



**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'ŌKELE

JOHN C. (JACK) LEWIN, MD
ADMINISTRATOR

March 13, 2026

TO: SENATE COMMITTEE ON HEALTH AND HUMAN SERVICES
Senator Joy A. San Buenaventura, Chair;
Senator Angus L.K. McKelvey, Vice Chair; and
Honorable Members

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

RE: **HB1562 HD1 -- RELATING TO YOUTH MENTAL HEALTH**

HEARING: Monday March 16, 2026 @ 1:10 pm Room 225

POSITION: SUPPORT with COMMENTS

Testimony:

SHPDA strongly supports HB1562 HD1, which funds a novel one-year Digital Youth Mental Health Platform Pilot Project through the DOH Adolescent Mental Health Division to help young people who would benefit by using an innovative platform – designed for these clients to be attractive and simple to use, and to help overcome their fears of openly expressing their mental health concerns. The platform could also potentially guide these young clients to care that they need when that is appropriate.

SHPDA has observed how successful platforms like this have been elsewhere in the country. We believe AMHD staff will turn this modest investment of funds into a very useful preventive strategy for kids who will benefit here; and although it wasn't able to be included in the Governor's budget, we believe it is a very valuable additional investment for our youth.

Mahalo for the opportunity to testify. – Jack Lewin, Administrator



**STATE OF HAWAI'I
DEPARTMENT OF HEALTH
KA 'OIHANA OLAKINO
STATE COUNCIL ON MENTAL HEALTH**
P.O. Box 3378, Room 256
HONOLULU, HAWAII 96801-3378

**STATE COUNCIL ON MENTAL HEALTH
Testimony to the Senate Committee on Health and Human Services
in SUPPORT of H.B. 1562 HD1
RELATING TO YOUTH MENTAL HEALTH
March 16, 2026 1:10 p.m., Room 225 and Video**

Chair San Buenaventura, Vice Chair McKelvey, and Committee members:

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Marian Tsuji, Deputy Director

Behavioral Health Administration

WEBSITE:

scmh.hawaii.gov

EMAIL ADDRESS:

[doh.scmhchairperson@
doh.hawaii.gov](mailto:doh.scmhchairperson@doh.hawaii.gov)

Hawaii law, HRS §334-10, established the State Council on Mental Health (SCMH) as a 21-member body to advise on the allocation of resources, statewide needs, and programs affecting more than one county as well as to advocate for adults with serious mental illness, children with serious emotional disturbances, individuals with mental illness or emotional problems, including those with co-occurring substance abuse disorders. Members are residents from diverse backgrounds representing mental health service providers and recipients, students and youth, parents, and family members. Members include representatives of state agencies on mental health, criminal justice, housing, Medicaid, social services, vocational rehabilitation, and education. Members include representatives from the Hawaii Advisory Commission on Drug Abuse and Controlled Substances and county service area boards on mental health and substance abuse.

The Council supports the intent of this measure to expand mental health education and motivate prevention. We respectfully urge the Legislature to ensure that the proposed pilot is strategically aligned and clearly connected to the existing continuum of care involving the Departments of Health, Education, and Human Services, as well as other agencies. The idea is to ensure that new efforts strengthen, not fragment or run parallel to, the system, especially for children and youth with the most complex needs.

The Council is glad to see many measures introduced this session to support the mental health of children and adolescents, but we remain cautious. This shows that more people recognize the mental health

challenges young people face. It also highlights the need for careful coordination and the smart use of limited resources to ensure these efforts truly improve access, capacity, and outcomes.

Thank you for the opportunity to testify.

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



BONNIE KAHAKUI
ADMINISTRATOR
DAYNA OMIYA
ASSISTANT ADMINISTRATOR

STATE OF HAWAI'I | KA MOKU'ĀINA O HAWAI'I
STATE PROCUREMENT OFFICE

P.O. Box 119
Honolulu, Hawaii 96810-0119
Tel: (808) 586-0554
email: state.procurement.office@hawaii.gov
<http://spo.hawaii.gov>

TESTIMONY
OF
BONNIE KAHAKUI, ADMINISTRATOR
STATE PROCUREMENT OFFICE

TO THE SENATE COMMITTEE
ON
HEALTH AND HUMAN SERVICES
March 16, 2026, 1:10 p.m.

House Bill 1562, HD1
RELATING TO YOUTH MENTAL HEALTH

Chair San Buenaventura, Vice Chair McKelvey, and members of the committee, thank you for the opportunity to submit testimony on House Bill 1562, HD1. The State Procurement Office (SPO) appreciates the bill's intent to promote early prevention of youth and adolescent mental health disorders through digital platforms and respectfully provides comments and recommendations.

