescriptive authority for psychologists has not solved the mental health needs of the rural communities in those very few states that implemented such laws. Despite promises made in Louisiana and New Mexico, psychologists did not and do not move their practices to serve the rural communities.

Patient safety must be paramount when considering the change of any law, and HB 1566 puts some of Hawaii's most vulnerable patients at risk. Powerful psychotropic medications do not stop at the patient's brain; they affect many systems of the body such as the heart, lungs, stomach, and kidneys. There can be seriously disabling or deadly side-effects of the medications if improperly prescribed and managed. 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. More than half of all patients who have a mental disorder also have one or more physical ailments. The medical providers who treat these patients must be trained to understand and treat all systems of the body to recognize the warning signs of adverse effects. In short, psychotropic medications should only be prescribed by clinicians with significant medical training and broad understanding of all systems of the body.

The practice of medicine is a serious responsibility requiring years of thorough and relevant medical education and training. Allowing psychologists to prescribe after dramatically short-cutting the medical education and training necessary presents a serious and avoidable danger to Hawaii's most vulnerable patients. There are evidence-based solutions to address access to care such as Collaborative Care, where primary care providers and psychiatrists work together to provide mental health care, and telehealth, where providers can harness the power of technology to safely treat patients. Again, we urge you to oppose HB 1566 and would welcome the opportunity to work with you through our partners – the Hawaii Psychiatric Medical Association – to facilitate evidence-based, proven programs that can truly assist Hawaii patients with mental illness, including substance use disorders.

Thank you for the opportunity to share our concerns. If you have any questions regarding this information, please contact Erin Philp, Director of State Government Relations, at ephilp@psych.org.

Sincerely,

Saul Levin, M.D., M.P.A.

C.E.O. and Medical Director

American Psychiatric Association



Hawai'i Psychological Association

For a Healthy Hawai'i

P.O. Box 833 Honolulu, HI 96808

www.hawaiipsychology.org

Phone (808) 521-8995

COMMITTEE ON HEALTH
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HEARING: Tuesday, February 5, 2019, 9:45AM, Room 329

Testimony in **SUPPORT** of HB1566
RELATING TO PRESCRIPTIVE AUTHORITY FOR
CERTAIN CLINICAL PSYCHOLOGISTS

Hawai'i Psychological Association (HPA) is in **strong support** of HB1566. This bill would allow advanced trained medical psychologists to prescribe and dispense medication within the scope of practice of psychology as defined by Hawai'i Law.

Please note that on pages 11-12, under Prescriptive Authority Privilege requirements (§465-C section (4)), the nationally recognized Psychopharmacology Examination for Psychologists is no longer developed or administered by the American Psychological Association's Practice Organization's College of Professional Psychology. It is now developed and administered by **The Association of State and Provincial Psychology Boards (ASPPB).**

HB1566 will expand our ability to provide a full range of mental health services to the most underserved communities of Hawai'i, and I respectfully ask that you consider a "YES" vote on this bill.

Respectfully submitted,

Julie Takishima-Lacasa, PhD Chair, HPA Legislative Action Committee

HB-1566

Submitted on: 2/3/2019 9:18:48 PM

Testimony for HLT on 2/5/2019 9:45:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Evan Taniguchi, MD	Hawaii Psychiatric Medical Association	Oppose	No

Comments:

TO: House Health Committee (HLT)

DATE: 2/3/2019

HB1566 RELATING TO PSYCHOLOGISTS PRESCRIBING

POSITION: OPPOSE

My testimony is submitted in opposition to HB1566, relating to psychologists prescribing.

The bill in discussion does not provide a model for adequate training and safe medical care for patients and does not address the larger roots of our lack of access to adequate mental health care across the state.

In order to safely prescribe medicines, a certain standard of rigorous training must be applied not only in pharmacology but in physiology, anatomy, chemistry, pathophysiology, etc. There is no short-term course in my view that can replace years of intensive medical training. Psychologists often do receive an intensive training in psychotherapy, various areas of psychology, development, neurochemistry and may other areas that do make them experts in their respective field. However, many of our medicines affect a broader range of illnesses and pathophysiologic states including diabetes, seizure disorders, gastrointestinal complications, cardiac arrhythmias, etc. There may be interactions with medicines outside of psychiatry and mental health that interact with each other. For example, in the case of Libby Zion, the patient who influenced resident duty hour restrictions, a doctor in training administered a phenelzine (a mood medication) with Demerol (an opiate pain medicine) which resulted in the patient's death. In order to understand these risks and learn how to treat them we as psychiatrists undergo not only years of medical school but in addition years of residency training not only in psychiatry but in neurology, internal medicine and general pediatrics. APRNs, though a different curricular model, also spend years of training and apprenticeship before being able to independently prescribe medicines. The consequences of inadequate training are dire and should not be treated lightly.

In working with patients, I have also found that the barrier to receiving care goes beyond the number of providers. In our state especially, there are geographic limitations that make solutions like telemedicine more technologically elegant and effective solutions in reaching rural communities. In addition, mental health trends even on the mainland US are moving towards a collaborative care model. This often involves having a mental health professional in the same location as your primary care or other medical provider. This enhances not only collaboration and interdisciplinary communication but also reduces the level of stigma in seeing a mental health provider.

I would ask the committee to use evidence and expert advice in making a decision rather than succumbing to desperation in addressing what is a very real problem in our state. I certainly acknowledge the very real need for more mental health providers in our community. Having worked with a number of psychologists, and being a new provider myself, I am also not personally invested or interested in seeing other providers unnecessarily or territorially "blocked" from having a greater set of tools in serving their patients. However, the bill as it currently stands does not provide a model for safe training and I have grave concerns over what, in a moment of tremendous need, may happen to the patients of our local community if we do not guarantee their right to safe and equitable care. There may be indeed a route towards safe prescribing amongst psychologists (ie the APRN Rx training route through UHM) but the bill in discussion does not yet offer such a solution.

Thank you for your consideration to HOLD HB1566 in committee.

Evan Taniguchi MD



HAWAII MEDICAL ASSOCIATION

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TO:

COMMITTEE ON HEALTH & HUMAN SERVICES

Rep. John M. Mizuno, Chair

Rep. Bertrand Kobayashi, Vice Chair

DATE: Tuesday, February 5, 2019

TIME: 9:45 am

PLACE: Conference Room 329

FROM: Hawaii Medical Association

Jerry Van Meter, MD, President

Christopher Flanders, DO, Executive Director

Re: HB 1566: Relating to Prescriptive Authority for Certain Clinical Psychologists

Position: Oppose

Chair Mizuno, Vice Chair Kobayashi, and all members of the House Health and Human Services Committee:

This legislation is a proposal that puts the health and safety of the citizens of Hawaii with mental illness, including substance use disorders, in serious jeopardy. HB 1566 proposes to allow clinical psychologists, who are experts in important behavioral interventions but who have no medical training, the permission to prescribe extremely powerful psychotropic drugs for patients with psychiatric disorders. While we understand the intention of this legislation is to increase access to needed mental health care, HB 1566 puts Hawaii's most vulnerable patients at risk while failing to promote available evidence-based solutions to mental health access challenges. We urge you to look at safer models already up and functioning in Hawaii, as there are better alternatives to supporting patients with mental health needs.

These alternatives include:

Project Echo: A program Hawaii began in 2017 that is helping deliver **quality** mental health care to patients in rural areas of the state. To go along with this, Congress also overwhelmingly passed the Expanding Capacity for Health Outcomes Act (Public Law No. 114-270). The legislation, sponsored by Hawaii Senator Brian Schatz, will help better integrate the Project ECHO model originating out of the University of New Mexico into health systems across the country. Senator Schatz's legislation directs the

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federal Secretary of Health and Human Services to prioritize analysis of the model and examine its impact on addressing mental health and substance use disorders.

Collaborative Care: A specific type of integrated care that improves access to evidence based mental health care for primary care patients. Working with a patient's primary care provider and a "care managers", a medically trained psychiatric consultant" (i.e. psychiatrist, nurse practitioner, or clinical nurse specialist or physician assistant with psychiatric training with psychiatric training) deliver care to a population of patients needing care. This "care team" shares a defined group of patients tracked in a registry to ensure no one falls through the cracks. Practices track and reach out to patients who are not improving and mental health specialists provide caseload-focused consultation, not just ad-hoc advice.

As you know, HB 1566 would permit psychologists to obtain a prescription pad by acquiring a master's degree in psychopharmacology or "equivalent", as determined by the Hawaii Board of Psychology - a professional regulatory group that has no specific medical expertise or medical background. HB 1566 would require little clinical experience to prescribe medications including controlled substances, antipsychotics, and an almost unlimited range of non-psychotropic medications. Under HB 1566, only 400 contact hours with 100 patients is required as part of this training. Consider for a moment that psychiatric resident physicians, who complete a four-year medical residency program following graduation from medical school, will generally see 100 patients in just two weeks.

HB 1566 would require passage of an exam created and administered by the same national organization that accredits these haphazard postdoctoral degree programs and that stands to directly benefit from this new certification. No other voluntary, dues-paying membership organization in any medical specialty (e.g., cardiology, obstetrics and gynecology, psychiatry) has created such an exam – nor do national professional advocacy associations for nurses and physician assistants accredit their graduate programs. These dangerously low and inadequate requirements must be taken into consideration, and any proposed training standards must be compared to the 12 or more years of medical education and training psychiatrists and other physicians receive to be able to safely care for any patient that is suffering physical, mental, or substance use disorders.

As you review HB 1566, please consider the following:

Proponents of HB 1566 state that this will increase access to mental health care
in Hawaii and cite both Louisiana and New Mexico as examples. The facts in
New Mexico and Louisiana illustrate that psychologists' claims about increased

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access have not materialized. Specifically, after having gained prescriptive privileges, few psychologists in either New Mexico or Louisiana have become certified to prescribe psychotropic drugs, let alone practice in a rural or underserved area.

- Prescriptive authority for psychologists has not solved the mental health needs of the rural communities in those very few states that implemented such laws.
 Despite promises made in New Mexico and Louisiana, psychologists did not and do not move their practices to serve the rural communities.
- Fragmentation of Hawaii's health care system will increase by limiting the availability of behavioral therapy that integrated mental health care teams have come to rely on from psychologists. Coordinated, team-based care in which every member is relied on for their training and expertise is the model of practice and reimbursement the nation is moving toward. We would be happy to serve as a resource to this Committee on programs like Project Echo and collaborative care models already underway in Hawaii and in other states that would be more sustainable alternatives to solving significant access problems. HB 1566 would seriously undermine this movement.

In summary, the practice of medicine is a serious responsibility that requires years of thorough and relevant medical education and training. Allowing psychologists to prescribe after dramatically short-cutting the medical education and training necessary presents a serious and avoidable danger to Hawaii's most vulnerable patients. Again, we urge you to vote No on HB 1566 and would welcome the opportunity to work with you to facilitate evidence-based, proven programs that can truly assist citizens of Hawaii suffering from mental illness, including substance use disorders.

TESTIMONY FOR SUPPORT OF HB1566, HEARING 2/5/19 AT 9:45 am

Dear Chairman Representative Mizuno and Members of the House Committee on Health,
I am writing in support of HB1566 giving prescriptive privileges to psychologists who are specially trained and regulated by the state. This bill will help my clients who would benefit from medication for mental health purposes avoid months of delay for a psychiatric consultation. This bill will give more access to care with specially-trained psychologists.

Mahalo for your consideration.

Respectfully, Ann S. Yabusaki, Ph.D., MFT Psychologist & Family Therapist

<u>HB-1566</u> Submitted on: 2/2/2019 10:28:59 AM

Testimony for HLT on 2/5/2019 9:45:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Ronald Taniguchi, Pharm.D.	Individual	Support	No

Comments:

To: Representative John Mizuno, Chair, House Health Committee (HLT) Representative Bertha Kobayashi, Vice Chair

February 5, 2019

Re: HB 1566 Relating to Prescriptive Authority for Certain Clinical Psychologists

Position: **OPPOSED**Dear Representative Luke:

- The military crash course prescribing program for psychologists from 1991-1997 was ended because it was a failure.
- Psychologists quit, they failed the tests, they said it was barely enough training and it had more than 4x the work as HB1566. It was full time for 3 years, taught by psychiatrists and cost \$600,000 per psychologist.
- We don't want to subject native Hawaiian patients in rural areas to this when they deserve the best standard of care.

Thank you for listening to my concerns.

Aloha,

Leslie Gise MD
Psychiatrist on Maui and Molokai x 24 years
Clinical Professor, Department of Psychiatry, John A Burns School of Medicine

HB-1566

Submitted on: 2/2/2019 4:55:23 PM

Testimony for HLT on 2/5/2019 9:45:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Kenichi Yabusaki	Individual	Support	No

Comments:

Aloha Chairman Mizuno and Health Committee Members:

I support HB1566 with first-hand knowledge as I am the spouse of a Clinical Psychologist and Marriage and Family Therapist in both California and Hawaii. To this end, there are many instances where a patient/client is in need of medications (mood stabilizers, antidepressants, etc.) and require first seeing a psychiatrist who can prescribe medications. However, in the area of adolescents, there are very few pediatric psychiatrists and there are long waiting periods before and an appointment can be made. In such cases, a patient may be in danger of hurting him/her self or others and a specific medication can greatly help. It is time for appropriately trained psychologists to have the proper authority to prescribe such medications. Thank you for your support.

K. Ken Yabusaki, Ph.D.

HB-1566

Submitted on: 2/2/2019 7:58:20 AM

Testimony for HLT on 2/5/2019 9:45:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing	
Joseph E. Comaty, Ph.D., M.P.	Individual	Support	No	

Comments:

The ability of appropriately trained psychologists to safely and effectively prescribe psychotropic medications is no longer a question. The data that currently exists from over 20 years experience with psychologists in the DoD program, LA, and NM shows that these psychologists have not harmed anyone in all those years. And, these psychologists have provided much needed services to our active duty military personnel, to our native american citizens through the IHS, to individuals served by the PHS, and to the citizens in the rural areas of LA and NM where no access to competent psychiatric services exist. Adding appropriate training to already well-trained doctoral psychologists will add much-needed specialty services for the citizens of HI.

