



OFFICE OF THE ASSISTANT SECRETARY OF DEFENSE
1500 DEFENSE PENTAGON
WASHINGTON, D.C. 20301-1500

MANPOWER AND
RESERVE AFFAIRS

March 13, 2023

The Honorable Representative Della Au Belatti
Chair, Committee on Health & Homelessness
415 South Beretania St.
Honolulu, HI 96813

SUBJ: Letter of Support – SB 320 SD 1 (Relating to the Psychology Interjurisdictional Compact)

Dear Chair Belatti, Vice Chair Takenouchi, and Members of the Committee:

On behalf of the U.S. Department of Defense (DoD) and military families, I am writing to express support for the policy addressed in Senate Bill 320 SD 1, which would establish a working group to study the feasibility and effects of the State adopting the Psychology Interjurisdictional Compact.

DoD has advocated for improved licensure and career portability for military Service members and their spouses for several years. Military spouses are disproportionately affected by state-specific professional licensing requirements that can cause delays and gaps in employment, with thirty-six percent requiring a state license to practice in their professions and an annual cross-state relocation rate ten times higher than their civilian counterparts. Accordingly, military spouses experience unemployment and underemployment at significantly higher rates than their civilian peers.

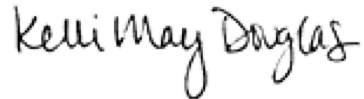
State policies enacting interstate licensure compacts, such as the Psychology Interjurisdictional Compact (PSYPACT), relieve one of the many stressors of frequent military moves by enabling military spouses to transfer their licenses more quickly across state lines and obtain employment as soon as they relocate to a new state. These policies facilitate greater career sustainability for military spouses, improving their families' financial security and overall resilience.

Finally, interstate licensure compacts benefit not only military spouses, but also apply to all eligible professionals to include active-duty Service members, members of the reserve components, veterans, and civilians. By enacting the PSYPACT policy, Hawaii would have the opportunity to increase its behavioral healthcare workforce available to serve the local community while supporting military families. The Department welcomes the opportunity to provide input to a working group evaluating the feasibility of Hawaii joining the other thirty-five states who have approved this compact.

In closing, the Department of Defense is very appreciative of Hawaii's ongoing commitment and efforts to support members of the military and their families who sacrifice much in service to our

country. Thank you for providing me the opportunity to provide comments in support of this policy proposal.

Sincerely,

A handwritten signature in black ink that reads "Kelli May Douglas". The signature is written in a cursive, flowing style.

Kelli May Douglas
Pacific Southwest Regional Liaison
Defense-State Liaison Office
DoD, Military Community & Family Policy
571-265-0075

Testimony of the Board of Psychology

**Before the
House Committee on Health and Homelessness
Wednesday, March 15, 2023
8:30 a.m.
Conference Room 329 & Videoconference**

**On the following measure:
S.B. 320, S.D. 1, RELATING TO THE PSYCHOLOGY INTERJURISDICTIONAL
COMPACT**

Chair Belatti and Members of the Committees:

My name is Christopher Fernandez, and I am the Executive Officer of the Board of Psychology (Board). The Board appreciates the intent of this bill, but offers comments expressing its concerns.

The purposes of this bill are to: (1) establish a working group to study the feasibility and effects of the State adopting the Psychology Interjurisdictional Compact (Compact); and (2) require a report to the Legislature.

The Board recommends that potential negative impacts on the public and consumer protection be added to working group's areas of focus. It is the Board's understanding that the majority of Compact users will be providing services remotely, and thus will not have to adhere to the licensing requirements of this state as set forth in Hawaii Revised Statutes chapter 465. The Board continues to question how disciplinary actions for remote practicing Compact practitioners will function, and if pursuing such disciplinary action is even possible based on this State's Constitution and laws. The Board also has concerns about insurance coverage for those who practice in this remote fashion merely by Compact authorization. The bill does not address reimbursement or liability insurance for compact-authorized psychologists.

The Board has strong concerns about the total lack of representation by Hawaii-licensed psychologists in the composition of the working group, while Compact proponents such as the Department of Defense and the Council of State Governments have established seats. The Board believes that Hawaii-licensed psychologists are a vital resource with relevant knowledge and expertise on the practice of psychology in the State; it is a severe oversight to fail to include this perspective within the working

group. The Board recommends that the working group add an individual Hawaii licensed psychologist or Hawaii Psychological Association delegate, and a member of the Board of Psychology—particularly since the Board will be the entity in charge of facilitating the Compact in Hawaii if this bill is enacted.

