



**TESTIMONY OF  
THE DEPARTMENT OF THE ATTORNEY GENERAL  
KA 'OIHANA O KA LOIO KUHINA  
THIRTY-THIRD LEGISLATURE, 2026**

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**ON THE FOLLOWING MEASURE:**

H.B. NO. 1854, RELATING TO COMMUNITY BEHAVIORAL HEALTH CLINICS.

**BEFORE THE:**

HOUSE COMMITTEE ON HEALTH

**DATE:** Wednesday, February 11, 2026      **TIME:** 9:00 a.m.

**LOCATION:** State Capitol, Room 329

**TESTIFIER(S):** Anne E. Lopez, Attorney General, or  
Michelle L. Agsalda, Deputy Attorney General

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Chair Takayama and Members of the Committee:

The Department of the Attorney General (Department) provides the following comments on this bill.

The bill adds a new chapter to the Hawaii Revised Statutes (HRS), the purpose of which is to establish a state certification and oversight structure for certified community behavioral health clinics. To accomplish this purpose, the bill (1) establishes the Community Behavioral Health Clinic Certifying Office (Office) within the Department of Health to certify community behavioral health clinics and provide technical assistance to clinics seeking certification under federal guidelines; (2) establishes a Certified Community Behavioral Health Clinics Oversight Board; (3) creates a Certified Community Behavioral Health Clinic special fund (Fund) to assist in offsetting the Office's expenses; and (4) amends the composition of the Hawaii Advisory Commission on Drug Abuse and Controlled Substances and the State Council on Mental Health to include a member from the Office. The bill also appropriates general funds.

Section -6 to be added to the new chapter (page 8, lines 7-15) establishes the Fund to be administered by the Office. The bill does not appear to explain how the special fund meets the requirements of section 37-52.3, HRS, including the need for the fund, the nexus between the program and its funding source, and whether the fund will be financially self-sustaining. The Department recommends adding a purpose section to the bill that explains how the fund meets these requirements.

Thank you for the opportunity to provide comments.



STATE OF HAWAII  
DEPARTMENT OF HEALTH  
KA 'OIHANA OLAKINO  
P. O. Box 3378  
Honolulu, HI 96801-3378  
doh.testimony@doh.hawaii.gov

**Testimony in SUPPORT of HB1854  
RELATING TO COMMUNITY BEHAVIORAL HEALTH CLINICS**

REP. GREGG TAKAYAMA, CHAIR  
REP. SUE L. KEOHOKAPU-LEE LOY, VICE CHAIR  
HOUSE COMMITTEE ON HEALTH

Hearing Date and Time: Wednesday, February 11, 2026, 9:00 a.m. Location: Room 329 & Video

1 **Fiscal Implications:** The Department of Health (“Department”) requests funding as identified in  
2 this measure for startup and operational project costs, provided it does not supplant the  
3 requests outlined in the Governor's executive budget request.

4 **Department Position:** The Department strongly supports this measure.

5 **Department Testimony:** The Department supports this measure, which establishes a  
6 Community Behavioral Health Clinic Certifying Office. The establishment of this office will allow  
7 the State to certify community behavioral health clinics to become Certified Community  
8 Behavioral Health Clinics (CCBHCs), which will promote consistency and accessibility to mental  
9 health and substance use services for people across the State.

10 CCBHCs use a “no wrong door” approach, serving anyone regardless of age, insurance, or  
11 ability to pay. The Department currently provides behavioral health services across all counties,  
12 including Hawai‘i, Maui, Kaua‘i, and Honolulu. For Hawai‘i, the CCBHC model will expand access  
13 to services and improve continuity of care, addressing rural access gaps, workforce shortages,  
14 and disaster recovery needs, as seen after the 2023 Maui wildfires.

