DAVID Y. IGE GOVERNOR OF HAWAII



BRUCE S. ANDERSON, PHD DIRECTOR OF HEALTH

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

Testimony in SUPPORT of SB2277 RELATING TO ADOLESCENT MENTAL HEALTH CARE

SENATOR ROSALYN H. BAKER, CHAIR SENATE COMMITTEE ON COMMERCE, CONSUMER PROTECTION, AND HEALTH Hearing Date: February 7, 2020, 8:30 AM Room Number: 229

1 **Department Position:** The Department of Health strongly **SUPPORTS** this bill which can

2 increase access of mental health treatment and services for youth.

3 Department Testimony: The subject matter of this measure falls within the scope of the
4 Department's Behavioral Health Administration (BHA) whose statutory mandate is to assure a
5 comprehensive statewide behavioral health care system by leveraging and coordinating public,
6 private and community resources. Through the BHA, the Department is committed to carrying
7 out this mandate by reducing silos, ensuring behavioral health care is readily accessible, and
8 person centered. The BHA's Child and Adolescent Mental Health Division (CAMHD) provides
9 the following testimony on behalf of the Department.

10 This bill amends the existing Hawai`i statute that allows youth 14 years and older to consent to 11 their own mental health treatment. It broadens the types of mental health service providers who 12 can work with youth without parental consent to include therapists-in-training who are 13 supervised by a licensed provider. Such trainees provide most of the no- or low-cost counseling 14 services available to youth in Hawai`i. As required in the existing statute, neither youth nor their 15 parents or legal guardians may be charged for out-of-pocket expenses when youth seek treatment 16 on their own.

- 17 This bill also provides a mechanism for ensuring parents or guardians are not informed by their
- 18 insurance company about youth treatment and services provided without their consent,
- 19 knowledge or participation, when appropriate. The bill permits confidentiality for minor-initiated

mental health services and is consistent with the federal Health Insurance Portability & 1 2 Accountability Act (HIPAA) and Hawaii State's Harmonization Law. The Harmonization Act of 2012, HRS § 323B-3 (a), "...deems that any State covered entity or business associate who 3 uses and discloses individually identifiable health information following HIPAA subpart E, will 4 be in compliance with all State laws regarding use, disclosure, or confidentiality of such 5 6 information." As such, the provision in this bill requiring confidentiality of unemancipated minor-initiated mental health treatment is consistent with 45 CFR § 164.502(g)(3)(ii)(B) and, 7 8 therefore, with Harmonization, "...to the extent, prohibited by an applicable provision of State 9 law or other law... a covered entity may not disclose or provide access... to protected health information of an unemancipated minor to a parent, guardian, or other person acting in loco 10 parentis...". 11

Offered Amendments: This bill is a revision of the 2019 SB768 "Adolescent Mental Health
Services" to address concerns over non-disclosure, and is a product of the Act 13, SLH 2018
Task Force.

15 **Fiscal Implications:** None.

16 Thank you for the opportunity to testify on this bill.



Hawai'i Psychological Association

For a Healthy Hawai'i

P.O. Box 833 Honolulu, HI 96808

www.hawaiipsychology.org

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

Testimony IN STRONG SUPPORT of SB2277 RELATING TO ADOLESCENT MENTAL HEALTH CARE

COMMITTEE ON COMMERCE, CONSUMER PROTECTION, AND HEALTH Senator Rosalyn H. Baker, Chair Senator Stanley Chang, Vice Chair

DATE: Friday, February 7, 2020 TIME: 8:30 a.m. PLACE: Conference Room 229 State Capitol 415 South Beretania Street

The Hawaii Psychological Association (HPA) strongly supports SB2277 because it is consistent with our interest in ensuring access to quality mental health services to the diverse people of Hawai'i. If passed, this bill would help increase the capacity of our public and private mental health systems to provide mental health services for adolescents who are seeking counseling, but who do not want to obtain permission from a parent or do not want to disclose their reasons for seeking help to a parent.

When the original bill changing the age of consent for mental health services to 14 was passed by the legislature in the 2016 session, it was a helpful step forward in ensuring that youth who are suffering emotionally can get help. However, the current statute includes two potential barriers to seeking this help which HB2043 is designed to address.

