## A BILL FOR AN ACT

RELATING TO PSYCHOLOGISTS.

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

1 SECTION 1. The legislature finds that there is a 2 significant shortage of prescribing mental health care providers 3 available to serve the needs of the State's residents. As a 4 means of addressing this shortfall, access to quality, 5 comprehensive, and affordable health care can be facilitated and 6 enhanced by collaborative practice between licensed clinical 7 psychologists and medical doctors. Authorizing qualified 8 clinical psychologists with appropriate advanced training to 9 prescribe from a limited formulary of psychotropic medication 10 will especially benefit residents who live in rural or medically underserved communities, where mental health professionals with 11 12 prescriptive authority are in short supply.

13 The legislature further finds that the mental health needs 14 of the State continue to outpace present capacity. According to 15 the Annual Report on Findings from the Hawaii Physician 16 Workforce Assessment Project (December 2019), psychiatrist 17 shortages are highest in Hawaii and Maui counties. Hawaii

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county has the greatest shortage, at thirty-eight per cent, 1 2 followed by Maui county with a thirty-seven per cent shortage, and then Kauai county with a twenty-two per cent shortage. The 3 2019 report reflected a nine per cent shortage of psychiatrists 4 in the city and county of Honolulu; however, these calculations 5 6 do not factor in the additional systemic barriers related to 7 accessing care in urban areas, such as long wait times to see 8 psychiatrists, psychiatrists not taking new patients due to 9 being overbooked, or certain psychiatrists not accepting 10 medicaid or medicare insurance.

11 The lack of access to appropriate mental health treatment 12 has serious and irrevocable consequences for many Hawaii 13 residents. According to the department of health, of the ten 14 leading injury-related causes of death, death by suicide is the 15 number one cause among Hawaii residents. Studies have shown 16 that people who attempt or commit suicide have often received 17 inadequate or no mental health treatment due to a shortage of community mental health providers. While causes for suicide are 18 complex, the most commonly reported contributing factors are 19 20 mental health conditions that, when identified and treated, respond favorably to therapy and psychotropic medication. 21

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A 2016 Hawaii News Now article reported that sixty-one per
 cent of all people arrested on Oahu in 2015 suffered from
 serious mental illness or severe substance intoxication. This
 almost two-fold increase occurred in the period following
 substantial cuts to state-supported mental health services in
 2009.

7 According to the National Alliance on Mental Illness and the federal Substance Abuse and Mental Health Services 8 9 Administration, approximately thirty-two thousand adults in 10 Hawaii, representing more than three per cent of the population, 11 live with serious mental illness. The actual scope of need in 12 the State is even greater since this figure excludes individuals 13 with clinical diagnoses such as unipolar depression, anxiety 14 disorders, adjustment disorders, substance abuse, or post-15 traumatic stress disorder.

16 The legislature additionally finds that increasing the 17 number of prescribing mental health providers would be 18 beneficial to the State's homeless population. According to the 19 2019 Hawaii Statewide Point-In-Time Count, there are an 20 estimated 6,448 homeless persons in the State, with an estimated 1,681 of those persons meeting the definition of chronically

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1 homeless. According to the 2019 Kauai Homeless Point-In-Time 2 Count, there are an estimated four hundred forty-three homeless 3 persons on Kauai. Of those persons, a large number fall into four subpopulations that would likely benefit from increased 4 access to prescribing mental health providers, including eighty-5 four adults with a serious mental illness; one hundred twenty-6 7 nine adults with a substance use disorder; five adults with HIV/AIDS; and eleven adult survivors of domestic violence. 8

Clinical psychologists are licensed health professionals 9 10 with an average of seven years of post-baccalaureate study and three thousand hours of post-graduate supervised practice in the 11 12 diagnosis and treatment of mental illness. The American Psychological Association has developed a model curriculum for a 13 14 master's degree in psychopharmacology for the education and 15 training of prescribing psychologists. However, the current 16 allowable scope of clinical psychologists' practice in Hawaii 17 does not include prescribing medications. Currently, these 18 providers' patients must consult with and pay for another 19 provider to obtain psychotropic medication when it is indicated. 20 The legislature has previously authorized prescription 21 privileges for advanced practice registered nurses,



