



STATE OF HAWAII | KA MOKU'ĀINA 'O HAWAI'I
OFFICE OF THE DIRECTOR
DEPARTMENT OF COMMERCE AND CONSUMER AFFAIRS
KA 'OIHANA PILI KĀLEPA
335 MERCHANT STREET, ROOM 310
P.O. BOX 541
HONOLULU, HAWAII 96809
Phone Number: (808) 586-2850
Fax Number: (808) 586-2856
cca.hawaii.gov

JOSH GREEN, M.D.
GOVERNOR | KE KIA'ĀINA

SYLVIA LUKE
LIEUTENANT GOVERNOR | KA HOPE KIA'ĀINA

NADINE Y. ANDO
DIRECTOR | KA LUNA HO'OKELE

DEAN I HAZAMA
DEPUTY DIRECTOR | KA HOPE LUNA HO'OKELE

Testimony of the Department of Commerce and Consumer Affairs

**Before the
Senate Committee on Health and Human Services
Friday, January 26, 2024
1:00 p.m.
Conference Room 225 and Videoconference**

**On the following measure:
S.B. 1444, RELATING TO MENTAL HEALTH**

Chair San Buenaventura and Members of the Committee:

My name is Rochelle Araki, and I am the Executive Officer for the Department of Commerce and Consumer Affairs' (Department) Professional and Vocational Licensing Division's (Division), Marriage and Family Therapy Program, Mental Health Counselors Licensing Program, and Social Worker Licensing Program. The Department offers comments on this bill.

The purposes of this bill are to: (1) establish a provisional or associate level licensure requirements for marriage and family therapists, mental health counselors, and psychologists and authorize insurance reimbursements in certain circumstances; and (2) allow psychologist license applicants to sit for the licensing examination before completing certain other requirements.

The Department limits its comments to Part II, Part III and Part V and Part VI of this bill as follows:

S.B. 1444, requires the Department to grant, upon application and payment of proper fees, provisional licensure as an associate marriage and family therapist and mental health counselor to those who meet certain requirements to obtain reimbursement for services rendered. While the Department appreciates the intent of this measure, the creation of this new license type appears contrary to the provisions of Hawaii Revised Statutes section 26H-2, which provides, in part, that “the regulation and licensing of professions and vocations shall be undertaken only where reasonably necessary to protect the health, safety, or welfare of consumers of the services; the purpose of regulation shall be the protection of the public welfare and not that of the regulated profession or vocation.” A new licensure scheme should not be implemented solely for the purpose of reimbursement. There may be unintended consequences of regulating or requiring licensure of a currently exempted population of professionals who provide mental health services. For example, the cost of services provided by these individuals may increase and could possibly be passed to consumers.

Regarding part V of this bill, the Department expresses similar concerns that authorizing reimbursements to a currently exempted population: social work interns, could have unintended consequences such as higher costs for services rendered. These costs could be passed on to consumers.

The Department is unclear whether the requirement for provisional licensure in Part II and III only applies to new applications received once the Act takes effect upon its approval. Currently, interns are exempted from licensure; those practicing under the exemptions of licensure would automatically be subject to license requirements, thereby, causing possible disruptions in patient care.

Additionally, the Department is asking for clarification on page 4, lines 15 to 20 and page 5, lines 3 to 9. HRS §451J-1 defines clinical supervision to occur “*by a licensed marriage and family therapist whose license has been in good standing in any state for two years preceding commencement and during the term of supervision, or any licensed mental health professional whose license has been in good standing in any state and who has been a clinical member in good standing of the association for the*

two years preceding commencement and during the term of supervision.” This bill limits direct supervision from a licensed marriage and family therapist that is in good standing.

The Department also seeks clarification regarding the language included on page 19, lines 14 to 19 and page 20, lines 1 to 6. HRS §453D-7(a)(2) requires clinical supervision under “*a licensed mental health counselor, psychologist, clinical social worker, advanced practice registered nurse with a specialty in mental health, marriage and family therapist, or physician with a specialty in psychiatry.*” Again, this bill only allows direct supervision from a licensed mental health counselor that is in good standing.

Should the Committee consider passing this bill, the Department respectfully requests the following to ensure proper implementation:

1. General fund appropriation to allow the Division:
 - a. To establish, recruit, and hire an office assistant V (OA-V) to process provisional license applications expeditiously. The sum of \$73,406¹ or so much thereof may be necessary to fund this position.
 - b. To make the appropriate updates to its internal database. The required updates may take upwards of 500 support hours to create these new license types and the associated requirements. These hours would be added onto the already extensive daily work of the Division’s developer, program analyst, and others outside of the division. The sum of \$75,000 or so much thereof may be necessary to fund this request.
2. Minimally, a delayed implementation date of July 1, 2026, to ensure that:
 - a. In line with the request above, the Division would need the appropriate time to establish, recruit, and hire an OA-V.
 - b. The appropriate updates are made to the database and applications are created.

Thank you for the opportunity to testify on this bill.

¹ OA-V: \$44,760 (salary) + \$28,656 fringe = \$73,406

Testimony of the Board of Psychology

**Before the
Senate Committee on Health and Human Services
Friday, January 26, 2024
1:00 p.m.
Conference Room 225 and Videoconference**

**On the following measure:
S.B. 1444, RELATING TO MENTAL HEALTH**

Chair San Buenaventura 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.

The purposes of this bill are to: (1) establish provisional or associate level licensure requirements for marriage and family therapists, mental health counselors, and psychologists and authorizes insurance reimbursements in certain circumstances; and (2) allow psychologist license applicants to take licensing examinations before completing other requirements.