15 The CCBHC Demonstration Program launched nationally in 2016 to expand access to  
16 comprehensive mental health and substance use services, starting with eight states. Under the

1 Protecting Access to Medicare Act (PAMA), Congress expanded the program to include 10  
2 additional states in 2024, with another 10 scheduled for 2026—and every two years thereafter.  
3 Today, 18 states and Washington, D.C. are Demonstration states, and 46 states in total  
4 participate in the CCBHC model through the Demonstrations or CCBHC planning grants  
5 including Hawai'i. Nationwide, more than 500 clinics are already certified and delivering care.

6 CCBHCs represent a national standard for delivering comprehensive, integrated behavioral  
7 health care. They combine mental health and substance use treatment with crisis services, care  
8 coordination, and connections to physical health, ensuring timely access and continuity of care.  
9 This model strengthens systems by improving service quality and addressing gaps in access to  
10 care, particularly for underserved and high-need populations. Passing this bill will allow the  
11 Department to certify clinics under federal and state CCBHC requirements. Clinics must be  
12 certified to qualify for enhanced Medicaid reimbursement under the CCBHC model. Without it,  
13 CCBHC clinics cannot receive enhanced Medicaid reimbursement.

14 The Community Behavioral Health Certifying Office (Office) will certify qualified clinics and  
15 ensure continued compliance with federal and state CCBHC requirements. The Oversight Board  
16 will provide accountability and community input, review applications, and assess statewide  
17 behavioral health needs. It includes a diverse group of 11 voting community members, with at  
18 least half from rural areas, including mental health and substance use treatment providers,  
19 individuals with lived experience, a child and adolescent provider, and a representative from  
20 the schools.

21 The CCBHC Special Fund included in this bill would support the Office and its activities to  
22 limit the burden of the Office on the General Fund. Any fees the Office charges would be  
23 deposited to the CCBHC Special Fund and will be used to cover essential operational costs,  
24 including inter-island travel for on-site audits.

1        This bill gives Hawai'i the tools and infrastructure to meet growing behavioral health needs,  
2        and the CCBHC model will help make that possible while strengthening care across our State.

3        **Offered Amendments:** On page 5, line 10, we suggest amending the language from "populated  
4        island" to "populated county" to accurately reflect the Department's service areas.

5        Thank you for the opportunity to testify in support of this measure.

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



RYAN I. YAMANE  
DIRECTOR  
KA LUNA HO'ŌKELE

JOSEPH CAMPOS II  
DEPUTY DIRECTOR  
KA HOPE LUNA HO'ŌKELE

STATE OF HAWAII  
KA MOKU'ĀINA O HAWAI'I  
**DEPARTMENT OF HUMAN SERVICES**  
KA 'OIHANA MĀLAMA LAWELAWE KANAKA  
Office of the Director  
P. O. Box 339  
Honolulu, Hawaii 96809-0339

TRISTA SPEER  
DEPUTY DIRECTOR  
KA HOPE LUNA HO'ŌKELE

February 10, 2026

TO: The Honorable Representative Gregg Takayama, Chair  
House Committee on Health

FROM: Ryan I. Yamane, Director

SUBJECT: **HB 1854 – RELATING TO HEALTH CARE.**

Hearing: February 11, 2026, 9:00 a.m.  
Conference Room 329 & via Videoconference, State Capitol

**DEPARTMENT'S POSITION:** The Department of Human Services (DHS) supports the intent of the bill to establish a community behavioral health clinic certifying office to certify community behavioral health clinics and provide technical assistance for clinics seeking certification under federal guidelines to promote consistency and accessibility for all people of the State to mental health and substance use services. DHS defers to the Department of Health on its resource needs.

This bill also requires the Department of Human Services, the Med-QUEST Administrator, or their designee to participate as an ex officio member of the certified community behavioral health clinics oversight board. DHS is happy to participate in this role.

DHS respectfully requests that this program and appropriation not conflict with, reduce, or replace priorities identified in the executive budget.

