

STATE OF HAWAII
OFFICE OF WELLNESS AND RESILIENCE
OFFICE OF THE GOVERNOR
415 S. BERETANIA ST. #415
HONOLULU, HAWAII 96813

Testimony on S.B. 3199
RELATING TO MENTAL HEALTH

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

February 18, 2026, at 1:00 p.m.; Room Number: 225

The Office of Wellness and Resilience (OWR) **SUPPORTS** S.B. 3199, Relating to Mental Health and defers to the Department of Health (DOH).

S.B. 3199 presents an important opportunity to establish a planful pathway for individuals in need of access to potentially life-saving treatments for trauma and other longstanding mental health challenges. A growing body of research demonstrates that breakthrough therapies—such as MDMA and psilocybin-assisted therapies—show significant efficacy and positive clinical outcomes in treating post-traumatic stress disorder, substance use disorders, end-of-life anxiety in terminally ill patients, eating disorders, treatment-resistant depression, and additional conditions.^{1 2}

This measure also creates a process to prepare Hawai'i's licensed professionals for the possibility that these therapies may be federally rescheduled and approved by the U.S. Food and Drug Administration. The task force's mandate is well-tailored to address the key challenges that lie ahead, including workforce training and certification, culturally informed

¹ Mithoefer, M. C., Designee, S., Doblin, R., Emerson, A., Mithoefer, A., Jerome, L., Ruse, J., Doblin, R., Gibson, E., Ot'alora, M., & Sola, E. (2017, August 22). *A manual for MDMA-assisted psychotherapy in the treatment of posttraumatic stress disorder*. Multidisciplinary Association for Psychedelic Studies. <https://maps.org/wp-content/uploads/2022/05/MDMA-Assisted-Psychotherapy-Treatment-Manual-V8.1-22AUG2017.pdf>

² Carhart-Harris, R. L., Bolstridge, M., Day, C. M. J., Rucker, J., Watts, R., Erritzoe, D. E., Kaelen, M., Giribaldi, B., Bloomfield, M., Pilling, S., Rickard, J. A., Forbes, B., Feilding, A., Taylor, D., Curran, H. V., & Nutt, D. J. (2018). Psilocybin with psychological support for treatment-resistant depression: Six-month follow-up. *Psychopharmacology*, 235(2), 399-408. <https://doi.org/10.1007/s00213-017-4771-x>

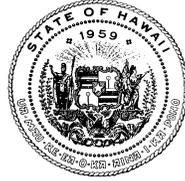
implementation, patient safety and equity of access, and the expansion of local clinical trials and university-based research partnerships. Proactive preparation ensures that, should that occur, these treatments can be administered safely, ethically, and equitably across our state.

The OWR believes that the people of Hawai'i might benefit from access to all safe and effective mental health treatment options. We are honored to serve on the Emerging Therapies Task Force and remain committed to working collaboratively to chart a thoughtful and responsible path forward.

Thank you for the opportunity to testify on this important measure.

Tia L.R. Hartsock, MSW, MSCJA
Director, Office of Wellness & Resilience

JOSH GREEN, M.D.
GOVERNOR OF HAWAII
KE KIA'AINA O KA MOKU'AINA 'O HAWAII



KENNETH S. FINK, M.D., M.G.A., M.P.H.
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STATE OF HAWAII
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**Testimony in SUPPORT of SB 3199
RELATING TO MENTAL HEALTH**

SENATOR SAN BUENAVENTURA, CHAIR
SENATOR McKELVEY, VICE CHAIR
SENATE COMMITTEE ON HEALTH AND HUMAN SERVICES

Hearing Date: Wednesday, February 18, 2026, 1:00 p.m. Location: 225 & Video

1 **Fiscal Implications:** Undetermined.

2 **Department Position:** The Department of Health (Department) supports the intent of this
3 measure and offers amendments.

4 **Department Testimony:** The Adult Mental Health Division (AMHD) provides the following
5 testimony on behalf of the Department.

6 The Department supports the intent of SB 3199 to establish a Mental Health Emerging
7 Therapies Task Force to proactively prepare the State for potential federal rescheduling and
8 approval of breakthrough therapies for mental health conditions. The United States Food and
9 Drug Administration has granted breakthrough therapy designation to certain emerging
10 treatments, and it is prudent for Hawaii to evaluate research readiness, regulatory implications,
11 workforce development, and culturally informed implementation pathways in advance of any
12 federal action.

13 However, the Department respectfully recommends that the Task Force be administratively
14 attached to an entity specializing in primary scientific research and pharmaceutical or medical
15 education, rather than housed within the Department. While the Department generally
16 implements evidence-based interventions, the totality of evidence on breakthrough therapies

1 remains under active development. The level of clinical oversight required, including rigorous
2 controls and potentially double-blind randomized controlled trials, exceeds the Department's
3 operational capacity.

4 The Department does not have infrastructure to conduct or oversee primary human subject
5 research; institutional review board (IRB) capacity; clinical trial management systems;
6 experienced research personnel; investigational drug protocols; or legal and compliance
7 infrastructure for research liability, privacy, and human participant protections. Further, the
8 Department is currently understaffed in maintaining core public health and behavioral health
9 functions. It cannot divert resources to develop and manage a new research-focused initiative
10 requiring specialized expertise and heightened ethical oversight.

11 Breakthrough therapies involving psychedelic or entactogenic compounds require
12 sophisticated research design, strict adherence to human participant protections,
13 comprehensive informed consent protocols, secure pharmaceutical handling and storage
14 procedures, data safety monitoring processes, and institutional legal review for liability and
15 compliance. An existing entity with qualified research investigators, experienced clinical trial
16 personnel, and established compliance frameworks is better positioned to ensure safe and
17 effective outcomes.

18 Accordingly, the Department supports SB 3199 with amendments to ensure that the Task
19 Force is administratively attached to an appropriate research-focused entity with demonstrated
20 capacity in primary scientific investigation and pharmaceutical or medical education. The
21 amendments also clarify that such placement does not transfer or modify regulatory authority
22 vested in the Department, the Board of Pharmacy, or other executive agencies.

23 **Offered Amendments:** The Department requests the following amendments.

24 Section 1, page 2, lines 8-14, concerning task force placement:

1 “Accordingly, the purpose of this Act is to establish a two-year mental health emerging
2 therapies task force within ~~[the department of health]~~ an entity with demonstrated expertise in
3 primary scientific research and pharmaceutical or medical education, charged with preparing
4 the State for the integration of federally rescheduled breakthrough therapies, expanding
5 pathways for clinical trials and clinical research in the State, and developing policy
6 recommendations for safe, ethical, and culturally-informed implementation.”

7 Section 2(a), page 2, lines 15-17, concerning administrative placement:

8 “SECTION 2. (a) There is established the mental health emerging therapies task force within the
9 ~~[the department]~~ an entity with demonstrated expertise in primary scientific research and
10 pharmaceutical or medical education for administrative purposes only.”

11 Section 2(d), page 5, lines 13-14:

12 “[~~The department~~] An entity with demonstrated expertise in primary scientific research and
13 pharmaceutical or medical education shall provide administrative, technical, and research
14 support to the task force.”

15 Insert a new subsection after Section 2(d), page 5, line 15, and renumber subsequent
16 subsections accordingly:

17 “(e) Administrative placement of the task force within an entity with demonstrated expertise in
18 primary scientific research and pharmaceutical or medical education shall not be construed to
19 transfer, delegate, diminish, expand, or otherwise modify any regulatory, enforcement,
20 licensing, scheduling, or rulemaking authority vested in the department, the board of
21 pharmacy, or any other state agency. All statutory authority relating to controlled substances,
22 professional licensure, and public health regulation shall remain with the appropriate executive
23 branch agencies as provided by law.”