The Board will review this bill at its scheduled meeting on February 9, 2024. In the meantime, the Board's legislative committee offers the following comments on Part IV of the bill only:

- 1) This bill is substantially similar to H.B. 1300 H.D. 2, S.D. 1 from the 2023 legislative session.
- 2) The Board believed that allowing applicants to take the licensing examination prior to completing a doctoral degree did not comport with the intent of the bill, which appears to be more focused on creating a provisional license to be obtained after completing a doctoral degree program; this would also include completing an internship prior to sitting for the exam. The Board believed that internship experience and degree completion are generally essential to successfully passing the exam, which primarily tests the theoretical knowledge psychologists learn in their education program. Page 38, lines 18 to 21, appears to uphold language which the Board did not support. The Board supported language requiring

an applicant to complete a qualifying doctoral degree and an internship prior to being authorized to sit for the examination.

- 3) Page 41, lines 6 to 9, authorizes the Board to grant waivers or extensions to licensees who are unable to comply with its continuing education requirements. The Board noted last year regarding H.B. 1300 H.D. 2, that this language is unnecessary and redundant since Hawaii Revised Statutes section 465-11(f) already provides a remedy for such circumstances. At the time, the Board strongly maintained that the language should remain out of any proposed legislation

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

Phone: (808) 521-8995

COMMITTEE ON HEALTH AND HUMAN SERVICES

Senator Joy A. San Buenaventura, Chair

Senator Henry J.C. Aquino, Vice Chair

January 26, 2024 1:00 P.M. – Rm 225 and via VIDEO CONFERENCE

Testimony in Strong Support of SB1444 RELATING TO MENTAL HEALTH

The Hawai'i Psychological Association (HPA) strongly supports SB1444 as a critical tool in meeting the burgeoning demand for quality mental health services – and is especially timely as the emotional and mental toll of the Maui Fires, as well as the lingering effects of the pandemic and associated hardships continue to be felt by all our residents, prolonged now for several years. The aftermath effect on our public behavioral health systems is immeasurable.

Of 37 states recently surveyed, 21 already have an associate licensing structure in place.

This bill expands access to much-needed high quality mental health services provided by local practitioners, and will significantly increase the speed with which trained, qualified, credentialed, and culturally cognizant practitioners can enter the workforce and meet Hawaii's demands. There is a critical shortage of mental health professionals in Hawaii, particularly in rural areas; and this bill helps to reduce some arbitrary and/or administrative obstacles to practicing here.

To become licensed as a psychologist, Hawaii Revised Statutes requires candidates to have completed a doctoral degree (Ph.D. or Psy.D.) in psychology including practicum experience comprised of a full time one-year psychology internship; followed by at least one year of supervised practice experience after completing the degree; and then a passing score on a rigorous national examination.

This proposal helps to alleviate several financial hardships psychology trainees in Hawaii typically face while on this path. New professionals seeking to complete their hours of supervised practice are having tremendous difficulty managing financially - due to Hawaii's very high cost of living.

The associate licensing framework in this bill will authorize insurance reimbursement for work done by pre-licensed, "post-doc" psychology trainees. Post-docs often work in an agency or other setting where they are supervised closely by a licensed psychologist, but insurance plans vary greatly on whether they will reimburse the agency or supervisor for services provided in this way. Some post-docs end up working for free, while maintaining other jobs to survive. Many leave the state – where associate-level licensure is already in place.

Another issue that causes financial hardship and delay during this post-doctoral period is the timing of the license application process. Currently, according to the Board of Psychology's administrative rules, applicants must complete their 1-year post-doctoral experience; apply for licensure; then be "seated" for the required examination (the EPPP); then pass it before they can be licensed. This process can lead to a many-month delay before they are allowed to practice as a psychologist. Many licensure candidates apply to take the exam in another state (incurring further personal expense) so that they can expedite the board of psychology review process by having their passing grade in hand when their application is reviewed by the Hawaii Board. Accordingly, this proposal requires the board to allow licensure candidates to take the exam as soon as they complete their doctorate.

In this vein, we support recommendations from other mental health professionals to remove the requirement that associate licensees in Marriage and Family Therapy and Mental Health Counseling pass their licensing exam *before* obtaining an “associate license”, [as provided on p. 5, lines 1-2; and p. 19, lines 20-21] as this creates another financial and logistical burden to potential providers. Removing these testing requirements would be consistent with the removal of such a burden for psychologists on page 38, lines 18-21, which we hope to retain.

This bill also addresses unnecessary administrative barriers experienced by state-employed psychology post-docs. Current law allows non-licensed individuals who have earned their doctoral degree to be hired into state psychologist positions before licensure; however, these employees must obtain licensure within two years of hire, and then cease practicing if the license is not obtained in that time period. The state has interpreted this to mean they must be terminated from their state position if this occurs.

During the pandemic, the Board of Psychology did not meet for a prolonged period to approve several candidates’ licenses, and several state-employed psychologists lost their jobs due to no fault of their own. Of those terminated included practitioners at the state hospital and in the Child and Adolescent Mental Health Division. This is a wholly avoidable hardship for these individuals, and the clients they were serving. The language proposed in this bill would allow the board to give a state-employed psychologist more time to obtain their license under such extenuating circumstances; and would also help others who may need more time due to, for example, the need for maternity or other medical leave.

We also appreciate the comprehensive purpose language in this bill, as well as in HB1242 and HB1830 explaining the gravity of demand and the costs and hardships for new professionals and their Hawaii-based patients. **We suggest the insertion of the words “flaw in” on page 2, lines 13 before “regulatory oversight”** for clarification; and also **respectfully request that SB1444’s purpose language be amended to include further language to enumerate the following** additional purposes:

- *Clarifying in law that Associate Level practitioners would not be allowed to do anything they aren’t already permitted to do now, except have their services billed through the insurance covering their supervisor’s treatment and supervision; and*
- *Enabling and encouraging post-degree, pre-licensed mental health practitioners to stay in Hawaii to complete the required hours of supervised work for full licensure – thereby promoting a diverse pool of homegrown providers that can best meet the needs of Hawaii’s people.*

Furthermore, we support the **clarifying language provided in the National Association of Social Workers – Hawaii Chapter’s testimony regarding insurance billing and clarifying the use of the term “intern”**.

Thank you for the opportunity to provide input on this important bill, and for your commitment to Hawaii’s mental health.

Sincerely,



Alex Lichton, Ph.D.