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optometrists, dentists, and naturopathic physicians. Licensed 1 clinical psychologists with specialized education and training 2 3 for prescriptive practice have been allowed to prescribe 4 psychotropic medications to active duty military personnel and 5 their families in federal facilities and the United States 6 Public Health Service for decades. In recent years, Idaho, 7 Iowa, Illinois, Louisiana, and New Mexico have adopted legislation authorizing prescriptive authority for advanced 8 9 trained psychologists. Many of these prescribing psychologists 10 have filled long-vacant public health positions or otherwise 11 serve predominantly indigent and rural patient populations. Independent evaluations of the federal Department of 12 13 Defense psychopharmacological demonstration project by the 14 Government Accountability Office and the American College of 15 Neuropsychopharmacology, as well as the experiences in other 16 jurisdictions, have shown that appropriately trained 17 psychologists can prescribe and administer medications safely 18 and effectively.

19 The purpose of this Act is to require the board of
20 psychology to grant prescriptive authority to certain
21 prescribing psychologists, licensed in the State before January

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1, 2024, and who meet specific education, training, and
 registration requirements.

3 SECTION 2. Chapter 465, Hawaii Revised Statutes, is
4 amended by adding a new part to be appropriately designated and
5 to read as follows:

6 "PART . PRESCRIBING PSYCHOLOGISTS
7 §465- Definitions. As used in this part, unless the
8 context otherwise requires:

9 "Advanced practice registered nurse with prescriptive
10 authority" means an advanced practice registered nurse, as
11 defined in section 457-2, with prescriptive authority granted
12 pursuant to section 457-8.6.

13 "Clinical experience" means a period of supervised clinical 14 training and practice in which clinical diagnoses and 15 interventions, which can be completed and supervised as part of 16 or subsequent to earning a post-doctoral master of science 17 degree in clinical psychopharmacology training, are learned.

18 "Controlled substance" has the same meaning as in19 section 329-1.

20 "Forensically encumbered" means a person who: has been21 detained by Hawaii courts for forensic examination or committed





1 to a psychiatric facility under the care and custody of the 2 director of health for appropriate placement by any court; has 3 been placed on conditional release or released on conditions by 4 a Hawaii court judge; or is involved in a case before the mental 5 health court or a jail diversion program.

6 "Narcotic drug" has the same meaning as in section 329-1.
7 "Opiate" has the same meaning as in section 329-1.

8 "Prescribing psychologist" means a clinical psychologist
9 who has undergone specialized training in clinical
10 psychopharmacology, passed a national proficiency examination in
11 psychopharmacology approved by the board, and been granted a

12 prescriptive authority privilege by the board.

13 "Prescription" means an order for a psychotropic medication 14 or any device or test directly related to the diagnosis and 15 treatment of mental and emotional disorders pursuant to the 16 practice of psychology.

17 "Prescriptive authority privilege" means the authority 18 granted by the board to prescribe and administer psychotropic 19 medication and other directly related procedures within the 20 scope of practice of psychology in accordance with rules adopted 21 by the board.



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"Primary care provider" means a physician or osteopathic
 physician licensed or exempt from licensure pursuant to
 section 453-2 or an advanced practice registered nurse with
 prescriptive authority.

5 "Psychotropic medication" means only those agents related 6 to the diagnosis and treatment of mental and emotional disorders 7 pursuant to the practice of psychology as defined in section 8 465-1, except drugs classified into schedule I, II, or III 9 pursuant to chapter 329; opiates; or narcotic drugs; provided 10 that psychotropic medication shall include stimulants for the 11 treatment of attention deficit hyperactivity disorder regardless of the stimulants' schedule classification. 12

"Serious mental illness" means bipolar I disorder, bipolar
II disorder, delusional disorder, major depressive disorder with
psychotic features, psychosis secondary to substance use,
schizophrenia, schizophreniform disorder, and schizoaffective
disorder, as defined by the most current version of the
Diagnostic and Statistical Manual of Mental Disorders.

19 §465- Administration. (a) The board shall prescribe
20 application forms and fees for application for and renewal of
21 prescriptive authority privilege pursuant to this part.