24 Thank you for the opportunity to testify.



**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 S.B. 3199
RELATING TO MENTAL HEALTH
February 18, 2026 1:00 pm, Room 225 and Video**

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

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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 unanimously supports the intent of SB3199. This measure seeks to establish a responsible and evidence-based process that prepares Hawai'i for emerging therapies for individuals with serious mental illness, many of whom do not benefit from existing treatment options. By prioritizing clinical research, workforce development, and patient safety prior to implementation, the bill reflects national best-practice approaches.

In supporting the intent of this measure, the Council also urges the Legislature to ensure the highest ethical and clinical standards for all emerging therapies. We respectfully recommend explicit attention to equity, affordability, and access so that any future therapies are not only safe and evidence-informed, but also culturally responsive and realistically

State Council on Mental Health Testimony

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Relating to Mental Health

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available to individuals and families most affected by serious mental illness.

Thank you for the opportunity to provide testimony.



**TESTIMONY IN SUPPORT OF SB 3199: Relating to Mental Health
Senate Health Committee
February 18, 2026 1pm**

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

My name is **Ashley Lukens**, and I am the Director of the Clarity Project, a public education and policy initiative focused on preparing states to responsibly integrate emerging mental health therapies grounded in science, ethics, and public health. For the past 18 years, I have worked as a community organizer and advocate in Hawaii. I received my PhD in Political Science from UH Manoa in 2013. Today, I am writing in strong support of SB 3199, a bill which is the continuation of a now 7 year legislative conversation around access to breakthrough therapies in Hawaii.

I am also a cancer survivor whose legal access to psychedelics outside of the US transformed my relationship with my diagnosis and I believe plays an instrumental role in why I am alive and happy today.

I want to begin by being very clear about what this bill does — and what it does not do.

This bill does **not** legalize psychedelic substances.

It does **not** authorize recreational use.

It does **not** bypass federal law or FDA approval.

What it does is far more modest, and far more responsible.

SB 3199 creates a temporary, two-year task force within the Department of Health to ensure that Hawai'i is *prepared* — not scrambling — when federally approved breakthrough mental health therapies become available. It is a readiness bill. A public health planning bill. A research and safety bill.

As someone who has personally navigated the healthcare system through a life-threatening diagnosis, I know firsthand how much it matters when states are unprepared for emerging treatments. Delays in access, lack of trained providers, inequitable rollout, and confusion at the regulatory level all translate into real human costs. Preparation saves lives.

I also want to briefly share why I am here not only as an individual, but as someone who has worked on this issue for many years.

The Clarity Project was founded in 2019 to support evidence-based education, clinician training, and policy readiness around emerging mental health therapies. Since our founding, our programming has reached **hundreds of licensed clinicians** across multiple states and **thousands of potential beneficiaries**, including veterans, first responders, trauma survivors, and family members seeking care. Our work has focused on ensuring that these therapies, if and when approved, are delivered safely, ethically, and within appropriate clinical and regulatory frameworks.

Through this work, we have seen a consistent pattern: demand is growing, evidence is advancing, and states that fail to prepare early face greater risks — including inequitable access, unregulated care environments, workforce shortages, and public confusion. S.B. 3199 directly addresses these challenges by creating a thoughtful, time-limited structure for planning and coordination.

The mental health crisis facing our state is not theoretical. **Suicide remains one of the leading causes of preventable death. Veterans, first responders, and trauma survivors continue to carry immense and often invisible burdens.** At the same time, the FDA has granted breakthrough therapy designation to treatments such as MDMA-assisted therapy for PTSD and psilocybin-assisted therapy for treatment-resistant depression because early clinical evidence shows these therapies may work where existing treatments have failed.

Other states are already preparing. They are building research capacity, workforce pipelines, ethical frameworks, and culturally informed safeguards. Hawai'i should not be left behind — especially given our strong academic institutions, our veteran population, and our responsibility to ensure equity and cultural integrity in healthcare delivery.

The task force includes public health officials, legal experts, clinicians, university researchers, Native Hawaiian health representation, veterans, and individuals with lived experience. It centers patient safety, cultural context, workforce training, and evidence-based policy. It sunsets. It reports back to the Legislature. It does not lock the State into any predetermined outcome.

As a cancer survivor, I am alive today because medical science advanced — and because systems were in place to responsibly deliver new treatments when they became available. We owe the same seriousness, care, and foresight to people suffering from PTSD, severe depression, and trauma-related conditions.

SB 3199 does not promise miracles. It promises preparation, responsibility, and informed decision-making.

I urge you to support this bill so that Hawai'i can meet this moment with leadership, compassion, and sound public health policy.

Mahalo for the opportunity to testify.
Ashley Lukens, PhD
Founder and Director, Clarity Project

SB-3199

Submitted on: 2/16/2026 8:52:48 AM

Testimony for HHS on 2/18/2026 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Shelby "Pikachu" Billionaire	Testifying for Kingdom of The Hawaiian Islands & Ohana Unity Party	Support	Remotely Via Zoom

Comments:

I fully support this bill, because the State Therapists will need the therapy from me and all the homeless and those who suffer under the Tyrannical rule of The Corrupt President, Administration, FBI, DOJ, AG Pam Bondi, and corrupt cops and judges! Therapists don't help you solve your problems, they just listen to you and expect you to get better thru some miracle! No justice = No peace!

Please pass this bill, because the State is going to need on its own employees once the truth comes out, and the therapists realize they have no control or power over the corrupt government, system, President, homelessness, poverty, etc.



Senator Joy San Buenaventura, Chair
Senator Angus McKelvey, Vice-Chair
Senate Committee on Health and Human Services
Hawaii State Capitol, Room 225

Hearing Date: February 18, 2026
1:00 PM

Re: Comment on SB 3199 - Relating to Mental Health Emerging Therapies Task Force

Chair San Buenaventura, Vice-Chair McKelvey, and members of the Committee:

The Hawaii Psychiatric Medical Association (HPMA) appreciates the intent of SB3199 to proactively address serious mental health conditions such as treatment-resistant depression and post-traumatic stress disorder. Hawaii faces significant unmet behavioral health needs, and thoughtful evaluation of emerging therapeutic innovations is a shared priority.

HPMA supports careful, evidence-based assessment of novel treatments, including psychedelic and empathogenic agents, should federal policy and scientific evidence ultimately support their clinical use. We agree that patient safety, equity, and cultural context must remain central to any future consideration of therapeutic integration.

At present, however, these agents remain investigational. The American Psychiatric Association has acknowledged promising early research while emphasizing that these substances have not yet received FDA approval for clinical use outside controlled research settings. As with all psychiatric treatments, implementation must proceed exclusively through established medical and regulatory pathways, including FDA approval, Controlled Substances Act scheduling, DEA oversight, state Board of Pharmacy rulemaking, and professional licensing and credentialing standards.

It is important to note that Hawaii does not need a statutory “readiness and integration” bill to prepare for FDA-approved therapies. Once a drug receives FDA approval and, where applicable, DEA scheduling, licensed clinicians may prescribe it according to professional standards, hospitals and clinics credential providers, and insurers determine coverage. State regulatory bodies already ensure safe, evidence-based adoption. SB3199’s anticipatory approach—developing workforce certification pathways, statewide roadmaps, and legislative recommendations—moves planning for clinical implementation into statute in a way that could inadvertently:

- Create pressure to implement therapies before long-term safety data exist,
- Blur the line between legislative oversight and professional clinical governance, and
- Duplicate or bypass existing regulatory mechanisms designed to protect patients.