Comments

This bill establishes a one-year pilot project for the implementation and administration of the Digital Youth Mental Health Platform commencing July 1, 2026, and ending June 30, 2027. The bill also requires that the Department of Health Child and Adolescent Mental Health Division submit a report to the Legislature, including any proposed legislation, regarding the pilot project no later than twenty days prior to the Regular Session of the 2027 Legislature.

SECTION 2, Subsection (c), Page 4, lines 15-18, exempts the procurement for the development, management, and hosting services and communication and marketing services for the pilot project from Chapters 103D and 103F, Hawaii Revised Statutes (HRS). The bill does not provide justification for exempting the one-year Digital Youth Mental Health Platform Pilot Project from HRS Chapter 103D - Hawaii Public Procurement Code and Chapter 103F - Purchase of Health and Human Services.

The SPO understands that this is a pilot program with a very short implementation and reporting period, which makes conducting a fully competitive procurement challenging. However, there should be parameters around the procurement exemption.

The SPO recommends that the bill include that the exemption from HRS Chapters 103D and 103F is valid only for the pilot project ending on June 30, 2027. If the department elects to continue the digital youth mental health platform, a competitive solicitation should be conducted pursuant to the HRS Chapters 103D and 103F.

RECOMMENDATION

The SPO recommends the following revisions to SECTION 2, Page 4, lines 15-18:

"(c) Procurement for development, management, and hosting services and communication and marketing services for the purposes of this Act shall be exempt from chapters 103D and 103F, Hawaii Revised Statutes, only for the period of the pilot program, not to exceed June 30, 2027."

Thank you for the opportunity to provide testimony on this measure.



HIPHI Board

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Health*

HIPHI Initiatives

Coalition for a
Tobacco-Free Hawai'i

Community-Based Research &
Evaluation

Community Health
Worker Initiatives

COVID-19 Response

Environmental Health

Hawai'i Drug & Alcohol-Free Coalitions

Hawai'i Farm to School Network

Hawai'i Oral Health Coalition

Hawai'i Public Health Training Hui

Healthy Eating + Active Living

Kūpuna Collective/Healthy Aging &
Community Living

Public Health Workforce Development

Date: March 13, 2026

To: Senator Joy A. San Buenaventura, Chair
Senator Senator Angus L.K. McKelvey, Vice Chair
Members of the Senate Committee on Health and Human Services

RE: Support for HB 1562 HD1, Relating to Youth Mental Health

Hrg: March 16, 2026, at 1:10 PM, Conference Room 225

Hawai'i Public Health Institute (HIPHI)¹ **supports HB 1562 HD1**, which establishes a one-year digital youth mental health platform pilot project to develop a digital platform providing tools and resources designed to help young people address and manage mental health challenges.

We are in the midst of a youth mental health crisis. According to the child and family mental health data tracker hosted by Hawai'i Health Matters, in 2023, one in three public school students in grades 6-12 in our state felt so sad or hopeless almost every day for two weeks or more in a row that they stopped doing some of their usual activities. Yet, less than 25% of those teens received the help they needed.²

Youth Mental Health Data

The Hawai'i Health Matters tracker also found that 26.3% of students in grades 6-8 have seriously considered attempting suicide. At the same time, the data tracker reported that only 23.2% of young teens were able to obtain the mental health assistance that they need, a number that falls to 19.9% when only public school students in grades 9-12 are considered. This disparity between the number of students reporting mental health problems and accessing services highlights the need to strengthen youth mental wellness programs in Hawai'i.

Digital Mental Health Tools

Digital mental health service delivery systems can improve access to mental health services in the Information Age. According to The Commonwealth Fund, a nongovernmental organization that works to promote a high-performing and healthcare system, digital mental health tools that use evidence-based interventions and are combined with clinician-based care could "help increase access to care for people of all ages."³

¹ Hawai'i Public Health Institute's mission is to advance health and wellness for the people and islands of Hawai'i. We do this through expanding our understanding of what creates health of people and place, fostering partnerships, and cultivating programs to improve policies, systems, and the environments where people live, learn, work, age, and play.

² [Child & Family Mental Health Tracker](#), Hawai'i Health Matters, 2023.

³ [Using Digital Technology to Respond to the Youth Mental Health Crisis](#), The Commonwealth Fund, July 2023.



Since young people tend to be more frequent users of digital technologies, the development of digital mental health technology, such as mobile applications that help people measure changes in their mental health symptoms or access treatment programs, carries unique opportunities for addressing youth mental healthcare gaps.