HOUSE OF REPRESENTATIVES THE THIRTIETH LEGISLATURE. REGULAR SESSION OF 2019

To: COMMITTEE ON HEALTH & HUMAN SERVICES

Rep. John M. Mizuno, Chair

Rep. Bertrand Kobayashi, Vice Chair

Rep. Della Au Belatti

Rep. Nadine K. Nakamura

Rep. Joy San Buenaventura

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Rep. James Kunane Tokioka

Rep. Gene Ward

HEARING: Tuesday, February 5, 2019, 9:45AM, Room 329

RE: Testimony in **SUPPORT** of HB 1566: RELATING TO PRESCRIPTIVE AUTHORITY FOR CERTAIN CLINICAL PSYCHOLOGISTS.

It was in 1989 that I first began supporting prescriptive authority for psychologists in Hawaii. That included participating in a months-long process of alternative dispute resolution required by the legislature at that time. The only consensus that was reached by the various disciplines involved in that process was that the mental health needs of the people of Hawaii were grossly underserved and even unserved in certain areas of the State. When we look around now, thirty years later, our people continue to lack access to muchneeded comprehensive mental health care. The consequences are many, affecting not only the individual who could benefit from access to the services, but family members, friends, co-workers, neighbors, and others in their communities.

Prescriptive Authority for specially trained advanced practice Psychologists is a safe and already utilized option in five other states, in Federally Qualified Health Centers, on Indian Reservations and in the military. The mental and behavioral health services which Psychologists across Hawaii already provide in their capacity as independently licensed, doctoral level mental health professionals will serve as the solid foundation for the comprehensive and integrative care which will be provided when augmented by prescriptive authority. More and more, prescriptive authority is being authorized by states for specially trained advance practice psychologists to use as a tool in providing just such comprehensive and integrative mental health care. Psychologists with the appropriate education and training have been successfully prescribing since the 1990s in the United States military, the Public Health Service, the Indian Health Service, Louisiana, New Mexico, Guam, and most recently have the opportunity to do so in Illinois, Iowa, and Idaho.

HB 1566 will provide the foundation to explore the suitability of Prescriptive Authority for advanced trained Psychologists to be able to support psychotherapy with psychopharmacological support, and I am in full support of this effort. Please vote **YES** on HB 1566 to allow greater access to care for those most in need.

Respectfully submitted,

Kathleen M. McNamara, Ph.D., ABPP Diplomate in Clinical Psychology Private Practice of Psychology, Maui

Denis Mee-Lee, MD 928 Nuuanu Avenue, Lower Level Honolulu, Hawaii 96817 Telephone (808) 538-2800 Facsimile (808) 536-2024 denmeelee@aol.com

02 February 2019

HOUSE COMMITTEE ON HEALTH

DATE: 05 February 2019

HB 1566 RELATING TO PRESCRIPTIVE AUTHORITY FOR CERTAIN CLINICAL PSYCHOLOGISTS.

POSITION: **OPPOSE**

Dear Chair John M. Mizuno, Co-Chair Bertrand Kobayashi, and Members,

My testimony is submitted in **opposition** to HB 1566, relating to psychologists.

From my experience as Chief of Hawaii's Mental Health Division for 10 years, Founder and Director of Psychiatry, Castle Medical Center for 12 years, principal investigator for almost 400 psychiatric medication studies, lecturer for most new psychiatric medications for 20 years, and the long term practice of psychiatry, I submit the following.

I am **opposed** to this measure because:

- 1 Psychologists are extremely important mental health specialists and are trained and oriented over many years to carry our distinctly different specialty functions from psychiatrists. Good mental health treatment needs a team of specialists expert in their unique and highly trained area of expertise. Each specialty needs to maintain and strengthen that unique excellence, and not compromise or dilute it by taking on other foreign specialty functions through legislation and inadequate training. Each specialty develops an attitudinal mind set, acquires cognitive learning and practice skills over many years from college through specialty post graduate training, practicums, internship, residencies, fellowships and more significantly through practice of that particular specialty.
- 2. Mental health illnesses are inadequately treated in Hawaii for many reasons even more important than the lack of access to psychiatric medications. These include under funded case management and peer support, lack of comprehensive community crisis management and facilities, absence of assertive community treatment, impractical mental health laws, lack of facilities for the unresponsive and uncooperative seriously mentally ill and chronic substance abusers thus causing homelessness and increased crime, and many others. Psychiatric medications are preferably available through the growing network of informed primary care physicians, Advanced Practice Registered Nurses, collaborative care models, State and private clinics, and telepsychiatry.
- **3. It is a challenge to find good cognitive behavioral therapists** (cognitive behavior has been proven as good as, and sometimes better than, medication treatment for many

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psychiatric conditions), **good psychological and neuropsychological evaluation**, and **other specialty therapies that only psychologists have been adequately trained to practice with expertise**.

4. Psychologists are the best specialists with conceptual understanding of the interplay between emotions/behavior/interpersonal dynamics, social workers with social system and environment factors, and only physicians and the nursing profession are trained and practiced over many years with understanding and treating the complex biological/genetic/psychiatric components and interplay between mental and other physical illnesses.

Thank you for your consideration to HOLD HB 1566 in committee.

Sincerely,

Denis Mee-Lee, MD, MS, CPI, DLFAPA

President and Principal Investigator, Valden Medical Clinic
Member/Advisor, NAMI Hawaii Board of Directors (family/friends of the mentally ill)
Member/Advisor, United Self Help Board of Directors (mental health consumers)
Member, Board of Governors, Honolulu County Medical Society
Member, Practitioners Advisory Committee, AlohaCare
Head Elder, Honolulu Japanese SDA Church
Chair, HALE KÖKUA O MĀNOA, Adventist Community Center to Manoa, Executive Committee
Past Chief of Staff, Castle Medical Center
President Elect, Hawaii Psychiatric Medical Association
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HB-1566

Submitted on: 2/3/2019 7:56:08 PM

Testimony for HLT on 2/5/2019 9:45:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Melissa Bowen	Individual	Support	No

Comments:

HOUSE OF REPRESENTATIVES

THE THIRTIETH LEGISLATURE

REGULAR SESSION OF 2019

To: COMMITTEE ON HEALTH & HUMAN SERVICES

Rep. John M. Mizuno, Chair

Rep. Bertrand Kobayashi, Vice Chair

Rep. Della Au Belatti

Rep. Nadine K. Nakamura

Rep. Joy San Buenaventura

Rep. Calvin Say

Rep. James Kunane Tokioka

Rep. Gene Ward

HEARING: Tuesday, February 5, 2019, 9:45AM, Room 329

RE: Testimony in **SUPPORT** of HB 1566: RELATING TO PRESCRIPTIVE AUTHORITY FOR CERTAIN CLINICAL PSYCHOLOGISTS.

1. communities are suffering because of the lack of access to comprehensive mental health care. Some of our most vulnerable citizens are unable to obtain the care needed to live healthy and functional lives. Often times, this leads to serious consequences such as drug overdose, suicide, and homelessness. The homelessness issue is a concern on every island and Psychologists are ready and willing to help. We 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 along side of our colleagues and community partners. As a social worker in Hawaii I have worked closely with the homeless population through the VA and at the shelters. I know first-hand the positive effects this would have on the homeless population. This would allow them to get the treatment they need to be stable to get housed and remain housed. There is a lack of professionals out there who are willing to go in the field and help these individuals. Passing this bill would help to house the homeless get them the treatment they deserve.

Prescriptive Authority for specially trained advanced practice Psychologists is a safe and already utilized option in five other states, in Federally Qualified Health Centers, on Indian Reservations and in the military. More and more, prescriptive authority is being authorized by states for specially trained advance practice psychologists to use as a tool in providing comprehensive, and integrative mental health care.

HB 1566 will provide the foundation to explore the suitability of Prescriptive Authority for advanced trained Psychologists to be able to support psychotherapy with psychopharmacological support, and I am in full support of this effort.

Prescribing Psychologists have been successfully prescribing since the 1990s in the US military, the Public Health service, the Indian Health Service, Louisiana, New Mexico, Guam, and most recently have the opportunity to do so in Illinois, Iowa, and Idaho.

Please vote **YES**on HB 1566 to allow greater access to care for those most in need.

Respectfully submitted,

Melissa Bowen, LCSW

Clinical Psychology Doctoral Student at Argosy University

HOUSE OF REPRESENTATIVES THE THIRTIETH LEGISLATURE REGULAR SESSION OF 2019

To: Committee on Health Services in support of HB 1566 (Prescriptive Authority for Certain Clinical Psychologists)

Rep. John M. Mizuno, Chair

Rep. Bertrand Kobayashi, Vice Chair

Rep. Della Au Belatti

Rep. Joy San Buenaventura

Rep. Nadine K. Nakamura

Rep. Calvin Say

Rep. James Kunane Tokioka

Rep. Gene Ward

HEARING: Tuesday, February 5, 2019, 9:45AM Room 329

From: Dr. Bracken Gott, Psv.D.

Re: Testimony in SUPPORT of HB 1566, Relating to Prescriptive Authority for Certain Clinical Psychologists

My name is Bracken Gott and I wholeheartedly support HB 1566. I am a clinical psychologist, a U.S. Navy veteran, and am currently enrolled in the Master of Science in Psychopharmacology Program at the University of Hawaii at Hilo (UH Hilo). The Psychopharmacology Program at UH Hilo is a fully accredited, nationally recognized program by the American Psychological Association for prescribing psychologists.

I have been practicing in mental health for over 20 years. During this time, I have had the opportunity to work with many skilled health care professionals; both those who can prescribe and those who cannot. Prescribing is an essential part of mental health treatment. However, great caution and consideration should be given to those who provide prescriptive services. These individuals must acquire the knowledge and skills needed to deliver safe, high-quality mental health care with prescribing privileges.

Some may argue that advanced trained clinical psychologists should not prescribe because it may be unsafe or could result in negative outcomes. I disagree. When an advanced trained clinical psychologist undergoes extensive training, obtains a Master's Degree from an accredited program, and passes a national licensing exam, these medical providers should be permitted to prescribe.

Medically trained psychologists have had prescriptive authority since 1974. The Department of Defense, Public Health Service, Indian Health Service, Guam, New Mexico, Louisiana, Illinois, Iowa, and Idaho all permit psychologists to have prescribing authority. There has never been any reported adverse outcomes or malpractice complaints related to prescriptive authority for medically trained psychologists. In fact, permitting psychologists to prescribe medications, will only enhance mental health care services throughout the State of Hawaii, by increasing access to care.

Passing HB 1566 will allow appropriately trained and credentialed psychologists the ability to help Hawaiians have access to medications needed to properly treat mental health disorders. As a practicing psychologist in Hawaii, I have gained first-hand knowledge of the limitations to accessing mental health treatment. I strongly support this measure because it will help to alleviate the difficulty people suffering from mental health problems have in accessing proper treatment and care. The language in this measure will provide the necessary safeguards to ensure only those psychologists with appropriate education, clinical training, and licensing will be authorized to prescribe.

Thank you for the opportunity to submit this testimony.

Very Respectfully,

Bracken Gott Psy.D. US Navy Reserve Clinical Psychologist

THE THIRTIETH LEGISLATURE REGULAR SESSION OF 2019

TO: COMMITTEE ON HEALTH

Rep John M. Mizuno, Chair

Rep Bertrand Kobayashi, Vice Chair

FROM: Jill Oliveira Gray, Ph.D.

Hawaii Licensed Clinical Psychologist

RE: TESTIMONY IN <u>SUPPORT</u> OF HB 1566

RELATING TO PRESCRIPTIVE AUTHORITY FOR CERTAIN CLINICAL

PSYCHOLOGISTS

Honorable Chairs, Vice-Chairs and members of the Committee on Health, my name is Dr. Jill Oliveira Gray and I am a licensed Clinical Psychologist who has worked in rural, medically underserved areas for the past 18 years to include Hana, Maui, Molokai, and Waimānalo. I am also a past President of the Hawai'i Psychological Association and current Training Director at I Ola Lāhui, an American Psychological Association accredited pre-doctoral internship and post-doctoral fellowship that has trained and placed psychologists in rural, medically underserved areas across our state since 2007. Because of my years of clinical experience serving rural, medically underserved areas, and first-hand knowledge of what the severe needs of these communities are and the profound impact that mental health provider shortages have on the psychological well-being of these communities, <u>I would like to submit this testimony in strong support of HB 1566.</u>

The mental health needs of individuals across our state continue to outweigh the capacity of our mental health system. I have been advocating in support of this measure for 16 years and during this time have not witnessed significant improvements in patients being able to access timely psychiatric care, particularly in rural areas of our state, but also on Oʻahu where repeated referrals to multiple psychiatrists have to be made due to many who do not accept new patients and/or Medicaid/Medicare patients. Individuals on Oʻahu are having to wait weeks to months before they are able to get appointments. The psychiatrists that I do know who have made themselves available in rural areas are <u>severely overbooked</u> and unable to provide patients the attention and connectedness they need and require in order to benefit from their services. We simply don't have enough psychiatric resources in our state.

According to the most recent Report on Findings from the Hawai'i Physician Workforce Assessment Project (December, 2018), physician shortages, including psychiatry, are highest in Hawai'i's rural areas. Across the different counties, in ranking order, the greatest shortage of psychiatrists is found on Maui at 36.91%, followed by Kaua'i county at 33.3%, and Hawai'i county at 32.95%. This annual report continues to indicate there is a 0% shortage for psychiatry on O'ahu but this doesn't take into account other aspects of accessibility including, availability (i.e., how soon and how often can a patient be seen?) and acceptability (i.e., quality of the relationship). I have witnessed all too often the suffering that persists due to individuals not being able to receive adequate psychiatric care on an outpatient basis. Psychiatrists practice in various types of health care settings, to include hospitals and residential treatment programs where the larger portion of our population does not require care, however, they do face access difficulties to receiving appropriate outpatient medication management in order to maintain functioning and prevent worsening of psychological problems.

THE THIRTIETH LEGISLATURE REGULAR SESSION OF 2019

Prescriptive authority for advanced trained clinical psychologists is a <u>long term</u>, <u>no-cost</u> solution to addressing the mental health provider shortages in our state. In Hawai'i, more people die from suicides than from motor vehicle accidents, drownings, falls, poisonings, suffocations, and homicides. From 2008-2012, there was an increasing trend in number of suicides and attempts in Hawai'i with an average of 170 deaths and 852 attempts per year. The highest reported number of deaths in a 21-year period was a mere 5 years ago in 2010 with 195 deaths (Hawai'i State Department of Health, Hawai'i Injury Prevention Plan, 2012-2017). According to this report, the most common negative life events that precede suicide are relationship issues (34%) (i.e., break up or divorce), or serious illness or medical issues (26%). Many studies show that people who commit suicide receive little or no treatment for their mental health problems due to the multiple barriers that exist (i.e., access, availability, acceptability, cost). It is not to be taken lightly that despite a 0% documented shortage of psychiatrists on O'ahu, "...65% of the O'ahu [suicide] victims had a documented history of mental illness" (Hawai'i State Department of Health, Hawai'i Injury Prevention Plan, 2012-2017, p. 34). Something does not add up here. We need any and all solutions to address the problems of accessing timely, accessible, and acceptable care across our State.