Chair, HPA Legislative Action Committee

COMMITTEE ON HEALTH AND HUMAN SERVICES
Senator Joy A. San Buenaventura, Chair
Senator Henry J.C. Aquino, Vice Chair

January 26, 2024 1:00 P.M. – Rm 225 and via VIDEO CONFERENCE

Testimony in Strong Support of SB1444

The National Association of Social Workers – Hawai'i (NASW- HI) strongly supports SB1444 Relating to Mental Health, which establishes associate level licenses for Psychologists, Mental Health Counselors, and Marriage and Family Therapists; and clarifies the ability of a Licensed Social Worker to bill under the supervision of a Licensed Clinical Social Worker.

This bill – along with several other measures introduced during this legislative biennium (SB343, HB1300, HB1242, HB776, and HB1830) does several important things. It creates an Associate level of Licensure for Psychologists, Mental Health Counselors, and Marriage and Family Therapists, based on the current LSW level of licensure for social workers, which will allow for a mechanism by which clinicians who have completed their graduate school courses can be compensated while they are receiving their required period of supervised practice.

It also clarifies that a LSW social worker can bill insurance under the clinical license of the supervising LCSW.

These steps will create the opportunity to open up more clinicians in supervision to see clients in the very near future, which is vital given the ongoing stressors resulting from Maui Fires, as well as the pandemic; and will immediately address the current shortage of *clinical*-level mental health providers, and long wait times to get in to therapy as a client.

It also opens the door to more diverse candidates in the field of mental health. Few people can afford to work for two years either unpaid or underpaid, as they complete their clinical supervision, which leads to an overrepresentation in our profession of people from affluent backgrounds and an underrepresentation of Black, Indigenous, and People of Color (BIPOC) in the fields of Social Work, Psychology, Mental Health Counseling, and Marriage and Family Therapy.

This bill can help encourage people who have completed their graduate education in Hawai'i to stay and work here, if they can receive a living wage. We strive to educate students in cultural competency and the importance of understanding the community in which they practice, to create clinicians who will thrive here, then do very little to help keep them in state, after graduation.

It also provides the opportunity for those in supervision to get experience working in private practices and doing more direct therapy, under supervision, which serves to strengthen them as clinicians when they reach the level of independent practice.

Suggested Amendments to Strengthen Purpose/Legislative Intent . . .

We would like to offer some black-letter amendments to clarify the language on **page 47, line 12- p. 48, line 4** of this bill relating to the supervision of social workers seeking licensure as a “Licensed Clinical Social Worker” as follows:

*“Services provided by a supervised licensed social worker or L.S.W. who is working to obtain post masters clinical social work experience under the supervision of a Hawaii licensed clinical social worker or individual identified in section 467E-7 (a)(3)(D) . . . ; provided further that the billed rate for the supervised licensed social **worker** is commensurate with the requisite level of training.”*

We also believe the language in HRS 467E-6(8) should be revised to replace the phrase relating to “clinical social work interns” to reflect the current practice, which is to use the phrase: **“under the supervision of a Licensed Clinical Social Worker L.C.S.W.”**

We believe these amendments make clear that billing must be done through the supervising Licensed Clinical Social Worker. This is important as there is currently confusion in insurance billing practices.

Moreover, HRS 467E authorizes those with a Masters in Social Work (M.S.W.) degree to obtain a “License in Social Work” or “L.S.W.”, as set forth in HRS sections 467E-2. Through the L.S.W. licensure, the *supervised* clinical services provided by the L.S.W. qualifies for insurance reimbursement as part of their clinical training to obtain status as a “Licensed *Clinical* Social Worker” (L.C.S.W.). HRS 467E-7(3)(C) requires this supervised training of M.S.W.s to qualify for an L.C.S.W..

While a practitioner with a M.S.W. does not need a L.S.W. to fulfill the hours of clinical supervision required to obtain an L.C.S.W., we are seeking to establish a mechanism so the L.S.W.'s supervised clinical services can be reimbursed under their supervising L.C.S.W.'s insurance. This is the crux of these proposals: eliminating a requirement that these practitioners work many years for free before achieving clinical licensure, risking brain drain and burgeoning mental health provider shortages.

In this effort, we want to emphasize the **“clinical”** nature of the licenses we hope to be established through these proposals – which would allow insurance reimbursement for the services provided by supervisees/trainees gaining the required training, skills, and guidance necessary to independently perform one-on-one *clinical* therapy.

Additionally, with respect to the “Practice of Social Work,” and the “Limitations of Scope of Practice,” as defined and outlined in HRS Sections 467E-1 and 467E-1.5 respectively, it is important to recognize that “licensed bachelor social workers” (L.B.S.W.s) and “licensed social workers” (L.S.W.s) are NOT authorized to independently perform “Clinical diagnosis or psychotherapy, or both, [as may be] provided by a licensed clinical social worker [L.C.S.W.]” pursuant to the definition of the “Practice of Social Work” in HRS 467E-1(8). (*Underlining added.*)

To reiterate, the current law *already* allows insurance reimbursement for the clinical services provided by those with a “License in Social Work” (“L.S.W.”) who are pursuing a *clinical* license (L.C.S.W.) pursuant to the requirements outlined in HRS 467E-7(C)(3) – which requires supervision by a Licensed “Clinical” Social Worker (L.C.S.W.) that meets the requirements set forth in HRS 467E-7(3)(D).

In this vein to provide more clarity, **we also recommend that existing statutory language on page 46, lines 1-15 which appears to “grandfather” potential clinical supervisors between July 1, 2004 – July 1, 2009 be repealed**, as this language is now moot and potentially confusing.