The Centers for Medicare and Medicaid Services (CMS) is laying the groundwork for a “coverage with evidence development” process to enable reimbursement for digital tools with initial evidentiary support.⁴ Additionally, some state Medicaid programs, such as those in Washington and Louisiana, are developing coverage determination processes to accommodate digital mental health tools.⁵

As digital mental health tools become more readily available and affordable for states, we should invest in programs that deploy their use to uplift adolescent mental resilience. Accordingly, we urge your committee to pass this measure to support the emotional wellness of our keiki.

Mahalo,

A handwritten signature in black ink that reads 'Kris Coffield'.

Kris Coffield
Policy and Advocacy Associate

⁴ [Accelerating Science-Driven Reimbursement For Digital Therapeutics In State Medicaid Programs](#), Health Affairs, October 2020.

⁵ [Transforming Medicare Coverage: A New Medicare Coverage Pathway for Emerging Technologies and Revamped Evidence Development Framework](#), Centers for Medicare & Medicaid Services, June 2023.



Hawai'i State Lesbian, Gay, Bisexual, Transgender, Queer Plus Commission



Advocating for the Hawai'i LGBTQIA+ Community

Mailing Address: LGBTQ+ Commission, c/o The Department of Human Services,
P.O. Box 339, Honolulu, Hawai'i 96809-0339

Email: hawaiistatelgbtqpluscommission@gmail.com
Web: <https://humanservices.hawaii.gov/lgbtq-commission/>

March 15, 2026

Senate's Committee on Health and Human Services
Hawai'i State Capitol
415 South Beretania Street
Honolulu, HI 96813

Hearing: Monday, March 16, 2026, at 1:10 PM

RE: Strong Support for House Bill 1562 HD 1

Aloha Chair San Buenaventura, Vice Chair McKelvey and fellow committee members,

I am writing in strong support of House Bill 1562 on behalf of the Hawai'i State Lesbian, Gay, Bisexual, Transgender, Queer Plus (LGBTQ+) Commission, which was established by the 2022 Hawai'i State Legislature to

“improve the State's interface with members of the lesbian, gay, bisexual, transgender, queer, plus community; identify the short- and long-range needs of its members; and ensure that there is an effective means of researching, planning, and advocating for the equity of this population in all aspects of state government.”

The Hawai'i State Lesbian, Gay, Bisexual, Transgender, Queer, Plus Commission submits this testimony in **strong support of House Bill 1562**, with a **request for an amendment**, relating to the establishment of a one-year Digital Youth Mental Health Platform Pilot Project within the Department of Health's Child and Adolescent Mental Health Division.

The Commission strongly supports the intent of HB 1562 to expand access to mental health resources for young people through innovative, digital tools. Hawai'i's keiki are facing unprecedented mental health challenges, and barriers to care, including provider shortages, stigma, cost, and geographic isolation, continue to prevent many from receiving timely and culturally responsive support. A publicly available digital platform has the potential to be a powerful, low-barrier entry point to care and information.

However, the Commission respectfully requests that HB 1562 be **amended to explicitly require that the digital platform include the specific needs of māhū, LGBTQIA+, and gender-diverse keiki** as a core component of the pilot project. Māhū, LGBTQIA+ and gender-diverse keiki youth experience disproportionately high rates of depression, anxiety, suicidal ideation, bullying, family rejection, and

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HI State LGBTQ+ Commission Testimony in Support of HB 1562

homelessness. These disparities are not incidental—they are the result of systemic exclusion and a lack of affirming, culturally competent mental health resources. For many of these young people, digital platforms may be the *first* or *only* place they feel safe seeking help. If inclusivity is not intentionally designed from the outset, these keiki will once again be left behind.

While the Commission understands that HB 1562 establishes a pilot project, we emphasize that **equity cannot be an afterthought**. Inclusion must be woven into the DNA of the project from its very beginning—in platform design, content development, user interface, data collection, and evaluation metrics. Building inclusivity at the start will strengthen the pilot, improve outcomes, and ensure that the Legislature receives a report that accurately reflects the needs of all youth in Hawai'i.

An explicit requirement to address mähū, LGBTQIA+ and gender-diverse youth will also align this project with the State's broader commitments to health equity, suicide prevention, and the well-being of historically marginalized communities.

For these reasons, the Hawai'i State LGBTQ+ Commission urges the Committee to pass HB 1562 **with amendments** to ensure that mähū, LGBTQIA+, and gender-diverse keiki are meaningfully and intentionally included in the Digital Youth Mental Health Platform Pilot Project.

Mahalo for the opportunity to submit testimony and for your commitment to the mental health and well-being of Hawai'i's keiki.

If you or any member of your staff has any questions regarding my testimony you can reach me at hawaiistatelgbtqpluscommission@gmail.com.