The basic argument from those who oppose this measure is that patient safety will be compromised by allowing psychologists to prescribe—but after 22 years of psychologists' prescribing, this has not proven to be true. Psychologists have been prescribing in the Indian Health Service and Department of Defense for the past 2 decades. There are now 178 prescribing psychologists licensed through New Mexico, Louisiana, and Illinois, many of whom are serving in rural, medically underserved areas and medically underserved populations. Recently, Idaho and Iowa also passed legislation to allow prescriptive authority for advanced trained clinical psychologists. The prescribing psychologists in New Mexico have increased the number of doctoral-level trained prescribers by 100%, and increased access to care among Medicaid patients by 60%. Via personal communication with a prescribing Medical Psychologist (MP) in Louisiana, after 10 years of practice, there have been NO complaints against MP's regarding prescribing and one of the benefits of MP's is that they are able to fill in positions that have been left vacant by psychiatrists for years.

HB 1566 contains increases in training requirements and supervised clinical experiences with a 580 hour increase and additional setting and population specifications such as obtaining 80 hours in a physical assessment practicum in a primary care, family practice, community or internal medicine setting and 100 hours of supervised community service that will include homeless, veteran and low-income populations. Supervised clinical experiences will include no less than 2 hours per week of supervision by a licensed physician or osteopathic physician, an APRN-Rx, or a prescribing psychologist.

HB 1566 also contains multiple safeguards imbedded in this legislation to include:

- Passing a rigorous national exam, the Psychopharmacology Exam for Psychologists (PEP);
- Required to obtain Federal DEA license;

THE THIRTIETH LEGISLATURE REGULAR SESSION OF 2019

- Required to maintain malpractice insurance;
- Required to prescribe only in consultation and collaboration with a patient's
 physician of record and only after a written collaborative agreement has been
 signed; will not be allowed to prescribe for any patient who does not have a
 primary or attending physician;
- For forensically encumbered or severely mentally ill patients, a prescribing psychologist must work with the department of health psychiatrist and/or enter into a collaborative agreement with the department of health;
- Exclusionary formulary prohibiting the prescribing of schedule I-III drugs to include opiates and narcotics and no off-label prescribing for patients 17 years of age and younger; and,
- Annual continuing education requirements specific to psychopharmacology and in addition to the existing continuation requirements for licensed clinical psychologists.

For all these reasons, and most importantly, to improve the health care system for Hawaii's medically underserved areas and most vulnerable populations, I humbly ask for your support of HB 1566.

Respectfully submitted,

Jill Oliveira Gray, Ph.D.

Licensed Clinical Psychologist

Direct of Training I Ola L**ā**hui, Inc

HB-1566

Submitted on: 2/4/2019 12:28:21 AM

Testimony for HLT on 2/5/2019 9:45:00 AM

Sı	ubmitted By	Organization	Testifier Position	Present at Hearing
	rika suzuki	Individual	Oppose	No

Comments:

RIKA SUZUKI M.D.

TO: House Health Committee (HLT)

DATE: February 3, 2019

HB 3105 RELATING TO PSYCHOLOGISTS PRESCRIBING

POSITION: OPPOSE

My testimony is submitted in opposition to **HB1566** relating to psychologists prescribing.

I am opposed to this measure because the needs of medically underserved populations must be met as safely, consistently, and responsibly as any other population. The patient populations of the medically underserved, with whom I have worked and do work, are particularly vulnerable because of limited resources and information, often with limited literacy about mental health and medical treatment options. My big concern, among others, is that it is assumed that access to mental health care often means obtaining medication. Increasing the number of prescribers is not the solution to improving access to care. Sometimes, in the mental health care triage process,

patients are found to be treatable without medications. Even suicidal patients are not always in need of medications but rather intensive supportive counseling and psychosocial supports and interventions. The triage process to identify danger and acuity, and immediate needs can be carried out by a variety of mental health professionals.

In treating the underserved populations with medications, however, especially the very young, the very old and the very sick, it is even more imperative that comprehensive medical training of brain and organ systems take place before safely identifying those patients who may benefit from medications. In prescribing, the medical model must be adhered to, as in any other treatment population. To expedite services to underserved populations, we are now actively exploring and putting to use integrative and collaborative care models between primary care providers and mental health providers. This kind of collaboration improves the efficiency of delivery of care, increases the numbers serviced, and decreases the time to access care.

Please help protect and advocate for the welfare of our underserved populations by your consideration to HOLD **HB1566** in committee.

Thank you,

Rika Suzuki M.D., Adult and Geriatric Psychiatry

<u>HB-1566</u> Submitted on: 2/4/2019 9:17:26 AM

Testimony for HLT on 2/5/2019 9:45:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Judi Steinman	Individual	Support	Yes

Comments:

HB-1566

Submitted on: 2/4/2019 9:26:56 AM

Testimony for HLT on 2/5/2019 9:45:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Keiko Chen	Individual	Oppose	No

Comments:

Keiko Chen

1114 Punahou Street #12A, Honolulu, HI 96816

Ph: (626) 328-9747

TO: Consumer Protection and Health Committee (CPH) OR House Health Committee (HLT)

DATE: 2019

HB1566 RELATING TO PSYCHOLOGISTS PRESCRIBING

POSITION: OPPOSE

My testimony is submitted in opposition to **HB1566**, relating to psychologists prescribing.

I am opposed to this measure because: I am a psychiatry resident having worked in the Queens Emergency Room and Kekela and have worked with the vulnerable and highrisk population who have serious mental health conditions. There are complex issues that arise from prescribing psychotropics as they are not benign medications - including drug-drug interactions, psychotropic induced side effects that necessitates close monitoring. Mental health consumers deserve to receive the same quality healthcare as all others. Psychologists have a path open to them to obtain prescribing authority in Hawaii via the two year APRN program at the School of Nursing at the University of Hawaii. This is an accredited and nationally regulated training curriculum.

The John A. Burns School of Medicine, the Hawaii Psychiatric Medical Association and the Department of Health are all working to reduce system barriers mental health services and helping to improve access to quality health care to all mental health

consumers. Hawaii is ramping up access improvement 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 taking time for consideration.

Sincerely, Keiko Chen, MD, MPH Dear Chair Mizuno and members of the House Committee on Health,

Please vote NO on HB1566.

It is not safe, has not been shown to improve access in the 2 states where implemented, and better, safer alternatives in Hawaii already exist and should be supported in their expansion, including:

Telemedicine

APRN-RX

Project ECHO

Collaborative Care

Below please find an analysis of HB1566 and safety concerns.

Also, the American Psychological Association had to settle a lawsuit for \$9 Million brought by its own members because the American Psychological Association Practice Organization (named in HB1566 as the entity overseeing the medical exam and grading) is in fact a lobbying arm that bullied the APA members into paying an additional lobbying fee of \$140 a year.

Please vote NO on HB1566.

Thank you.

Jeffrey Akaka, MD

HB1566 - ANALYSIS OF PROPOSED STANDARDS & SAFEGUARDS

In 2006-2007, the Hawaii Legislative Reference Bureau (LRB) conducted an impartial review of the psychologist prescribing issue. The LRB's detailed 100 page report made no recommendation on the final question, but noted that only one training model has been evaluated and found to have successfully trained postdoctoral clinical psychologists to prescribe psychotropic drugs for patients with mental illness, the 1990-1997 Department of Defense PDP program (DoD-PDP). The Bureau's final recommendation was:

If the Legislature deems it appropriate to authorize prescriptive authority for qualified clinical psychologists who practice in community health centers, the Legislature may wish to consider requiring a training model that requires minimum classroom and clinical training requirements no less rigorous than the PDP program training model and a scope of practice and formulary for graduates that is no broader than limitations applied to PDP program graduates.

Regardless of the approach or solutions adopted to increase access to mental health services for the medically underserved population, it is clear that patient safety cannot be compromised. Patient safety should guide the Legislature's decision on the issue of prescriptive authority for qualified clinical psychologists under limited circumstances.

The primary question for policy makers should be,

"How close does the process proposed under HB1566 come to meeting the LRB's recommended requirements for

- (A) clinical training,
- (B) scope of practice,
- (C) medication formulary and
- (D) patient safety?"

Another question of importance is (E)

"Does HB1566 have any budgetary implications or other risks?"

A. PROPOSED TRAINING AND SUPERVISION REQUIREMENTS ARE INADEQUATE

The LRB recommended that the Legislature require a training model with minimum classroom and clinical training requirements no less rigorous than the PDP program training model. How close does the process proposed under HB1566 come to meeting the LRB's recommended requirements for clinical

training?

As noted by the LRB, the Department of Defense PDP training program included the following four requirements or factors:

1. Curriculum:

PDP students had one to two full-time years of classroom training in the basic and preclinical biomedical sciences, and one year of full-time clinical training at a medical center that included inpatient and outpatient experience. This totaled 2-3 calendar years of

full-time study. The PDP training model and curriculum was designed and approved not just by psychologists, but also by psychiatric physicians,

representatives of American Association of Medical Colleges, the Accreditation Council for Graduate Medical Education, the medical school of the Uniformed Services University of Health Sciences, and the Walter Reed Army Medical Center.

Graduates of the apparently defunct University of Hawaii at Hilo Masters of Science in Clinical Psychopharmacology (UHH-MSCP) and Argosy University MSCP programs did not require applicants

to demonstrate passing grades in any of the usual prerequisite courses or labs in basic foundational sciences, and instead claimed to provide students with equivalent basic science and preclinical biomedical education in a fraction of the time. At the UHH-MSCP program, listening to recorded

lectures was the primary teaching method. The program told applicants, "As a distance learning online program, we offer flexible scheduling to ensure that your education does not impair your current work schedule."

In terms of biomedical science, UHH-MSCP applicants were not required to have completed any of the

standard courses or labs for science majors. Instead, the psychologists were provided 6 semester-hours

of recorded lectures on biochemistry, as opposed to the standard 21 semester-hours of general, organic

and biochemistry required for other students at the College of Pharmacy.

The psychologists received

just a 3 semester-hour taped class combining human anatomy & physiology and microbiology, material

that normally spans 24 semester-hours for other students at the University of Hawaii. Taken together,

the basic and preclinical science provided to MSCP psychologists totaled just 9 credit-hours, compared

to 21 credit-hours for non-prescribing nursing students, at least 27 credit-hours for APRN students, and

46 credit-hours for pharmacists and physicians. The following represents the amount of required basic

(46)

UHH-MSCP program provided a total of 33 credit-hours education. This is equivalent to a one year,

two semester graduate program, though it is spread over 6 semesters with a 1/4 - 1/3 time student

schedule. The Argosy University MSCP program offered graduates only a 22 semester credit hour curriculum.

For comparison, nursing students enrolled in the U.H. Hilo Bachelor of Science in Nursing

program (BSN) receive a total of 123 credit-hours over 4 years, and APRN's with prescriptive authority

receive even more.

As the LRB concluded, "Current psychopharmacology training programs that authorize online learning,

weekend classes, and optional clinical experience are considerably less rigorous than the PDP

training model." HB1566 permits these low standards and lacks reasonable safeguards regarding quality

and duration of the DoD-PDP curriculum.

2. Selective Admission: The PDP had a selective admission process and the LRB concluded

that "candidates for any similar training program, whether military or civilian, should be held to high selection standards; several years of clinical experience was also suggested...

The Advisory Council to the PDP program recommended that applicants to the program should have a minimum of 2 years experience as a licensed clinical psychologist."

There is no evidence that the criteria used by the UHH-MSCP program to select applicants recognized the challenges of its accelerated curriculum. It required no entrance examination or other evidence to

ensure that its psychologists were sufficiently gifted or exceptionally qualified to allow them to safely bypass so much of the standard biomedical science coursework. In fact, its program coordinator admitted that her students were often "scared by biochemistry". The program did not require applicants to have 2 years or more of experience as a licensed clinical psychologist. The MSCP student selection process basically takes all comers.

Advising against this, the LRB cautioned, "Admission into current postdoctoral psychopharmacology programs require only a doctoral degree in psychology and a current state license to practice psychology;

these minimal requirements do not establish the high selection standards suggested by the ACNP evaluation panel or the minimum two year clinical experience recommended by the Advisory Council."

HB1566 lacks these reasonable safeguards regarding the quality and experience of MSCP applicants.

3. Expert Clinical Supervision: PDP students were supervised by physicians specialized

in psychiatry, and a wide range of health care professionals, labs, and other equipment available

in close proximity.

The UHH-MSCP program's first director was a pharmacist with no experience treating patients with

psychiatric drugs, or even on the pharmacy aspects of psychiatric drugs. This is also the case for the

next program director, Supakit Wongwiwatthananukit, PharmD, a **veterinary pharmacist** whose main

contribution since transferring to the School of Pharmacy from the U.H. Cancer Center, was designing

a curriculum for pharmacy students to treat animals. As he described this, "The curriculum was

designed to expose students to a veterinary clinical setting."

The basic science portion of the UHH-MSCP curriculum was not taught by qualified faculty with

relevant degrees in these respective fields. Chemistry material was not taught by chemists. Biology

material was not taught by biologists. This does not even meet community college standards.

According to past program listings, the only UHH-MSCP faculty who were trained to prescribe

medications were Allen Novak, APRN-Rx and Kristine McCoy, MD, a family doctor. Both were listed as

"guest lecturers".

The UHH-MSCP program had no other faculty or clinical training sites to provide the necessary

supervised clinical experience. Instead, students were required to find their own clinical training sites

and volunteer supervisors. Generally this meant a primary care doctors at a community health center. It

is notable that even though the program's director advocated for

psychologist prescribing by insisting

that primary care doctors are not qualified to treat mental illness, the program relied on these same

doctors as the primary supervisors for its psychologist trainees.

HB1566 lacks reasonable safeguards regarding the quality of program faculty and clinical supervisors.

4. Post-graduate Collaboration: PDP graduates received close supervision by psychiatric

physicians during their initial postgraduate medical facility assignment, and an ongoing open,

collaborative practice that permitted ready access consultation with physicians who were onsite

or readily available.