To preserve clinical integrity, HPMA recommends clarifying that the Mental Health Emerging Therapies Task Force shall be strictly advisory and shall not:

- Establish or imply clinical standards of care;
- Recommend implementation timelines tied to federal scheduling changes;
- Direct state scheduling actions outside existing statutory authority; or
- Be construed as authorizing clinical use prior to FDA approval and appropriate regulatory action.

Any recommendations produced by the Task Force should explicitly defer to federal approval processes and Hawaii's existing regulatory bodies. Scientific evidence, regulatory review, and professional standards must govern clinical implementation.

HPMA further recommends strengthening the clinical foundation of the Task Force. In addition to psychologists with expertise in trauma and post-traumatic stress disorder, the Task Force should include licensed Hawaii psychiatrists with prescribing authority and expertise in pharmacologic interventions. Evaluating compounds with complex neuropsychiatric effects and safety considerations requires direct prescribing expertise to safeguard patient welfare and ensure alignment with standards of care.

HPMA respectfully proposes the following amendment:

(b)(7)(D) Two licensed psychiatrists with prescribing authority and demonstrated expertise in the pharmacologic treatment of post-traumatic stress disorder, and two licensed psychologists with expertise in trauma-focused psychotherapy and post-traumatic stress disorder.

With explicit statutory guardrails, clear deference to established regulatory authority, and strong physician representation, this measure can provide a structured forum for evaluating emerging therapies while preserving regulatory integrity, minimizing unintended liability exposure, and protecting Hawaii's patients and clinicians.

HPMA remains committed to working collaboratively with the Legislature to ensure that innovation in mental health treatment proceeds within a framework of scientific rigor, regulatory clarity, and patient safety.

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

Mahalo,
Pi'imauna Kackley, MD, President
Hawaii Psychiatric Medical Association



Hawaii Medical Association

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SENATE COMMITTEE ON HEALTH AND HUMAN SERVICES

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

Date: February 18, 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 SB 3199 RELATING TO MENTAL HEALTH. DOH; Mental Health; Emerging Therapies; Task Force; Reports

Position: Comments

This measure would establish the Mental Health Emerging Therapies Task Force to prepare the State for the integration of breakthrough therapies, expansion of pathways for clinical trials and clinical research, and development of policy recommendations for safe, ethical, and culturally informed implementation of emerging therapies and require reports to the Legislature with sunset 6/30/2028.

HMA supports the intent of this measure to allow for thoughtful, proactive preparation for emerging mental health clinical innovations in Hawaii. With a strong emphasis on patient safety, equity, and cultural context, the proposed Task Force can carefully assess the State's readiness for reviewing research and the potential therapeutic integration of compounds such as psilocybin and MDMA, should federal policy and evidence support their use.

HMA recommends clarifying that the Task Force should include qualified licensed Hawaii psychiatrists with clinical prescribing authority and expertise in pharmacologic interventions, in addition to the psychologists, each with expertise in trauma and post-traumatic stress disorder.

HMA respectfully proposes the amendment:

(b) (7) (D) Two licensed psychiatrists ~~or~~ and psychologists with expertise in trauma and post-traumatic stress disorder; and

This measure reflects responsible foresight to address emerging therapeutic frontiers in mental health for Hawaii. HMA supports task force collaboration with solid healthcare professional representation. This will strengthen the Task Force's clinical foundation and better protect Hawaii's patients as policymakers and stakeholders evaluate complex, novel mental health interventions.

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

2026 Hawaii Medical Association Public Policy Coordination Team

Elizabeth A Ignacio, MD, Chair • Robert Carlisle, MD, Vice Chair • Christina Marzo, MD, Vice Chair
Linda Rosehill, JD, Government Relations • Marc Alexander, Executive Director

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REFERENCES AND QUICK LINKS

Siegel, J.S., et al. "Psychedelics Drug Legislative Reform and Legalization in the US." *PMC*, 2023, [pmc.ncbi.nlm.nih.gov/articles/PMC10069558/](https://pubmed.ncbi.nlm.nih.gov/articles/PMC10069558/).

American Public Health Association (ASTHO) Overview of State Policies. "State Policies Supporting Evidence-Based Therapeutic Psilocybin Use." *ASTHO Communications Blog*, 22 June 2023, astho.org/communications/blog/state-policies-supporting-evidence-based-therapeutic-psilocybin-use/.

Callahan, Jessica, and Michelle Kirby. *Psilocybin Study Report to the Connecticut State Legislature*. Connecticut Dept. of Mental Health & Addiction Services, 22 Feb. 2022, portal.ct.gov/-/media/dmhas/publications/psilocybin-study-report-final-022322.pdf.

Kaiser Family Foundation. "How Oregon's Regulated Therapeutic Psilocybin Program Is Getting Off the Ground." *KFF Health News*, 17 Mar. 2021, kffhealthnews.org/morning-breakout/plans-for-therapeutic-psychedelics-program-begin-in-oregon/.

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

SB-3199

Submitted on: 2/17/2026 11:13:02 AM

Testimony for HHS on 2/18/2026 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Chelsea Rorer	Testifying for MindWave Medicine	Support	Written Testimony Only

Comments:

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

My name is Chelsea Rorer. I am an acute care and psychiatric nurse practitioner and the owner of MindWave Medicine. I am writing in strong support of SB3199, which establishes the Mental Health Emerging Therapies Task Force to prepare the State for the integration of breakthrough therapies, expansion of pathways for clinical trials and clinical research, and development of policy recommendations for safe, ethical, and culturally informed implementation of emerging therapies.

I have worked in medicine for over fifteen years, including in emergency medicine and psychiatry, and now specialize in ketamine-assisted psychotherapy. In my clinical practice, I work with individuals suffering from treatment-resistant depression, PTSD, addiction, anxiety disorders, and suicidality. I have witnessed firsthand the limitations of conventional treatments for many patients and the profound healing potential when innovative therapies are delivered safely, ethically, and with appropriate preparation and integration support.

Over the past two decades, researchers around the world have renewed scientific understanding of breakthrough therapies. With growing certainty, scientists and medical professionals are collaborating with policymakers to expand access to safe, non-addictive therapeutic modalities such as psilocybin and MDMA. Research from major institutions demonstrates psilocybin’s promise in treating depression, addiction, end-of-life anxiety, and other mental health conditions. Similarly, MDMA-assisted therapy has shown groundbreaking efficacy in the treatment of post-traumatic stress disorder (PTSD). These results have led the U.S. Food & Drug Administration (FDA) to grant both psilocybin and MDMA Breakthrough Therapy Designation.

Hawai‘i faces unique mental health challenges, including high rates of trauma exposure, geographic isolation, limited provider access in rural areas, and disparities across communities. Establishing a task force ensures that our state approaches emerging therapies thoughtfully — with attention to clinical safety, practitioner training, cultural sensitivity, Native Hawaiian perspectives, and equitable access.

States such as Oregon and Colorado have taken steps toward responsible frameworks for therapeutic access. Hawai‘i now has the opportunity to proactively prepare rather than react. SB3199 does not legalize or commercialize these therapies; rather, it ensures that Hawai‘i is

informed, prepared, and positioned to implement evidence-based policy when federal approval advances.