Mahalo nui loa for your time and consideration,

Michael Golojuch, Jr. (he/him)
Vice Chair
[Hawai'i State LGBTQ+ Commission](#)

[Inclusive LGBTQIA+ Glossary](#)

The [Hawai'i State LGBTQ+ Commission](#) has this webpage and that is dedicated to understanding and being able to use the correct terms when talking about the rainbow community from mähū to LGBTQIA+ to QTPI+ to MVPFAFF+ and beyond. The list found on this page is not an exhaustive list and will be updated as appropriate.



CATHOLIC CHARITIES HAWAII

SUPPORT HB 1562 HD1: RELATING TO YOUTH MENTAL HEALTH

TO: Senate Committee on Health and Human Services
FROM: Shellie Niles, VP of Mission, Catholic Charities Hawai'i
Hearing: Monday 3/16/26; 1:10pm; CR 225 & Videoconference

Chair San Buenaventura, Vice Chair McKelvey and Members of the Committee:

Catholic Charities Hawai'i **supports HB 1562 HD1**, which establishes a Digital Youth Mental Health Platform Pilot Project within the Department of Health's Child and Adolescent Mental Health Division.

Catholic Charities Hawai'i is a statewide, community-based nonprofit that has served Hawai'i's individuals and families for over 78 years. Through our programs, we work closely with children, youth, and families experiencing poverty, housing instability, trauma, and crisis. Increasingly, we are seeing the effects of unaddressed mental health challenges among children and adolescents, particularly in communities impacted by disasters, economic hardship, and limited access to care. HB 1562 HD1 responds directly to this growing and urgent need.

Today's youth face unprecedented stressors, yet traditional, in-person mental health services alone cannot meet current demand due to workforce shortages, geographic barriers, and persistent stigma around seeking help. Evidence-based digital mental health platforms—when thoughtfully designed and well-governed—offer a critical tool to expand access, especially for rural, underserved, and disaster-impacted communities.

Importantly, this pilot prioritizes prevention and early intervention, helping address lower-level mental health needs through education, coping tools, and timely support. By doing so, it allows Hawai'i's limited supply of licensed mental health professionals to focus on youth with the most acute and complex needs. This approach reflects a realistic understanding of Hawai'i's behavioral health workforce constraints while still advancing access, equity, and quality of care.

HB 1562 HD1 also helps reduce stigma by allowing young people to access trusted information and resources confidentially, meeting them where they are and encouraging earlier engagement with mental health supports. Catholic Charities Hawai'i believes this measure represents a prudent, forward-looking investment in the resilience and health of Hawai'i's keiki and aligns with our shared commitment to building strong, compassionate, and healthy communities.

Mahalo for the opportunity to provide testimony and for your continued leadership on behalf of Hawai'i's children and families. If you have any questions, please contact our Vice President of Mission, Shellie Niles, at (808) 527-4813.



TO: SENATE COMMITTEE ON HEALTH AND HUMAN SERVICES
The Honorable Joy A. San Buenaventura, Chair
The Honorable Angus L.K. McKelvey, Vice Chair, and
Members of the Committee

FROM: Justina Acevedo-Cross, Senior Director of Community Strategy

RE: Testimony in Support for HB 1562 HD 1, Relating to Youth Mental Health

DATE: Monday, March 16, 2026 at 1:10 pm

LOCATION: Hearing Room 225

The Hawai'i Community Foundation (HCF) **supports HB 1562 HD 1** to create a one-year Digital Youth Mental Health Platform Pilot Project to expand access to mental health resources for young people in Hawai'i. HCF believes in preventing and addressing the symptoms and impacts of mental health for all ages, that is why it has been identified as a priority area within HCF's CHANGE Framework under the Health and Wellness sector. HCF is investing and activating a mental health and behavioral health strategy to communities to reduce stigma, expand access to care, and champion mental well-being for all. In 2025, HCF awarded \$282,500 to 17 organizations to build organizational capacity for creating and sharing messaging that addresses mental and behavioral health stigma within their communities and to test out communications and outreach strategies. We see the youth mental health platform pilot as a complementary effort that expands access to an important group—our young people.

According to Mental Health America's 2025 "State of Mental Health in America" report, 16 percent of youth (approx. 16,000 young people) in Hawai'i experienced a major depressive episode in the past year, and 57 percent of them did not receive mental health services.¹ Additionally, nearly 13 percent (approx. 13,000 young people) in Hawai'i have had serious thoughts of suicide in the past year.² HB 1562 HD 1 would establish a publicly available digital platform to help youth in Hawai'i access crucial mental health resources and information.

¹ Mental Health America, "State of Mental Health in America" - [2025 report](#), pages 17, 29.

² Mental Health America, "State of Mental Health in America" - [2025 report](#), pages 19.