The process proposed under HB1566 requires psychologists to maintain documented "collaborative"

agreements" and "treatment protocols" with DOH psychiatrists for patients with serious mental illness,

and with the primary care physician for all other patients. These required collaborations, protocols and agreements would be the primary safeguards in the bill, but it is difficult to assess exactly what they

would entail, how they will be meaningful, and their medico-legal implications. One thing is clear,

these are likely to be the primary focus of scrutiny in event of adverse outcomes.

B. PROPOSED SCOPE OF PRACTICE LACKS SAFEGUARDS

How close does the process proposed under HB1566 come to meeting the LRB's recommended requirements for scope of practice?

The LRB recommended that the Legislature require a scope of practice that is no broader than limitations applied to PDP program graduates. It also noted:

There is no program that authorizes psychologists to prescribe psychoactive medications for children or seniors that has been evaluated or determined to be safe.

The PDP scope of practice was limited to outpatients between the ages of 18 to 65, without serious

medical conditions or serious mental illnesses. HB1566 does not have this safeguard, would allow

psychologists to prescribe risky drugs to children, teens, elderly, the

medically-ill and the severely

mentally-ill. Most people don't understand that there are no requirements for adequate supervised

clinical experience for each of these specialized areas of practice, either during MSCP training or even

in psychology doctorate programs.

HB1566 does not require psychologists to meet the usual standards American Psychological Association

(APA) for specialized training in child psychology or for proficiency in assessment and treatment of

serious mental illness before prescribing drugs to in these higher risk cases.

There is no evidence that

any MSCP program offers the specialized biomedical, clinical and psychopharmacologic training

required to safely treat children, seniors and other higher risk patient populations with drugs.

This bears repeating, HB1566 would allow psychologists who have no clinical experience evaluating or

treated children with psychological or pharmacologic interventions to prescribe drugs to children. The

same goes for prescribing drugs to teens, elderly, the medically-ill and the severely mentally-ill. The

bill's lack of such a common-sense safeguard is of great concern.

C. PROPOSED MEDICATION FORMULARY LACKS SAFEGUARDS

The LRB recommended that the Legislature require a formulary that is no broader than the limitations applied to PDP program graduates. How close does the process proposed under HB767 come to

meeting the LRB's recommended requirements for the medication formulary?

Because PDP psychologists did not treat patients with severe mental illness, their medication formulary

was limited to the lower risk drugs prescribed for less serious conditions.

HB1566 lacks this reasonable

safeguard, and would permit psychologists use all psychiatric medications, a formulary that is nearly

equivalent to that used by psychiatric physicians.

D. HB1566 LACKS MULTIPLE DoD-PDP SAFEGUARDS

The LRB recommended that patient safety should guide the Legislature's decision on the issue of prescriptive authority for clinical psychologists. All agree that psychiatric drugs are no less complex and no less risky when prescribed by a Hawaii psychologist than by others. Once they are in someone's body, the chemicals will do what they do. Nevertheless, HB767 lacks many of the common-sense safeguards of the PDP, that could be described as "someone allowed to provide a medical service, should first have the substantial and relevant education, training and supervised experience for that speficic service". Consider the following comparison of safeguards: □ 2-3 years of quality, full-time biomedical training? PDP -yes, HB1566-no ☐ Selective applicant process? PDP -yes, HB1566—no ☐ Qualified preclinical and clinical faculty? PDP -yes, HB1566-no ☐ Supervisors expert in the use of psychiatric drugs? PDP -yes, HB1566-no ☐ Limited to the lowest risk medications? PDP -yes, HB1566—no □ Videotaped lectures as primary teaching method? PDP-no, HB1566-yes ☐ Prescribe drugs to children? PDP-no, HB1566-yes ☐ Prescribe drugs to teens? PDP-no, HB1566-yes ☐ Prescribe drugs to pregnant women? PDP-no, HB1566-yes ☐ Prescribe drugs to the elderly? PDP-no, HB1566-yes ☐ Prescribe drugs to the medically-ill? PDP-no, HB1566-yes ☐ Prescribe drugs for severe mental illness? PDP-no, HB1566-yes ☐ Psychology training in treating children? PDP-n/a, HB1566-no ☐ Psychology training in treating teens? PDP-n/a, HB1566-no ☐ Psychology training in treating pregnant women? PDP-n/a, HB1566-no ☐ Psychology training in treating the elderly? PDP-n/a, HB1566-no ☐ Psychology training in treating the medically-ill? PDP-n/a, HB1566-no ☐ Psychology training in treating severe mental illness? PDP-n/a, HB1566no ☐ Medical training in treating children with drugs? PDP-n/a, HB1566-no ☐ Medical training in treating teens with drugs? PDP-n/a, HB1566-no ☐ Medical training in treating children with drugs? PDP-n/a, HB1566-no ☐ Medical training in treating pregnant women with drugs? PDP-n/a, HB1566-no ☐ Medical training in treating the elderly with drugs? PDP-n/a, HB1566-no ☐ Medical training in treating severe mental illness with drugs? PDP-n/a, HB1566-no

☐ Does HB1566 mention any of this in its preamble? No. SUMMARY

The available evidence continues to support the LRB's conclusion that, "There is no postdoctoral training

in psychopharmacology for clinical psychologists in Hawaii that has high selection standards to

choose participants or that meets the classroom and clinical training requirements of the PDP program."

The PDP only allowed psychologists to prescribe only after a 2-3 year, full-time biomedical training

program, taught and supervised by qualified medical school faculty at Walter Reed. When finished,

these military psychologists were only allowed to use a limited list of the safest psychiatric drugs to

treat healthy adults aged 18-65, but not children, teens, elderly, the medically-ill or the severely mentally-ill.

HB1566 does not compare favorably to an objective examination of the PDP training program

safeguards for the admission process, curriculum and training content, duration, faculty and supervisor

qualifications, and required clinical settings. This is alarming given that the bill also fails to require and

the important PDP safeguards of a narrow scope of practice and limited formulary. This risk is

compounded by the fact that neither conventional clinical psychology training nor MSCP programs

require any significant education or supervised clinical experience for children, seniors or other

specialized patient populations.

7

Another safeguard missing from HB1566 involves psychologists who may have completed MSCP

training years ago, perhaps 10-15 years ago or more, and who have no evidence of substantial relevant

prescriptive practice or continuing education since then. Allowing these individuals to begin

prescribing after such a long gap, especially given the sketchy quality of the training being considered,

is yet another concern.

It is clear, according to the LRB's independent and objective analysis of this controversial issue, that

HB1566 does not require adequate education and training and poses significant risks to patient safety.

The bill's primary safeguard, consultation and collaboration with physicians, will push these risks

down to the level of those responsible for oversight the prescribing psychologists. For the highest risk

cases, this would include department of health psychiatrists. Any future claims of inadequate training

and negligent supervision would be very difficult to defend given the findings of the LRB and other

independent experts.

All of these risks and costs can be avoided by voting against HB1566, and instead implementing

initiatives that are safe and proven to work, like Telemedicine, Project ECHO and Collaborative Care.

Please vote NO on HB1566

From: <u>katrina.moss.psyd@gmail.com</u>

To: <u>HLTtestimony</u>

Subject: Testimony in SUPPORT OF HB1566

Date: Monday, February 4, 2019 9:57:44 AM

Katrina Perreira 462 Kahinu St Honolulu, HI 96821-2217

February 4, 2019

John M. Mizuno Chair, House Committee on Health

Dear John Mizuno:

HOUSE OF REPRESENTATIVES THE THIRTIETH LEGISLATURE REGULAR SESSION OF 2019

To: COMMITTEE ON HEALTH Rep. John M. Mizuno, Chair Rep. Bertrand Kobayashi, Vice Chair

HEARING: Tuesday, February 5, 2019, 9:45AM, Room 329

RE: Testimony in SUPPORT of HB 1566

RELATING TO PRESCRIPTIVE AUTHORITY FOR CERTAIN CLINICAL PSYCHOLOGISTS

Our communities are suffering because of the lack of access to comprehensive mental health care. Some of our most vulnerable citizens are unable to obtain the care needed to live healthy and functional lives. Often times, this leads to serious consequences such as drug overdose, suicide, and homelessness. The homelessness issue is a concern on every island and Psychologists are ready and willing to help. We 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 along side of our colleagues and community partners.

Prescriptive Authority for specially trained advanced practice Psychologists is a safe and already utilized option in five other states, in Federally Qualified Health Centers, on Indian Reservations and in the military. More and more, prescriptive authority is being authorized by states for specially trained advance practice psychologists to use as a tool in providing comprehensive, and integrative mental health care.

Please vote YES on HB1566 to allow greater access to care for those most in need.

Sincerely,

Dr Katrina Perreira Moss

From: <u>steve@hawaiifamilytherapist.com</u>

To: <u>HLTtestimony</u>

Subject: Testimony in SUPPORT OF HB1566

Date: Monday, February 4, 2019 9:47:44 AM

Steven P. 407 Uluniu Street #414 Kailua, HI 96734-2544

February 4, 2019

John M. Mizuno Chair, House Committee on Health

Dear John Mizuno:

HOUSE OF REPRESENTATIVES THE THIRTIETH LEGISLATURE REGULAR SESSION OF 2019

To: COMMITTEE ON HEALTH Rep. John M. Mizuno, Chair Rep. Bertrand Kobayashi, Vice Chair

HEARING: Tuesday, February 5, 2019, 9:45AM, Room 329

RE: Testimony in SUPPORT of HB 1566
RELATING TO PRESCRIPTIVE AUTHORITY FOR CERTAIN CLINICAL PSYCHOLOGISTS

Steven P. Katz, LMFT, Hawaii License #376 Master's in Counseling Psychology, with and Emphasis in Marriage and Family Therapy 354 Uluniu Street Suite 412 Kailua, HI 96734 808-220-3625 email: steve@hawaiifamilytherapist.com

Our communities are suffering because of the lack of access to comprehensive mental health care. Some of our most vulnerable citizens are unable to obtain the care needed to live healthy and functional lives. Often times, this leads to serious consequences such as drug overdose, suicide, and homelessness. The homelessness issue is a concern on every island and Psychologists are ready and willing to help. We 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 along side of our colleagues and community partners.

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HB1566 will provide the foundation to explore the suitability of Prescriptive Authority for advanced trained Psychologists to be able to support psychotherapy with psychopharmacological support, and I am in full support of this effort.

Prescribing Psychologists have been successfully prescribing since the 1990s in the US military, the Public Health service, the Indian Health Service, Louisiana, New Mexico, Guam, and most recently have the opportunity to do so in Illinois, Iowa, and Idaho.

Please vote YES on HB1566 to allow greater access to care for those most in need.

Sincerely,

Steven P. Katz, LMFT, Hawaii License #376 Master's in Counseling Psychology, with and Emphasis in Marriage and Family Therapy 354 Uluniu Street Suite 412 Kailua, HI 96734 808-220-3625 email: steve@hawaiifamilytherapist.com 808-220-3625

From: swfreedle@gmail.com

To: <u>HLTtestimony</u>

Subject: Testimony in SUPPORT OF HB1566

Date: Monday, February 4, 2019 9:32:44 AM

Shannon FREEDLE 25 KAHOA ST HILO, HI 96720-2205

February 4, 2019

John M. Mizuno Chair, House Committee on Health

Dear John Mizuno:

HOUSE OF REPRESENTATIVES THE THIRTIETH LEGISLATURE REGULAR SESSION OF 2019

To: COMMITTEE ON HEALTH Rep. John M. Mizuno, Chair Pop. Portrond Kohayashi, Vice Ch

Rep. Bertrand Kobayashi, Vice Chair

HEARING: Tuesday, February 5, 2019, 9:45AM, Room 329

RE: Testimony in SUPPORT of HB 1566

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Please vote YES on HB1566 to allow greater access to care for those most in need.

Sincerely,

Shannon W Freedle 5056992292

From: <u>kobleada@gmail.com</u>
To: <u>HLTtestimony</u>

Subject: Testimony in SUPPORT OF HB1566

Date: Monday, February 4, 2019 9:12:40 AM

Katrina Obleada 1504 Magazine St. HONOLULU, HI 96822-3733

February 4, 2019

John M. Mizuno Chair, House Committee on Health

Dear John Mizuno:

HOUSE OF REPRESENTATIVES THE THIRTIETH LEGISLATURE REGULAR SESSION OF 2019

To: COMMITTEE ON HEALTH Rep. John M. Mizuno, Chair Rep. Bertrand Kobayashi, Vice Chair

HEARING: Tuesday, February 5, 2019, 9:45AM, Room 329

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Please vote YES on HB1566 to allow greater access to care for those most in need.

Sincerely,

Katrina Obleada 4076178089 From: <u>kobleada@gmail.com</u>
To: <u>HLTtestimony</u>

Subject: Testimony in SUPPORT OF HB1566

Date: Monday, February 4, 2019 9:12:40 AM

Katrina Obleada 1504 Magazine St. HONOLULU, HI 96822-3733

February 4, 2019

John M. Mizuno Chair, House Committee on Health

Dear John Mizuno:

HOUSE OF REPRESENTATIVES THE THIRTIETH LEGISLATURE REGULAR SESSION OF 2019

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Please vote YES on HB1566 to allow greater access to care for those most in need.

Sincerely,

Katrina Obleada 4076178089 From: <u>kstueber@hawaii.edu</u>
To: <u>HLTtestimony</u>

Subject: Testimony in SUPPORT OF HB1566

Date: Monday, February 4, 2019 9:02:45 AM

Kyla Stueber 6042 Summer Street Honolulu, HI 96821-2379

February 4, 2019

John M. Mizuno Chair, House Committee on Health

Dear John Mizuno:

HOUSE OF REPRESENTATIVES THE THIRTIETH LEGISLATURE REGULAR SESSION OF 2019

To: COMMITTEE ON HEALTH Rep. John M. Mizuno, Chair Rep. Bertrand Kobayashi, Vice Chair

HEARING: Tuesday, February 5, 2019, 9:45AM, Room 329

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Please vote YES on HB1566 to allow greater access to care for those most in need.

Sincerely,

Kyla Stueber

From: <u>drlyleherman@gmail.com</u>

To: <u>HLTtestimony</u>

Subject: Testimony in SUPPORT OF HB1566

Date: Monday, February 4, 2019 7:42:39 AM

Lyle Herman 720 B 8th Ave Honolulu, HI 96816-7100

February 4, 2019

John M. Mizuno Chair, House Committee on Health

Dear John Mizuno:

HOUSE OF REPRESENTATIVES THE THIRTIETH LEGISLATURE REGULAR SESSION OF 2019

To: COMMITTEE ON HEALTH Rep. John M. Mizuno, Chair Rep. Bertrand Kobayashi, Vice Chair

HEARING: Tuesday, February 5, 2019, 9:45AM, Room 329

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Please vote YES on HB1566 to allow greater access to care for those most in need.