We also appreciate the comprehensive purpose language in this bill, as well as in HB1242 and HB1830 explaining the gravity of demand and the costs and hardships for new professionals and their Hawaii-based patients. **We suggest the insertion of the words “flaw in” on page 2, lines 13 before “regulatory oversight” for clarification; and also respectfully request that SB1444’s purpose language be amended to include further language to enumerate the following additional purposes:**

- *Clarifying in law that Associate Level practitioners would not be allowed to do anything they aren’t already permitted to do now, except have their services billed through the insurance covering their supervisor’s treatment and supervision; and*
- *Enabling and encouraging post-degree, pre-licensed mental health practitioners to stay in Hawaii to complete the required hours of supervised work for full licensure – thereby promoting a diverse pool of homegrown providers that can best meet the needs of Hawaii’s people.*

Finally, **we support recommendations from other mental health professionals to remove the requirement that associate licensees in Marriage and Family Therapy and Mental Health Counseling pass their licensing exam *before* obtaining an “associate license”, [as provided on p. 3, lines 12-13; and p. 18, lines 16-18]** as this creates another financial and logistical burden to potential providers. Removing these testing requirements would be consistent with the removal of such a burden for psychologists on page 37, lines 16-18, which we hope to retain.

We thank you for your careful attention to this critical mental health access bill and are available for further questions and clarifications.

Thank you for the opportunity to provide this testimony in very strong support.

Sincerely,

 Sonja Bigalke-Bannan, MSW, LCSW

Sonja Bigalke-Bannan, MSW, LCSW

Executive Director, National Association of Social Workers- Hawai’i Chapter

SB-1444

Submitted on: 1/23/2024 3:41:53 PM

Testimony for HHS on 1/26/2024 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Leolinda Iokepa	Testifying for Hilopa'a Family to Family, Inc	Support	Written Testimony Only

Comments:

Senators Joy A. San Buenaventura, Chair, Senator Henry J.C. Aquino, Vice Chair, and members of the Committee:

On behalf of Hilopa'a Family to Family, Inc. we are in strong support in moving SB1444 forward. One of the hallmark programs of the Hilopa'a has been our state's designated Family to Family Health Information Center. On a regular basis we receive inquiries from families and professionals seeking assistance in not only finding access to mental health providers but inquiring how to expedite waitlists take months to get through, while families lack the resources and skills to support their loved ones in times of need.

Many of our young adults who have pursued graduate work to serve our people, are startled and shocked when they find out that in order to receive clinical hours that they would need to subsidize the clinical hours themselves without any mechanism to receive assistance. While in school, many students took advantage of financial aid, scholarships or other vehicles. Post graduate clinical supervision does not have an infrastructure - these young up and coming providers now have to find between \$10,000 - \$20,000 extra to pay for clinic supervision. The number of clinical supervisors for MFTs are limited with the state of HI and nationally. Its not fair to ask a licensed practitioner to give up space in their schedule of seeing patients who have been on waitlist to assist in clinical supervision. The ability to allow providers to bill creates a win win for both the post graduate and the clinical supervisor. Perhaps this will incentivize other licensed provider to consider becoming clinical supervisors to help increase the needed capacity in our state.

thank you for your time for hearing this important measure.



CATHOLIC CHARITIES HAWAII

TESTIMONY IN SUPPORT OF SB 1444: RELATING TO MENTAL HEALTH

TO: Senate Committee on Health and Human Services

FROM: Rob Van Tassell, President and CEO, Catholic Charities Hawaii

Hearing: **Friday 1/26/24 at 1:00 PM; CR 225 & via videoconference**

Chair San Buenaventura, Vice Chair Aquino, and Members of the Committee

We appreciate the opportunity to provide testimony in support of **SB 1444**, which establishes a provisional or associate level licensure for marriage and family therapist, mental health counselors, and psychologists. I am Rob Van Tassell, with Catholic Charities Hawaii.

Catholic Charities Hawaii (CCH) is a tax exempt, non-profit agency that has been providing social services in Hawaii for over 75 years. CCH has programs serving children, families, elders, homeless, and immigrants. Our mission is to provide services and advocacy for the most vulnerable in Hawaii. Catholic Charities Hawaii has a long history of providing counseling services to the people of Hawaii.

The mental health workforce has historically endured a shortage of qualified mental health providers (includes psychiatrists, psychologists, licensed clinical social workers, counselors, marriage and family therapist, and advanced practice nurses). The pandemic has exacerbated this workforce shortage, while increasing the overall need for mental health services. According to Mental Health America data, there are 360 individuals for every one mental health provider in Hawaii. Catholic Charities Hawaii has years of experience providing counseling services and has been able to train and develop highly qualified mental health professionals to add to the workforce. This bill would provide the opportunity for organizations like ours to expand on workforce development and contribute to improving access to mental health services in Hawaii.

Catholic Charities Hawaii supports this bill which will increase the workforce capacity of qualified mental health professionals to address the mental health crisis in Hawaii.

We urge your support for this bill and ask for your assistance in its passing during this legislative session.

Please contact our Director of Advocacy and Community Relations, Shellie Niles at (808) 527-4813 or shellie.niles@catholiccharitieshawaii.org if you have any questions.





To: Committee on Health and Human Services

Hearing Date/Time: Friday, January 26, 2024 at 1:00 pm

Re: Testimony to Strongly Support of SB 1444

From: Heather Lusk, Hawaii Health & Harm Reduction Center

Dear Members of the Committee,

Hawaii Health & Harm Reduction Center (HHHRC) fully endorses SB 1444 that establishes provisional and associate level licensure requirements for marriage and family therapists, mental health counselors, psychologists, and authorizes insurance reimbursement for certain circumstances. This bill provides a crucial opportunity to create a more efficient pathway for recent graduates and individuals entering the mental health field. The proposed legislation allows these aspiring professionals to take their licensure exams sooner, expediting their entry into active service. By enabling insurance reimbursements in certain situations, SB 1444 also contributes to making mental health care more affordable and accessible.

HHHRC's mission is to *reduce harm, promote health, create wellness, and fight stigma in Hawai'i and the Pacific*. We focus our efforts on those disproportionately affected by social determinants of health, including but not limited to: people living with and/or affected by HIV, hepatitis, substance use, and the transgender, LGBTQ and the Native Hawaiian communities. We support increased access to mental health services, but strongly feel these services should be outside the correctional setting.