This legislation would help address the growing mental health needs of keiki and young people in Hawai'i, particularly those in rural and underserved communities. **We respectfully urge you to advance HB 1562 HD 1.**



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Mar 16, 2026

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We work together with the community and consumers to improve the quality of life through individual choices and access to services.

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Roxanne U. Bolden

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The Honorable Joy A. San Buenaventura, Chair
Senate Committee on Health and Human Services
The Thirty-Third Legislature
State Capitol
State of Hawaii
Honolulu, Hawaii 96813

SUBJECT: HB1562 HD1 – Relating to Youth Mental Health (Digital Youth Mental Health Platform Pilot Project)

Chair and Members of the Committee:

Aloha Independent Living Hawaii (AILH) is a consumer-controlled, cross-disability Center for Independent Living (CIL) serving people with disabilities across Hawaii. We write **in support of the goals of HB1562 HD1**, and offer amendments that are essential to ensuring this platform is accessible to, and does not exclude, youth with disabilities.

Youth mental health conditions are disabilities. The legislature's own findings acknowledge that mental health indicators for children and adolescents worsened significantly between 2013 and 2023, with disasters including the Maui wildfires compounding the crisis. Early access to mental health resources is consistent with Independent Living principles of self-direction and community participation. AILH supports the creation of a Digital Youth Mental Health Platform as a tool to help young people in Hawaii access support, particularly where geography and workforce shortages create barriers.

However, having reviewed the bill text carefully, we urge three amendments before passage:

1. **Mandate digital accessibility in the bill—the procurement exemption in Section 2(c) makes this critical:** Section 2(c) exempts procurement under this Act from Chapters 103D and 103F, Hawaii



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Revised Statutes—the State’s standard public procurement laws. This means the normal competitive bidding process, which provides one avenue for imposing accessibility requirements on vendors, will not apply. As a result, the only way to guarantee accessibility for youth with disabilities is to require it in the bill text itself. AILH urges the Committee to amend the bill to require that the platform comply with the Web Content Accessibility Guidelines (WCAG) 2.1 Level AA at minimum as a condition of development and continued operation. This is not optional: Section 504 of the Rehabilitation Act and Title II of the Americans with Disabilities Act require that technology funded or operated by state agencies be accessible to people with disabilities. Youth with visual, hearing, cognitive, learning, and physical disabilities must be able to fully use this platform. A mental health resource that excludes youth with disabilities—the population at greatest risk—is not achieving its stated purpose. Without an explicit accessibility mandate in the bill, and with procurement law oversight waived under Section 2(c), there is no mechanism to ensure compliance.

- 2. Address digital equity for rural youth and low-income families:** The bill’s findings correctly identify that digital platforms can reach youth in ‘remote or underserved areas where in-person programs may be limited.’ But the platform will fail to reach those same youth if they lack reliable broadband, devices, or data plans. Hawaii County, Kauai, Molokai, and Lanai face significant digital equity gaps. AILH urges the Committee to require that platform development under Section 2(b)(1) include low-bandwidth functionality and, where feasible, offline or downloadable access. The report required under Section 2(d) should include usage data disaggregated by island and household income level so the Legislature can assess whether the platform is reaching the communities it was designed to serve.
- 3. Clarify this platform supplements—and does not replace—clinical services:** The bill’s findings explicitly state that one purpose of the digital platform is ‘addressing lower-level needs so the behavioral



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health workforce, which is scarce, can focus on youth with the highest level of need.' AILH understands the intent: prioritize the scarce clinical workforce for those with greatest need. We support that goal. However, a digital platform pilot, if declared successful, could become justification for reducing CAMHD's clinical staffing or deflecting resources away from direct services for youth with serious mental health conditions. AILH urges the Committee to include explicit language in the bill stating that this platform is intended to supplement—and not replace—in-person clinical mental health services, and that platform utilization data shall not be used as a basis for reducing clinical staffing levels. A digital tool cannot provide the individualized, relationship-based care that youth with serious psychiatric disabilities require.

With these amendments, HB1562 HD1 can meaningfully expand access to mental health resources for Hawaii's youth while protecting the rights and access of young people with disabilities across our islands. AILH urges the Committee to adopt these amendments and pass the bill.

Thank you for the opportunity to testify.

