



STATE HEALTH PLANNING AND DEVELOPMENT AGENCY

DEPARTMENT OF HEALTH - KA 'OIHANA OLAKINO

JOSH GREEN, MD
GOVERNOR OF HAWAII
KE KIA'ĀINA O KA MOKU'ĀINA 'O HAWAII

KENNETH S. FINK, MD, MGA, MPH
DIRECTOR OF HEALTH
KA LUNA HO'OKELA

JOHN C. (JACK) LEWIN, MD
ADMINISTRATOR

February 4, 2026

TO: HOUSE COMMITTEE ON HEALTH
Representative Gregg Takayama, Chair
Representative Sue L. Keohokapu-Lee Loy, Vice Chair

HOUSE COMMITTEE ON HUMAN SERVICES & HOMELESSNESS
Representative Lisa Marten, Chair
Representative Ikaika Olds, Vice Chair
Honorable Members

FROM: John C. (Jack) Lewin, MD, Administrator, SHPDA, and Sr. Advisor to Governor Josh Green, MD on Healthcare Innovation

RE: **HB 1704 -- RELATING TO PSYCHOLOGY INTERJURISDICTIONAL COMPACT**

HEARING: Wednesday, February 4, 2026 @ 09:00 am; Conference Room 329

POSITION: SUPPORT with COMMENTS

Testimony:

SHPDA supports HB 1704 with comments.

This bill is intended to expand access to timely psychological services in Hawai'i by adopting the Psychology Interjurisdictional Compact (PSYPACT), which allows qualified, licensed psychologists in other compact states to provide telepsychology and limited temporary in-person services to Hawai'i residents. By creating a consistent, multi-state framework with shared standards and coordinated oversight, the bill reduces cross-state licensing barriers while maintaining public protection and supporting care access for rural and underserved communities.

This bill would expand timely access to high-quality behavioral health care and increase the pool of qualified psychologists available to serve Hawai'i residents. The bill is especially beneficial for neighbor islands and underserved communities, and it helps ensure kama'āina who travel or return home can maintain continuity with long-time providers without unnecessary disruption. At the same time, PSYPACT strengthens public protection by promoting shared standards, information-sharing, and

HB 1704 testimony of SHPDA (2026), continued.

accountability across compact states. Finally, requiring Department of Commerce and Consumer Affairs to adopt implementing rules helps ensure these access improvements are carried out with clear safeguards and consistent oversight.

Our support is contingent on assuring in the implementation of this measure that consideration of using locally based and licensed providers when available for these types of clinical services is strongly preferred, and this service should not replace or bypass local providers.

For these aforementioned reasons including the last caveat, SHPDA supports this bill and its goal of responsibly expanding access to behavioral health services through the PSYPACT, particularly for neighbor island and underserved communities. By reducing unnecessary cross-state barriers while preserving strong consumer protections and coordinated oversight, the bill will help improve timely access and continuity of care for Hawai'i residents

Thank you for hearing HB 1704.

Mahalo for the opportunity to testify.

■ -- Jack Lewin MD, Administrator, SHPDA

Testimony of the Board of Psychology

LATE

**Before the
House Committee on Health
Tuesday, February 4, 2026
9:00 a.m.
Via Videoconference**

**On the following measure:
H.B. 1704, RELATING TO RELATING TO THE PSYCHOLOGY
INTERJURISDICTIONAL COMPACT**

Chair Takayama 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 purpose of this bill is to adopt the Psychology Interjurisdictional Compact (PSYPACT) to regulate the practice of telepsychology and the temporary in-person, face-to-face practice of psychology by psychologists across state boundaries. The measure also requires the Department of Commerce and Consumer Affairs to adopt rules to implement and administer the Compact with an effective date of January 1, 2027.

The Board is scheduled to review this bill at its meeting on February 6, 2026. In the interim, please accept the following comments by the Board's legislative liaison.

Since 2020, when the PSYPACT was first introduced, the Board has generally supported the intent of the Compact while consistently raising implementation concerns. Most recently, during the testimony on S.B. 320 in the 2024 Legislative Session, the Board identified the following issues:

- (1) The Board has been unable to identify information regarding enforcement costs associated with the Compact, which may require additional staff time and resources, including potential interjurisdictional travel to investigate complaints or attend hearings.
- (2) The Board does not currently conduct FBI background checks for licensure applicants, as such authority is not established under Chapter 465, of the Hawaii Revised Statutes. Adoption of the Compact would require the Board to establish this capability in coordination with the FBI.