We believe that this bill serves as a vital steppingstone for qualified individuals to swiftly transition into active service. The streamlined process for licensure exams not only benefits the professionals but also addresses the growing need for mental health services in our community.

Thank you for the opportunity to testify.

Heather Lusk, LCSW, MSW
Executive Director
Hawaii Health & Harm Reduction Center



The Hawaiian Islands Association
for Marriage and Family Therapy
(HIAMFT)

We know systems.
We know relationships.
We know FAMILY MATTERS.

COMMITTEE ON HEALTH AND HUMAN SERVICES

Senator Joy A. San Buenaventura, Chair

Senator Henry J.C. Aquino, Vice Chair

January 26, 2024 1:00 P.M. – Rm 225 and via VIDEO CONFERENCE

Testimony in Strong Support of SB1444 RELATING TO MENTAL HEALTH

The Hawaiian Islands Association for Marriage and Family Therapy (HIAMFT) strongly supports SB1444 as a critical tool in improving access and meeting the overwhelming demand for quality mental health services, particularly during and following the prolonged pandemic. Here's a snapshot of recently recorded ratios of clients/patients to mental health providers in Hawai'i:

Hawai'i 320:1

Honolulu 370:1

Kauai 480:1

Maui 550:1

Moloka'i has no registered providers.

Obviously, this demand far exceeds the viable supply of mental health providers. Among other provisions to remove administrative barriers and increase the speed with which trained and qualified practitioners can enter the workforce, SB343 would establish provisional/associate-level licensure requirements for Marriage and Family Therapists (MFTs), Mental Health Counselors, and Psychologists. This would ensure a regulatory framework that would encourage relevant and quality training to associate-level providers by authorizing insurance reimbursement for supervised care provided by these post-degree/pre-licensed mental health professionals during the 12 to 24-month period in which they are completing required supervised practice hours under the mentorship and guidance of an independently licensed mental health professional.

In 23 other states, associate-level licensure is already established as common practice. This regulatory approach not only expands clients' access to providers, it also creates a viable career path for would-be providers: Hawai'i residents interested in pursuing careers as mental health professionals (of which there is a 10,000-15,000 shortage), but who might otherwise not be able to actualize such a career due to outdated statutes that often force post-graduate/pre-licensed providers to work for sub-par wages or even pro bono (while also paying a supervisor to oversee their work, costing MFT supervisees anywhere from \$10,000-\$30,000 for 1,000 hours of supervised direct care during their 2-year post-degree period) and/or in contexts that do not provide sufficiently relevant clinical experience (e.g., prisons, substance abuse centers, case management, etc.) to ensure providers are ready for independent licensure.

This bill would update Hawai'i's licensing statutes in ways that would not only modernize our processes, but ultimately improve the quality and utilization of mental health care provided in our state by creating a more robust system of clinical accountability/training and a financially viable career path for local would-be providers who have a deep understanding of local cultures/customs and who in turn, may be better able to connect with clients, who in turn will be more likely to actually utilize available mental health services.

Moreover, this bill will reduce the loss of potential future mental health professionals to other careers or one of the other 23 states that have already modernized their licensing laws. In turn, this will contribute to the state economy through associate licensing fees, taxes from wages earned by associate-level licensees, and local purchases made by these licensees.

Overall, many aspects of our mental health system are deeply flawed, understaffed, and are in no way prepared to manage the onslaught of mental health issues that the general population are experiencing during and after this pandemic. The consequences of this pandemic, both short- and long-term, in terms of mental health, could be significant and could weaken the Hawai'i health care system.

If we don't develop the means to stave off and/or treat these mental health issues, individuals and families will suffer even more than they already have/do. In all areas of life, untreated mental health issues can become chronic and with crippling, long-term effects – for individuals, families, and communities.

These circumstances call for a change in the paradigm and practices of mental health care in Hawai'i. Our current model of mental health care does not adequately address the complex challenges of modern living. Let's re-vision current models of mental health care delivery by learning from other states and being creative and flexible in how we provide mental health services. To protect our community now and in the future, let's take appropriate action now. Mental health care cannot be an afterthought.

In this vein, we recommend a VERY IMPORTANT amendment. Please delete the requirements that associate licensees **pass their full licensure exam *before* obtaining an "associate license"**, [as provided on p. 5, lines 1-2; and p. 19, lines 20-21] as this creates another financial and logistical burden to potential providers. We suspect this was a drafting oversight in modeling the new associate licensing language after full licensure language – but inadvertently retaining examination requirements. Removing these testing requirements for MFTs and MHCs would be consistent with the removal of such a burden for psychologists on page 38, lines 18-21. We hope to retain the removal of testing requirements for associate licensees for all professions - to support developing the network of local providers in all mental health disciplines.

We also appreciate the comprehensive purpose language in this bill, as well as in HB1242 and HB1830 explaining the gravity of demand and the costs and hardships for new professionals and their Hawaii-based patients. **We suggest the insertion of the words "flaw in" on page 2, lines 13 before**

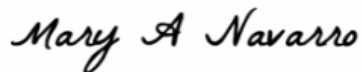
“regulatory oversight” for clarification; and also **respectfully request that SB1444’s purpose language be amended to include further language to enumerate the following** additional purposes:

- *Clarifying in law that Associate Level practitioners would not be allowed to do anything they aren’t already permitted to do now, except have their services billed through the insurance covering their supervisor’s treatment and supervision; and*
- *Enabling and encouraging post-degree, pre-licensed mental health practitioners to stay in Hawaii to complete the required hours of supervised work for full licensure – thereby promoting a diverse pool of homegrown providers that can best meet the needs of Hawaii’s people.*

We also support clarifying language provided in the National Association of Social Workers – Hawaii Chapter’s (NASW) testimony regarding the use of the term “intern” – as our statute uses this term for students, not licensees or graduates; and we agree their statute and language should run parallel in structure as ours. We also recommend NASW’s suggested language on insurance billing be included as well.