Aloha,

Roxanne Bolden
Executive Director



Hawaii Medical Association

1360 South Beretania Street, Suite 200 • Honolulu, Hawaii 96814
Phone: 808.536.7702 • Fax: 808.528.2376 • hawaiimedicalassociation.org

SENATE COMMITTEE ON HEALTH AND HUMAN SERVICES

Senator Joy A. San Buenaventura, Chair
Senator Angus L.K. McKelvey, Vice Chair

Date: March 16, 2026
From: Hawaii Medical Association (HMA)
Elizabeth Ann Ignacio MD - Chair, HMA Public Policy Committee
Christina Marzo MD and Robert Carlisle MD, Vice Chairs, HMA Public Policy Committee

RE HB 1562 HD1 RELATING TO YOUTH MENTAL HEALTH: Keiki Caucus; DOH; Child and Adolescent Mental Health Division; Digital Youth Mental Health Platform Pilot Project; Report; Appropriation
Position: Support

This measure would establish and appropriate funds for a one-year Digital Youth Mental Health Platform Pilot Project that will enable the Child and Adolescent Mental Health Division of the Department of Health to develop and make publicly available a digital platform designed to help young people address and manage mental health challenges, and require a report to the Legislature. Effective 7/1/3000. (HD1)

HMA applauds the Legislature's direction to strengthen early prevention and education on mental health. By increasing access to tailored education and coping resources across our islands, especially in rural and underserved areas, the measure will support equitable behavioral health access for diverse communities. The pilot provides a platform to tailor resources sensitive to cultural and geographic needs across Hawaii, which can strengthen statewide resilience and reduce disparities in mental health and substance use outcomes.

HMA greatly appreciates the House Health Committee's thoughtful recommendation to ensure that the digital youth mental health platform have language and content specifically addressing the unique needs and experiences of Hawai'i's LGBTQ+ youth. This important inclusion will help make the platform more equitable, culturally responsive, and supportive of all young people seeking mental health resources in our communities.

HMA strongly supports this measure, and respectfully provides this additional comment:

HMA recommends health care literacy as a core platform component. Introducing young people to the roles and value of their health care teams — including physicians, nurse practitioners, psychologists, family therapists, and even emerging tools such as AI health and well-being trackers — will:

2026 Hawaii Medical Association Public Policy Coordination Team

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Linda Rosehill, JD, Government Relations • Marc Alexander, Executive Director

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- Improve young people’s understanding of *when* and *how* to seek professional support.
- Normalize seeking care and strengthen their long-term patient-provider relationships.
- Foster engagement with evidence-based care pathways early in life.

Healthcare literacy is foundational to effective prevention and navigation of behavioral health challenges. Introducing youth to the *scope of provider roles*, culturally responsive care options, and supportive technologies can reduce barriers to care and improve outcomes across mental health and substance use disorders.

By strengthening mental health education and outreach, this platform pilot can help surround our keiki and young adults with a connected circle of care that includes families, schools, community supports, and trusted health care teams. HMA lauds this shared approach, reinforcing that no young person navigates mental health or substance use challenges alone, and that Hawaii is committed to meeting them with understanding, guidance, and accessible resources at every step of their journey.

Thank you for allowing Hawaii Medical Association to submit comments on this measure.

REFERENCES AND QUICK LINKS

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Potts C, Kealy C, McNulty JM, Madrid-Cagigal A, Wilson T, Mulvenna MD, O’Neill S, Donohoe G, Barry MM. Digital Mental Health Interventions for Young People Aged 16-25 Years: Scoping Review. *J Med Internet Res*. 2025 May 9;27:e72892. doi: 10.2196/72892. PMID: 40344661; PMCID: PMC12102633.

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2024 Hawaii Medical Association Officers

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Linda Rosehill, JD, Government Relations • Marc Alexander, Executive Director

Hawai'i Psychological Association

For a Healthy Hawai'i

P.O. Box 833
Honolulu, HI 96808

www.hawaiiipscychology.org

Phone: (808) 521 -8995

HOUSE COMMITTEES ON HEALTH, AND HUMAN SERVICES & HOMELESSNESS

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

Representative Lisa Marten, Chair
Representative Ikaika Olds, Vice Chair

Monday, March 16, 2026, 1:10 PM
Conference Room 225 & Videoconference

SUPPORT FOR HB 1562, RELATING TO YOUTH MENTAL HEALTH

The Hawai'i Psychological Association (HPA) strongly supports HB 1562. This bill seeks to establish and appropriate funds for a one-year pilot project to develop a digital youth mental health platform designed to support Hawai'i's youth by providing county specific resources, mental health education, self-care strategies, and healthy coping skills.

According to the Center for Disease Control and Prevention (CDC), national trends indicate that youth mental health challenges have increased significantly over the past decade with the most common conditions including depression and anxiety. Furthermore, The State of Mental Health in America 2025 report indicated that most young people in Hawaii with depression did not receive mental health services. Nationally, approximately 85% of youth who did not receive care reported believing they should be able to manage their mental health on their own. Such stigma may prevent youth from utilizing existing support channels (e.g., family, friends) to identify and access resources. Providing a resource tool that allows for self-directed exploration of mental health information and available support may help bridge this gap in accessing services.

