

Testimony of the Hawaii Board of Psychology

**Before the
Senate Committee on Commerce and Consumer Protection
Thursday, March 24, 2022
9:30 a.m.
Via Videoconference**

On the following measure:

S.R. 149, REQUESTING THE DEPARTMENT OF COMMERCE AND CONSUMER AFFAIRS TO CONVENE A TASK FORCE TO PROVIDE RECOMMENDATIONS FOR A PILOT PROGRAM THAT GRANTS PRESCRIPTIVE AUTHORITY TO QUALIFIED PSYCHOLOGISTS IN THE COUNTIES OF KAUAI, MAUI, AND HAWAII

Chair Baker and Members of the Committee:

My name is Dr. Jill Oliveira Cabbab, and I am the Chairperson of the Hawaii Board of Psychology's (Board) Legislative Committee. I apologize for not being able to attend the hearing to present the Board's testimony. The Board appreciates the intent of this resolution and offers comments.

The purposes of this resolution are to request the Department of Commerce and Consumer Affairs to: (1) convene a task force to evaluate and provide recommendations to establish a pilot program that grants prescriptive authority to qualified psychologist applicants in the counties of Hawaii, Maui, and Kauai; and (2) with the assistance of the Board of Psychology, submit a report of its findings and recommendations, including any proposed legislation, to the Legislature no later than twenty days prior to the convening of the Regular Session of 2023.

The Board will review this resolution at its next publicly noticed meeting on April 1, 2022. In the meantime, the Board's Legislative Committee offers comments based on the Board's support of S.B. 131, Relating to Psychologists and S.B. 1295, Relating to Prescriptive Authority for Certain Clinical Psychologists, both of which were carried over to the 2022 Regular Session, but did not pass First Reading.

At its February 22, 2022 publicly noticed meeting, the Board reviewed S.B. 131 and S.B. 1295, and voted to support these measures because its fundamental intent to establish prescriptive authority for certain psychologists. The Board supports granting qualified psychologists' prescriptive authority where feasible, as this will help meet the demands for psychological services in rural areas by expanding access to psychiatric

medication support services in a safe manner. The Board also notes its previous comments in which it felt a pilot program was unnecessary, however, regardless of whether a pilot program is established, or the Board merely commences with authorizing prescriptive authority, it believes that it is prepared to establish regulations that will protect the consuming public.

Thank you for the opportunity to testify on this resolution.

OFFICE OF THE MAYOR

DEREK S.K. KAWAKAMI, MAYOR

MICHAEL A. DAHLIG, MANAGING DIRECTOR



Testimony of
Derek S.K Kawakami
Mayor, County of Kaua'i

Before the
Senate Committee on Commerce and Consumer Protection
March 24, 2022 at 9:30 a.m.
Room 229 and Via Videoconference

In consideration of
SCR 156 / SR 149
Requesting the Department of Commerce and Consumer Affairs to Convene a Task Force to Provide Recommendations for a Pilot Program that Grants Prescriptive Authority to Qualified Psychologists in the Counties of Kaua'i, Maui, and Hawai'i

Honorable Chair Baker, Honorable Vice Chair Chang, and Members of the Committee:

The County of Kaua'i is in **strong support** of SCR 156 and SR 149 which requests the Department of Commerce and Consumer Affairs to convene a task force to provide recommendations for a pilot program that grants prescriptive authority to qualified psychologists in the counties of Kaua'i, Maui, and Hawai'i.

The legislature finds from the December 2020 Hawai'i Physician Workforce Assessment Project there continues to be a significant shortage of doctors throughout our state and especially on our outer islands. Included in this shortage is a substantial deficiency of psychiatrists. With a lack of access to appropriate mental health treatment, the consequences are devastating and too often end with suicide.

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

The County of Kaua'i strongly supports the creation of a task force, with the assistance of the Board of Psychology, to evaluate and provide recommendations, including proposed legislation to establish a pilot program that grants prescriptive authority to qualified psychologist applicants to the outer islands.

Thank you for your consideration of this resolution and your continued support of the island of Kaua'i.

TESTIMONY ON BEHALF OF HAWAII PSYCHIATRIC MEDICAL ASSOCIATION

To: Chairs Rosalyn Baker, Vice Chair Stanley Chang and Members of the Committees

From: Dr. Denis Mee-Lee, Chair, HPMA Legislative Committee

Time: 9:30 a.m., March 24, 2022

Re: SCR 156/ SR 149

Position: **OPPOSE**

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

HPMA supports the legislature's efforts to address a significant shortage of primary care physicians, psychiatrists, and other health care professionals in the State; this shortage affects our patients, their families, and, by extension, the health care system of Hawaii. In addition, the ongoing COVID-19 public health emergency has highlighted the imperative for robust investments to address the nation's critical physician and psychiatric workforce shortage. Extensive medical training is the foundation upon which safe prescribing is built.¹

Still, HPMA and, historically, the Legislative Reference Bureau oppose psychologists prescribing.