Thank you for the opportunity to provide this testimony in strong support of this bill.

Sincerely,

A handwritten signature in black ink that reads "Mary A. Navarro". The signature is written in a cursive, flowing style.

Mary A. Navarro, MA, LMFT, President
The Hawaiian Islands Association for Marriage and Family Therapy

☒ *Sharon K. Usagawa MSW, DCSW, LCSW* ☒
970 North Kalaheo Avenue, Suite C201 Kailua, Hawaii 96734
ph: 808-386-8523 email: skulcsw@aol.com

January 25, 2024

Aloha Committee Members,

I am strongly in support of SB1444, Relating to Mental Health and the Provisional Licensure of Mental Health Professionals (MHP) in training, and respectfully ask this committee to pass this bill. As a practicing Clinician in Private Practice, I am constantly having to turn away clients seeking mental health support and it is heartbreaking. I hate turning people away in their time of need and I often hear the same sentiment from many of my colleagues. This bill in its enactment will be able to resolve some problematic issues on multiple levels.

In addition to the shortage of available MHPs, we also lack the availability of sites where up and coming Professionals seeking their Clinical License can obtain their direct practice hours for Licensure. I am in the fortunate position where I can also provide Supervision and Training for Graduate Student Interns as well as Professional Interns seeking their Clinical License. For years now, in addressing these two deficits, I have offered their services as alternatives to clients that are unable to locate a Licensed MHP. In doing so, it helps to address the shortage of MHPs available as well as provide assistance and opportunity for Licensure Candidates to obtain their hours. This option is not very viable however, as most people must already work a full-time job while also collecting their hours. Additionally, it takes up a lot of my voluntary and donated time which can create a challenge for my own income and economic security.

This proposal would support those issues on all islands, particularly on neighbor islands where the need is often greater due to even more limited resources. This bill would also improve and incentivize on-the-job training and cultivate homegrown talent - encouraging them to stay in Hawaii to meet the unique needs of our community.

Lastly, this bill would also provide more relief for the Providers currently working to support the community. I have witnessed an increase in burn-out in some of my colleagues due to the burden of sometimes over-extending themselves or getting overwhelmed with the high need. The demand for mental health services has risen to a record high. The good thing is that, as there has been a strong focus on mental health, more people are open and willing to seek counseling support. The need is there; we've been in it for years and need to address this more quickly and efficiently.

Thank you for your thoughtful consideration of this very important matter.

Respectfully,



Sharon K. Usagawa LCSW

SB-1444

Submitted on: 1/24/2024 3:48:45 PM

Testimony for HHS on 1/26/2024 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Dr. John Souza, Jr.	Individual	Support	Remotely Via Zoom

Comments:

Support for SB1444 – Establishing Associate Licensure for Mental Health Professionals

Dear Committee Members,

I am writing to express my strong support for Senate Bill 1444, which seeks to establish provisional or associate-level licensure for marriage and family therapists, mental health counselors, and psychologists in Hawai'i.

I have witnessed firsthand the challenges faced by emerging professionals in our field, as well as the gaps in mental health services accessible to our communities. SB1444 addresses these crucial issues by:

1. **Creating Pathways for Emerging Professionals:** By establishing associate licensure, this bill provides an essential stepping stone for recent graduates and those entering the mental health field. This not only aids their professional development but also helps in addressing the shortage of qualified mental health professionals in Hawai'i.
2. **Enhancing Accessibility to Mental Health Services:** The bill's provision for insurance reimbursements for services rendered by provisional or associate-level professionals will make mental health care more affordable and accessible to a broader segment of our population.
3. **Current Provision in SB1444:**
 - o The bill stipulates that individuals seeking associate-level licensure as marriage and family therapists must have passed the National Marriage and Family Therapy Exam.
 - o **Proposed Amendment:**
 1. **Remove the National Exam Requirement for Associate Licensure:** I propose amending the bill to eliminate the requirement of passing the National Marriage and Family Therapy Exam for obtaining associate licensure. The requirement for passing this exam should remain for those seeking full licensure.

I firmly believe that the passage of SB1444 will be a significant step forward in enhancing the mental health landscape of Hawai'i. It will not only benefit mental health professionals but, more importantly, will have a profound impact on the well-being of our communities.

Thank you for considering my testimony in support of this vital piece of legislation.

Sincerely,

Dr. John Souza, Jr., LMFT, DMFT

SB-1444

Submitted on: 1/23/2024 1:03:14 PM

Testimony for HHS on 1/26/2024 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Cards Pintor	Individual	Support	Written Testimony Only

Comments:

Aloha,

I support this bill.

Mahalo nui,

Cardenas Pintor

SB-1444

Submitted on: 1/25/2024 5:10:03 AM

Testimony for HHS on 1/26/2024 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Erin Castaldi	Individual	Support	Written Testimony Only

Comments:

I support SB 1444

SB-1444

Submitted on: 1/25/2024 7:12:23 AM

Testimony for HHS on 1/26/2024 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Emma Ishihara	Individual	Support	Written Testimony Only

Comments:

Support for SB343 – Establishing Associate Licensure for Mental Health Professionals

To the Esteemed Members of the Committee,

I am writing to express my strong support for Senate Bill 343, which seeks to establish provisional or associate-level licensure for marriage and family therapists, mental health counselors, and psychologists in Hawai'i, and support social workers in receiving their clinical supervision.

I have witnessed firsthand the challenges faced by emerging professionals in our field, as well as the gaps in mental health services accessible to our communities. SB343 addresses these crucial issues by:

1. **Creating Pathways for Emerging Professionals:** By establishing associate licensure, this bill provides an essential stepping stone for recent graduates and those entering the mental health field. This not only aids their professional development but also helps in addressing the shortage of qualified mental health professionals in Hawai'i.
2. **Enhancing Accessibility to Mental Health Services:** The bill's provision for insurance reimbursements for services rendered by provisional or associate-level professionals will make mental health care more affordable and accessible to a broader segment of our population.
3. **Strengthening Mental Health Care Delivery:** Allowing psychologist license applicants to sit for licensing exams sooner and enabling the Board of Psychology to grant licensure waivers under certain conditions, SB343 streamlines the process of bringing qualified professionals into active service.