First, the current statute applies only to services provided by licensed mental health professionals. As you may be aware, most of the readily available low- or no-cost services in Hawaii are provided – not by licensed professionals – but by unlicensed professionals who are in the process of meeting all the requirements for full licensure under the supervision of a licensed professional. This includes interns, practicum students, psychiatric residents, and newer graduates who have not completed all the requisite hours of experience and/or passed the examination necessary for licensure. In general, licensure as a mental health professional of any kind in Hawaii requires at least a year of full-time supervised practice after graduating with the relevant degree. One purpose of this bill is to authorize these mental health professionals working under the supervision of a fully licensed mental health professional to provide mental health treatment or counseling services to minors without parental consent - when this is clinically indicated.

Secondly, we are also in strong support of this bill's intention to ensure minors can access counseling and mental health services without their parents' knowledge by clarifying the requirement for health insurance plans when adolescents choose to consent to their own mental health services. This bill prohibits health plans from disclosing to a policy holder or other covered person any payment information for mental health services that are provided upon the consent of a minor according to §577-29, HRS. This bill further specifies that the provider shall help the minor inform the plan when the youth wants their information withheld from the parents or legal guardian. It maintains the provisions of the current statute that minors and their guardians are not responsible for out-of-pocket payments for minor-initiated mental health services.

The suppression of the explanation of benefits (EOB) by the insurance plan is a standard practice where minor consent laws exist. If such a suppression were not required, the minor's privacy would not be retained, resulting in a decrease in their access to confidential mental health services. Health plans are required to have standard operating practices to suppress the EOB in circumstances where a consenting minor is receiving mental health services. **HPA members stand ready to help educate our colleagues and other mental health providers about their responsibilities both to assess whether there is a need to keep a youth's treatment confidential from parents and to help minors request confidentiality from their health plan.**

This bill is a product of a task force led by the Department of Health (DOH), Child and Adolescent Mental Health Division (CAMHD) as mandated by Act 13, SLH 2018 in which HPA was a participant. The task force focused primarily on questions regarding counseling practices with LGBTQ youth. These youth often feel alienated from their parents and other family members or fear revealing their struggles around their sexual orientation and/or gender identity to their parents. The ability to find a counselor without having to involve a parent can be especially crucial for these youth who are at elevated risk of serious mental health difficulties and suicide. In addition, some youth are reluctant to disclose their concerns to their parents for a wide variety of other reasons, such as undisclosed sexual abuse, substance abuse problems, and situations of high family conflict.

Thank you for the opportunity to provide input into this important bill.

Sincerely,

Julie Takishima-Lacasa, Ph.D., President Chair, Legislative Action Committee Hawai'i Psychological Association



Friday, February 7, 2020

Senate Bill 2277 Testifying in Support

Aloha Chair Baker, Vice Chair Chang, and Members of the Committee Commerce, Consumer Protection, and Health,

The Democratic Part of Hawaii (The Party) **stands in support** of SB2277. The bill increasing access for minors to receive behavioral healthcare services by seeing professionals who are in the final stages of receiving their licensure and currently receiving clinical supervision is a necessary step.

Around the world it is standard practice that once a behavioral health professional has completed most of their schooling and is in their practicum phase, they begin seeing patients under the supervision of a licensed professional. Adults already see these professionals, and it is good and necessary next step to allow minors the same rights.

There is shortage of licensed behavioral health professionals in Hawaii, specifically on neighbor islands.

"New data from the University of Hawaii reveals a health system in crisis. In 2017, Hawaii was short more than 750 physicians across the medical field, according to University of Hawaii professor Kelley Withy, who conducts an annual workforce survey. This calculation accounts for differing needs on neighbor islands and the unique demand for medical specialties like psychiatry.

Experts say filling the void is practically impossible, as it would require that the state increase its physician workforce by about 25 percent. Luring new doctors to Hawaii is complicated by myriad factors, not the least of which is the state's high cost of living coupled with its relatively low rates for insurance reimbursement.

When it comes to psychiatrists, the UH data reveals a 10 percent statewide shortage. The gravest scarcity is on Kauai and Hawaii islands, which are tied with a whopping 33 percent shortage."

For these reasons we urge to vote favorably on this bill and expand treatment options for minors seeking help with behavioral health challenges.