Thank you for the opportunity to testify on this bill.



ALOHACARE

To: Representative Della Au Belatti, Chair
Representative Jenna Takenouchi, Vice Chair
House Committee on Health & Homelessness

From: Paula Arcena, External Affairs Vice President
Mike Nguyen, Public Policy Manager

Hearing: Wednesday, March 15, 2023 8:30 AM

RE: **SB320, SD1 Relating to the Psychology Interjurisdictional Compact-Support**

AlohaCare appreciates the opportunity to provide testimony in **support of SB320, SD1**. This measure establishes a working group to evaluate the feasibility and effects of the State entering into a Psychology Interjurisdictional Compact, designates members of the working group and specifies reporting requirements to the Legislature.

Founded in 1994 by Hawai`i's community health centers, AlohaCare is a community-rooted, non-profit health plan serving over 80,000 Medicaid and dual-eligible health plan members on all islands. Approximately half of our membership are keiki. We are Hawai`i's only health plan exclusively dedicated to serving Medicaid beneficiaries. Our mission is to serve individuals and communities in the true spirit of aloha by ensuring and advocating for access to quality health care for all. We believe that health is about supporting whole-person health needs.

Psychologists are an important source of care for mental health services. Hawai`i's shortage of psychologists is the most severe for our most vulnerable residents, Medicaid beneficiaries and those who live in rural communities. A lack of timely access to mental health treatment can have devastating consequences. During the COVID-19 pandemic which triggered an alarming rise in anxiety and depression, pre-existing backlogs and months waits for appointments were exacerbated. The shortage contributes to burnout and fatigue because our psychologists are stretched thin. Telehealth provided a way to avoid in-person contact during the pandemic, but did little to address the shortage of psychologists.

We support this measure's approach to form a working group to study the benefits, implementation and economic impacts of joining the Psychology Interjurisdictional Compact in an effort to make mental health a priority by improving access to quality care for all of Hawai`i's residents.

Mahalo for the opportunity to submit testimony in **support of SB320, SD1**.



March 15, 2023

To: Chair Belatti, Vice Chair Takenouchi, and Members of the House Committee on Health & Homelessness

From: Hawaii Association of Health Plans Public Policy Committee

Date/Location: March 15, 2023; 8:30 a.m., Conference Room 329/Videoconference

Re: Testimony in support of SB 320 SD2– Relating to the Psychology Interjurisdictional Compact

The Hawaii Association of Health Plans (HAHP) appreciates the opportunity to testify in support of SB 320 SD2. HAHP is a statewide partnership that unifies Hawaii’s health plans to improve the health of Hawaii’s communities together. A majority of Hawaii residents receive their health coverage through a plan associated with one of our organizations.

HAHP recognizes that the pandemic highlighted gaps in our health care system and appreciates the legislature’s attempt to relieve some of the burden on our health care providers and increase resources and access for rural communities. By establishing a working group to study the feasibility and effects of the State adopting the Psychology Interjurisdictional Compact, we can continue to address opportunities for workforce expansion to strengthen Hawaii’s health care network. Participation in interstate compacts can be one way that we can expand Hawaii’s “toolkit” for providing essential care for our members and our community. We support a working group to study feasibility.

Thank you for the opportunity to testify on SB 320 SD2.

Sincerely,

HAHP Public Policy Committee
cc: HAHP Board Members

AlohaCare | HMAA | HMSA | Humana | HWMG | Kaiser Permanente | MDX Hawaii | Ohana Health Plan | UHA Health Insurance | UnitedHealthcare

hahp.org | 818 Keeaumoku Street, Honolulu, HI 96814 | info@hahp.org



March 15, 2023

8:30 a.m.

Conference Room 329

VIA VIDEOCONFERENCE

To: House Committee on Health & Homelessness

Rep. Della Au Belatti, Chair

Rep. Jenna Takenouchi, Vice Chair

From: Grassroot Institute of Hawaii

Ted Kefalas, Director of Strategic Campaigns

RE: SB320 SD1 — RELATING TO THE PSYCHOLOGY INTERJURISDICTIONAL COMPACT

Comments Only

Dear Chair and Committee Members:

The Grassroot Institute of Hawaii would like to offer its comments on [SB320 SD1](#), which would create a working group to review the feasibility and possible consequences of Hawaii joining the Psychology Interjurisdictional Compact (PSYPACT).

