

JOSH GREEN, M.D.
GOVERNOR
KE KIA'ĀINA



STATE OF HAWAII | KA MOKU'ĀINA 'O HAWAII
**DEPARTMENT OF CORRECTIONS
AND REHABILITATION**
*Ka 'Oihana Ho'omalu Kalaima
a Ho'oponopono Ola*
1177 Alakea Street
Honolulu, Hawaii 96813

TOMMY JOHNSON
DIRECTOR

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Deputy Director
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Sanna Muñoz
Deputy Director
Rehabilitation Services
and
Programs

No. _____

TESTIMONY ON SENATE BILL 2080
RELATING TO THE PSYCHOLOGY INTERJURISDICTIONAL COMPACT.

by
Tommy Johnson, Director
Department of Corrections and Rehabilitation

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

AND

Senate Committee on Commerce and Consumer Protection
Senator Jarrett Keohokalole, Chair
Senator Carol Fukunaga, Vice Chair

Friday, February 6, 2026; 9:00 a.m.
State Capitol, Conference Room 229 & via Videoconference

Chairs San Buenaventura and Keohokalole, Vice Chairs McKelvey and Fukunaga,
and Members of both Committees:

The Department of Corrections and Rehabilitation (DCR) **supports** Senate Bill (SB) 2080, which proposes to adopt the Psychology Interjurisdictional Compact (PsyPact/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. It also requires the Department of Commerce and Consumer Affairs to adopt rules to implement and administer the Compact.

A disproportionate number of individuals in DCR's custody have a diagnosed mental health illness. Among these individuals, the primary request from inmate patients is access to counseling and ongoing therapeutic relationships.

Over the past three years DCR has been unable to retain a significant number of our clinical psychologists due to cost of living, salary ratio, budgetary constraints and licensure mandated timeframes. Even with robust recruitment efforts, we encounter difficulties recruiting staff as we are also competing with other departments who can offer less challenging environments to work in and reduced caseloads.

The DCR has twenty-three (23) clinical psychologist positions with nineteen (19) of those positions currently vacant. Of the four (4) positions filled, two (2) are unlicensed. The current critical shortage of licensed psychologists impacts DCR's ability to retain invaluable mental health professionals who serve our inmate-residents suffering from severe mental illness as well as those in acute crisis. A significant number of residents facing court hearings are unable to participate due to their mental illness.

Since the inception of the PsyPact in 2020, 42 states have successfully enacted this legislature. PsyPact facilitates the practice of psychology across state boundaries while maintaining professional standards and regulatory oversight thereby exponentially increasing access to needed mental health care with licensed psychologists. The Compact also creates a streamlined system that eliminates the bureaucratic burden of multiple licenses while preserving the integrity of professional standards. Adopting PsyPact to increase mental health care expansion is particularly crucial for addressing critical shortages of licensed mental health professionals.

The Compact has significant implications for forensic psychology, a field in which specialized expertise is often in high demand yet geographically limited. Forensic psychologists who conduct risk assessments, provide expert testimony, or provide specialized evaluations may now extend their services across state lines, improving access to critical expertise in legal proceedings, such as fitness to proceed, and other specialized diagnostic evaluations. Expanded access to forensic psychological services through PsyPact supports DCR's policies and National Commission on Correctional Health Care standards, helping ensure that the mental health needs of incarcerated individuals are adequately addressed through a forensic lens.

Thank you for the opportunity to provide testimony in **support** of SB 2080.



**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

February 6, 2026

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

SENATE COMMITTEE ON COMMERCE AND CONSUMER PROTECTION
Senator Jarrett Keohokalole, Chair
Senator Carol Fukunaga, Vice Chair
Honorable Members

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

**RE: SB 2080 -- RELATING TO PSYCHOLOGY INTERJURISDICTIONAL
COMPACT**

HEARING: Friday, February 6, 2026 @ 09:00 am; Conference Room 229

POSITION: SUPPORT with COMMENTS

Testimony:

SHPDA supports SB 2080 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

SB 2080 testimony of SHPDA (2026), continued.

strengthens public protection by promoting shared standards, information-sharing, and 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 SB 2080

Mahalo for the opportunity to testify.

■ -- Jack Lewin, MD, Administrator, SHPDA

Testimony of the Board of Psychology

**Before the
Senate Committees on Health and Human Services
&
Senate Committee on Commerce and Consumer Protection**

**Friday, February 6, 2026
9:00 a.m.
Conference Room 229 & Via Videoconference**

On the following measure:

S.B. 2080, RELATING TO THE PSYCHOLOGY INTERJURISDICTIONAL COMPACT

Chair San Buenaventura, Chair Keohokalole, and Members of the Committees:

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.

February 6, 2026

**To: Chair San Buenaventura, Chair Keohokalole, Vice Chair McKelvey, Vice Chair Fukunaga,
and Members of the Senate Committees on Health and Human Services (HHS) and Commerce
and Consumer Protection (CPN)**

From: Hawaii Association of Health Plans Public Policy Committee

Date/Location: Feb. 6, 2026; 9:00 a.m./Conference Room 229 & Videoconference

Re: Testimony in support of SB 2080 – Relating to the Psychology Interjurisdictional Compact

The Hawaii Association of Health Plans (HAHP) offers this testimony in support of SB 2080. 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.

Hawaii continues to face a significant shortage of mental health professionals, particularly in Neighbor Island and rural communities. HAHP 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 SB 2080.

Sincerely,

HAHP Public Policy Committee
cc: HAHP Board Members

Feb. 6, 2026, 9 a.m.
Hawaii State Capitol
Conference Room 229 and Videoconference

To: Senate Committee on Health and Human Services

Sen. Joy A. San Buenaventura, Chair

Sen. Angus L.K. McKelvey, Vice Chair

Senate Committee on Commerce and Consumer Protection

Sen. Jarrett Keohokalole, Chair

Sen. Carol Fukunaga, Vice Chair

From: Grassroot Institute of Hawaii

Ted Kefalas, Director of Strategic Campaigns

RE: TESTIMONY IN SUPPORT OF SB2080 — RELATING TO THE PSYCHOLOGY INTERJURISDICTIONAL COMPACT

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

The Grassroot Institute of Hawaii **supports** [SB2080](#), 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.



February 2nd, 2026

Committee on Health and Human Services and Committee on Commerce and Consumer Protection

Dear Chair San Buenaventura, Chair Keohokalole, Vice Chair McKelvey, Vice Chair Fukunaga and all distinguished members of the Committees:

I appreciate the opportunity to comment on SB 2080, 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



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 Senate
Committee on Health and Human Services
Committee on Commerce and Consumer Protection

Testimony by
Hawaii Government Employees Association

February 6, 2026

S.B. 2080 – RELATING TO THE PSYCHOLOGY INTERJURISDICTIONAL COMPACT

The Hawaii Government Employees Association, AFSCME Local 152, AFL-CIO **opposes S.B. 2080 which seeks to bring the State of Hawaii into the multistate 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 other states that are party to 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 sector will leave the public section and choose to work out-of-state in another state that is a party to 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.

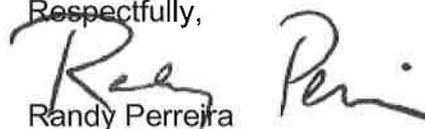
This is not the best possible solution to the existing recruitment and retention issue and it will not solve the issue as envisioned.

Rather than entering into a complex and binding multistate 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 both 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 S.B. 2080.**

We appreciate your consideration of our testimony in opposition to S.B. 2080.

Respectfully,


Randy Perreira
Executive Director