I firmly believe that the passage of SB343 will be a significant step forward in enhancing the mental health landscape of Hawai'i. It will not only benefit mental health professionals but, more importantly, will have a profound impact on the well-being of our communities.

Thank you for considering my testimony in support of this vital piece of legislation.

Sincerely,

Emma Ishihara, LSW

SB-1444

Submitted on: 1/25/2024 8:33:10 AM

Testimony for HHS on 1/26/2024 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Crystal Charkowski	Individual	Support	Written Testimony Only

Comments:

Dear Health and Human Services Committee,

Thank you for the opportunity to testify in support of SB1444.

I am a recent MSW graduate from the University of Hawaii at Manoa. A majority of the cohort I graduated with are currently in the testing and licensing process for our Licences Social Work (LSW). I was so grateful for my education that helped me pass my exam and I am officially licensed in the state of Hawaii. I serve the community of Kailua-Kona on the island of Hawaii, but work for an organization that serves the entire population of the island of Hawaii.

I am fortunate to work for a company that is providing supervised psychotherapy hours as part of my job title. However that is not the case for the majority of my 27 cohort members. Most students who graduate with a Masters of Social Work then scrounge for psychotherapy hours in an attempt to collect the required 3000 hours of supervision if they want to pursue the Licensed Clinical Social Work path. This creates a 2-5 year gap of mental health services to our state as educated and passionate social workers are limited to the jobs they can find because of insurance billing. It's bad for the new MSW's as we have to work multiple jobs, and beg for supervision, often trying to justify our hardwork as applicable to the 3000 supervision hours which are demotivating barriers. It's bad for the people of Hawaii who needs social work and mental health services as it limits access to mental health support by the eager and ready LSW's. It's bad for our state because the health of our population directly affects employment rates, voting, crime, substance use, criminal justice, taxes and so much more.

This bill would allow a LCSW to bill for the work done by the LSW which will increase the supervision bond, increase access to quality supervision and job opportunities for newly educated social workers and increase access to quality mental health care to our community.

This bill will also increase access to mental health care with the provisional and associate-level licenses for marriage and family therapists, mental health counselors, and psychologists! I have several highly educated and passionate friends who live in this state who are unable to find supervision or jobs within direct mental health care that allow them to use their skills to support the community due to insurance and billing barriers in this state.

I look forward to the changes coming in the future for my chosen field of service!

Thank you for the hard work you do!

Crystal Charkowski, MSW, LSW

SB-1444

Submitted on: 1/25/2024 8:50:59 AM

Testimony for HHS on 1/26/2024 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Kanela Kamahalohanuilai	Individual	Support	Written Testimony Only

Comments:

I fully support Senate Bill 1444.

SB-1444

Submitted on: 1/25/2024 9:19:25 AM

Testimony for HHS on 1/26/2024 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Andrea Agcaoili Mills	Individual	Support	Written Testimony Only

Comments:

Support for SB1444

Dear Committee Members,

I am writing to express my strong support for Senate Bill 1444, which seeks to establish provisional or associate-level licensure for marriage and family therapists, mental health counselors, and psychologists in Hawai'i, and support social workers in receiving their clinical supervision.

I have witnessed firsthand the challenges faced by emerging professionals in our field, as well as the gaps in mental health services accessible to our communities. SB1444 addresses these crucial issues by:

1. **Creating Pathways for Emerging Professionals:** By establishing associate licensure, this bill provides an essential stepping stone for recent graduates and those entering the mental health field. This not only aids their professional development but also helps in addressing the shortage of qualified mental health professionals in Hawai'i.
2. **Enhancing Accessibility to Mental Health Services:** The bill's provision for insurance reimbursements for services rendered by provisional or associate-level professionals will make mental health care more affordable and accessible to a broader segment of our population.
3. **Strengthening Mental Health Care Delivery:** Allowing psychologist license applicants to sit for licensing exams sooner and enabling the Board of Psychology to grant licensure waivers under certain conditions, SB1444 streamlines the process of bringing qualified professionals into active service.

I firmly believe that the passage of SB1444 will be a significant step forward in enhancing the mental health landscape of Hawai'i. It will not only benefit mental health professionals but, more importantly, will have a profound impact on the well-being of our communities.

Thank you for considering my testimony in support of this vital piece of legislation.

Sincerely,

Andrea A. Mills, LCSW

andreamills150@gmail.com

SB-1444

Submitted on: 1/25/2024 11:32:17 AM

Testimony for HHS on 1/26/2024 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
MARNIE HONEYCUTT	Individual	Support	Written Testimony Only

Comments:

Please allow this modernization of practice and increased access to providers!

I love being a social worker and have loved my entire career here on the Big Island. It has been my privilege and honor to support my community. However, the need has continued to rise and not equal to the number of providers. I am quickly aging out. It is so hard to turn down referrals; yet, it has become common practice.

I am in complete support of SB 343 & SB1444, Please help the residents of Hawai'i by allowing more access to accountable providers.

Marnie Honeycutt, LCSW

Written Testimony

Support for SB1444 – Establishing Associate Licensure for Mental Health Professionals

Dear Committee Members,

I am writing to express my strong support for Senate Bill 1444, which seeks to establish provisional or associate-level licensure for marriage and family therapists, mental health counselors, and psychologists in Hawai'i, and support social workers in receiving their clinical supervision.

I have witnessed firsthand the challenges faced by emerging professionals in our field, as well as the gaps in mental health services accessible to our communities. **SB1444** addresses these crucial issues by:

1. **Creating Pathways for Emerging Professionals:** By establishing associate licensure, this bill provides an essential stepping stone for recent graduates and those entering the mental health field. This not only aids their professional development but also helps in addressing the shortage of qualified mental health professionals in Hawai'i.
2. **Enhancing Accessibility to Mental Health Services:** The bill's provision for insurance reimbursements for services rendered by provisional or associate-level professionals will make mental health care more affordable and accessible to a broader segment of our population.
3. **Strengthening Mental Health Care Delivery:** Allowing psychologist license applicants to sit for licensing exams sooner and enabling the Board of Psychology to grant licensure waivers under certain conditions, SB1444 streamlines the process of bringing qualified professionals into active service.