Mahalo for the opportunity to testify,

Josh Frost Co-Chair, Legislation Committee Democratic Party of Hawai'i

Zahava Zaidoff Co-Chair, Legislation Committee Democratic Party of Hawai'i

https://www.civilbeat.org/2018/09/hawaiis-mental-health-care-crisis/

HAWAII YOUTH SERVICES NETWORK

677 Ala Moana Boulevard, Suite 904 Honolulu, Hawaii 96813 Phone: (808) 489-9549

Web site: <u>http://www.hysn.org</u> E-mail: <u>info@hysn.org</u>

Rick Collins, President Judith F. Clark, Executive Director

Bay Clinic

Big Brothers Big Sisters of Hawaii **Big Island Substance Abuse** Council **Bobby Benson Center** Child and Family Service Coalition for a Drug Free Hawaii Collins Consulting, LLC Domestic Violence Action Center EPIC, Inc. Family Programs Hawaii Family Support Hawaii Friends of the Children of West Hawaii Hale Kipa, Inc. Hale 'Opio Kauai, Inc. Hawaii Children's Action Network Hawaii Health & Harm Reduction Center Hawaii Student Television Ho`ola Na Pua Kahi Mohala Kokua Kalihi Valley Kokua Ohana Aloha (KOA) Maui Youth and Family Services Na Pu'uwai Molokai Native Hawaiian Health Care Systems P.A.R.E.N.T.S., Inc. Parents and Children Together (PACT) PHOCUSED PFLAG - Kona Big Island Planned Parenthood of the Great Northwest and Hawaiian Islands **Residential Youth Services** & Empowerment (RYSE) Salvation Army Family Intervention Services Sex Abuse Treatment Center Susannah Wesley Community Center The Catalyst Group

January 31, 2020

To: Senator Roslyn Baker And members of the Committee on Consumer Protection and Health

Testimony in Support of SB 2277 Related to Adolescent Mental Health Care

Hawaii Youth Services Network, a statewide coalition of youth-serving organizations, supports SB 2277 Relating to Adolescent Mental Health Care.

Youth aged 14 and older may consent for mental health services in emergency situations or when the involvement of a parent or guardian would not be in the child's best interests.

When the law was originally passed, it did not consider the involvement of an unlicensed mental health professional who is working under the supervision of a licensed professional. This occurs, for example, when a recent graduate of a counseling program is accruing the hours needed to qualify for licensure. This bill will clarify that the right to consent for mental health services includes such mental health workers.

Thank you for this opportunity to testify.

Sincerely,

Juotitto F. Clark

Judith F. Clark, MPH Executive Director





Helping Hawai'i Live Well

To: Senator Rosalyn Baker, Chair, Senator Stanley Chang, Vice Chair, Members, Senate Committee on Commerce, Consumer Protection and Health

From: Trisha Kajimura, Executive Director

Re: TESTIMONY IN SUPPORT OF SB 2277 RELATING TO ADOLESCENT MENTAL HEALTH CARE

Hearing: February 7, 2020, 9:30 am, CR 229

Thank you for hearing **Senate Bill 2277**, which amends Section 577-29 of the Hawaii Revised Statutes to improve minors' access to mental health care by:

- 1. allowing unlicensed mental health professionals working under supervision of a licensed mental health professional to provide services in cases where minors consent to their own services;
- 2. requiring the treating mental health professional to assist the minor with completing a non-disclosure notification form to send entities, when appropriate; and
- 3. requiring a covered entity, upon receiving a completed notification form, to maintain confidentiality of minor-initiated mental health services.

Mental Health America of Hawaii (MHAH) is a 501(c)3 organization founded in Hawai'i 78 years ago, that serves the community by promoting mental health through advocacy, education and service. We support youth mental health in Hawaii through our Youth Suicide and Bullying Prevention Program and through our advocacy work. In 2016 we provided testimony in support of SB 2886 SD2 HD2 CD1 which became Act 181, allowing minors fourteen years or older to consent to their own mental health treatment. Sometimes youth need to talk to a mental health professional but may not feel safe or comfortable asking their parent for consent for a variety of reasons, which may include family violence, sexual abuse, or substance abuse.

Implementation of Act 181 demonstrated the need for this bill to fulfill Act 181's intention, which is for minors that are unable to disclose their need for mental health services to their parents to be able to receive care without disclosure. Unfortunately, it is sometimes critical to their safety that minors are able to receive treatment without their parent or legal guardian finding out. In those cases, it is important that they do not find out through their health insurance company.