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(b) The board shall develop and implement procedures to
 review the education and training credentials of a psychologist
 applying for or renewing prescriptive authority privilege under
 this part, in accordance with current standards of professional
 practice.

6 (c) The board shall determine the exclusionary formulary7 for prescribing psychologists.

8 (d) The board shall have all other powers that may be9 necessary to carry out the purposes of this part.

10 §465- Prescriptive authority privilege; requirements.
11 Beginning on July 1, 2026, the board shall accept applications
12 for prescriptive authority privilege to qualified candidates.
13 Every applicant for prescriptive authority privilege shall
14 submit evidence satisfactory to the board, in a form and manner
15 prescribed by the board, that the applicant meets the following
16 requirements:

17 (1) The applicant possesses a current license pursuant to
18 section 465-7; was originally licensed in the State
19 before January 1, 2024; and practices in any county in
20 the State;



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The applicant successfully graduated with a 1 (2)post-doctoral master's degree in clinical 2 psychopharmacology from a regionally-accredited 3 institution with a clinical psychopharmacology program 4 designated by the American Psychological Association, 5 or the equivalent of a post-doctoral master's degree, 6 as approved by the board; provided that any equivalent 7 shall include study in a program offering intensive 8 didactic education, including instruction in: anatomy 9 10 and physiology; biochemistry; neuroanatomy; neurophysiology; neurochemistry; physical assessment 11 12 and laboratory examinations; clinical medicine and 13 pathophysiology; clinical and research pharmacology 14 and psychopharmacology; clinical pharmacotherapeutics; research; and professional, ethical, and legal issues; 15 16 (3) The applicant has clinical experience that includes a 17 minimum of eight hundred hours completed in a clinical prescribing practicum, completed in not less than 18 twelve months and not more than fifty-six months, and 19 20 consists of:

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1		(A)	Supervision of a minimum of one hundred patients,
2			including geriatric, pediatric, and pregnant
3			patients;
4		(B)	A minimum of eighty hours completed in a physical
5			assessment practicum in a primary care, family
6			practice, community, or internal medicine
7			setting;
8		(C)	A minimum of one hundred hours of community
9			service with homeless, veteran, or low-income
10			populations;
11		(D)	A minimum of two hours per week of supervision by
12			a primary care provider or a prescribing
13			psychologist; and
14		(E)	Eight weeks of rotation in each of the following:
15			(i) Internal and family medicine;
16			(ii) Women's health;
17		(	iii) Pediatrics; and
18			(iv) Geriatrics; and
19	(4)	The	applicant has successfully passed the nationally
20		reco	gnized Psychopharmacology Examination for
21		Psyc	hologists developed by the American Psychological



Association's Practice Organization's College of 1 2 Professional Psychology or other authority relevant to 3 establishing competence across the following content 4 areas: neuroscience; nervous system pathology; 5 physiology and pathophysiology; biopsychosocial and 6 pharmacologic assessment and monitoring; differential diagnosis; pharmacology; clinical psychopharmacology; 7 8 research; and integrating clinical psychopharmacology 9 with the practice of psychology, diversity factors, 10 and professional, legal, ethical, and 11 interprofessional issues; provided that the passing 12 score shall be determined by the American 13 Psychological Association's Practice Organization's 14 College of Professional Psychology or other authority, 15 as applicable. 16 §465-Prescriptive authority privilege; renewal. (a) 17 The board shall implement a method for the renewal of 18 prescriptive authority privilege in conjunction with the renewal 19 of a license under section 465-11.

20 (b) To qualify for the renewal of prescriptive authority21 privilege, a prescribing psychologist shall present evidence

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1 satisfactory to the board that the prescribing psychologist has 2 completed at least eighteen hours, biennially, of acceptable 3 continuing education, as determined by the board, relevant to 4 the pharmacological treatment of mental and emotional disorders; 5 provided that a first-time prescribing psychologist shall not be 6 subject to the continuing education requirements under this 7 section for the first prescriptive authority privilege renewal.

8 (c) The continuing education requirement under this
9 section shall be in addition to the continuing education
10 requirement under section 465-11.