- (3) Under the Compact, psychologists seeking authorization for interjurisdictional telepsychology or temporary in-person practice must meet specified educational requirements. Adoption of the Compact would limit the Board's authority to determine minimum degree requirements for practice in Hawaii.
- (4) Current Hawaii licensure standards require a qualifying doctoral degree in clinical, counseling, or school psychology, or a combination thereof. The Compact's broader requirement of a graduate degree in psychology may allow degree types that are presently excluded from licensure in Hawaii.
- (5) While the Board recognizes the critical need to expand access to mental health services in Hawaii, it is concerned that the Compact providers may never physically practice in the State and therefore lack familiarity with Hawaii's unique socio-cultural factors that affect health care.
- (6) The Board also notes a potential fiscal impact resulting from reduced license fee revenue, as Compact privilege fees will not be passed to DCCA to support administrative and enforcement costs.

Thank you for the opportunity to testify on this bill.

Hawai‘i State Association of Counties (HSAC)

Counties of Kaua‘i, Maui, Hawai‘i, and City & County of Honolulu

Website: hawaiicounties.org | Email: hsac@hawaiicounties.org



Testimony of the Hawai‘i State Association of Counties

H.B. No. 1704 - Support

Relating to the Psychology Interjurisdictional Compact

Committee on Health

Wednesday, February 4, 2026, 9:00 a.m.

The Hawai‘i State Association of Counties (HSAC) is a non-profit organization that represents the collective interests of Hawai‘i’s four counties: the County of Kaua‘i, County of Maui, County of Hawai‘i, and the City and County of Honolulu. HSAC’s membership includes the elected members of each county council, who advocate for policies and programs that strengthen county government, improve public safety, and enhance the quality of life for residents statewide. Through this work, HSAC helps ensure that counties are better positioned to address shared challenges and that statewide policies reflect county-level realities, an important outcome that helps make all counties stronger.

HSAC submits this testimony in **support** of H.B. 1704, which adopts the Psychology Interjurisdictional Compact (PSYPACT) and authorizes the Department of Commerce and Consumer Affairs to implement and administer the compact.

Counties across Hawai‘i continue to experience the impacts of limited access to mental health services, particularly in rural areas and on the neighbor islands. These challenges are often reflected in increased demands on county services, including emergency response, homelessness outreach, corrections, and community-based support programs. Expanding access to licensed psychological services is therefore critically important to county governments and the communities they serve.

H.B. 1704 will help address workforce shortages by allowing licensed psychologists in participating states to provide telepsychology services and limited temporary in-person services across state lines, while maintaining professional standards and public safety protections. Participation in PSYPACT will expand access to care, support continuity of treatment, and improve mental health service delivery statewide.

For these reasons, HSAC strongly supports H.B. 1704 and respectfully urges the Committee to pass this measure.

Nahelani Parsons

Executive Director, Hawai‘i State Association of Counties



February 2nd, 2026

Committee on Health and Committee on Human Services and Homelessness

Dear Chair Takayama, Chair Marten, Vice Chair Loy, Vice Chair Olds and all distinguished members of the Committee on Health and Committee on Human Services and Homelessness:

I appreciate the opportunity to comment on HB 1704, the Psychology Interjurisdictional Compact. My name is Alicia Plemmons, PhD, and I am an assistant professor and director of the Knee Regulatory Research Center at West Virginia University. This comment is not submitted on behalf of any party or interest group.

My research studies patient outcomes in terms of safety, quality, cost, and access under different practice agreements. Compacts are a unique solution to workforce mobility problems, and in fact my team has found evidence of beneficial outcomes for similar compacts, such as the interstate medical licensure compact for the physicians¹, and the enhanced nurse licensure compact for nurses².

While beneficial, piecemeal solutions through compacts have led to several logistical problems attempting to modernize healthcare legislation, develop continuing education programs, and in developing differential licensure systems for each profession.

I would like to draw your attention to a policy already used by several states, which allows psychologists from outside the state to come in and work without additional hurdles. **Universal licensing recognition**³ has had great success in attracting skilled workers, where all licenses in good standing from other states are recognized. States with universal licensing recognition addressing all professions at once, instead of through piecemeal legislation, have been more flexible and responsive, bolstering their state workforce and access to safe, high quality, cost effective medical care.