While a digital platform is not intended to replace services provided by licensed mental health care professionals, increasing awareness of county specific resources and access to trusted mental health information can help Hawai'i's youth to better understand their mental health challenges and encourage earlier help-seeking behaviors.

Additionally, given the widespread use of technology and social media, youths are particularly vulnerable to inaccurate and misleading mental health-related content. A regulated digital mental health platform can play an important role in promoting early awareness and the prevention of mental health challenges from escalating by providing peer-reviewed information and resources, which are evidence-based.

Other strengths of this bill are a strong marketing campaign to ensure awareness and accessibility of the platform among youth and the broader community as well as highlighting the importance of monitoring and evaluating performance usage and outcomes to support effective implementation and continuous improvement.

Thank you for the opportunity to submit testimony and for your thoughtful consideration of this important matter.

Sincerely,

A handwritten signature in cursive script that reads "Alex Lichton, Ph.D." The signature is written in dark ink on a light-colored background.

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



HB1562 HD1 Digital Platform for CAMHD

COMMITTEE ON HEALTH AND HUMAN SERVICES

Sen. Joy San Buenaventura, Chair

Sen. Angus McKelvey Vice Chair

Wednesday, Mar 16, 2026: 1:10: Room 225 Videoconference

Hawaii Substance Abuse Coalition Comments to Support HB1562 HD1:

ALOHA CHAIR, VICE CHAIR, AND DISTINGUISHED COMMITTEE MEMBERS. My name is Alan Johnson. I am the ad hoc leader of the Hawaii Substance Abuse Coalition (HSAC), a statewide organization for substance use disorder and co-occurring mental health disorder prevention and treatment agencies and recovery-oriented services.

COMMENTS for SUPPORT:

Digital Platforms, according to all evidence, **do not replace therapy or clinical care nor evidence-based prevention.**

However, **they are useful to support clinical care or formalized evidenced-based treatment, especially for early support, education, monitoring and accessibility.** What digital platforms can do is help kids practice skills, track moods, learn coping strategies, or deliver evidence-based exercises (e.g., CBT-based tools).

Our **caution is that digital platforms** are not a substitute for personalized, licensed clinical treatment for children who need it.

1. **Human connection matters.** Licensed mental health professionals provide clinical assessment, diagnosis, tailored treatment planning, and crisis support — things current digital platforms cannot fully replicate. Empathy, nuanced judgment, and safety monitoring (especially for younger users) are best delivered by trained clinicians.
2. Evidence varies. While some tools show positive results for mild to moderate issues in studies, the **quality and long-term effectiveness are still being researched**, and outcomes vary by tool, age group, and condition.
3. **Not all tools are regulated.** Some wellness or chatbot apps aren't clinically validated and should not be treated as therapy. Professional guidance helps families choose appropriate, evidence-based resources.

Digital platform **can improve outcomes when combined with traditional therapy** and help reinforce what's learned in sessions. Some platforms are even designed to work *alongside* a clinician's plan.

Digital platforms for youth mental health (including ones connected to support services) are **valuable complements** — they broaden access, support skill development, and can *enhance* traditional care — but **they do not replace professional treatment** when a child has significant or complex mental health needs.

We appreciate the opportunity to provide testimony and are available for questions.

Judith F. Clark
48-218 Kamehameha Highway
808-499-9966
Judithforceclark@gmail.com
Kaneohe, Hawaii 96744

March 13, 2026

To: Senator Joy San Buenaventura, Chair,
And members of the Committee on Health and Human Services

Testimony in Support of HB 1562 HD 1 Relating to Youth Mental Health

As a community advocate and the former Executive Director of Hawaii Youth Services Network, I support HB 1562 HD 1 which establishes a digital mental health platform for youth.

This program will increase access to information and services for youth with mental health needs particularly in underserved neighbor island and rural areas. It will use a medium that young people find natural and comfortable. The need to improve mental health services for Hawaii's youth is huge.

35% of middle and high school youth in Hawai'i experience persistent depression; 7% of high school and 11% of middle school students in Hawai'i reported having attempted suicide. 23% of middle school students report that their mental health was most of the time or always "not good" in the prior 30 days.

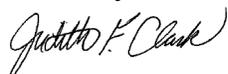
The TeenLink Hawai'i website continues to get 2,000 site visits on average each month. The top topics/pages visited included Suicide; Health and Wellness Toolkit; Sleep; Stress; Mental Health; and Self- Care.

A Hawai'i Department of Health report using 2020 data estimates that 11,000 of Hawai'i's youth experienced at least one major depressive episode in the prior year. Of those who experienced a major depressive episode, approximately 6,000 did not receive mental health services in the prior year.