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



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 House Committee on Health**  
**IN SUPPORT OF H.B. 1854**  
**RELATING TO COMMUNITY BEHAVIORAL HEALTH CENTERS**  
**February 11, 2026 9:00 am, Room 423 and Video**

Chair Takayama, Vice-Chair Keokohapu-Lee Loy and Committee members:

**CHAIRPERSON**

Katherine Aumer, PhD

**1<sup>st</sup> VICE CHAIRPERSON**

Kathleen Merriam, LCSW CSAC

**2<sup>nd</sup> VICE CHAIRPERSON**

Forrest Wells, MSCP, LMHC, MBA

**SECRETARY**

Mary Pat Waterhouse, MHA MBA

**MEMBERS:**

Danielle Bergan

John Betlach

Tianna Celis-Webster

Lea Dias, MEd

Jon Fujii, MBA

Heidi Ilyavi

Jackie Jackson, CFPS

Christine Montague-Hicks, MEd

Ray Rice, MEd

Asianna Saragosa-Torres

Kristin Will, MA, CL, CSAC

**EX-OFFICIO:**

Marian Tsuji, Deputy Director

Behavioral Health Administration

**WEBSITE:**

[scmh.hawaii.gov](http://scmh.hawaii.gov)

**EMAIL ADDRESS:**

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

The State Council on Mental Health ("Council") strongly supports this measure. The bill establishes a necessary pathway for developing Community Behavioral Health Clinics (CCBHCs) across the islands by creating a state certifying office to oversee and implement the model. The Council looks forward to its role in supporting CCBHC development and advancing a more accessible and coordinated mental health system. However, as currently drafted, HB1854 requires the appointment of an additional Council member specifically designated to represent the certifying office. This level of specificity departs from the existing statutory framework governing Council membership under section 334-10.

Section 334-10(a) provides for representation from relevant government sectors, including mental health, education, vocational rehabilitation, criminal justice, housing, Medicaid, and social services, without mandating representation from a particular office, program, or administrative entity. This structure preserves flexibility, promotes balanced representation, and allows the Council's composition to adapt as systems and delivery models evolve.

The Council respectfully recommends maintaining the current statutory structure for membership while ensuring appropriate collaboration with the certifying office through existing interagency and advisory mechanisms.

Katherine Aumer, PhD  
Chairperson of Hawai'i State Council on Mental Health



**LATE**

Testimony in SUPPORT of HB1854  
RELATING TO COMMUNITY BEHAVIORAL HEALTH CLINICS

Hearing Date and Time: Wednesday, February 11, 2026, 9:00am

To the Honorable:

Rep. Gregg Takayama, Chair  
Rep. Sue L. Keohokapu-Lee Loy, Vice Chair  
House Committee on Health

From:

Jill Stutsman  
University of Hawaii at Manoa  
Social Work Graduate Student

The undersigned respectfully submits this testimony in support of the proposed measure. Upon review, the legislation may be summarized in clear terms: SPECTACULAR! Specifically, it increases community mental health access through the promotion of consistency in care delivery and consistency in funding streams - two factors that have long been recognized as exceedingly beneficial.

When care is consistent, treatment outcomes improve. When funding is consistent, service providers remain operational. When providers remain operational, access to community mental health services expand. The causal chain is neither speculative nor controversial. HB1854 expands access to quality mental health care and substance use treatment. Meeting communities where they are at to enhance wellness.

Accordingly, the record supports the following conclusion: This good. This needed. This changemaker.

The Committee is therefore urged to render an affirmative vote. Say Aye! (Maybe even add more funding.)

Respectfully submitted.

**LATE**

**HB-1854**

Submitted on: 2/10/2026 10:13:53 PM

Testimony for HLT on 2/11/2026 9:00:00 AM

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Testify</b>
Seth Lindvay	Individual	Support	Written Testimony Only

Comments:

I believe that these certified mental health clinics will be exponentially beneficial to the community and provide access to behavioral resources that so many desperately need. I believe funding these clinics will put back value into the community and economy by uplifting lives of the unsheltered and decrease the houseless population. Everyone should have access to mental health care by providers certified and have the emotional capability to deal with human being in crisis.