Sincerely,

Lyle Herman 8085454585

From: <u>dr.bbeltran@gmail.com</u>

To: <u>HLTtestimony</u>

Subject: Testimony in SUPPORT OF HB1566

Date: Monday, February 4, 2019 7:42:37 AM

Brianna Beltran 98-288 Kaonohi St, Apartment 1803 Aiea, HI 96701-2359

February 4, 2019

John M. Mizuno Chair, House Committee on Health

Dear John Mizuno:

HOUSE OF REPRESENTATIVES THE THIRTIETH LEGISLATURE REGULAR SESSION OF 2019

To: COMMITTEE ON HEALTH Rep. John M. Mizuno, Chair Rep. Bertrand Kobayashi, Vice Chair

HEARING: Tuesday, February 5, 2019, 9:45AM, Room 329

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Please vote YES on HB1566 to allow greater access to care for those most in need.

Sincerely,

Brianna Beltran

From: <u>dr.brouwers@gmail.com</u>

To: <u>HLTtestimony</u>

Subject: Testimony in SUPPORT OF HB1566

Date: Monday, February 4, 2019 7:12:43 AM

Gerald Brouwers 3265 Paty Drive Honolulu, HI 96822-1449

February 4, 2019

John M. Mizuno Chair, House Committee on Health

Dear John Mizuno:

HOUSE OF REPRESENTATIVES THE THIRTIETH LEGISLATURE REGULAR SESSION OF 2019

To: COMMITTEE ON HEALTH Rep. John M. Mizuno, Chair Rep. Bertrand Kobayashi, Vice Chair

HEARING: Tuesday, February 5, 2019, 9:45AM, Room 329

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Please vote YES on HB1566 to allow greater access to care for those most in need.

Sincerely,

Gerald Brouwers 8082206689 From: <u>dr.lioujohnson@gmail.com</u>

To: <u>HLTtestimony</u>

Subject: Testimony in SUPPORT OF HB1566

Date: Monday, February 4, 2019 7:02:39 AM

Victoria Liou-Johnson 7192 Kalanianaole Hwy, Suite A143A #264 Honolulu, HI 96825-1849

February 4, 2019

John M. Mizuno Chair, House Committee on Health

Dear John Mizuno:

HOUSE OF REPRESENTATIVES THE THIRTIETH LEGISLATURE REGULAR SESSION OF 2019

To: COMMITTEE ON HEALTH Rep. John M. Mizuno, Chair Rep. Bertrand Kobayashi, Vice Chair

HEARING: Tuesday, February 5, 2019, 9:45AM, Room 329

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Please vote YES on HB1566 to allow greater access to care for those most in need.

Sincerely,

Dr. Victoria Liou-Johnson

From: <u>drgamby@gmail.com</u>
To: <u>HLTtestimony</u>

Subject: Testimony in SUPPORT OF HB1566

Date: Monday, February 4, 2019 6:57:37 AM

Tanya Gamby 7220s kahuna Rd Kapaa, HI 96746-9027

February 4, 2019

John M. Mizuno Chair, House Committee on Health

Dear John Mizuno:

HOUSE OF REPRESENTATIVES THE THIRTIETH LEGISLATURE REGULAR SESSION OF 2019

To: COMMITTEE ON HEALTH Rep. John M. Mizuno, Chair Rep. Bertrand Kobayashi, Vice Chair

HEARING: Tuesday, February 5, 2019, 9:45AM, Room 329

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Please vote YES on HB1566 to allow greater access to care for those most in need.

Sincerely,

Tanya Evslin Gamby, PhD 8083461939

From: <u>bradleyjmac@gmail.com</u>

To: <u>HLTtestimony</u>

Subject: Testimony in SUPPORT OF HB1566

Date: Monday, February 4, 2019 4:22:37 AM

Bradley McConnell 9308 Four Pines Dr. Shafter, CA 93263-9430

February 4, 2019

John M. Mizuno Chair, House Committee on Health

Dear John Mizuno:

HOUSE OF REPRESENTATIVES THE THIRTIETH LEGISLATURE REGULAR SESSION OF 2019

To: COMMITTEE ON HEALTH Rep. John M. Mizuno, Chair Rep. Bertrand Kobayashi, Vice Chair

HEARING: Tuesday, February 5, 2019, 9:45AM, Room 329

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Please vote YES on HB1566 to allow greater access to care for those most in need.

Sincerely,

Bradley McConnell 6618055003

From: <u>drginasamala@gmail.com</u>

To: <u>HLTtestimony</u>

Subject: Testimony in SUPPORT OF HB1566

Date: Monday, February 4, 2019 1:02:36 AM

Gina Samala 95-1249 Meheula Pkwy Suite 195 Mililani, HI 96789-1791

February 4, 2019

John M. Mizuno Chair, House Committee on Health

Dear John Mizuno:

HOUSE OF REPRESENTATIVES THE THIRTIETH LEGISLATURE REGULAR SESSION OF 2019

To: COMMITTEE ON HEALTH Rep. John M. Mizuno, Chair Rep. Bertrand Kobayashi, Vice Chair

HEARING: Tuesday, February 5, 2019, 9:45AM, Room 329

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Please vote YES on HB1566 to allow greater access to care for those most in need.

Sincerely,

Gina Samala 8083661175 From: <u>nadinechiang@msn.com</u>

To: <u>HLTtestimony</u>

Subject: Testimony in SUPPORT OF HB1566

Date: Sunday, February 3, 2019 11:57:36 PM

nadine chiang 1188 Bishop St. Suite 2101 Honolulu, HI 96813-3308

February 4, 2019

John M. Mizuno Chair, House Committee on Health

Dear John Mizuno:

HOUSE OF REPRESENTATIVES THE THIRTIETH LEGISLATURE REGULAR SESSION OF 2019

To: COMMITTEE ON HEALTH Rep. John M. Mizuno, Chair Rep. Bertrand Kobayashi, Vice Chair

HEARING: Tuesday, February 5, 2019, 9:45AM, Room 329

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Please vote YES on HB1566 to allow greater access to care for those most in need.

Sincerely,

nadine chiang 808-892-2663

From: janetcovingtoncounseling@gmail.com

To: <u>HLTtestimony</u>

Subject: Testimony in SUPPORT OF HB1566

Date: Sunday, February 3, 2019 9:22:35 PM

Janet Covington 240 Kilea Place Wahiawa, HI 96786-2764

February 4, 2019

John M. Mizuno Chair, House Committee on Health

Dear John Mizuno:

HOUSE OF REPRESENTATIVES THE THIRTIETH LEGISLATURE REGULAR SESSION OF 2019

To: COMMITTEE ON HEALTH Rep. John M. Mizuno, Chair Rep. Bertrand Kobayashi, Vice Chair

HEARING: Tuesday, February 5, 2019, 9:45AM, Room 329

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Please vote YES on HB1566 to allow greater access to care for those most in need.

Sincerely,

Janet Covington, LMFT, LMHC 8082915321

From: junewching@gmail.com

To: <u>HLTtestimony</u>

Subject: Testimony in SUPPORT OF HB1566

Date: Sunday, February 3, 2019 9:12:34 PM

June W. J. Ching, PhD 1833 Kalakaua Avenue, Suite 800 Honolulu, HI 96815-1528

February 4, 2019

John M. Mizuno Chair, House Committee on Health

Dear John Mizuno:

HOUSE OF REPRESENTATIVES THE THIRTIETH LEGISLATURE REGULAR SESSION OF 2019

To: COMMITTEE ON HEALTH Rep. John M. Mizuno, Chair Rep. Bertrand Kobayashi, Vice Chair

HEARING: Tuesday, February 5, 2019, 9:45AM, Room 329

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Please vote YES on HB1566 to allow greater access to care for those most in need. $\,$

Sincerely,

June W. J. Ching, PhD 808-949-9502

From: <u>ivan irie@hotmail.com</u>

To: <u>HLTtestimony</u>

Subject: Testimony in SUPPORT OF HB1566

Date: Sunday, February 3, 2019 8:42:34 PM

Ivan Irie 730 Hausten St., Apt. 1 Honolulu, HI 96826-3092

February 4, 2019

John M. Mizuno Chair, House Committee on Health

Dear John Mizuno:

HOUSE OF REPRESENTATIVES THE THIRTIETH LEGISLATURE REGULAR SESSION OF 2019

To: COMMITTEE ON HEALTH Rep. John M. Mizuno, Chair Rep. Bertrand Kobayashi, Vice Chair

HEARING: Tuesday, February 5, 2019, 9:45AM, Room 329

RE: Testimony in SUPPORT of HB 1566

RELATING TO PRESCRIPTIVE AUTHORITY FOR CERTAIN CLINICAL PSYCHOLOGISTS

Our communities are suffering because of the lack of access to comprehensive mental health care. Some of our most vulnerable citizens are unable to obtain the care needed to live healthy and functional lives. Often times, this leads to serious consequences such as drug overdose, suicide, and homelessness. The homelessness issue is a concern on every island and Psychologists are ready and willing to help. We 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 along side of our colleagues and community partners.

Prescriptive Authority for specially trained advanced practice Psychologists is a safe and already utilized option in five other states, in Federally Qualified Health Centers, on Indian Reservations and in the military. More and more, prescriptive authority is being authorized by states for specially trained advance practice psychologists to use as a tool in providing comprehensive, and integrative mental health care.

Please vote YES on HB1566 to allow greater access to care for those most in need.

Sincerely,

Ivan Irie 8083210712 From: renee.nakama@gmail.com

To: <u>HLTtestimony</u>

Subject: Testimony in SUPPORT OF HB1566

Date: Sunday, February 3, 2019 8:17:35 PM

Renee Bellis 1829 Halekoa drive Honolulu, HI 96821-1028

February 4, 2019

John M. Mizuno Chair, House Committee on Health

Dear John Mizuno:

HOUSE OF REPRESENTATIVES THE THIRTIETH LEGISLATURE REGULAR SESSION OF 2019

To: COMMITTEE ON HEALTH Rep. John M. Mizuno, Chair Rep. Bertrand Kobayashi, Vice Chair

HEARING: Tuesday, February 5, 2019, 9:45AM, Room 329

RE: Testimony in SUPPORT of HB 1566

RELATING TO PRESCRIPTIVE AUTHORITY FOR CERTAIN CLINICAL PSYCHOLOGISTS

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Please vote YES on HB1566 to allow greater access to care for those most in need.

Sincerely,

Renee Y. Bellis 8083811408 From: <u>tsimmons4u@gmail.com</u>

To: <u>HLTtestimony</u>

Subject: Testimony in SUPPORT OF HB1566

Date: Sunday, February 3, 2019 7:47:34 PM

Tamika Simmons 536 Saddle vista Cibolo, TX 78108-3658

February 4, 2019

John M. Mizuno Chair, House Committee on Health

Dear John Mizuno:

HOUSE OF REPRESENTATIVES THE THIRTIETH LEGISLATURE REGULAR SESSION OF 2019

To: COMMITTEE ON HEALTH Rep. John M. Mizuno, Chair Rep. Bertrand Kobayashi, Vice Chair

HEARING: Tuesday, February 5, 2019, 9:45AM, Room 329

RE: Testimony in SUPPORT of HB 1566

RELATING TO PRESCRIPTIVE AUTHORITY FOR CERTAIN CLINICAL PSYCHOLOGISTS

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Please vote YES on HB1566 to allow greater access to care for those most in need.

Sincerely,

Tamika Simmons 8083171558 From: erikjul@gmail.com
To: HLTtestimony

Subject: Testimony in SUPPORT OF HB1566

Date: Sunday, February 3, 2019 7:42:37 PM

Erik Jul 3056 Felix St. Honolulu, HI 96816-1912

February 4, 2019

John M. Mizuno Chair, House Committee on Health

Dear John Mizuno:

HOUSE OF REPRESENTATIVES THE THIRTIETH LEGISLATURE REGULAR SESSION OF 2019

To: COMMITTEE ON HEALTH Rep. John M. Mizuno, Chair Rep. Bertrand Kobayashi, Vice Chair

HEARING: Tuesday, February 5, 2019, 9:45AM, Room 329

RE: Testimony in SUPPORT of HB 1566

RELATING TO PRESCRIPTIVE AUTHORITY FOR CERTAIN CLINICAL PSYCHOLOGISTS

This is a good idea. Deteriorate the unecessary hierarchy that can exist in education communities and allow qualified providers to utilize this learnable skill set and apply to populations urgently in need. I want to have more options and providers I can trust to refer patients to. I work in Aiea and finding quality and quantity care for medication provision is so difficult it literally creates human suffering that I see day to day. You can change this!!

Our communities are suffering because of the lack of access to comprehensive mental health care. Some of our most vulnerable citizens are unable to obtain the care needed to live healthy and functional lives. Often times, this leads to serious consequences such as drug overdose, suicide, and homelessness. The homelessness issue is a concern on every island and Psychologists are ready and willing to help. We 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 along side of our colleagues and community partners.

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HB1566 will provide the foundation to explore the suitability of Prescriptive Authority for advanced trained Psychologists to be able to support psychotherapy with psychopharmacological support, and I am in full support of this effort.

Prescribing Psychologists have been successfully prescribing since the 1990s in the US military, the Public Health service, the Indian Health Service, Louisiana, New Mexico, Guam, and most recently have the opportunity to do so in Illinois, Iowa, and Idaho.

Please vote YES on HB1566 to allow greater access to care for those most in need.

Sincerely,

Erik Jul

From: jcwhite54@gmail.com

To: <u>HLTtestimony</u>

Subject: Testimony in SUPPORT OF HB1566

Date: Sunday, February 3, 2019 7:42:33 PM

Judith White P.O. Box 1719 Kapaa, HI 96746-5719

February 4, 2019

John M. Mizuno Chair, House Committee on Health

Dear John Mizuno:

HOUSE OF REPRESENTATIVES THE THIRTIETH LEGISLATURE REGULAR SESSION OF 2019

To: COMMITTEE ON HEALTH Rep. John M. Mizuno, Chair Rep. Bertrand Kobayashi, Vice Chair

HEARING: Tuesday, February 5, 2019, 9:45AM, Room 329

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Please vote YES on HB1566 to allow greater access to care for those most in need.