In mental health, access to care is everything and we humbly ask you to authorize this change to increase access for youth in these circumstances. Thank you for considering my **testimony in support of SB 2277**. Please contact me at <u>trisha.kajimura@mentalhealthhawaii.org</u> or (808)521-1846 if you have any questions.





February 7, 2020

The Honorable Rosalyn H. Baker, Chair The Honorable Stanley Chang, Vice Chair Senate Committee on Commerce, Consumer Protection, and Health

Re: SB 2277 – Relating to Adolescent Mental Health Care

Dear Chair Baker, Vice Chair Chang, and Committee Members:

The Hawaii Medical Service Association (HMSA) appreciates the opportunity to testify on SB 2277, which allows an unlicensed mental health professional, working under the supervision of a licensed mental health professional, to provide mental health treatments or counseling services to minors without parental or legal guardian consent, knowledge, or participation. It also requires a mental health professional to assist a minor with completing a non-disclosure notification form to send to covered entities, when appropriate. And it requires a covered entity, upon receiving a completed notification form, to maintain confidentiality of minor-initiated mental health treatment or counseling services.

HMSA appreciates the intent of this measure and would like to submit **Comments**. We do not believe it is necessary to require an additional process for maintaining confidentiality. All covered entities, including health care providers and insurance plans, are bound by the Health Insurance Portability and Accountability Act of 1996 (HIPAA) which provides for the privacy of patients. As such, HMSA has an existing process in place for protecting the privacy of patients that adheres to federal regulations and is in line with the intent of this measure. An additional state privacy requirement goes against the intent of Hawaii's 2012 HIPAA Harmonization Law, which consolidated Hawaii's approximately 50 separate privacy laws to conform with HIPAA.

We look forward to working with stakeholders on this measure.

Thank you for allowing us to provide these comments on SB 2277.

Sincerely,

fono Ce

Pono Chong Vice President, Government Relations

<u>SB-2277</u> Submitted on: 2/1/2020 9:39:21 AM Testimony for CPH on 2/7/2020 8:30:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Lynn Robinson- Onderko	Individual	Support	No

Comments:

<u>SB-2277</u> Submitted on: 1/31/2020 8:02:11 AM Testimony for CPH on 2/7/2020 8:30:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
arielle	Individual	Oppose	No

Comments:

As a parent, I am **strongly opposed** to this proposed piece of legislation. I have been responsible and caring for my child since I first became pregnant. I understand the full scope of my child's history, and I would not at all appreciate it if my child was professionally counseled without my knowledge. On top of that, I absolutely would not want my child to receive counseling that I am not aware of and by someone who is not licensed and has not completed the many practicum hours (experience) required to obtain a license.

<u>SB-2277</u> Submitted on: 2/1/2020 11:14:07 PM Testimony for CPH on 2/7/2020 8:30:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Steffanie Humphrey	Individual	Support	No

Comments:

<u>SB-2277</u> Submitted on: 2/3/2020 11:50:34 PM Testimony for CPH on 2/7/2020 8:30:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Jo-Ann M Adams	Individual	Support	No

Comments:

This bill was a recommendation from the task force banning conversion therapy and should be implemented.

<u>SB-2277</u> Submitted on: 2/3/2020 8:43:44 PM Testimony for CPH on 2/7/2020 8:30:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Mike Golojuch	Individual	Support	No

Comments:

I support SB2277. Please pass this bill.

Mike Golojuch, Lt Col, USAF (Ret)

Secretary, Rainbow Family 808

<u>SB-2277</u> Submitted on: 2/1/2020 1:54:57 PM Testimony for CPH on 2/7/2020 8:30:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Richard Onderko	Individual	Support	No

Comments:

I support SB2277. Mahalo

SENATOR ROSALYN H. BAKER SENATE COMMITTEE ON COMMERCE, CONSUMER PROTECTION, & HEALTH

SB2277

Hearing Date: Friday, February 7, 2020 Time: 9:30 AM Room number: 229

IN SUPPORT

- 1. My name is Carah Metcalf, and I am a graduate student at Myron B. Thompson School of Social Work, here at the University of Hawaii at Manoa.
- 2. I am testifying in favor of SB2277 Relating to Adolescent Mental Health Care.