Mental health affects every family in our state. Many of our residents are suffering despite exhausting conventional options. SB3199 represents a measured, research-driven approach to ensuring that Hawai'i does not fall behind in access to safe, clinically supervised breakthrough therapies.

I respectfully urge you to support SB3199 and help prepare Hawai'i for the future of mental health care.

Mahalo for your time and consideration,

Chelsea Rorer, MSN, PMHNP-BC, AGACNP-BC
MindWave Medicine

SB-3199

Submitted on: 2/15/2026 3:56:21 PM

Testimony for HHS on 2/18/2026 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Kendall Krumm	Individual	Support	In Person

Comments:

Testimony in Support of (SB 3199)

Senate Health committee and the Ways and Means committee - | February 18, 2026 at 1:00P

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

My name is Kendall Krumm, I live in Honolulu County and I am writing in strong support of SB3199, which creates a pilot program to fund research and patient/clinician training on breakthrough therapies.

I am the spouse of a combat veteran. I have experienced the benefits of plant medicines first hand in regards to my own PTSD diagnosis, and so has my family. I am also a future LCSW and plant medicine practitioner.

Currently these treatment modalities and practioner trainings have to be done underground or out of the state compeltely. This creates a huge, inequitable barrier to access, treatment, and legitamacy to an indigenous treatment methodology that has been around for thousands of years and that can be found across cultures.

We know laws and compound scheduling does nothing to prevent folks from accessing the medicines or compounds they wish to ingest. They just find creative ways around it, injecting their money into other economies that don't benefit the people or state of Hawaii. This subversion of system norms by those who have the resources to do so, is a further reflection of all the inequitable disparities prevalent in our current western, capitalistic dominated society.

Here are the research based facts:

- **The National for Behavioral Health:** states that over 90% of clients that seek mental health treatment have experienced trauma, which is a risk factor in nearly all behavioral and substance use disorders
- **National Center for PTSD & the US Dept. of Veteran Affairs:** states that veterans are more likely to have PTSD than civilians and veterans deployed to a war zones are more likely to have PTSD than those that did not deploy
- **The National Institute for Health states:** PTSD patients exhibit a significant impact on cognition and emotional processing, leading to a decline in the functions of daily living and interpersonal and social relationships.
- **The current treatment for PTSD is either pharmacological or psychotherapy and currently there are only two approved FDA medications for PTSD treatment.**
- **According to several studies, 40–60% of patients do not respond to treatment adequately**
- **MDMA has shown promising results in treatment-resistant PTSD. According to a study by Mithoefer et al. [6], even 3.5 years after undergoing an MDMA-assisted psychotherapy trial, patients showed a long-term durability reduction in PTSD**
- **US. Department of VA affairs states: Psychoactive drugs such as MDMA, ketamine (which is already legalized in Hawaii), and psilocybin have been shown to specifically target and decrease fear and anxiety pathways in the brain. These unique properties hold the potential to be utilized in addressing symptoms of trauma in those with refractory or treatment-resistant PTSD**
- **Psilocybin has shown efficacy for treating depression, anxiety, and substance use**
- **Psilocybin affects neural networks to create positive changes in personality, increased feelings of connectedness, increased openness, improved perspective taking, increased psychological flexibility, and an increased sense of well-being**
- **Psilocybin facilitates fear extinction and neurogenesis in animals, which may directly counteract the impaired fear extinction and neurogenesis that likely play a key role in the development and maintenance of PTSD**
- **Psilocybin induces emotional breakthrough experiences that have been established as a key mediator in long-term psychological change in treatment for other mental health disorders.**
- **Psychedelics can also decrease amygdala reactivity during emotion processing which may reverse the heightened amygdala reactivity typically seen in PTSD, thereby increasing the ability to process traumatic memories.**
- **Psilocybin also increases emotional empathy, mindfulness-related capacities like acceptance and connectedness while reducing avoidance, which may all facilitate PTSD treatment.**

Based on our current research, emerging psychedelic therapies look promising for the treatment of many mental health issues, that psychotherapy and pharmacology alone

cannot improve

As a future practitioner, I want access to as many care tools as possible. We have a saying in the field that no modality, whether pharmacological or psychotherapy based, is a “one size fits all” treatment. The more treatment paths we have at our disposal, the more likely we will be able to find a treatment path that works for each individual client.

In the end, folks will find the relief they are looking for whether its legal or not. This is already happening. We might as well find a way to allow regulated, robust researched treatment modalities to be accessible to all constituents in Hawaii. Let’s keep the money, research, treatment, and training in the state of Hawaii and provide mental health relief in a current system that fails to do so.

Mahalo nui loa for your time and consideration,

Kendall Krumm

MSW Student at Portland State University

BA - Criminology and Sociology

MS - Urban Multicultural Elementary Education

64 Kaneohe Bay Dr.

Kailua, HI

96734

Written Testimony in Support of SB3199

Hearing / Committee: SB 3199 / COMMITTEE ON HEALTH AND HUMAN SERVICES

Date / Time: Wednesday, February 18th @ 1pm Hawaii Time

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

My name is Corey Westbury, and I live on Maui. I am writing in strong support of SB3199, which establishes the Mental Health Emerging Therapies Task Force to prepare the State of Hawai'i for the safe, ethical, and culturally informed integration of breakthrough mental health therapies.

I bring both professional and community-based experience to this issue. I previously served as a **Training Coordinator for the MAPS-PBC MDMA-Assisted Therapy Training Program**, where I supported the preparation of licensed mental health professionals working with MDMA-assisted therapy for post-traumatic stress disorder within regulated clinical research settings. Through this work, I gained direct insight into the rigor, ethics, safeguards, and workforce development required to responsibly implement emerging therapies at scale.

In addition to my work with MAPS-PBC, I am deeply engaged in community education and integration support around trauma, grief, and end-of-life care here in Hawai'i. My work focuses on bridging clinical research with community understanding—ensuring that emerging therapies are approached with humility, cultural awareness, and care for the unique needs of our island communities.

Over the past two decades, scientific research has significantly advanced our understanding of breakthrough therapies such as MDMA-assisted therapy for PTSD and psilocybin-assisted therapy for treatment-resistant depression and anxiety, including end-of-life distress. These therapies have demonstrated strong safety and efficacy profiles when delivered in structured, clinical, and ethical contexts, leading the U.S. Food and Drug Administration to grant them Breakthrough Therapy Designation.

SB3199 is both timely and responsible. As federal rescheduling and approval are anticipated, Hawai'i has an opportunity—and a responsibility—to proactively prepare our public health systems, research institutions, and clinical workforce. This bill does not prematurely legalize therapies; rather, it establishes a thoughtful task force to evaluate best practices, expand research pathways, recommend training and certification standards, and ensure culturally informed and equitable implementation.

Importantly, the bill recognizes that workforce readiness and education are essential. My experience coordinating a national MDMA-assisted therapy training program has shown me that successful implementation depends not only on clinical protocols, but also on well-trained professionals, strong ethical frameworks, and integration support for patients and communities. Hawai'i can benefit greatly from developing these systems thoughtfully and in alignment with our values.

Many residents of Hawai'i—including veterans, first responders, trauma survivors, and those facing serious illness—stand to benefit from future access to these therapies. SB3199 helps ensure that when access becomes possible, our State is prepared to respond safely, ethically, and with care for cultural context.

I respectfully urge you to support SB3199 and help position Hawai'i as a leader in responsible mental health innovation that centers both science and community wellbeing.