Sincerely,

Judith C. White, Psy.D. 808-346-5856

From: <u>kellar@hawaii.edu</u>
To: <u>HLTtestimony</u>

Subject: Testimony in SUPPORT OF HB1566

Date: Sunday, February 3, 2019 7:32:33 PM

Michael Kellar 435 Haleloa Place, Apt. E Honolulu, HI 96821-2251

February 4, 2019

John M. Mizuno Chair, House Committee on Health

Dear John Mizuno:

HOUSE OF REPRESENTATIVES THE THIRTIETH LEGISLATURE REGULAR SESSION OF 2019

To: COMMITTEE ON HEALTH Rep. John M. Mizuno, Chair Rep. Bertrand Kobayashi, Vice Chair

HEARING: Tuesday, February 5, 2019, 9:45AM, Room 329

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support of this effort.

Prescribing Psychologists have been successfully prescribing since the 1990s in the US military, the Public Health service, the Indian Health Service, Louisiana, New Mexico, Guam, and most recently have the opportunity to do so in Illinois, Iowa, and Idaho.

Please vote YES on HB1566 to allow greater access to care for those most in need.

Sincerely,

Michael A. Kellar, Psy.D. 8082849500

From: <u>drodriguez@iolalahui.org</u>

To: <u>HLTtestimony</u>

Subject: Testimony in SUPPORT OF HB1566

Date: Sunday, February 3, 2019 7:27:34 PM

Daniel Rodriguez 303 Wai Nani Way Unit B Honolulu, HI 96815-3954

February 4, 2019

John M. Mizuno Chair, House Committee on Health

Dear John Mizuno:

HOUSE OF REPRESENTATIVES THE THIRTIETH LEGISLATURE REGULAR SESSION OF 2019

To: COMMITTEE ON HEALTH Rep. John M. Mizuno, Chair Rep. Bertrand Kobayashi, Vice Chair

HEARING: Tuesday, February 5, 2019, 9:45AM, Room 329

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Please vote YES on HB1566 to allow greater access to care for those most in need.

Sincerely,

Daniel Rodriguez, MA

From: <u>annienguyenpsyd@gmail.com</u>

To: <u>HLTtestimony</u>

Subject: Testimony in SUPPORT OF HB1566

Date: Sunday, February 3, 2019 7:02:33 PM

Annie Nguyen PSYD 47297 Hui oo Way Kaneohe, HI 96744-4511

February 3, 2019

John M. Mizuno Chair, House Committee on Health

Dear John Mizuno:

HOUSE OF REPRESENTATIVES THE THIRTIETH LEGISLATURE REGULAR SESSION OF 2019

To: COMMITTEE ON HEALTH Rep. John M. Mizuno, Chair Rep. Bertrand Kobayashi, Vice Chair

HEARING: Tuesday, February 5, 2019, 9:45AM, Room 329

RE: Testimony in SUPPORT of HB 1566

RELATING TO PRESCRIPTIVE AUTHORITY FOR CERTAIN CLINICAL PSYCHOLOGISTS

Every day patients struggle to obtain access to mental health services, particularly prescribers who are able to manage their behavioral health issues. I have witnessed this nearly every day for the last six years in my private practice.

Our communities are suffering because of the lack of access to comprehensive mental health care. Some of our most vulnerable citizens are unable to obtain the care needed to live healthy and functional lives. Often times, this leads to serious consequences such as drug overdose, suicide, and homelessness. The homelessness issue is a concern on every island and Psychologists are ready and willing to help. We 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 along side of our colleagues and community partners.

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Prescribing Psychologists have been successfully prescribing since the 1990s in the US military, the Public Health service, the Indian Health Service, Louisiana, New Mexico, Guam, and most recently have the opportunity to do so in Illinois, Iowa, and Idaho.

In my six years of working in private practice as a psychologist in Kailua, Hawaii I have encountered extreme difficulty getting access to care for my most vulnerable patients. Patients are often released from the hospital without psychiatry follow-up and then are unable to find a psychiatrist who is willing to accept new patients. This is especially difficult for patients who are on Quest or Medicare. This bill is pivotal in allowing greater access to care for our most vulnerable citizens.

Please vote YES on HB1566 to allow greater access to care for those most in need.

Sincerely,

Annie Nguyen, PSYD 808-381-1838

From: n.sidun@hawaiiantel.net

To: <u>HLTtestimony</u>

Subject: Testimony in SUPPORT OF HB1566

Date: Sunday, February 3, 2019 6:52:37 PM

Nancy M. Sidun PsyD 1195 Kamehame Drive Honolulu, HI 96825-3504

February 3, 2019

John M. Mizuno Chair, House Committee on Health

Dear John Mizuno:

HOUSE OF REPRESENTATIVES THE THIRTIETH LEGISLATURE REGULAR SESSION OF 2019

To: COMMITTEE ON HEALTH Rep. John M. Mizuno, Chair Rep. Bertrand Kobayashi, Vice Chair

HEARING: Tuesday, February 5, 2019, 9:45AM, Room 329

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Please vote YES on HB1566 to allow greater access to care for those most in need.

Sincerely,

Nancy M. Sidun, PsyD, ABPP, ATR 808 395-9871

From: <u>sidhermosura@hotmail.com</u>

To: <u>HLTtestimony</u>

Subject: Testimony in SUPPORT OF HB1566

Date: Sunday, February 3, 2019 6:52:35 PM

Sid Hermosura 41-1347 Kalanianaole Hwy Honolulu, HI 96825

February 3, 2019

John M. Mizuno Chair, House Committee on Health

Dear John Mizuno:

HOUSE OF REPRESENTATIVES THE THIRTIETH LEGISLATURE REGULAR SESSION OF 2019

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Please vote YES on HB1566 to allow greater access to care for those most in need.

Sincerely,

Sid Hermosura 8082597948 From: <u>rsconcepcion@gmail.com</u>

To: <u>HLTtestimony</u>

Subject: Testimony in SUPPORT OF HB1566

Date: Sunday, February 3, 2019 6:02:33 PM

Richelle Concepcion 565H Mananai Place Honolulu, HI 96818-5318

February 3, 2019

John M. Mizuno Chair, House Committee on Health

Dear John Mizuno:

HOUSE OF REPRESENTATIVES THE THIRTIETH LEGISLATURE REGULAR SESSION OF 2019

To: COMMITTEE ON HEALTH Rep. John M. Mizuno, Chair Rep. Bertrand Kobayashi, Vice Chair

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Please vote YES on HB1566 to allow greater access to care for those most in need.

Sincerely,

Richelle Concepcion

kobayashi1 - Melvia

From: mchristopher@ponopraxis.com
Sent: Monday, February 4, 2019 10:33 AM

To: HLTtestimony

Subject: Testimony in SUPPORT OF HB1566

Categories: Red Category

Michael Christopher 3734 Honolulu, HI 96818

February 4, 2019

John M. Mizuno Chair, House Committee on Health

Dear John Mizuno:

HOUSE OF REPRESENTATIVES THE THIRTIETH LEGISLATURE REGULAR SESSION OF 2019

To: COMMITTEE ON HEALTH Rep. John M. Mizuno, Chair

Rep. Bertrand Kobayashi, Vice Chair

HEARING: Tuesday, February 5, 2019, 9:45AM, Room 329

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ACCORDING TO THE HONOLULU EMERGENCY PSYCHOLOGICAL SERVICES AND JAIL DIVERSION PROGRAM CURRENTLY 50-60% EVERYONE ARRESTED (ABOUT 7,000

ARRESTS) BY HPD SUFFERS FROM UNTREATED SERIOUS MENTAL ILLNESS, AND POLICE MAKE NEARLY 4,0000 INVOLUNTARY TRANSPORTATIONS PER YEAR TO THE HOSPITAL, BECAUSE A PERSON IS A DANGER TO SELF OR OTHERS AS A RESULT OF UNTREATED MENTAL HEALTH PROBLEMS. ONE OF THE REASON FOR THIS IS THE DECADES LONG CHRONIC SHORTAGE OF MENTAL HEALTH PROFESSIONALS WHO CAN PRESCRIBE PSYCHOTROPIC MEDICATIONS.

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Prescribing Psychologists have been successfully prescribing since the 1990s in the US military, the Public Health service, the Indian Health Service, Louisiana, New Mexico, Guam, and most recently have the opportunity to do so in Illinois, Iowa, and Idaho.

Please vote YES on HB1566 to allow greater access to care for those most in need.

Sincerely,

Michael Christopher Psy.D., Ph.D. 808-285-6721

HB-1566

Submitted on: 2/4/2019 12:13:37 PM

Testimony for HLT on 2/5/2019 9:45:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Leanne Fox	Individual	Support	No

Comments:

The Native Hawaiian community continues to suffer because of the lack of access to comprehensive mental health care. Many rural areas in Hawai'i have limited or no access to psychiatric care; this has been the case for decades. The need is significant and increasing. Many Native Hawaiians from keiki to kupuna have mental health challenges and/or substance use challenges that impact them and their families. We need all providers to be hands on and practicing at the top of their licenses. Because of the mental health crisis facing Hawai'i, I support HB1566 and urge the committee to PASS this bill.

kobayashi1 - Melvia

From: rjkravetz@aol.com

Sent: Monday, February 4, 2019 10:18 AM

To: HLTtestimony

Subject: Testimony in SUPPORT OF HB1566

Richard Kravetz Ph.D 122 Hoahana Honolulu, HI 96825-3520

February 4, 2019

John M. Mizuno Chair, House Committee on Health

Dear John Mizuno:

HOUSE OF REPRESENTATIVES THE THIRTIETH LEGISLATURE REGULAR SESSION OF 2019

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HEARING: Tuesday, February 5, 2019, 9:45AM, Room 329

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Please vote YES on HB1566 to allow greater access to care for those most in need.

Sincerely,

Richard Kravetz, Ph.D 8082582598

kobayashi1 - Melvia

From: drrozi@yahoo.com

Sent: Sunday, February 3, 2019 11:43 PM

To: HLTtestimony

Subject: Testimony in SUPPORT OF HB1566

Rosemary Adam-Terem 1833 Kalakaua Avenue Honolulu, HI 96815-1512

February 4, 2019

John M. Mizuno Chair, House Committee on Health

Dear John Mizuno:

HOUSE OF REPRESENTATIVES THE THIRTIETH LEGISLATURE REGULAR SESSION OF 2019

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Please vote YES on HB1566 to allow greater access to care for those most in need.

Sincerely,

Rosemary Adam-Terem 8082924793

kobayashi1 - Melvia

From: nozanintherapy@aol.com

Sent: Monday, February 4, 2019 7:48 AM

To: HLTtestimony

Subject: Testimony in SUPPORT OF HB1566

Nozanin Yusufbekova 92-1309 Kuamu Street Kapolei, HI 96707-1555

February 4, 2019

John M. Mizuno Chair, House Committee on Health

Dear John Mizuno:

HOUSE OF REPRESENTATIVES THE THIRTIETH LEGISLATURE REGULAR SESSION OF 2019

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Please vote YES on HB1566 to allow greater access to care for those most in need.

Sincerely,

Nozanin Yusufbekova 8084252625

From: kathrine@hawaii.edu

Sent: Monday, February 4, 2019 11:18 AM

To: HLTtestimony

Subject: Testimony in SUPPORT OF HB1566

Kathrine Fast 47-759 Hui Kelu St. Kaneohe, HI 96744-4526

February 4, 2019

John M. Mizuno Chair, House Committee on Health

Dear John Mizuno:

HOUSE OF REPRESENTATIVES THE THIRTIETH LEGISLATURE REGULAR SESSION OF 2019

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lowa, and Idaho.

Please vote YES on HB1566 to allow greater access to care for those most in need.

Sincerely,

Kathrine Fast

From: artfirestepper@hotmail.com

Sent: Monday, February 4, 2019 10:48 AM

To: HLTtestimony

Subject: Testimony in SUPPORT OF HB1566

Categories: Red Category

Charles Liu 1114 Punahou St, 12A Honolulu, HI 96826-2054

February 4, 2019

John M. Mizuno Chair, House Committee on Health

Dear John Mizuno:

HOUSE OF REPRESENTATIVES THE THIRTIETH LEGISLATURE REGULAR SESSION OF 2019

To: COMMITTEE ON HEALTH Rep. John M. Mizuno, Chair

Rep. Bertrand Kobayashi, Vice Chair

HEARING: Tuesday, February 5, 2019, 9:45AM, Room 329

RE: Testimony in SUPPORT of HB 1566

RELATING TO PRESCRIPTIVE AUTHORITY FOR CERTAIN CLINICAL PSYCHOLOGISTS

Dear committee on Health,

My name is Charles Liu, Ph.D. I am a behavioral health psychologist who has worked on both Oahu and the Big Island. My experience in working with rural populations has opened my eyes to the significant need in psychologists' ability to prescribe. As it sits, there are simply not enough psychiatrists working in rural areas to meet the need. With the training that psychologists would have to go through (obtaining a masters in psychopharmacology and obtaining supervision), this training is equal, if not more significant than the training many non MD providers obtain before having the same privileges. Furthermore, psychologists have the most training in accurately assessing for disorders, and would be trained to know when their patients are more complex than what they can treat with medication.

Prescribing Psychologists have been successfully prescribing since the 1990s in the US military, the Public Health service, the Indian Health Service, Louisiana, New Mexico, Guam, and most recently have the opportunity to do so in Illinois, Iowa, and Idaho.

Please vote YES on HB1566 to allow greater access to care for those most in need.

Sincerely,

Dr. Charles Liu 6092260557

From: drjudyrocap@gmail.com

Sent: Monday, February 4, 2019 11:18 AM

To: HLTtestimony

Subject: Testimony in SUPPORT OF HB1566

Judith Rocap 1231 Ala Alii Street, Apartment 18 Honolulu, HI 96818-1880

February 4, 2019

John M. Mizuno Chair, House Committee on Health

Dear John Mizuno:

HOUSE OF REPRESENTATIVES THE THIRTIETH LEGISLATURE REGULAR SESSION OF 2019

To: COMMITTEE ON HEALTH Rep. John M. Mizuno, Chair Rep. Bertrand Kobayashi, Vice Chair

HEARING: Tuesday, February 5, 2019, 9:45AM, Room 329

RE: Testimony in SUPPORT of HB 1566

RELATING TO PRESCRIPTIVE AUTHORITY FOR CERTAIN CLINICAL PSYCHOLOGISTS

Our communities are suffering because of the lack of access to comprehensive mental health care. Some of our most vulnerable citizens are unable to obtain the care needed to live healthy and functional lives.

Often times, this leads to serious consequences such as drug overdose, suicide, and homelessness. The homelessness issue is a concern on every island and Psychologists are ready and willing to help. We 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 along side of our colleagues and community partners.