According to the Physician Workforce 2023 annual report, Hawaii has a 45.2% shortage of adult psychiatrists and a 42.8% shortage of child and adolescent psychiatrists.¹

But the shortage extends far beyond psychiatrists alone. Hawaii employed 66 school psychologists in 2022 — for a ratio of one school psychologist for every 2,800 students. The National Association of School Psychologists suggests a 1 to 500 ratio.²

¹ [“Annual Report on Findings from the Hawai‘i Physician Workforce Assessment Project,”](#) University of Hawaii System, Dec. 2022, p. 17.

² Jessica Terrell, [“Hawaii Has A Shortage Of School Psychologists. National Research Says That’s A Problem,”](#) Honolulu Civil Beat, Sept. 17, 2022.

As we discuss in a new policy brief [“How changing Hawaii’s licensing laws could improve healthcare access.”](#) licensing compacts are one reform that might make it easier for Hawaii to attract and retain healthcare professionals.³

“Joining multiple interstate compacts could be the simplest route to address the difficulties medical professionals face in moving to Hawaii.

“Most important, the compact approach has support from within the medical community,” the report states.

Numerous other states have adopted this compact and others, and the various compact commissions are more than happy to assist state regulators in the implementation phase.

Even though this bill does not outright adopt PSYPACT, we hope that the working group will examine the costs and benefits of joining the compact and that the Legislature might consider it again next session.

Thank you for the opportunity to submit our comments.

Sincerely,

Ted Kefalas
Director of Strategic Campaigns,
Grassroot Institute of Hawaii

³ Malia Hill, [“How changing Hawaii’s licensing laws could improve healthcare access.”](#) Grassroot Institute of Hawaii, Feb. 2023.

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 HOMELESSNESS

Representative Della Au Belatti, Chair
Representative Jenna Takenouchi, Vice Chair

Wednesday, March 15, 2023 8:30 AM
Conference Room 329 & Videoconference


Comments on SB320, SD1 RELATING TO Interstate Compact for Psychologists

The membership of the Hawaii Psychology Association (HPA) is divided on whether or not Hawaii should join PSYPACT which would be established if SB 320 is passed into law. Given the lack of consensus, HPA takes no position on the issue at this time. Establishing a working group to study the issue has merit. Nationally, the majority of state associations of the American Psychological Association are in favor of joining PSYPACT.

Opposition by our members in Hawaii is largely due to concerns that PSYPACT would allow mainland, for-profit corporations to flood the market with poorly trained psychologists who are unfamiliar with Hawaii's diverse culture. There is also concern that mainland psychologists practicing telehealth in Hawaii would not be adequately regulated by the states in which they are licensed. Therapeutic outcomes may be better for psychologists referred by a trusted source than for psychologists who gain clients by advertising through the media. On the other hand, PSYPACT would allow Hawaii practitioners to see clients who are on the mainland and would, at least temporarily, help address the acute provider shortage. More time is needed for our membership to further study and debate the feasibility and safety of PSYPACT.

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

Sincerely,



Alex Lichton, Ph.D.
Chair, HPA Legislative Action Committee

SB-320-SD-1

Submitted on: 3/11/2023 11:03:46 AM

Testimony for HLT on 3/15/2023 8:30:00 AM

Submitted By	Organization	Testifier Position	Testify
Noelani Rodrigues	Individual	Oppose	Written Testimony Only

Comments:

Dear Legislators,

I am a licensed psychologist. I am a resident of Hawaii. I am strongly opposed of Hawaii beoming part of Psypact. Hawaii currently has higher standards than many of the other states in licensinging requirements for clinical psychologists. By joining Psypact we are lowering the bar of the quality of care for our people.

Although I hold licenses in several states as a clinical psychologist - my original license is based in Hawaii. Hawaii required 1900 hours pre-doctoral training. Another 1900 post-doctoral training prior to licensure. In comparison, California permits a psychologist is obtain all hours post-doctoral and only requires 3000 hours. This is not comparable to Hawaii's current requirements.