(d) The board may conduct random audits of licensees to determine compliance with the continuing education requirement under this section. The board shall provide written notice of an audit to each licensee randomly selected for audit. Within sixty days of notification, the licensee shall provide the board with documentation verifying compliance with the continuing education requirement established by this section.

18 §465- Prescriptive authority privilege; prescribing
19 practices. (a) It shall be unlawful for any psychologist not
20 granted prescriptive authority privilege under this part to
21 prescribe, offer to prescribe, administer, or use any sign,



1	card, or	device to indicate that the psychologist is so				
2	authorized.					
3	(b)	A valid prescription issued by a prescribing				
4	psycholog	ist shall be legibly written and contain, at a minimum,				
5	the follo	wing:				
6	(1)	Date of issuance;				
7	(2)	Original signature of the prescribing psychologist;				
8	(3)	Prescribing psychologist's name and business address;				
9	(4)	Name, strength, quantity, and specific instructions				
10		for the psychotropic medication to be dispensed;				
11	(5)	Name and address of the person for whom the				
12		prescription was written;				
13	(6)	Room number and route of administration if the patient				
14		is in an institutional facility; and				
15	(7)	Number of allowable refills, if applicable.				
16	(c)	A prescribing psychologist shall comply with all				
17	applicabl	e state and federal laws and rules relating to the				
18	prescript	ion and administration of psychotropic medication.				
19	(d)	A prescribing psychologist shall:				
20	(1)	Except as provided in paragraph (3), prescribe and				
21		administer psychotropic medication only in				



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1		consultation with and pursuant to a written
2		collaborative agreement with a patient's primary care
3		provider that is established and signed prior to
4		prescribing any psychotropic medication for the
5		patient;
6	(2)	Make any changes to a medication treatment plan,
7		including dosage adjustments, addition of medications,
8		or discontinuation of medications, only in
9		consultation and collaboration with a patient's
10		primary care provider;
11	(3)	For patients who are forensically encumbered and for
12		patients with a diagnosis of serious mental illness
13		who are subject to the jurisdiction of the department
14		of health:
15		(A) Prescribe and administer psychotropic medication
16		only:
17		(i) In accordance with a treatment protocol
18		agreed to by the prescribing psychologist
19		and the treating department of health
20		psychiatrist; and

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1		(ii) With notification to all other health care
2		providers treating the patient; and
3		(B) Enter into a collaborative agreement with the
4		department of health prior to prescribing any
5		psychotropic medication; and
6	(4)	Document all consultations in the patient's medical
7		record.
8	(e)	Except as provided in subsection (d)(3), a prescribing
9	psycholog	ist shall not prescribe to the following:
10	(1)	All persons under the age of eighteen years;
11	(2)	All adults with serious mental illnesses, which
12		includes all adults not suffering from anxiety or
13		depression; and
14	(3)	All persons who do not have a primary care provider
15		who is a physician, psychiatrist, or advanced practice
16		registered nurse with prescriptive authority, or is a
17		patient in a clinic with a collaborative practice
18		setting that has a physician, psychiatrist, or
19		advanced practice registered nurse with prescriptive
20		authority,

or administer psychotropic medication for any patient who does
 not have a primary care provider.

3 (f) A prescribing psychologist shall not delegate4 prescriptive authority to any other person.

§465- Prescriptive authority privilege; exclusionary
formulary. (a) A prescribing psychologist shall only prescribe
and administer medications for the treatment of mental health
disorders as defined by the most current version of the
Diagnostic and Statistical Manual of Mental Disorders.

(b) A prescribing psychologist shall not prescribe or
administer medications to a patient for a use that is not stated
on the label as a prescribed use by the manufacturer or is
otherwise not approved by the United States Food and Drug
Administration.