Compacts are a useful and critical tool for improving healthcare, but it is continuing a cycle of expensive, one-profession policies rather than systematic change. Data and research support considering the policy alternative of universal licensing recognition to improve efficiency of attracting skilled care workers.

Best regards,

¹ https://papers.ssrn.com/sol3/papers.cfm?abstract_id=4755497

² <https://link.springer.com/article/10.1007/s12122-022-09333-2>

³ <https://www.sciencedirect.com/science/article/abs/pii/S0165176522002920>

Dr. Alicia Plemmons, Assistant Professor, General Business
Director, Knee Regulatory Research Center
West Virginia University



February 4, 2026

To: Chair Takayama, Vice Chair Keohokapu-Lee Loy and Members of the House Committee on Health (HLT)

From: Hawaii Association of Health Plans Public Policy Committee

Date/Location: Feb. 4, 2026; 9:00 a.m./Conference Room 329 & Videoconference

Re: Testimony in support of HB 1704 – Relating to the Psychology Interjurisdictional Compact

The Hawaii Association of Health Plans (HAHP) offers this testimony in support of HB 1704. HAHF 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.

Hawaii continues to face a significant shortage of mental health professionals, particularly in Neighbor Island and rural communities. HAHF appreciates the compact's ability to increase access to needed mental health services statewide. Workforce support and expansion are important to strengthening Hawaii's health care network. We support the inclusion of the psychology interjurisdictional compact to expand Hawaii's "toolkit" for providing essential care for our members and our community.

Thank you for the opportunity to testify in **support** of HB 1704.

Sincerely,

HAHP Public Policy Committee
cc: HAHF Board Members



HAWAII GOVERNMENT EMPLOYEES ASSOCIATION

AFSCME Local 152, AFL-CIO

RANDY PERREIRA, Executive Director • Tel: 808.543.0011 • Fax: 808.528.0922

The Thirty-Third Legislature, State of Hawaii
The House of Representatives
Committees on Health and Human Services & Homelessness

Testimony by
Hawaii Government Employees Association

February 4, 2026

H.B. 1704 – RELATING TO THE PSYCHOLOGY INTERJURISDICTIONAL COMPACT

The Hawaii Government Employees Association, AFSCME Local 152, AFL-CIO **opposes H.B. 1704 which seeks to bring the State of Hawaii into the Psychology Interjurisdictional Compact.**

Broadly speaking, the Psychology Interjurisdictional Compact allows out-of-state psychologists to work in the State of Hawaii, and it allows Hawaii-based psychologists to work out-of-state in another state that is part of the Psychology Interjurisdictional Compact.

In effect, the passage of this bill into law would reduce the agency of local licensing bodies, lead to practice of psychologists of unknown quality in the State of Hawaii, and increase the likelihood that Hawaii-based talent in the public section might choose to work out-of-state in another state that is part of the Psychology Interjurisdictional Compact. The likely unintended consequence of this is diminished quality of care in our community and exacerbation of existing recruitment and retention issues in the public sector.

This is not the best possible solution to the existing recruitment and retention issue and it will not solve the issue as envisioned.

Rather than entering into a complex and binding national compact that places the destiny of our community outside of its own hands, we suggest that the State of Hawaii simply reprice civil service psychologists to aid in retention of those already in its service and recruitment of qualified applicants who might otherwise be deterred by the wages presently offered.

Accordingly, the Hawaii Government Employees Association, AFSCME Local 152, AFL-CIO opposes H.B. 1704.

We appreciate your consideration of our testimony in opposition to H.B. 1704.

Respectfully,

 Randy Perreira
Executive Director

Feb. 4, 2026, 9 a.m.
Hawaii State Capitol
Conference Room 329 and Videoconference

To: House Committee on Health

Rep. Gregg Takayama, Chair
Rep. Sue L. Keohokapu-Lee Loy, Vice Chair

House Committee on Human Services & Homelessness

Rep. Lisa Marten, Chair
Rep. Ikaika Olds, Vice Chair

From: Grassroot Institute of Hawaii

Ted Kefalas, Director of Strategic Campaigns

RE: TESTIMONY IN SUPPORT OF HB1704 — RELATING TO THE PSYCHOLOGY INTERJURISDICTIONAL COMPACT

Aloha chair, vice chair and other members of the committees,

The Grassroot Institute of Hawaii **supports** [HB1704](#), which would allow Hawaii to join the Psychology Interjurisdictional Compact (PSYPACT).