I believe if are state wants to entertain the idea of allowing licensed psychologists from other states to serve our people then perhaps Hawaii needs to consider decreasing the licensing requirements for Hawaii residents who are seeking licensure. In other words, it is not equitable or fair to expect a person applying for their license in Hawaii as a psychologist to attain more training than those you are considering allowing to practice here without those requirements.

I also hold psychology licenses now in the following states; Alaska, California, Idaho, Washington, Colorado, and Vermont. For most of these states I have also need to pass a state jurisprudence exam. I believe Hawaii needs to consider a similar requirement not only to assess for the applicant's knowledge and competence in Hawaii law & ethics but also of Hawaii's unique culture.

Please do not think we need to joining Psypact just because its a mainland thing and all the other states are doing it.

Sincerely,

Dr. Noelani C. Rodrigues, PhD, MSCP

SB-320-SD-1

Submitted on: 3/14/2023 2:38:19 PM

Testimony for HLT on 3/15/2023 8:30:00 AM

Submitted By	Organization	Testifier Position	Testify
Diana Bray	Individual	Support	Written Testimony Only

Comments:

To: The Honorable Joy A. San Buenaventura, Chair

The Honorable Henry J.C. Aquino, Vice-Chair

Senate Committee on Health and Human Services

From: Diana Bray, Psy.D. Clinical Psychologist

RE: SB320 SD1 Relating to the Psychology Interjurisdictional Compact Working Group Study

Thank you for the opportunity to submit written testimony in support of SB 320 SD1. As a licensed Clinical Psychologist in Hawaii and in Colorado, as well as a PSYPACT authorized practitioner, I appreciate the effort the legislature is taking to fully examine this bill.

I would like to state my strong preference for SB 320, rather than the amended version.

Though SB 320 is not moving forward this year, I support the study group evaluating the merits of the Psychology Compact (PSYPACT) as Hawaii residents are struggling to find mental health services and this Compact would be transformational in terms of its impact.

Every day that access to mental health services is limited for Hawaii residents is a matter of life and death for many, and I look forward to seeing the study findings in early 2024. I personally know several people who are searching for a Psychologist in Hawaii and cannot find anyone to see them. The shortage of mental health services for children in schools is alarming.

A couple points on testimony already submitted:

- Some of the comments around the critique of the SB320 has to do with liability issues. All Psychologists are required to have liability insurance as part of their practice, and liability ultimately lies with the practitioners. Psychologists have a strict code of conduct and an entire organization is committed to regulating inappropriate conduct. Even inadvertent and negligent violations that are committed by Psychologists are investigated.

- As to the immunity of the PSYPACT organization from liability, that applies to many government organizations. If a person with a driver's license inadvertently hits another person while driving, that person's family cannot typically sue the organization that issued the drivers license.
- Clarification that Psychologists who are PSYPACT authorized are not "unlicensed." Most PSYPACT authorized providers would not typically be licensed in Hawaii, but they will always be licensed elsewhere.
- The standard for authorization is very high. To be considered for authorization to practice under PSYPACT, one must not just have a Masters, but a Doctoral degree from a program that was accredited at the time of attendance. Purportedly one state in the country has not signed on to PSYPACT because of this accreditation requirement. The bar is set high so that people receiving services have the most protection possible.
- For-profit corporations cannot apply to be PSYPACT members, only individuals can.
- Regarding the comment that practitioners outside Hawaii might not understand the different populations and diverse needs of people in Hawaii, that area of critique is covered by the Psychology licensure code of practice.
- Psychologists are not permitted to practice outside of their scope of practice. Just as you would not go to a heart surgeon for eye surgery, the same is true for Psychologists. Psychologists have to practice inside their areas of expertise and experience.
- When deciding whether to form a study group to examine PSYPACT for next year, please imagine the many resources which would suddenly be available to the residents of Hawaii. Yes, the Compact would also enable practitioners inside and outside Hawaii to expand their practices, but the far greater benefit would be for Hawaiian residents who would quite suddenly have access to practitioners in 34 other states and they could have choice of extensive resources that are now currently unavailable to them.

I highly recommend contacting the Executive Director of PSYPACT, Janet Orwig, MBA, CAE, 678-216-1175 ext. 507 who can provide significant clarification on these issues.

Thank you for allowing the opportunity to testify in support of SB 320 and SB 320 SD1, and feel free to reach out to me with any questions regarding my testimony.

Diana Bray, Psy.D.

Englewood, Colorado

Kihei, Hawaii

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303-888-7323