I firmly believe that the passage of SB1444 will be a significant step forward in enhancing the mental health landscape of Hawai'i. It will not only benefit mental health professionals but, more importantly, will have a profound impact on the well-being of our communities.

Thank you for considering my testimony in support of this vital piece of legislation.
Sincerely,

Chelsea Huntington [Practicum Student/ Behavioral Health] [317-408-3857 /
Chunt44@hawaii.edu]

We appreciate your prompt response to this urgent call. Together, we can make a significant impact on the mental health landscape of our state.

Thank you for your dedication and support.

Warm regards,

SB-1444

Submitted on: 1/25/2024 10:41:35 AM

Testimony for HHS on 1/26/2024 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Keli Chambers	Individual	Support	Written Testimony Only

Comments:

I would like to express my unequivocal support for SB343, which aims to allow Licensed Social Workers to bill insurance under the supervision of Licensed Clinical Social Workers in Hawai‘i, provisional licensure for Marriage and Family therapists and Mental Health Counselors, and allows licensure waivers for psychologists under certain circumstances. This legislation is crucial in addressing the current provider shortage and ensuring accessible mental health services for our residents.

The shortage of mental health providers is a pressing issue that adversely affects individuals seeking support. By creating provisional licensures and allowing supervised licensees to bill for their services, we can expand the pool of qualified professionals who can contribute to meeting the growing demand for mental health services in Hawai‘i. This approach not only maximizes the skills and expertise of more mental health professionals, but also provides a sustainable solution to alleviate the strain on our mental health care system.

Further, many LSW's and other mental health professionals are already working under the supervision of independent licensed professionals for necessary licensure experience. These providers are not equitably compensated for this additional work. By allowing these supervised licensees to bill for their supervision work, it will enhance their economic wellbeing and will therefore have a positive impact in overall quality of care. Licensed Social Workers must have a Master's Degree in Social Work from an accredited university, pass an AWSB LSW exam, and maintain continuing education requirements. Provisional LMFT and LMHC also have Master's Degrees in their respective fields and must work under supervision for 3-6 years before obtaining licensure. The average salary of an LSW and unlicensed LMFT and LMHC in Hawai‘i is around \$60,000. Comparatively, Registered Nurses require a Bachelor's Degree in Nursing from an accredited university and must pass the NCLEX-RN exam. The average salary of an RN in Hawai‘i is around \$105,000. LSW's and RN's both work directly under the supervision of a higher licensed professional and provide direct services to clients. During COVID-19, nurses saw pay raises that enhanced interest in nursing to meet the needs of the population. Social Workers and therapists did not receive the same support, and has therefore led to a shortage in mental health providers in the state due to low wages compared with lesser qualified positions.

I believe that by allowing current LSW's and provisionally licensed mental health professionals to bill insurance for direct services under the supervision of independent practitioners, more clients will receive the care they need in a more timely manner. I kindly urge you to consider the positive impact that this legislation can have on our community's mental

health, economic impact, and streamlined access to mental health care. By supporting and enacting this proposal, we take a significant step towards meeting this much needed support.

Thank you for your attention to this matter, and I appreciate your commitment to the well-being of our community.

Support for SB1444 – Establishing Associate Licensure for Mental Health Professionals

Dear Committee Members,

I am writing to express my dedicated support for Senate Bill 1444, which seeks to establish provisional or associate-level licensure for marriage and family therapists, mental health counselors, and psychologists in Hawai'i, and support social workers in receiving their clinical supervision.

I have witnessed firsthand the challenges faced by emerging professionals in our field, as well as the gaps in mental health services accessible to our communities. SB343 addresses these crucial issues by:

1. **Creating Pathways for Emerging Professionals:** By establishing associate licensure, this bill provides an essential stepping stone for recent graduates and those entering the mental health field. This not only aids their professional development but also helps in addressing the shortage of qualified mental health professionals in Hawai'i.
2. **Enhancing Accessibility to Mental Health Services:** The bill's provision for insurance reimbursements for services rendered by provisional or associate-level professionals will make mental health care more affordable and accessible to a broader segment of our population.
3. **Strengthening Mental Health Care Delivery:** Allowing psychologist license applicants to sit for licensing exams sooner and enabling the Board of Psychology to grant licensure waivers under certain conditions, SB343 streamlines the process of bringing qualified professionals into active service.

I passionately believe that the passage of SB1444 will be a significant step forward in enhancing the mental health landscape of Hawai'i. It will not only benefit mental health professionals but, more importantly, will profoundly impact our communities' well-being. Thank you for considering my testimony in support of this vital piece of legislation.

Sincerely,

Shaun Kamisato

MSW Student

Shaunwk@hawaii.edu

LATE

SB-1444

Submitted on: 1/26/2024 4:03:08 AM

Testimony for HHS on 1/26/2024 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Natalia Werkoff	Individual	Support	Written Testimony Only

Comments:

Aloha,

I am a Licensed Clinical Social Worker and I support this bill.

Natalia Werkoff

LATE

SB-1444

Submitted on: 1/26/2024 7:25:09 AM

Testimony for HHS on 1/26/2024 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Mary Pat Waterhouse	Individual	Support	Written Testimony Only

Comments:

Aloha Chair San Buenaventura and Members,

I strongly support this bill. It will provide Hawaii with more mental health workers, which is critically needed. In addition, it will stem the loss of mental health workers from Hawaii. For example, when doctorate students are looking for an internship in Hawaii they often end up having to the mainland since we do not have this provisional license. Once there and after their internship is complete they often have professional and personal ties and they remain on the mainland. We need to do what we can to keep them in Hawaii.

Mahalo,

Mary Pat Waterhouse