Mahalo for your time and consideration.

Respectfully,
Corey Westbury
Maui, Hawai'i

1-Minute Oral Testimony (via Zoom) in Support of SB3199

Aloha Chair, Vice Chair, and Members of the Committee.

My name is Corey Westbury, and I live on Maui. I'm here in strong support of SB3199, which establishes the Mental Health Emerging Therapies Task Force.

I previously served as a **Training Coordinator for the MAPS-PBC MDMA-Assisted Therapy for PTSD Training Program**, supporting the preparation of licensed mental health professionals working within regulated clinical research settings. That experience showed me how much care, training, and ethical infrastructure are required to implement these therapies safely and responsibly.

I also work in community education and integration support around trauma, grief, and end-of-life care here in Hawai'i. From both perspectives, I see SB3199 as a thoughtful and necessary step. This bill does not rush access—it prepares our state for federal approval by focusing on workforce readiness, research pathways, cultural grounding, and patient safety.

As federal rescheduling is anticipated, Hawai'i has an opportunity to lead with care rather than react later. I respectfully urge your support of SB3199.

Mahalo for your time.

SB-3199

Submitted on: 2/16/2026 11:50:23 AM

Testimony for HHS on 2/18/2026 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Edith Garcia	Individual	Support	In Person

Comments:

Chair, Vice Chair, and Members of the Committee,

My name is Edith Garcia. I am traveling from Mountain View, Hawaii. I am a combat Navy veteran, a Hawai'i resident, a healthcare administrator, a patient advocate, and the co-founder of the Big Island Veteran Club at UH Hilo. I am writing in strong support of SB3199.

SB3199 is not a bill to immediately legalize psychedelic therapies. Rather, it responsibly prepares the State of Hawai'i for the integration and implementation of emerging mental health treatments by establishing a task force to study clinical research, safety protocols, ethical implementation, and culturally informed care models that promote trauma-informed and compassionate care. This preparation is necessary and, to be honest, overdue.

I had the opportunity to travel outside of the United States to receive emerging mental health therapies that are currently inaccessible to most veterans here. I was fortunate enough to physically and financially be able to get on an airplane and leave the country to seek care. Many veterans in Hawai'i cannot. Some cannot even travel between islands due to physical injuries, severe PTSD, or other disabling mental health conditions. Hawai'i's geography itself is a healthcare barrier already.

This creates a serious equity issue in our state. Access to care should not depend on whether a veteran is healthy enough to travel internationally. Our healthcare system is currently struggling to adequately address treatment-resistant PTSD, depression, and suicide among veterans. Preparing the state now allows Hawai'i to move forward carefully, responsibly, and with strong safeguards rather than reacting later without structure.

Across the United States, states are already preparing for these therapies. Colorado has implemented a regulated psilocybin access framework, and Texas has authorized and funded clinical research into ibogaine for veterans with treatment-resistant PTSD. Legislators are not approaching this recklessly; they are building medical oversight, research partnerships, and patient protections before wider access occurs.

This bill is about readiness. It is about ensuring that when these therapies become federally approved or more widely available, Hawai'i will already have the infrastructure, policies, and trained providers necessary to protect patients while offering hope.

Our veterans earned access to every possible avenue of healing.

I respectfully urge you to support SB3199.

Mahalo for your time and consideration.

Edith Garcia

Combat Navy Veteran

Testimony in Support of SB3199

Hearing / Committee info | Hearing date and time
Aloha Chair, Vice Chair, and Members of the Committee,

My name is Zoe Wells, I live in Haiku, HI and I am writing in **strong support of SB3199**, which establishes the Mental Health Emerging Therapies Task Force to prepare the State for the integration of breakthrough therapies, expansion of pathways for clinical trials and clinical research, and development of policy recommendations for safe, ethical, and culturally informed implementation of emerging therapies.

I am someone who has transcended addiction and depression as well as chronic pain with the help of these treatments. I want others to have access to these modalities as I strongly believe they are highly effective for trauma, addiction, depression, etc. I believe Hawaii would see less domestic violence, abuse, trauma from addiction and depression if these modalities were available and safely accessible.

Over the past two decades, researchers around the world have renewed scientific understanding of the benefits of breakthrough therapies, so it is with growing certainty that scientists and medical professionals are now working with policymakers to create access to safe and non-addictive therapies like psilocybin and MDMA for therapeutic uses. Research from major institutions around the world shows psilocybin to be a promising clinical treatment tool for a wide range of mental and psychiatric diagnoses including anxiety, addiction, depression, end-of-life anxiety, and more. Similarly, MDMA is showing groundbreaking efficacy in treating post-traumatic stress disorder (PTSD). As a result, psilocybin and MDMA are increasingly considered some of the most effective, non-addictive, and safe treatment options for

treatment-resistant depression and PTSD respectively, when administered in clinical settings. These impressive results have led the U.S. Food & Drug Administration (FDA) to grant psilocybin and MDMA their Breakthrough Therapy Designation.

States now have an essential role to play in the movement toward safe, legal, therapeutic access to psilocybin, MDMA and other breakthrough therapies. Initiatives like the passage of Measure 109 in Oregon (2020) and Natural Medicine Health Act in Colorado (2022) are paving the way for people who suffer from treatment-resistant mental health ailments to get the help they need. **If passed, Hawai'i would also join Arizona, Connecticut, Maryland, Texas, and Washington, whose legislatures all passed bills funding research and trials for breakthrough therapies between 2021 and 2023.**

With mental health becoming a more present issue in our communities, everyone knows someone who stands to benefit from access to psilocybin, MDMA and other breakthrough therapies. Please support this measure, which supports research and prepares medical professionals for breakthrough therapies. We do not want the citizens of Hawai'i to miss out on these healing modalities.

Mahalo,
Zoe Wells

Testimony in Support of SB3199
Hearing on February 18, 2026, at 1pm
Senate Committee on Health and Human Services

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

My Name is Vanessa Torres, I am a resident of Hawai'i County, I serve as the Public Relations Officer for American Legion Post 3, and I stand in strong support of SB3199, Establishing a Mental Health Emerging Therapies Task Force to prepare the State for safe, ethical, and culturally informed integration of breakthrough therapies.

I am a Marine Corps veteran of the Iraq War, a mother of two young adults, and a wife of 21 years. I was diagnosed with Complex PTSD and major depressive disorder as a result of trauma endured through my service. I hold a bachelor's degree in psychology and an MBA, I speak with full understanding of the complexity and weight of the trauma I carry. I lost two friends to that weight, and my family nearly lost me.

For more than a decade, I struggled with PTSD symptoms and treatment-resistant depression, pursuing traditional therapies, which failed to help. I followed the research on psilocybin-assisted therapy for years with hope. Then I met someone who helped me pursue treatment in the controlled environment I was seeking. I traveled to a state where psilocybin is legally regulated, receiving treatment under professional supervision. The result was not temporary relief; it was joyful restoration. I regained clarity, purpose, and the ability to function and engage in life again.

This bill is about safe, regulated access for those who have run out of options, these therapies save and improve lives. I urge you to support SB3199.

Research has demonstrated the clinical effectiveness of psilocybin and MDMA in treating depression, addiction, and PTSD, particularly in treatment-resistant cases like mine. Both have received FDA Breakthrough Therapy designation. Efforts elsewhere have shown that responsible legislation, can expand pathways for those in need. Hawai'i should be prepared to responsibly integrate these emerging therapies.

Mahalo for the opportunity to testify in support of SB3199.