Prescriptive Authority for specially trained advanced practice Psychologists is a safe and already utilized option in five other states, in Federally Qualified Health Centers, on Indian Reservations and in the military. More and more, prescriptive authority is being authorized by states for specially trained advance practice psychologists to use as a tool in providing comprehensive, and integrative mental health care.

Please vote YES on HB1566 to allow greater access to care for those most in need.

Sincerely,

Judith Rocap 8084971644

From: ksbrown33@gmail.com

Sent: Monday, February 4, 2019 11:38 AM

To: HLTtestimony

Subject: Testimony in SUPPORT OF HB1566

Kathleen Brown 2743 1st St, #1105 Fort Myers, FL 33916-1869

February 4, 2019

John M. Mizuno Chair, House Committee on Health

Dear John Mizuno:

HOUSE OF REPRESENTATIVES THE THIRTIETH LEGISLATURE REGULAR SESSION OF 2019

To: COMMITTEE ON HEALTH Rep. John M. Mizuno, Chair Rep. Bertrand Kobayashi, Vice Chair

HEARING: Tuesday, February 5, 2019, 9:45AM, Room 329

RE: Testimony in SUPPORT of HB 1566

RELATING TO PRESCRIPTIVE AUTHORITY FOR CERTAIN CLINICAL PSYCHOLOGISTS

Our communities and criminal justice systems are suffering because of the lack of access to comprehensive mental health care. Some of our most vulnerable citizens are unable to obtain the care needed to live healthy and functional lives. Often, this leads to serious consequences such as drug overdose, suicide, and homelessness. Homelessness is a concern on every island and Psychologists are ready and willing to help. We 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 along side of our colleagues and community partners.

Prescriptive Authority for specially trained advanced practice Psychologists is a safe and already utilized option in five other states, in Federally Qualified Health Centers, on Indian Reservations and in the military. More and more, prescriptive authority is being authorized by states for specially trained advance practice psychologists to use as a tool in providing comprehensive, and integrative mental health care.

Please vote YES on HB1566 to allow greater access to care for those most in need.

Sincerely,

Kathleen S. Brown, PhD 8087783478

From: drhitominihei@gmail.com

Sent: Monday, February 4, 2019 12:18 PM

To: HLTtestimony

Subject: Testimony in SUPPORT OF HB1566

Hitomi Nihei 2825 S. King St. #2504 Honolulu, HI 96826-3535

February 4, 2019

John M. Mizuno Chair, House Committee on Health

Dear John Mizuno:

HOUSE OF REPRESENTATIVES THE THIRTIETH LEGISLATURE REGULAR SESSION OF 2019

To: COMMITTEE ON HEALTH Rep. John M. Mizuno, Chair Rep. Bertrand Kobayashi, Vice Chair

HEARING: Tuesday, February 5, 2019, 9:45AM, Room 329

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Please vote YES on HB1566 to allow greater access to care for those most in need.

Sincerely,

Hitomi Nihei 8082232474

From: drlsanderson@yahoo.com

Sent: Monday, February 4, 2019 7:03 AM

To: HLTtestimony

Subject: Testimony in SUPPORT OF HB1566

Laura Anderson 2325 Liliuokalani st KILAUEA, HI 96754-5304

February 4, 2019

John M. Mizuno Chair, House Committee on Health

Dear John Mizuno:

HOUSE OF REPRESENTATIVES THE THIRTIETH LEGISLATURE REGULAR SESSION OF 2019

To: COMMITTEE ON HEALTH Rep. John M. Mizuno, Chair Rep. Bertrand Kobayashi, Vice Chair

HEARING: Tuesday, February 5, 2019, 9:45AM, Room 329

RE: Testimony in SUPPORT of HB 1566

RELATING TO PRESCRIPTIVE AUTHORITY FOR CERTAIN CLINICAL PSYCHOLOGISTS

Hi- having lived and worked in the outer islands die nearly 20 years I know first hand that our communities are suffering because of the lack of access to comprehensive mental health care. Some of our most vulnerable citizens are unable to obtain the care needed to live healthy and functional lives. Often times, this leads to serious consequences such as drug overdose, suicide, and homelessness. The homelessness issue is a concern on every island and Psychologists are ready and willing to help.

We 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 along side of our colleagues and community partners.

Prescriptive Authority for specially trained advanced practice Psychologists is a safe and already utilized option in five other states, in Federally Qualified Health Centers, on Indian Reservations and in the military. More and more, prescriptive authority is being authorized by states for specially trained advance practice psychologists to use as a tool in providing comprehensive, and integrative mental health care.

HB1566 will provide the foundation to explore the suitability of Prescriptive Authority for advanced trained Psychologists to be able to support psychotherapy with psychopharmacological support, and I am in full support of this effort.

Prescribing Psychologists have been successfully prescribing since the 1990s in the US military, the Public Health service, the Indian Health Service, Louisiana, New Mexico, Guam, and most recently have the opportunity to do so in Illinois, Iowa, and Idaho.

Please vote YES on HB1566 to allow greater access to care for those most in need.

Sincerely,

Dr. Laura Anderson 8086391404

From: drrozi@yahoo.com

Sent: Sunday, February 3, 2019 11:43 PM

To: HLTtestimony

Subject: Testimony in SUPPORT OF HB1566

Rosemary Adam-Terem 1833 Kalakaua Avenue Honolulu, HI 96815-1512

February 4, 2019

John M. Mizuno Chair, House Committee on Health

Dear John Mizuno:

HOUSE OF REPRESENTATIVES THE THIRTIETH LEGISLATURE REGULAR SESSION OF 2019

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HEARING: Tuesday, February 5, 2019, 9:45AM, Room 329

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Please vote YES on HB1566 to allow greater access to care for those most in need.

Sincerely,

Rosemary Adam-Terem 8082924793

From: trey.hicks@me.com

Sent: Sunday, February 3, 2019 9:28 PM

To: HLTtestimony

Subject: Testimony in SUPPORT OF HB1566

William Hicks 215 Luika Pl Kailua, HI 96734-3238

February 4, 2019

John M. Mizuno Chair, House Committee on Health

Dear John Mizuno:

HOUSE OF REPRESENTATIVES THE THIRTIETH LEGISLATURE REGULAR SESSION OF 2019

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Please vote YES on HB1566 to allow greater access to care for those most in need.

Sincerely,

William Hicks 2546303220

From: lhufano@aol.com

Sent: Sunday, February 3, 2019 9:08 PM

To: HLTtestimony

Subject: Testimony in SUPPORT OF HB1566

Linda Hufano Ph.D. 122 Hoahana Place Honolulu, HI 96825-3520

February 4, 2019

John M. Mizuno Chair, House Committee on Health

Dear John Mizuno:

HOUSE OF REPRESENTATIVES THE THIRTIETH LEGISLATURE REGULAR SESSION OF 2019

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Please vote YES on HB1566 to allow greater access to care for those most in need.

Sincerely,

Linda Hufano, Ph.D. 808 258-2250

From: drmarianmiller@me.com

Sent: Sunday, February 3, 2019 8:37 PM

To: HLTtestimony

Subject: Testimony in SUPPORT OF HB1566

MARIAN MILLER 1454 AKEKE PLACE KAILUA, HI 96734-4218

February 4, 2019

John M. Mizuno Chair, House Committee on Health

Dear John Mizuno:

HOUSE OF REPRESENTATIVES THE THIRTIETH LEGISLATURE REGULAR SESSION OF 2019

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Prescribing Psychologists have been successfully prescribing since the 1990s in the US military, the Public Health service,
the Indian Health Service, Louisiana, New Mexico, Guam, and most recently have the opportunity to do so in Illinois,
lowa, and Idaho.

Please vote YES on HB1566 to allow greater access to care for those most in need.

Sincerely,

Dr Marian Miller

From: lalikipaulo@yahoo.com

Sent: Sunday, February 3, 2019 6:22 PM

To: HLTtestimony

Subject: Testimony in SUPPORT OF HB1566

Lesley A. Slavin 317C Olomana Street Kailua, HI 96734-5509

February 3, 2019

John M. Mizuno Chair, House Committee on Health

Dear John Mizuno:

HOUSE OF REPRESENTATIVES THE THIRTIETH LEGISLATURE REGULAR SESSION OF 2019

To: COMMITTEE ON HEALTH Rep. John M. Mizuno, Chair Rep. Bertrand Kobayashi, Vice Chair

HEARING: Tuesday, February 5, 2019, 9:45AM, Room 329

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Please vote YES on HB1566 to allow greater access to care for those most in need.

Sincerely,

Lesley A. Slavin, Ph.D. 8083939110

<u>HB-1566</u> Submitted on: 2/4/2019 1:12:03 PM

Testimony for HLT on 2/5/2019 9:45:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Christopher Knightsbridge	Individual	Support	Yes

Comments:

From: hi.wellness.services@gmail.com

Sent: Monday, February 4, 2019 2:33 PM

To: HLTtestimony

Subject: Testimony in SUPPORT OF HB1566

Kalei Chandler-Ah Sing PO Box 755 Kailua, HI 96734-0755

February 4, 2019

John M. Mizuno Chair, House Committee on Health

Dear John Mizuno:

HOUSE OF REPRESENTATIVES THE THIRTIETH LEGISLATURE REGULAR SESSION OF 2019

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Please vote YES on HB1566 to allow greater access to care for those most in need.

Sincerely,

kalei Chandler-Ah Sing 18087382099

From: c.kehaulani@gmail.com

Sent: Monday, February 4, 2019 1:23 PM

To: HLTtestimony

Subject: Testimony in SUPPORT OF HB1566

Christina Uemura PO BOX 334 LAWAI, HI 96765-0334

February 4, 2019

John M. Mizuno Chair, House Committee on Health

Dear John Mizuno:

HOUSE OF REPRESENTATIVES THE THIRTIETH LEGISLATURE REGULAR SESSION OF 2019

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Please vote YES on HB1566 to allow greater access to care for those most in need.

Sincerely,

Christina Uemura 8086348201

From: kmburns@gwu.edu

Sent: Monday, February 4, 2019 1:28 PM

To: HLTtestimony

Subject: Testimony in SUPPORT OF HB1566

Katherine Burns 21 Homelani Pl Honolulu, HI 96817-1113

February 4, 2019

John M. Mizuno Chair, House Committee on Health

Dear John Mizuno:

HOUSE OF REPRESENTATIVES THE THIRTIETH LEGISLATURE REGULAR SESSION OF 2019

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Prescribing Psychologists have been successfully prescribing since the 1990s in the US military, the Public Health service,
the Indian Health Service, Louisiana, New Mexico, Guam, and most recently have the opportunity to do so in Illinois,
Iowa, and Idaho.

Please vote YES on HB1566 to allow greater access to care for those most in need.

Sincerely,

Katherine Burns, PhD

From: seanscanlanphd@yahoo.com

Sent: Monday, February 4, 2019 1:43 PM

To: HLTtestimony

Subject: Testimony in SUPPORT OF HB1566

Sean Scanlan 1019 University Ave. #6A Honolulu, HI 96826-1509

February 4, 2019

John M. Mizuno Chair, House Committee on Health

Dear John Mizuno:

HOUSE OF REPRESENTATIVES THE THIRTIETH LEGISLATURE REGULAR SESSION OF 2019

To: COMMITTEE ON HEALTH Rep. John M. Mizuno, Chair Rep. Bertrand Kobayashi, Vice Chair

HEARING: Tuesday, February 5, 2019, 9:45AM, Room 329

RE: Testimony in SUPPORT of HB 1566
RELATING TO PRESCRIPTIVE AUTHORITY FOR CERTAIN CLINICAL PSYCHOLOGISTS

Please vote YES on HB1566 to allow greater access to care for those most in need. The current number of prescriptive providers is simply not sufficient and hasn't been for a long time. The other week, I had a patient that needed simple ADHD medication for school. The psychiatrist was able to get them an appointment.... in 6 months! That's summertime, and school is done. That's 6 months of suffering for no good reason.

Prescriptive Authority for specially trained advanced practice Psychologists is a safe and already utilized option in five other states, in Federally Qualified Health Centers, on Indian Reservations and in the military. More and more, prescriptive authority is being authorized by states for specially trained advance practice psychologists to use as a tool in providing comprehensive, and integrative mental health care.

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the Indian Health Service, Louisiana, New Mexico, Guam, and most recently have the opportunity to do so in Illinois,
lowa, and Idaho.

Mahalo,

Sean W. Scanlan, Ph.D. 808-277-7577

From: eric.larsen79@gmail.com

Sent: Monday, February 4, 2019 3:43 PM

To: HLTtestimony

Subject: Testimony in SUPPORT OF HB1566

Eric Larsen

7770 Norfolk Ave #301 Bethesda, MD 20814-7038



February 4, 2019

John M. Mizuno Chair, House Committee on Health

Dear John Mizuno:

HOUSE OF REPRESENTATIVES THE THIRTIETH LEGISLATURE REGULAR SESSION OF 2019

To: COMMITTEE ON HEALTH Rep. John M. Mizuno, Chair Rep. Bertrand Kobayashi, Vice Chair

HEARING: Tuesday, February 5, 2019, 9:45AM, Room 329

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Please vote YES on HB1566 to allow greater access to care for those most in need.

Sincerely,

Eric Larsen, MD 8608577126

From: drstephenchoy@hotmail.com

Sent: Monday, February 4, 2019 3:53 PM

To: HLTtestimony

Subject: Testimony in SUPPORT OF HB1566

Stephen Choy 1314 a king st Honolulu, HI 96814

February 4, 2019

John M. Mizuno Chair, House Committee on Health

Dear John Mizuno:

HOUSE OF REPRESENTATIVES THE THIRTIETH LEGISLATURE REGULAR SESSION OF 2019

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Please vote YES on HB1566 to allow greater access to care for those most in need.

Sincerely,

Stephen Choy phd 8085938484 Elaine M. Heiby, Ph.D. Licensed Psychologist 2542 Date St., Apt. 702 Honolulu, HI 96826 (808) 497-0929 heiby@hawaii.edu



2 February 2019

Hawaii State Legislature House Health Committee

Re: OPPOSITION to HB1566 Relating to prescription privileges for psychologists

Dear Honorable Representatives:

This is individual testimony that is informed from my experience as a doctoral level psychologist since 1980. My experience includes being a Professor of Psychology at the University of Hawaii at Manoa from 1981 to 2014, a Hawaii Licensed Psychologist since 1982, and a former member of the Board of Psychology. My opinions do not represent the University or the Board. My opinions are consistent with testimony submitted by Psychologists Opposed to Prescriptions Privileges for Psychologists (POPPP) and I am on the Board of Advisors of POPPP (https://www.poppp.org).