First, the measure would be a redundant misuse of State funds. In 2007, the Hawaii State Legislature ordered the Legislative Reference Bureau (LRB) to study psychologists prescribing. As such the LRB found over 20 significant concerns regarding giving psychologists prescriptive authority. These findings urged that **patient safety should never be compromised and that adequate training as determined by medical doctors is necessary to protect the safety of our vulnerable patients**. The 76-page LRB study on prescriptive authority for psychologists found 21 major concerns, including inadequate training and no proof of safety. The LRB concluded:

"In determining whether to authorize prescriptive authority for clinical psychologists who practice in community health centers, legislators must be mindful of the significant differences in the classroom and clinical training of clinical psychologists and psychiatrists and the basic medical background of nonphysician health care prescribers. From a behavioral perspective, a clinical psychologist treats mental illness as a social scientist; a psychiatrist treats patients as a physician, from a medical model with additional special training in psychiatry. Although the need to increase access to mental health care in Hawaii is undeniable, particularly to residents who are medically underserved, patient safety must be the primary consideration."²

Safe practices require that medical doctors receive training in pharmacology, physiology, anatomy, chemistry, pathophysiology, and neuroscience. It is imperative to understand drug-drug interactions, the interplay of psychiatric diagnoses with medical comorbidities, and the effects of psychotropic medications on the human body to provide safe care. The 400-hour training psychologists receive in pharmacology cannot substitute the comprehensive knowledge, and skills physicians acquire through the tens of thousands of hours of clinical training and thousands of patients seen in a four-year psychiatry residency after four years of medical school. **The LRB recommended we encourage psychologists to pursue the same medical training as other professions with prescriptive authority, such as attending medical school or nurse practitioner school.** HPMA agrees.

There are safe and cost-effective alternatives to address the legislative intent of improving health care access in rural communities through the expansion of telepsychiatry and the Collaborative Care Model -- both reliable, proven, tested, and safe mental health care methods. In addition, the expansion of 9-8-8 crisis help line, particularly through Telehealth, enable greater neighbor island access.

Finally, allowing for prescriptive authority on neighbor islands and not O'ahu exacerbates health disparities and violates Federal Law, **28 U.S.C. 1714 - Protection against discrimination based on geographic location.**

Discrimination is making unjustified distinctions between people based on the groups, classes, or other categories to which they belong or are perceived to belong.³ People may be discriminated against based on [race](#), [gender](#), [age](#), [religion](#), or [sexual orientation](#), as well as geography. Discrimination especially occurs when individuals or groups are unfairly treated in a way that is worse than other people, based on their actual or perceived membership in certain groups or social categories.⁴ Current oversight for physicians falls under the Hawaii Medical Board, which operates across the State, while prescribing psychologists would be overseen by the Board of Psychology. This would create different levels of care on neighbor islands and could lead to complications in enforcement of regulation and safety standards to protect patients. This would mean that some patients would receive treatment from a person with minimal medical training simply because of where they live. These patients include elderly people, children, pregnant women, people with disabilities, and people with complex medical conditions.

In short, HPMA opposes **SCR 156 / SR 149** because both are illogical, redundant, misuse state funds, and violate Federal Law. Should the legislature support a task force, we respectfully ask that it include representatives from other prescribing medical professions, such as physicians, psychiatrists, APRNs, and a representative from the Board of Medicine.

Thank you for the opportunity to present this testimony opposing SCR 156 / SR 149. We welcome the opportunity to work with you to facilitate evidence-based, proven programs to ensure our most vulnerable patients in underserved communities receive safe and equitable care.

¹ www.saferprescribing.org.

² Prescriptive authority for psychologists: Issues and concerns, Report 2. 2007, Page 57, https://lrb.hawaii.gov/wp-content/uploads/2007_PrescriptiveAuthorityForPsychologists.pdf

³ *What drives discrimination and how do we stop it?*. www.amnesty.org. [Amnesty International](#)

⁴ *"discrimination, definition"*. *Cambridge Dictionaries Online*. Cambridge University. Retrieved March 29, 2013.

SR-149

Submitted on: 3/19/2022 7:19:18 PM

Testimony for CPN on 3/24/2022 9:30:00 AM

Submitted By	Organization	Testifier Position	Testify
Gerard Silva	Individual	Oppose	Written Testimony Only

Comments:

We have Enough problems with Drug over Doses with just Perscriptions from the Doctor and you want to Add more Over dose problems by adding someone else the picture. We have enough problems Now. Try fixing the Over Dose problem before you add more drugs out there!!