(c) The exclusionary formulary for prescribing psychologists shall consist of drugs or categories of drugs adopted by the board, subject to the limitations in subsection (e), which shall include but not be limited to a formulary with high safety profiles that includes some serotonin reuptake inhibitors and serotonin-norepinephrine reuptake inhibitors, and all prescription medications with a boxed warning issued by the

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1	United Sta	ates Food and Drug Administration pursuant to title 21
2	Code of F	ederal Regulations section 201.5.
3	(d)	The exclusionary formulary and any revised formularies
4	shall be n	made available to licensed pharmacies at the request of
5	the pharm	acy and at no cost.
6	(e)	Under the exclusionary formulary, prescribing
7	psycholog	ists shall not prescribe or administer:
8	(1)	Schedule I controlled substances pursuant to
9		section 329-14;
10	(2)	Schedule II controlled substances pursuant to section
11		329-16;
12	(3)	Schedule III controlled substances pursuant to section
13		329-18, including all narcotic drugs and opiates; and
14	(4)	For indications other than those stated in the
15		labeling approved by the federal Food and Drug
16		Administration for patients seventeen years of age or
17		younger; provided that prescribing psychologists may
18		prescribe and administer stimulants for the treatment
19		of attention deficit hyperactivity disorder,
20		regardless of the stimulants' schedule classification.

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\$465- Drug Enforcement Administration; registration.
 (a) Every prescribing psychologist shall comply with all
 federal and state registration requirements to prescribe and
 administer psychotropic medication.

5 (b) Every prescribing psychologist shall file with the
6 board the prescribing psychologist's federal Drug Enforcement
7 Administration registration number. The registration number
8 shall be filed before the prescribing psychologist issues any
9 prescription for a psychotropic medication.

10 §465- Violation; penalties. Any person who violates
11 this part shall be guilty of a misdemeanor and, upon conviction,
12 subject to penalties as provided in section 465-15(b). Any
13 person who violates this part may also be subject to
14 disciplinary action by the board."

15 SECTION 3. Section 329-1, Hawaii Revised Statutes, is 16 amended as follows:

17 1. By adding two new definitions to be appropriately18 inserted and to read:

19 "Prescribing psychologist" means a clinical psychologist

20 licensed under chapter 465 who has undergone specialized

21 training in clinical psychopharmacology, passed a national



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1	proficiency examination in psychopharmacology approved by the
2	board of psychology, and has been granted a prescriptive
3	authority privilege by the board of psychology.
4	"Psychotropic medication" means only those agents related
5	to the diagnosis and treatment of mental and emotional disorders
6	pursuant to the practice of psychology as defined in section
7	465-1 except drugs classified into schedule I, II, or III
8	pursuant to this chapter; opiates; or narcotic drugs; provided
9	that psychotropic medication shall include stimulants for the
10	treatment of attention deficit hyperactivity disorder regardless
11	of the stimulants' schedule classification."
12	2. By amending the definition of "practitioner" to read:
13	""Practitioner" means:
14	(1) A physician, dentist, veterinarian, scientific
15	investigator, or other person licensed and registered
16	under section 329-32 to distribute, dispense, or
17	conduct research with respect to a controlled
18	substance in the course of professional practice or
19	research in [ <del>this</del> ] <u>the</u> State;
20	(2) An advanced practice registered nurse with
21	prescriptive authority licensed and registered under

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1		section 329-32 to prescribe and administer controlled
2		substances in the course of professional practice in
3		[ <del>this</del> ] <u>the</u> State;[ <del>and</del> ]
4	(3)	A prescribing psychologist licensed and registered
5		under section 329-32 to prescribe and administer
6		psychotropic medication in the course of professional
7		practice in the State; and
8	[ <del>(3)</del> ]	(4) A pharmacy, hospital, or other institution
9		licensed, registered, or otherwise permitted to
10		distribute, dispense, conduct research with respect to
11		or to administer a controlled substance in the course
12		of professional practice or research in [ <del>this</del> ] <u>the</u>
13		State."
14	SECT	ION 4. Section 329-38, Hawaii Revised Statutes, is
15	amended by	y amending subsection (h) to read as follows:
16	"[+]	(h) [+] Prescriptions for controlled substances shall
17	be issued	only as follows:
18	(1)	All prescriptions for controlled substances shall
19		originate from within the State and be dated as of,
20		and signed on, the day when the prescriptions were
21		issued and shall contain:



1 The first and last name and address of the (A) 2 patient; and 3 The drug name, strength, dosage form, quantity (B) 4 prescribed, and directions for use. Where a 5 prescription is for gamma hydroxybutyric acid, 6 methadone, or buprenorphine, the practitioner 7 shall record as part of the directions for use, 8 the medical need of the patient for the 9 prescription. 10 Except for electronic prescriptions, controlled 11 substance prescriptions shall be no larger than eight and one-half inches by eleven inches and no smaller 12 13 than three inches by four inches. A practitioner may 14 sign a prescription in the same manner as the 15 practitioner would sign a check or legal document 16 (e.g., J.H. Smith or John H. Smith) and shall use both 17 words and figures (e.g., alphabetically and 18 numerically as indications of quantity, such as five 19 (5)), to indicate the amount of controlled substance 20 to be dispensed. Where an oral order or electronic 21 prescription is not permitted, prescriptions shall be



1 written with ink or indelible pencil or typed, shall be manually signed by the practitioner, and shall 2 3 include the name, address, telephone number, and 4 registration number of the practitioner. The 5 prescriptions may be prepared by a secretary or agent 6 for the signature of the practitioner, but the 7 prescribing practitioner shall be responsible in case the prescription does not conform in all essential 8 9 respects to this chapter and any rules adopted 10 pursuant to this chapter. In receiving an oral 11 prescription from a practitioner, a pharmacist shall 12 promptly reduce the oral prescription to writing, 13 which shall include the following information: the 14 drug name, strength, dosage form, quantity prescribed 15 in figures only, and directions for use; the date the 16 oral prescription was received; the full name, Drug 17 Enforcement Administration registration number, and 18 oral code number of the practitioner; and the name and 19 address of the person for whom the controlled 20 substance was prescribed or the name of the owner of

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1 the animal for which the controlled substance was
2 prescribed.

3 A corresponding liability shall rest upon a 4 pharmacist who fills a prescription not prepared in 5 the form prescribed by this section. A pharmacist may 6 add a patient's missing address or change a patient's 7 address on all controlled substance prescriptions 8 after verifying the patient's identification and 9 noting the identification number on the back of the 10 prescription document on file. The pharmacist shall 11 not make changes to the patient's name, the controlled 12 substance being prescribed, the quantity of the 13 prescription, the practitioner's Drug Enforcement 14 Administration number, the practitioner's name, the 15 practitioner's electronic signature, or the 16 practitioner's signature;

17 (2) An intern, resident, or foreign-trained physician, or
18 a physician on the staff of a Department of Veterans
19 Affairs facility or other facility serving veterans,
20 exempted from registration under this chapter, shall
21 include on all prescriptions issued by the physician:



1		(A) The registration number of the hospital or other
2		institution; and
3		(B) The special internal code number assigned to the
4		physician by the hospital or other institution in
5		lieu of the registration number of the
6		practitioner required by this section.
7		The hospital or other institution shall forward a copy
8		of this special internal code number list to the
9		department as often as necessary to update the
10		department with any additions or deletions. Failure
11		to comply with this paragraph shall result in the
12		suspension of that facility's privilege to fill
13		controlled substance prescriptions at pharmacies
14		outside of the hospital or other institution. Each
15		written prescription shall have the name of the
16		physician stamped, typed, or hand-printed on it, as
17		well as the signature of the physician;
18	(3)	An official exempted from registration shall include
19		on all prescriptions issued by the official:
20		(A) The official's branch of service or agency (e.g.,
21		"U.S. Army" or "Public Health Service"); and



1	(B) The official's service identification number, in
2	lieu of the registration number of the
3	practitioner required by this section. The
4	service identification number for a Public Health
5	Service employee shall be the employee's social
6	security or other government issued
7	identification number.
8	Each prescription shall have the name of the officer
9	stamped, typed, or handprinted on it, as well as the
10	signature of the officer; [and]
11 (4)	A physician assistant registered to prescribe
12	controlled substances under the authorization of a
13	supervising physician shall include on all controlled
14	substance prescriptions issued:
15	(A) The Drug Enforcement Administration registration
16	number of the supervising physician; and
17	(B) The Drug Enforcement Administration registration
18	number of the physician assistant.
19	Each written controlled substance prescription issued
20	shall include the printed, stamped, typed, or hand-
21	printed name, address, and phone number of both the