SB-3199

Submitted on: 2/17/2026 4:33:21 AM

Testimony for HHS on 2/18/2026 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Gerald Busch	Individual	Oppose	Remotely Via Zoom

Comments:

TESTIMONY IN OPPOSITION TO SB3199 (AS DRAFTED)

Relating to Mental Health Emerging Therapies

Senate Committee on Health and Human Services

Hearing Date: February 18, 2026, 1:00 PM

Conference Room 225 & Videoconference

Submitted by:

Gerald Busch, MD, MPH

Board Certified in General Psychiatry, Child and Adolescent Psychiatry,

American Psychiatric Association Council on Addiction Psychiatry

Past President, Hawai'i Psychiatric Medical Association

Chair, Vice Chair, and Members of the Committee:

I appreciate the intent of SB3199 to address serious mental health conditions such as treatment-resistant depression and PTSD. However, I respectfully oppose the bill as drafted because it departs from the standard medical governance framework used for all other psychiatric treatments.

No other psychiatric treatment—whether SSRIs, antipsychotics, lithium, ECT, TMS, or ketamine—requires a legislatively created task force to prepare for implementation. Clinical treatments are introduced into practice through established pathways: FDA approval, DEA scheduling, Board of Pharmacy rulemaking, professional licensing standards, health system

credentialing, and payer coverage decisions. This structure preserves medical integrity, patient safety, and evidence-based practice.

SB3199 creates a special legislative pathway for a particular class of therapies and includes provisions that effectively link state scheduling actions to federal changes on a compressed timeline. That approach shifts decisions about clinical implementation from medical and regulatory bodies to statute. Psychiatric care should not be governed differently simply because a treatment is politically or culturally prominent.

This concern carries particular weight in Hawai‘i. The history of the Hawaiian Islands includes a well-documented pattern in which psychoactive substances were introduced to Native Hawaiian communities with devastating and lasting consequences. Alcohol did not exist in Hawai‘i prior to European contact in 1778. Before colonization, Native Hawaiians used ‘awa (kava), a non-addicting and culturally regulated substance tied to sacred ceremony. European explorers and settlers introduced alcohol as a tool of commerce and colonial expansion, and the resulting intergenerational trauma—including disproportionate rates of substance misuse, mental health disparities, and mass incarceration—continues to affect Native Hawaiian communities today (Greywolf & Lowe, 2022; Williams et al., 2021). Legislation that creates a special pathway for introducing another class of psychoactive substances into Hawai‘i’s communities should be evaluated against this historical context. Simultaneously, the broader psychedelic commercialization movement has drawn significant criticism for appropriating Indigenous knowledge systems while excluding Indigenous peoples from governance, economic benefit, and meaningful participation. An Indigenous-led global consensus published in *The Lancet Regional Health—Americas* identified ongoing harms including cultural extraction, unsustainable harvesting of traditional plant medicines, and the commodification of sacred healing practices with little to no benefit returning to the communities from which this knowledge originated (Celidwen et al., 2023). Any framework for emerging therapies in Hawai‘i must account for these realities and ensure that Native Hawaiian communities are not once again subjected to externally driven substance introduction without adequate cultural safeguards, genuine community governance, and equitable benefit-sharing.

If the Legislature’s goal is to address Hawai‘i’s mental health crisis, the more impactful interventions would be strengthening workforce capacity, improving Medicaid reimbursement, expanding inpatient and step-down resources, enhancing crisis services, and increasing access to evidence-based care that is already FDA-approved.

Emerging therapies should be evaluated and implemented through the same rigorous medical and regulatory processes that govern all other treatments. Creating a separate legislative structure risks fragmenting psychiatric care and setting a precedent for policy-driven rather than evidence-driven clinical decision-making.

For these reasons, I respectfully urge reconsideration or substantial amendment of SB3199.

Thank you for the opportunity to testify.

References

Celidwen, Y., Redvers, N., Berger, E., et al. (2023). Ethical principles of traditional Indigenous medicine to guide western psychedelic research and practice. *The Lancet Regional Health—Americas*, 18, 100410.

Greywolf, C. T., & Lowe, J. R. (2022). Colonization and the introduction of alcohol to Native Hawaiians: Why cultural safety? *Journal of Indigenous Research*, 10(2022), Article 7.

Williams, I. L., Makini, G. K., & Rezendes, W. C., III. (2021). Indigenous Hawaiian psychoactive drug use: Before European contact, and after 1778. *Journal of Psychoactive Drugs*, 53(2), 111–126.

SB-3199

Submitted on: 2/17/2026 12:26:56 PM

Testimony for HHS on 2/18/2026 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Vicky Farmer	Individual	Support	In Person

Comments:

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

My name is Vicky Farmer, and I live on Hawai'i Island. I am writing in strong support of SB3199, which establishes the Mental Health Emerging Therapies Task Force to prepare the State for the integration of breakthrough therapies, expansion of pathways for clinical trials and clinical research, and development of policy recommendations for safe, ethical, and culturally informed implementation of emerging therapies.

A Crisis We Can No Longer Ignore

Suicide is the second leading cause of death in Hawai'i. For years, we believed 22 veterans a day died by suicide. A decade later, we learned that number was actually closer to 44. This is a staggering tragedy—a devastating loss for those who signed a blank check in service to this country. Since 2001, 7000 lives lost to combat. 140,000 lives lost to suicide.

And the reality? Many veterans have had to seek lifesaving treatments outside the U.S.—accessing ibogaine, ayahuasca, psilocybin, and more in other countries because they are not legally available here.

This is unacceptable.

Why This Matters: A Personal Story

I am a veteran spouse, and I have witnessed firsthand the devastating effects of complex PTSD (Post-Traumatic Stress Disorder) and TBI (Traumatic Brain Injury).

My husband is a 22-year U.S. Army veteran and Special Forces Green Beret. He completed 10 combat deployments. He was exposed to IEDs, burn pits, heavy weaponry, mass casualties, near misses—he was even shot several times. He lost teammates in combat—and then, to suicide. He survived the war abroad but almost lost the war at home.

The military trained him for war, but not to return home.

The VA's solution? Thirteen medications.

Thirteen medications that left him feeling like a zombie—disconnected, numb, and barely present.

We tried everything:

- Music therapy
- Art therapy
- Talk therapy
- Equine therapy
- Neurofeedback
- Transcendental meditation
- Hyperbaric oxygen treatment
- EMDR, prolonged exposure therapy, and more

But NONE of this worked. Nothing even scratched the surface.

A Desperate Search for Something That Works

Several years ago, my husband was in crisis. Articles about psychedelic therapies started appearing in my newsfeed. And you know what my first reaction was? Absolutely not. The idea of putting a highly trained, suicidal veteran on something that makes him hallucinate sounded like a terrible idea.

But when nothing else is working, you rethink everything.

I began to dig into the research—NIH studies, clinical trials, documentaries, podcasts, veteran testimonies. That's when I found VETS Solutions, a nonprofit started by Marcus and Amber Capone to help veterans access psychedelic-assisted therapy outside the U.S..

We applied. We received a grant. We got on a plane.

And for the first time in years, my husband experienced profound relief.

A Catalyst for Healing

This was not a miracle cure. It wasn't an overnight fix. But it was a catalyst.

It gave him neuroplasticity—the ability for his brain to heal.

It gave him space to breathe—to step outside his trauma.

It gave him the ability to process what he had survived.

Because here's the truth:

PTSD doesn't just affect the veteran. It affects the entire family.