We need to ensure that mental health services are accessible to Hawaii's students.

Thank you for this opportunity to testify.

Sincerely,



Judith F. Clark, MPH

COMMITTEE ON HEALTH AND HUMAN SERVICES
Senator Joy A. San Buenaventura, Chair
Senator Angus L.K. McKelvey, Vice Chair

HEARING:

Monday, March 16, 2026 at 1:10 pm
Conference Room 225 & Videoconference

TESTIMONY IN SUPPORT OF HB 1562, HD1 - RELATING TO YOUTH MENTAL HEALTH.

Aloha Chair Buenaventura, Vice Chair McKelvey, and Members of the Committee,

My name is Christine Andrews and I live in Wailuku, Maui. I write to you today in **support of HB 1562, HD1, relating to youth mental health**, which establishes and appropriates funds for a one-year Digital Youth Mental Health Platform Pilot Project that will enable the Child and Adolescent Mental Health Division of the Department of Health to develop and make publicly available a digital platform designed to help young people address and manage mental health challenges.

I am the parent of two young adult children who each suffered from severe mental health problems, including depression and anxiety, when they were younger. I am fortunate that, as an attorney, a stay-at-home parent and someone with access to health care, I was able to advocate for them. It was a full-time job. I would spend hours each day looking for appointments to get my daughter seen while she was experiencing a mental health crisis. It took weeks of calls and emails to arrange for a 504 plan with my daughters' school. There were hospital visits and intakes with crisis care teams. Constant communication with her teachers to help navigate missed school days and workload. It was a lot.

Even with all the work I did to support my oldest daughter, and to get her the help she needed, she was still the one who managed to self-diagnose with ADHD, right at the end of high school. It took months to get her diagnosis confirmed, because the waitlist for testing was months long. Then, because she turned 18 during that wait, it was another struggle to transition her from a pediatric mental health team to an adult one. It was a struggle to get her the care she needed, work with her high school teachers and administrators, and yet, she was a lucky one. She had me to be there for her and advocate for her. She was able to graduate high school, with honors, and be accepted to a prestigious college. During college she became a mental health advocate, received a prestigious fellowship, and is now in graduate school at a world-renowned institution. She was able to navigate her mental health challenges successfully because she had access to support. Not everyone has that privilege. She had friends with the same challenges that withdrew from college because they could not manage their mental health and their education. They did not have the same resources or support.

I have seen the challenges for youth in trying to access care. The long waitlists for appointments, the scarcity of providers. I have seen the impacts on their opportunities, their education, their futures, and their families caused by lack of access to youth mental health resources. **I strongly support HB 1562, HD1** and request your vote for it, because young people, like my daughters, need platforms to address and manage mental health challenges, so that they can become healthy, productive adults.

Mahalo for supporting the success of Hawaii keiki,

Christine L. Andrews, J.D.
Wailuku, Maui

To: Senate Committee on Health and Human Services

From: Catherine Abellera

RE: HB 1562 HD1 – Relating to Youth Mental Health

Date: March 16, 2026

My name is Catherine Abellera, and I submit testimony in strong support of HB 1562 HD1. I speak as a future social worker and as a leader in early childhood programs who has spent years working with families and young children. Through this work, I have seen how early developmental experiences influence lifelong mental health outcomes. When youth have access to preventive support early in life, they are far more likely to build resilience and navigate challenges successfully.

Research consistently shows that early identification and intervention are among the most effective strategies for preventing severe mental health crises later in life. However, many young people do not receive support until they reach a crisis point. Increasingly, youth turn to digital platforms first when they are seeking information, support, or guidance about mental health concerns.

HB 1562 HD1 recognizes the importance of meeting young people where they are by establishing a pilot program to develop a statewide digital mental health platform for youth. A centralized and accessible online resource can provide reliable information, coping tools, and connections to appropriate services. For many adolescents, an online platform may serve as an important first step toward seeking help and learning about available support systems.

According to the Hawai‘i Department of Health, suicide is the leading cause of death among youth ages 10–19 in Hawai‘i. Males die by suicide at three to four times the rate of females (Centers for Disease Control and Prevention [CDC], 2025; Ontanin et al., 2025). Native Hawaiian and Pacific Islander youth are disproportionately impacted, reflecting ongoing inequities in access to culturally responsive mental health care and supportive services.

Investing in accessible mental health resources, including digital platforms, can help lower barriers to information and support for young people across the state. When youth can easily find trusted resources and pathways to care, it strengthens early prevention efforts and helps communities respond more effectively before a crisis occurs.

Thank you for the opportunity to provide testimony in support of HB 1562 HD1. I respectfully urge the committee to pass this measure and continue prioritizing early mental health prevention and access to support for Hawai‘i’s youth.