1		supe	rvising physician and physician assistant, and
2		shal	l be signed by the physician assistant[-]; and
3	(5)	A pr	escribing psychologist authorized to prescribe and
4		admi	nister psychotropic medication pursuant to
5		part	
6		<b></b>	aboration with a primary care provider shall
7			ude on all psychotropic medication prescriptions
, 8		·	
0		<u>issu</u>	
9		<u>(A)</u>	The Drug Enforcement Administration registration
10			number of the licensed primary care provider;
11		<u>(B)</u>	The printed, stamped, typed, or hand-printed
12			name, address, and phone number of both the
13			licensed primary care provider and prescribing
14			psychologist; and
15		(C)	The signature of the prescribing psychologist."
16	SECT	ION 5	. Section 329-39, Hawaii Revised Statutes, is
17	amended b	y ame	nding subsection (b) to read as follows:
18	"(b)	Whe	never a pharmacist sells or dispenses any
19	controlle	d sub	stance on a prescription issued by a physician,
20	dentist,	podia	trist, [ <del>or</del> ] veterinarian, <u>or any psychotropic</u>
21	medicatio	n on	a prescription issued by a prescribing

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1	psycholog	ist, the pharmacist shall affix to the bottle or other
2	container	in which the drug is sold or dispensed:
3	(1)	The pharmacy's name and business address;
4	(2)	The serial number of the prescription;
5	(3)	The name of the patient or, if the patient is an
6		animal, the name of the owner of the animal and the
7		species of the animal;
8	(4)	The name of the physician, dentist, podiatrist, [ <del>or</del> ]
9		veterinarian, or prescribing psychologist by whom the
10		prescription is written; and
11	(5)	[ <del>Such directions</del> ] <u>Directions</u> as may be stated on the
12		prescription."
13	SECT	ION 6. Section 346-59.9, Hawaii Revised Statutes, is
14	amended b	y amending subsection (h) to read as follows:
15	"(h)	All psychotropic medications covered by this section
16	shall be j	prescribed by a psychiatrist, a physician, or an
17	advanced j	practice registered nurse with prescriptive authority
18	under chaj	pter 457 and duly licensed in the State[+], or a
19	prescribi	ng psychologist authorized under part of
20	chapter 4	<u>65.</u> "

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1 SECTION 7. Chapter 465, Hawaii Revised Statutes, is 2 amended by designating sections 465-1 to 465-15 as part I and 3 inserting a title before section 465-1 to read as follows: "PART I. GENERAL PROVISIONS" 4 5 SECTION 8. Section 465-3, Hawaii Revised Statutes, is 6 amended by amending subsection (e) to read as follows: 7 "(e) [Nothing] Except as provided in part , nothing in this chapter shall be construed as permitting the 8 9 administration or prescription of drugs, or in any way engaging 10 in the practice of medicine as defined in the laws of the 11 State." 12 SECTION 9. (a) The board of psychology, in collaboration 13 with the appropriate department of the John A. Burns school of 14 medicine, shall submit a report of its findings and 15 recommendations, including any proposed legislation, on the 16 authorization of prescriptive authority to prescribing 17 psychologists who meet specific education, training, and 18 registration requirements pursuant to this Act to the 19 legislature no later than twenty days prior to the convening of 20 the regular session of 2028.

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1 (b) The board of psychology shall collaborate with the 2 department of health when preparing information in the report 3 regarding the treatment of patients who are forensically encumbered or patients with a diagnosis of serious mental 4 5 illness who are subject to the department of health's 6 jurisdiction. 7 SECTION 10. Statutory material to be repealed is bracketed 8 and stricken. New statutory material is underscored. 9 SECTION 11. This Act shall take effect on December 31, 10 2050.

#### Report Title:

Board of Psychology; Psychologists; Prescriptive Authority; Prescribing Psychologists; Report

#### Description:

Requires the Board of Psychology to grant prescriptive authority to qualified psychologist applicants statewide. Requires a report to the Legislature. Takes effect 12/31/2050. (SD1)

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