We, too, carry the weight of war.

But healing?

Healing ripples outward. It spreads through a family like a wave rolling across the ocean.

We Call Them Heroes—But Deny Them Treatment

We hold our veterans in high regard.

We tell them, “Thank you for your service.”

But words are not enough.

How can we call them heroes while denying them real, effective treatment—treatment that forces them to leave the country just to heal?

This Is a Human Issue—Not a Political One

This treatment is not for everyone. But it is a proven tool.

We are not asking for blind faith. We are asking for science-backed solutions. We must remove the stigma surrounding mental health treatment.

The Science Speaks for Itself

Over the past two decades, researchers around the world have renewed scientific understanding of the benefits of breakthrough therapies, so it is with growing certainty that scientists and medical professionals are now working with policymakers to create access to safe and non-addictive therapies like psilocybin and MDMA for therapeutic uses. Research from major institutions around the world shows psilocybin to be a promising clinical treatment tool for a wide range of mental and psychiatric diagnoses including anxiety, addiction, depression, end-of-life anxiety, and more. Similarly, MDMA is showing groundbreaking efficacy in treating post-traumatic stress disorder (PTSD). As a result, psilocybin and MDMA are increasingly considered some of the most effective, non-addictive, and safe treatment options for treatment-resistant depression and PTSD respectively, when administered in clinical settings. These results have led the FDA to grant both psilocybin and MDMA their Breakthrough Therapy Designation.

States now have an essential role to play in the movement toward safe, legal, therapeutic access to psilocybin, MDMA and other breakthrough therapies. Initiatives like the passage of Measure 109 in Oregon (2020) and Natural Medicine Health Act in Colorado (2022) are paving the way for people who suffer from treatment-resistant mental health ailments to get the help they need.

With mental health becoming a more present issue in our communities, everyone knows someone who stands to benefit from access to psilocybin, MDMA and other breakthrough therapies. We do not want the citizens of Hawai‘i to miss out on these healing modalities.

The Time to Act Is Now

Every member of this committee has the power to move and pass this bill. Please pass SB3199 — in honor of those who didn't make it home, and for those still fighting to stay.

Mahalo, mahalo, mahalo

Vicky Farmer

Hawai'i Island Resident | Veteran Spouse

Aloha, my name is Josh Sze, and I am a disabled veteran who has battled PTSD, depression, and anxiety for years. My struggles led me to homelessness, lost in a system that offered me medication but no real healing. Nothing worked—more days than not I didn't care if I woke up the next day. Then, I found out about psilocybin therapy. That treatment changed everything for me.

It helped me confront my trauma in a way that traditional therapies never could. It allowed me to break free from the cycle of despair and rebuild my life. Today, I am no longer homeless. I have a bachelor's degree in psychology, something I never thought possible before this therapy gave me a second chance. Plant medicine has the power to heal and should be accessible here in the United States. It is unacceptable that we must travel outside the country for healing!

This is more than just a bill—it's a lifeline. It's a chance for veterans and others suffering from severe mental health conditions to access a treatment that can truly heal. I urge our lawmakers to support this bill and give more people the opportunity to reclaim their lives. Mahalo.

LATE

3199 SB RELATING TO MENTAL HEALTH.

Aloha Chair, and Members of the Committee,

My name is Michael “Mikey” McKim, and I am a Retired U.S. Army First Sergeant with 20 years of active service, including 16 years in the Special Operations Community. I currently reside in Tennessee and am writing in strong support of expanding access to psychedelic-assisted therapy within the United States so that Veterans and those struggling with severe mental health conditions do not have to leave the country for life-saving treatment.

I served my country with honor during the height of the Global War on Terrorism (GWOT), yet when I returned home, I faced battles I never expected—post-traumatic stress, anxiety, and a deep disconnection from myself and others. Like many Veterans, I tried traditional treatments, prescription medications, therapy, and unhealthy coping mechanisms, that only numbed the symptoms rather than addressing the root causes of my trauma. I was stuck in survival mode, unable to truly heal.

Everything changed when I had the opportunity to undergo psychedelic-assisted therapy outside of the U.S. Through my treatment, I was able to confront and process my trauma in ways that years of traditional therapy never achieved. These therapies didn’t mask my pain, they helped me reconnect with parts of myself I thought were lost forever. For the first time in decades, I felt peace, self-compassion, and the ability to move forward.

My story is not unique, thousands of Veterans and many humans have had similar breakthroughs, yet these treatments remain inaccessible in the U.S.

Over the past two decades, scientific research has consistently demonstrated the effectiveness of psychedelic therapies in treating PTSD, depression, and treatment-resistant mental health conditions. In 2017, the FDA designated MDMA and psilocybin as Breakthrough Therapies, recognizing their potential to transform mental health treatment. Studies from Johns Hopkins, MAPS (Multidisciplinary Association for Psychedelic Studies), and other leading institutions continuously show that these treatments are safe, non-addictive, and offer profound healing when administered in controlled settings.

However, because these therapies remain federally restricted, Veterans like myself are forced to leave the country for life-saving treatment. We should not have to travel to Mexico, Costa Rica, or other nations to receive healing that should be available at home.

This is not just a medical issue, this is a moral obligation.

Denying these therapies is not just a medical oversight, it is a failure of our duty to care for those who have sacrificed for this country.

States such as Oregon, Colorado, and Texas have already taken steps to fund research and expand access to these therapies. It is time for the entire country to follow suit.

By supporting psychedelic-assisted therapy, we are not endorsing recreational use, we are advocating for evidence-based, clinical treatments that save lives.

I urge you to support the expansion of psychedelic-assisted therapy in the U.S. This is not just about Veterans, it is about ensuring that all Americans struggling with trauma and mental health conditions have access to safe, evidence-based treatments.

We cannot afford to wait. The lives of countless Americans depend on it.

With Love and Respect,
Michael "Mikey" McKim
First Sergeant (Retired), U.S. Army
Owner/Coach/Consultant, Pragmatic Solutions LLC

SB-3199

Submitted on: 2/17/2026 10:40:43 AM

Testimony for HHS on 2/18/2026 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Kristina Rodriguez	Individual	Support	Remotely Via Zoom

Comments:

Testimony in Support of SB3199

Hearing on February 18, 2026 at 1pm

Senate Committee on Health and Human Services

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

My name is Kristina Marie Rodriguez, I live in Kihei, Maui, Hawai'i and I am writing in strong support of SB3199, which establishes the Mental Health Emerging Therapies Task Force to prepare the State for the integration of breakthrough therapies, expansion of pathways for clinical trials and clinical research, and development of policy recommendations for safe, ethical, and culturally informed implementation of emerging therapies.

As a registered nurse specializing in psychedelic-assisted therapy and education, I have witnessed firsthand the profound healing potential of plant medicines and psychedelic therapies. Backed by a growing body of scientific research, these emerging and breakthrough treatments offer an evidence-based approach to addressing complex mental health conditions—often where conventional interventions have fallen short. While modern science is only now substantiating their efficacy, Indigenous communities have understood and stewarded these medicines responsibly for millennia. Even substances such as MDMA have historical therapeutic applications dating back to the early 20th century. In my professional practice and personal experience, I have observed how, with proper education, thoughtful regulation, and skilled medical oversight, psychedelic medicines can create transformative opportunities for healing, resilience, and renewed hope for individuals suffering from trauma, depression, anxiety, and other mental health challenges.