Purpose of HB1566

This bill aims to expand the scope of practice of psychologists to that of psychiatrists based on only 10% of the medical training completed by psychiatrists. This expansion of scope of practice crosses disciplinary boundaries. It is not accurate to compare this expansion of scope of practice to permitting other health professionals, such as dentists and nurses, to prescribe as the training of these other allied health professionals is already premedical and medical in nature. In contrast, the training of psychologists is not related to the practice of medicine. Therefore, this bill proposes a radical reduction of required medical training in order to practice medicine in Hawaii. Many psychologists believe this bill is contrary to the profession's ethic of "do no harm".

Reasons for Opposition involve Risk to the Consumer

- Since 1996, bills similar to this one have been rejected at least 193 times in 26 states owing to substandard medical training (see 2016 map attached)
- Training for a doctorate in clinical psychology does not include pre-medical or medical training. Therefore, as stated above, comparison to expansion of

- scope of practice for dentists and nurses is erroneous because the training of these other professionals is already medical in nature.
- There is virtually no evidence that reducing medical training to about 10% of that required for physicians and about 20% of that required for advanced practice nurses (advanced nurse practitioners) will protect the consumer. This bill suggests there is solid evidence that licensing requirements for physicians and nurses is extremely excessive. Yet no such evidence exists and no bills to reduce the training required for physicians and nurses are being entertained.
- 89.2% of about 1000 members of the psychological Association for Behavioral and Cognitive Therapies (ABCT) argue the medical training for psychologists to prescribe should be equivalent to other non-physician prescribers (*the Behavior Therapist, September 2014*). A survey of Illinois psychologist yielded similar findings (78.6%) (Baird, K. A. (2007). A survey of clinical psychologists in Illinois regarding prescription privileges. *Professional Psychology: Research and Practice, 38,* 196-202. doi:10/1037/0735-7028.38.2.196).
- Only 5.8% endorsed the effectiveness of online medical training, which is permitted in this bill (ABCT survey)
- Only 10.9% would refer a patient to a prescribing psychologist whose medical training is what is required in this bill (ABCT survey).
- 88.7% agreed that there should be a moratorium on bills like this one until
 there is objective evidence that the training involved protects the consumer
 (ABCT survey).
- The impact of prescribing privileges in New Mexico and Louisiana should be objectively evaluated for consumer safety before this experiment is repeated in Hawaii. Consumer safety outcome in the military is difficult to evaluate owing to the Feres Doctrine (barring lawsuits involving injuries to members of the armed forces) and the small number of prescribing psychologists (e.g., 2 in the Navy and 4 in the Air Force).
- Proponents claim that the lack of a reported death or serious harm by
 prescribing psychologists somehow provides evidence of safety. It does not.
 It only provides evidence that any harm done by these psychologists was not
 identified and reported by the psychologists themselves or their patients. A
 lack of evidence about safety does not constitute evidence for safety.
- There have been malpractice lawsuits filed against prescribing psychologists in New Mexico and Louisiana, so some problems in their practice have been asserted.

- Given proponents spent over \$500,000 to pass a prescribing bill in Louisiana alone speaks to the availability of funds to conduct such a consumer safety study for the amount of medical training required in this bill.
- The choice by the APA to not conduct a consumer safety outcome study suggests a lack of concern about consumer safety. There has been erosion in the ethics of the APA in the past decades. The ethics of the APA has changed from professional ethics designed to protect the consumer to guild ethics, designed to increase the income of psychologists regardless of the impact upon the consumer (http://kspope.com/PsychologyEthics.php#contentarea).
- Evidence of this erosion of ethics is apparent in the disregard for consumer safety in prescribing and in other areas, such as the APA's explicit support of doing harm by endorsing psychologists to conduct torture and the APA's admitted deception of the membership by presenting voluntary contributions as mandatory.

The State of Illinois has set the standard for prescription privileges for psychologists

- Illinois Model for psychologists prescribing is not controversial
- In 2014, the State of Illinois enacted a law to permit psychologists to prescribe some psychotropic medications (e.g., excluding narcotics and benzodiazepines) to a limited population (excluding youth, the elderly, pregnant women, the physically ill, and those with developmental disabilities).
 http://ilga.gov/legislation/ilcs/ilcs3.asp?ActID=1294&ChapAct=225%26nbsp%3BILCS%26nbsp%3B15%2F&ChapterID=24&ChapterName=PROFESSIONS+AND+OCCUPATIONS&ActName=Clinical+Psychologist+Licensing+Act%2E
- The training requirement is similar to what is required of Physician Assistants, including undergraduate pre-medical training. This training includes 7 undergraduate and 20 graduate courses along with a 14-month practicum in multiple medical rotations.
- The Illinois Psychological Association and Nursing and Medical associations supported the Illinois law, as it requires the same medical training as other non-physician prescribers. Psychologists Opposed to Prescription Privileges for Psychologists (POPPP) does

not oppose the Illinois Model because of the standard medical training required.

Solutions to access to psychoactive drugs while protecting the consumer

- 1. Collaboration between psychologists and physicians.
- 2. Completion of medical or nursing school by psychologists. Encouraging medical and nursing schools to offer executive track programs for psychologists and social workers.
- 3. Use of Tele-psychiatry, which is promoted by the Department of Veterans Affairs and the U.S. Bureau of Prisons.
- 4. Modify this bill to meet the required training and scope of practice limitations in the Illinois law enabling psychologists to prescribe.
- 5. Encouraging all professionals to serve rural areas and those in poverty. The prescribing laws in New Mexico and Louisiana did not result in psychologists moving their practices to rural areas as they had declared would happen (see attached chart; Source: Prof. T. Tompkins, 2010; used with permission; no prescribing psychologists in Guam identified despite enabling legislation in 1999).

Thank you for your kind consideration of this opinion.

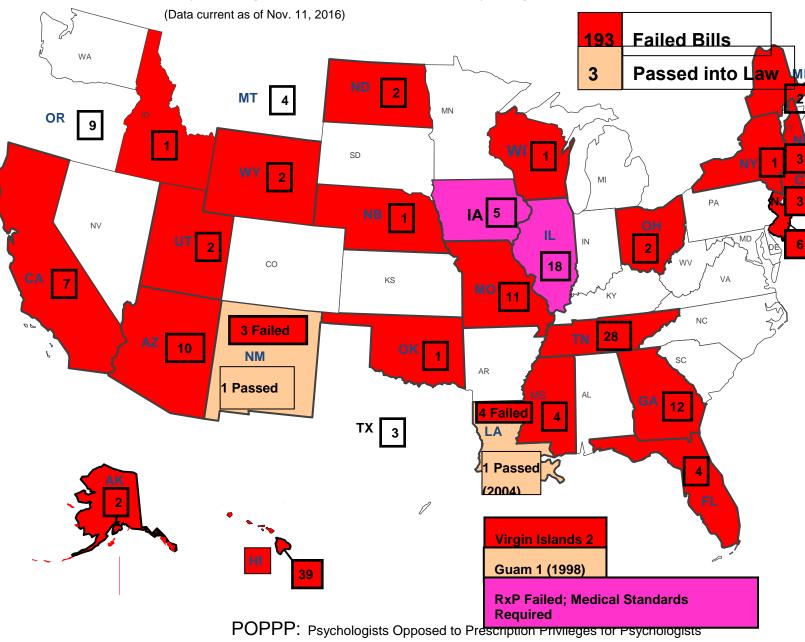
Respectfully,

Elaine M. Heiby, Ph.D.

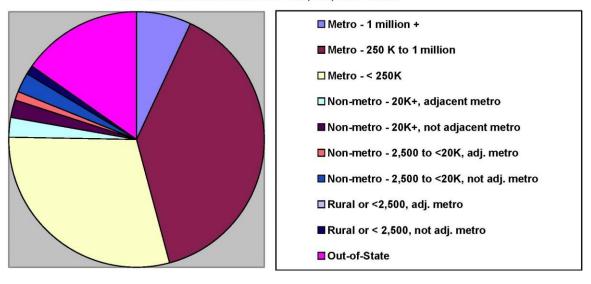
Psychologist (HI license 242)

Professor Emerita of Psychology, UH-Manoa

Psychologist Prescriptive Authority Legislative Bills 1995-2016



Combined Distribution of Psychologists Authorized to Prescribe Medications in NM, LA, and Guam





IQBAL "IKE" AHMED, M.D.

2861 KALAWAO STREET HONOLULU, HI 96822 TELEPHONE: (808) 554-4457 EMAIL: ahmedi96822@gmail.com

TO: OR House Health Committee (HLT)

DATE: Feb. 4, 2019

SB819 RELATING TO PSYCHOLOGISTS PRESCRIBING

POSITION: OPPOSE

I am writing to you as not only a practicing psychiatrist of 40 years. I have been a professor of psychiatry in 4 major medical schools. I am also a consultant, teacher and researcher in psychopharmacology.

My testimony is submitted in opposition to **HB1566**, relating to psychologists prescribing. I am opposed to this measure because:

- The proposal does not provide for adequate level of psychopharmacologic education and training to allow safe and effective treatment of 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.
- My concern is that in trying to address the access issue, our most vulnerable citizens living in rural areas of Hawaii with mental illness are unnecessarily being 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 in the business of exposing the people to unnecessary harm?
- Another issue that has been raised by the proponents of the bill is that suicides could be prevented if psychologists could prescribe. There is very little data that medications may prevent suicides. 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. Crisis intervention and psychotherapy are often more effective than medications in preventing suicide. In addition, many of the more common psychiatric disorders such as depression, anxiety disorders, post-traumatic disorders, and ADHD respond well to psychotherapies and other behavioral interventions, often better than medications. Psychologists are well qualified to provide these services.
- 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 (CBT), psychosocial rehabilitation programs, and recovery programs. Therapies such as CBT are just as effective as medications for most anxiety disorders and depression, without the associated side-effects of medications. Ultimately what we need is more access to good mental health care in rural areas, not more prescribers of medications

- Mental health consumers deserve to receive the same quality healthcare as all others.
- The John A. Burns School of Medicine, the Hawaii Psychiatric Medical Association and the Department of Health are all working to reduce system barriers mental health services and helping to improve access to quality health care to all mental health consumers. These approaches have evidence of providing increasing access to both therapy and medication treatments.
- Hawaii is ramping up access improvement 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 HOLD **HB1566** in committee.

Iqbal "Ike" Ahmed, M.D.



HB-1566 Submitted on: 2/5/2019 3:29:30 AM

Testimony for HLT on 2/5/2019 9:45:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Thea Moran	Individual	Oppose	No

Comments:

kobayashi1 - Melvia

From: dr.dlogan@gmail.com

Sent: Monday, February 4, 2019 5:48 PM

To: **HLTtestimony**

Subject: Testimony in SUPPORT OF HB1566

Diane Logan PO Box 5488

Kailua Kona, HI 96745-5488



February 4, 2019

John M. Mizuno Chair, House Committee on Health

Dear John Mizuno:

HOUSE OF REPRESENTATIVES THE THIRTIETH LEGISLATURE **REGULAR SESSION OF 2019**

To: COMMITTEE ON HEALTH Rep. John M. Mizuno, Chair Rep. Bertrand Kobayashi, Vice Chair

HEARING: Tuesday, February 5, 2019, 9:45AM, Room 329

RE: Testimony in SUPPORT of HB 1566

RELATING TO PRESCRIPTIVE AUTHORITY FOR CERTAIN CLINICAL PSYCHOLOGISTS

Our communities are suffering because of the lack of access to comprehensive mental health care. Some of our most vulnerable citizens are unable to obtain the care needed to live healthy and functional lives.

Often times, this leads to serious consequences such as drug overdose, suicide, and homelessness. The homelessness issue is a concern on every island and Psychologists are ready and willing to help. We 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 along side of our colleagues and community partners.

Prescriptive Authority for specially trained advanced practice Psychologists is a safe and already utilized option in five other states, in Federally Qualified Health Centers, on Indian Reservations and in the military. More and more, prescriptive authority is being authorized by states for specially trained advance practice psychologists to use as a tool in providing comprehensive, and integrative mental health care.

HB1566 will provide the foundation to explore the suitability of Prescriptive Authority for advanced trained Psychologists to be able to support psychotherapy with psychopharmacological support, and I am in full support of this effort.

Prescribing Psychologists have been successfully prescribing since the 1990s in the US military, the Public Health service, the Indian Health Service, Louisiana, New Mexico, Guam, and most recently have the opportunity to do so in Illinois, Iowa, and Idaho.

Please vote YES on HB1566 to allow greater access to care for those most in need.

Sincerely,

Dr. Diane Logan 8087855443

kobayashi1 - Melvia

From: drmarieterry@gmail.com

Sent: Monday, February 4, 2019 9:33 PM

To: HLTtestimony

Subject: Testimony in SUPPORT OF HB1566

Marie Terry-Bivens 2975 Haleko Rd, Suite 307 Lihue, HI 96766-1366



February 5, 2019

John M. Mizuno Chair, House Committee on Health

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Please vote YES on HB1566 to allow greater access to care for those most in need.

Sincerely,

Marie Terry-Bivens, Psy.D. 8083327190



<u>HB-1566</u> Submitted on: 2/5/2019 8:06:44 AM

Testimony for HLT on 2/5/2019 9:45:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Melodie Aduja	O`ahu County Committee on Legislative Priorities of the Democratic Party of Hawai`i	Support	No

Comments:



HB-1566

Submitted on: 2/5/2019 8:19:30 AM

Testimony for HLT on 2/5/2019 9:45:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Purvi Parikh	Individual	Oppose	No

Comments:

Dear Hon Representative,

I am an internal medicine physician with ties to Honolulu, Hawaii. I am highly concerned about this bill in Hawaii which will allow psychologists, people with no medical training, to prescribe medications. This is deplorable and takes advantage of our very vulnerable mental health population. As someone who consults both psychology and psychiatry, each has their place and plays an important role in patient care. However, when I consult my psychiatry colleagues, I am seeking an expert opinion on medication management. My patients often have complex medical diagnoses and are on multiple medications that may interactions with medications that psychiatrists prescribe. Psychologists are simply ill prepared for prescribing and could not possibly be safe prescribers unless they also completed 4 years of medical school, a 1 year general medicine internship and 3 years of psychiatry residency. I hope you'll consider protecting our patients as top priority.

Please vote NO on HB 1566

I have had patients die as a result of drug drug interactions from psych medications prescribed by practitioners without training

Purvi Parikh MD