The interstate compact approach outlined in this bill would increase access to mental health professionals for Hawaii residents by allowing for the practice of telepsychology and temporary in-person, face-to-face practice of psychology across state boundaries.

Hawaii patients are in great need of mental health services. According to the National Alliance on Mental Illness, approximately 234,000 adults in Hawaii have a mental health condition, and nearly half a million Hawaii residents live in a community that lacks sufficient mental health professionals.¹

¹ "[Mental Health in Hawaii](#)," National Alliance on Mental Illness, accessed Feb. 2, 2026.

According to the Physician Workforce 2026 annual report, Hawaii has a 67% shortage of adult psychiatrists and a 64% shortage of child and adolescent psychiatrists.²

This shortage has caused burnout among Hawaii's existing mental health practitioners.

One provider told Hawaii News Now in 2021: "There are moments where I feel a little bit helpless, like I'm putting every joule of energy that I have in my body towards trying to make an impact on a problem that feels so insurmountable."³

Encouraging more counselors to practice in Hawaii requires a multipronged strategy that addresses the state's high cost of living, its regulatory scheme for healthcare facilities and more. An important part of this approach should include reforming licensing regulations for healthcare professionals.

At present, PSYPACT comprises [43 states](#), the District of Columbia and the Commonwealth of the Northern Mariana Islands. Several other states have introduced legislation to join the compact. Years of successful implementation testify to the safety and effectiveness of this approach to license reciprocity.

Joining PSYPACT would be an important step toward improving patients' access to mental and behavioral health professionals, thereby helping address mental health needs and shortages in our state.

Thank you for the opportunity to testify.

Ted Kefalas
Director of Strategic Campaigns
Grassroot Institute of Hawaii

² ["Annual Report on Findings from the Hawai'i Physician Workforce Assessment Project,"](#) University of Hawaii System, Dec. 2025, p. 22.

³ Jolanie Martinez, "[As Hawaii faces a mental health crisis, psychologists struggle to keep up with patient demand,](#)" Hawaii News Now, May 5, 2021.



LATE

To: The Honorable Gregg Takayama, Chair
The Honorable Sue Keohokapu-Lee Loy, Vice Chair
House Committee on Health

From: Paula Arcena, External Affairs Vice President
Mike Nguyen, Director of Public Policy
Maria Rallojay, Public Policy Specialist

Hearing: Wednesday, February 4, 2026, 9:00am, Conference Room 329

RE: **HB1704 Relating to the Psychological Interjurisdictional Compact**

AlohaCare appreciates the opportunity to provide testimony in **support** of **HB1704**. This measure (1) adopts the Psychological Interjurisdictional Compact to regulate the practice of telepsychology and temporary in-person, face-to-face practice of psychology by psychologists across state boundaries in the performance of their psychological practice, and (2) requires the Department of Commerce and Consumer Affairs to adopt rules to implement and administer the Compact effective 1/1/2027.

AlohaCare is a community-rooted, non-profit health plan founded by Hawai'i's Community Health Centers and the Queen Emma Clinics. We serve over 66,000 Medicaid and Medicaid-Medicare dual-eligible residents on all islands. Since 1994, AlohaCare has partnered with providers, government entities, and community-based organizations to meet the evolving needs of our safety net community as Hawai'i's only health plan focused solely on Medicaid-eligible individuals. Our mission is to serve individuals and communities in the true spirit of aloha by ensuring and advocating for equitable access to quality, whole-person care for all.

AlohaCare's commitment to whole-person care includes providing timely access to behavioral health services. We see firsthand the growing demand for behavioral health services, especially in neighbor islands and rural communities. Workforce shortages in behavioral health are one of the most significant barriers to timely, appropriate care. For these reasons, AlohaCare supports this measure to allow qualified, licensed psychologists in other compact states to deliver telepsychology services to Hawai'i residents and provide short-term in-person services when clinically appropriate.

Mahalo for this opportunity to testify in **support** of **HB1704**.