In being a Social Work student, mental health is of the highest importance. One of the leading specialization for social workers is in Mental Health, because it is a growing population. Through my own personal experience, growing up in an emotionally, psychologically, and religiously abusive household, I needed access to mental health services. However due to the environment I grew up in, seeking help was not an option, because I didn't have permission. If we had this bill put into law when I was growing up I think it would have helped me reach a healthier state sooner and ultimately salvaging the harm and relationships that I deal with to this very day. Instead I had to lose everything in my life, and cut myself off in order to prioritize my health. We don't know every individual's story, but take my story as an example that there are people out there who need help they might just be in a place where they can't access it. We should be willing to provide that access to meet the needs of those who are facing mental illness and wanting help.

In conclusion, open the door to adolescents who need help to have the privacy to receive services and ultimately become healthier and more stable. I am in support of this bill, because I believe it will better the lives of youth here in Hawaii.

Carah Metcalf

Myron B. Thompson School of Social Work at the University of Hawaii at Manoa Carahm@hawaii.edu



THE FIRST CAUCUS OF THE DEMOCRATIC PARTY OF HAWAI'I

February 3, 2020

Senate's Committee on Commerce, Consumer Protection, and Health Hawaii State Capitol 415 South Beretania Street, Room 229 Honolulu, HI 96813

Hearing: Friday, February 7, 2019 – 9:30 a.m.

RE: STRONG SUPPORT for Senate Bill 2277

Aloha Chair Baker, Vice Chair Chang and fellow committee members,

I am writing in STRONG SUPPORT for Senate Bill 2277 Senate Draft 1 on behalf of the LGBT Caucus of the Democratic Party of Hawai'i. SB 2277 allows an unlicensed mental health professional, working under the supervision of a licensed mental health professional, to provide mental health treatments or counseling services to minors without parental or legal guardian consent, knowledge, or participation. Requires a mental health professional to assist a minor with completing a non-disclosure notification form to send to covered entities, when appropriate. Requires a covered entity, upon receiving a completed notification form, to maintain confidentiality of minor-initiated mental health treatment or counseling services.

SB 2277 stems out of the taskforce that was formed as requirement of Act 13, 2018 which ban conversion therapy for minors. One of the concerns that was raised during the hearings was that by banning conversion therapy LGBTQIA youth would not seek therapy. I am happy to respond, <u>as shown in the report</u>, banning conversion therapy will not stop LGBTQIA youth from seeking therapy.

What the taskforce did find is that there is barrier for ALL minors from seeking mental health care. That barrier can be the minor's parent or guardian they may either not support mental health care or the minor does not want them to know why they are seeking mental health care. SB 768 will help remove that barrier from all minors seeking mental health care.

The LGBT Caucus of the DPH asks that you support this very important bill as it will help ensure that ALL youth will have access to mental health care.

Mahalo nui loa,

Michael Golojuch, Jr. Chair

<u>SB-2277</u> Submitted on: 2/4/2020 9:08:40 AM Testimony for CPH on 2/7/2020 8:30:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Eileen McKee	Individual	Support	No

Comments:

I stand in support of Senate Bill 2277.

Eileen McKee

279Alaume Street

Kihei, 96753

<u>SB-2277</u> Submitted on: 2/4/2020 11:38:13 AM Testimony for CPH on 2/7/2020 8:30:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Sherry Alu Campagna	Individual	Support	No

Comments:

<u>SB-2277</u> Submitted on: 2/4/2020 4:22:32 PM Testimony for CPH on 2/7/2020 8:30:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Andrea Quinn	Individual	Support	No

Comments:

Dear Honorable Committee Members:

Please support SB2277, which would help alleviate the shortage of mental health care professionals.

Thank you for the opportunity to present my testimony.

Andrea Quinn

Kihei

<u>SB-2277</u> Submitted on: 2/5/2020 9:14:59 AM Testimony for CPH on 2/7/2020 8:30:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Thaddeus Pham	Individual	Support	No

Comments:

As a member of the LGBTQ+ community and a public health professional, I am writing in STRONG SUPPORT for Senate Bill 2277.

SB 2277 stems out of the taskforce that was formed as requirement of Act 13, 2018 which banned conversion therapy for minors. The taskforce found that there is a barrier for ALL minors seeking mental health care, which could include: 1. lack of parent/guardian support for mental health care, and 2. minor's fear of disclosure to parent/guardian. SB 2277 will help remove that barrier for appropriate and necessary mental health care for all youth, especially those who identify as LGBTQ+.

Data from the Dept. of Health indicates that local students who identify as LGB or T are less likely to seek medical care and more likely to need support around mental health issues including suicidality and substance use. As such, this bill will not only provide access to mental health services, but also lead to broader positive health outcomes.

Thank you for your time and consideration,

Thaddeus Pham

<u>SB-2277</u> Submitted on: 2/5/2020 10:02:26 AM Testimony for CPH on 2/7/2020 8:30:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Jen Jenkins	Individual	Support	No

Comments:

<u>SB-2277</u> Submitted on: 2/5/2020 10:30:45 PM Testimony for CPH on 2/7/2020 8:30:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Kerrie Villers	Individual	Oppose	No

Comments:

Chair, Vice Chair, and Members,

I strongly oppose this bill for a number of reasons.

1. Unless the parental rights have been removed by the state, or there is some reason for not disclosing (for the safety of the child in an abusive situation, wherein shortly thereafter, the child ought to be removed from the household), then the parent has the right to know what treatment their child is receiving. Even if the content of the conversation with the therapist is confidential, the parent should still know that their child has been counseled by someone. That is the reason the law currently mandates attempted notification. This bill tramples parental rights.

2. We know that minors are very impressionable and subtle suggestions or ideas from a counselor could have significant effects. An adult may consent to mental health treatment by someone practicing under the supervision of a licensed professional, but a minor should only be treated/counseled by a licensed professional. There is a level of competence required and safeguards in licensing that helps protect those who are seeking treatment, and our youth, deserve the protection that demonstrated knowledge and competence provides.

3. To attempt to completely hide the fact that a minor had mental health treatment from the parents is highly detrimental to the family unit and the parent's ability to know what is happening to their child. This unnecessarily further creates family barriers. Unless there is a reason to believe the minor would be harmed, notifying the parent of therapy helps open the doors of communication and informs the parent that there is an issue that needs to be looked into and worked on together as a family unit. Children don't exist in a vacuum. No parent is perfect, but we can safely believe that the vast majority desire good for their children and want to be more connected and informed, not less.

4. This bill is also harmful to the business practices of insurance companies who are expected to just absorb the cost of these sessions/treatments.

For these reasons, I strongly oppose SB 2277 and request that you vote to not move this bill forward. Thank you for your time.

Kerrie Villers

<u>SB-2277</u> Submitted on: 2/6/2020 6:35:39 AM Testimony for CPH on 2/7/2020 8:30:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Nancy Nino	Individual	Oppose	No

Comments:

I am strongly opposed to SB2277.

Counseling and therapy performed on minors WITHOUT the consent of the parents is outside of the purview of the government. While parents are not perfect, they are the primary caregivers and influencers of their children, and they need to be involved in such an important decision.

Furthermore, allowing unlicensed professionals to perform such treatment, regardless of whether they are supervised by a licensed professional or not, further complicates this proposal.

In any medical setting, whenever a trainee not yet licensed is brought into a case, the patient is asked permission to have this person involved. Teenagers do not have the life experience to fully understand the ramifications of working with an unlicensed professional are not equipped to make these decisions without the guidance of their parents.

Offering counseling is a good idea. Offering it without parental consent is not.

COMMITTEE ON COMMERCE, CONSUMER PROTECTION, AND HEALTH

Senator Rosalyn H. Baker, Chair

Senator Stanley Chang, Vice Chair

Friday, February 7, 2020, 8:30AM Conference Room 229

Re: Testimony in STRONG SUPPORT of SB2588

I am in strong support of SB2588, which permits psychologists to claim exemption from service as a juror.

Physicians in the state of Hawai'i are permitted exemption from jury duty under Section 612-6, Hawai'i Revised Statutes. Currently, practicing psychologists in the state of Hawai'i are not permitted exemption from jury duty.

Compelling practicing psychologists to serve on jury duty makes them inaccessible to both ongoing and new patients, limiting access to mental health care. Further limiting mental health care when we already have a shortage of available care contributes to homelessness, crime, reduced productivity, suicide, domestic violence, and diminished physical health.

SB2588 will establish parity between access to mental health care and access to medical/surgical care, which is in the best interest of the community and according to research, produces cost savings for the health care system.

I respectfully ask that you please support SB2588 for the health of all of Hawaii's people.

Thank you, AR

Anne-Mane Rohr Licensed Churcal Rychologist (808) 542-4131