My commitment to this work is deeply personal. As a survivor of early childhood sexual trauma, I have devoted my life to healing, spiritual inquiry, and service. Studying diverse Indigenous and spiritual traditions across India, Peru, Brazil, Mexico, Hawai'i, and North America introduced me to the healing power of plant and fungi medicines, ceremony, prayer, and ritual. These traditions not only supported my own recovery and strengthened my resilience, but also clarified my calling to help facilitate healing for others. It is my sincere hope that safe, equitable access to these therapeutic medicines be made available to the people of Hawai'i. If healing was possible for me, it is possible for others, and that belief continues to guide my advocacy for a more compassionate and effective future in mental healthcare.

Mahalo for the opportunity to testify in support of SB3199.

Kristina M. Rodriguez, RN-BSN, LMT, IFMCP

SB-3199

Submitted on: 2/17/2026 12:04:55 PM

Testimony for HHS on 2/18/2026 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Robert Farmer	Individual	Support	Remotely Via Zoom

Comments:

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

My name is Robert Farmer. I live in Hawai'i Island and I am writing in strong support of SB3199, which establishes the Mental Health Emerging Therapies Task Force to prepare the State for the integration of breakthrough therapies, expansion of pathways for clinical trials and clinical research, and development of policy recommendations for safe, ethical, and culturally informed implementation of emerging therapies.

I am a retired U.S. Army veteran with 22 years of active service many within the special operations community. I completed 10 combat deployments as a Special Forces Green Beret. I served on the front lines of war. I was shot 3 times, TBI (traumatic brain injury), multiple herniated discs on my spine, hearing loss, vision damage, exposure to hundreds of explosives, tinnitus, shattered hip and of course, PTS. I strongly support this bill to expand access to psychedelic assisted therapy. While I served my country for 22 years, I had to travel abroad to access safe and effective care.

I did everything available under the traditional medical model; I left the VA on 13 medications which did nothing more than make me feel like a zombie. I tried countless therapies; music therapy, art therapy, talk therapy, equine therapy, neurofeedback, alpha stim, transcendental meditation, mERt, hyperbaric oxygen treatment, prolonged exposure, emdr - none of which address the trauma. My central nervous system was stuck in fight or flight for 20 years. Over TWO DECADES. The constant deployments never allowed my body to get out of the sympathetic fight or flight state.

In our search for alternative treatments, we discovered plant medicine and came across VETS Solutions, a nonprofit founded by former Navy SEAL Marcus Capone and his wife, Amber. Their organization has helped an astounding 1,000 veterans, yet due to overwhelming demand, they are forced to turn many away.

It wasn't until I left the country to access psychedelic medicine that I experienced profound relief, neuroplasticity and healing from my combat trauma. The set and setting and preparation were of utmost importance. The integration continues to this day. It is NOT a magic pill. With the right therapeutic environment, guidance, support, safe strong container in place I am living proof this works.

Veterans deserves access to this life saving, effective medicine. We should not have to leave the country we served to get real treatments.

This unmet need speaks to a far deeper crisis—one that is costing lives. This is the reality for so many veterans. Ask any veteran, and they will tell you they know someone who has died by suicide. Since 2001, 7000 service members have lost their lives to the Global War on Terror. Those who have lost their lives to suicide: 140,000.

My story isn't unique - thousands of veterans have sought out treatments unavailable in the country we served to access healing. This is truly unacceptable. Supporting our veterans means advocating for their care, access to care and removing the barriers to that care.

Over the past two decades, researchers around the world have renewed scientific understanding of the benefits of breakthrough therapies, so it is with growing certainty that scientists and medical professionals are now working with policymakers to create access to safe and non-addictive therapies like psilocybin and MDMA for therapeutic uses. Research from major institutions around the world shows psilocybin to be a promising clinical treatment tool for a wide range of mental and psychiatric diagnoses including anxiety, addiction, depression, end-of-life anxiety, and more. Similarly, MDMA is showing groundbreaking efficacy in treating post-traumatic stress disorder (PTSD). As a result, psilocybin and MDMA are increasingly considered some of the most effective, non-addictive, and safe treatment options for treatment-resistant depression and PTSD respectively, when administered in clinical settings. These results have led the FDA to grant both psilocybin and MDMA their Breakthrough Therapy Designation.

States now have an essential role to play in the movement toward safe, legal, therapeutic access to psilocybin, MDMA and other breakthrough therapies. Initiatives like the passage of Measure 109 in Oregon (2020) and Natural Medicine Health Act in Colorado (2022) are paving the way for people who suffer from treatment-resistant mental health ailments to get the help they need.

With mental health becoming a more present issue in our communities, everyone knows someone who stands to benefit from access to psilocybin, MDMA and other breakthrough therapies. We do not want the citizens of Hawai'i to miss out on these healing modalities.

Please pass SB3199 - in honor of those didn't make it home and for those still fighting to stay.

Mahalo,

Robert Farmer
Military Veteran | Hawai'i Island Resident

Breaking the Silence: A Veteran's Journey Through Mental Health, Failed Treatments, and the Hope in Psychedelic-Assisted Therapy

Testimony in Support of SB 3199
House Committee on Health | 2026 Legislative Session

Aloha Chair Takayama, Vice Chair Keohokapu-Lee Loy, and Members of the HLT Committee,

My name is Joe, I live in California, and I am writing in strong support of **SB3199**, which establishes a mental health emerging therapies special fund to support clinical trials, training of mental health professionals, and more to bolster research and education around breakthrough therapies.

By Joe Hudak, MSG(R)
San Diego, CA, USA

As a local retired service member, I spent over a decade fighting a war that most people don't see—a war within my mind. Returning home from multiple deployments to Afghanistan and Iraq, I continued to find myself fighting battles. This inner war was a grueling fight against depression, anxiety, and suicidality. In a culture where masculinity often means suppressing emotions, many of us struggle silently, unable to express our vulnerability. The brotherhood we relied on in combat is replaced by a loneliness that magnifies our inner turmoil.

Once I finally asked for help, I was met with the standard course of treatment. I spent hours in therapy sessions, swallowed countless pills, and cycled through different medications in search of relief. Yet, the crushing weight of PTSD and the hopelessness of suicidal thoughts remained. I became a statistic—one of the myriad veterans struggling with mental health, feeling betrayed by a healthcare system that seemed ill-equipped to understand or help. It was hard to admit that I was suffering—and it was killing me.

Here in San Diego, we're a gigantic military town, and the military and civilian communities know this story all too well. Many of us feel left behind by traditional treatments that often fail to address the complex trauma that comes from military service. The mental health crisis among veterans in our community is not an abstract problem—it's a reality that affects our families, neighbors, and friends. Yet we often battle these demons alone, afraid to appear weak or vulnerable. The waiting lists are long, the therapy options are limited, and many of us turn to substance abuse as a way to cope.

After years of being stuck in ruminations with no forward progress, let alone the goal of happiness, I stumbled upon something that changed my life: psychedelic-assisted therapy. I know it's controversial, but when traditional treatments failed me, psychedelics like ibogaine or psilocybin offered a new path. Through guided therapy sessions, I confronted the root of my

trauma in ways I never could before. I was finally able to be vulnerable in a setting that felt safe, allowing me to embrace parts of myself I had buried for years. For the first time, I felt like I was truly healing—not just masking my symptoms but addressing the core of my pain.

Psychedelic-assisted therapy is not a quick fix, and it's not a cure-all. But for me, it was a breakthrough. With the support of conventional therapists, I was able to reframe my traumatic experiences, finding a sense of peace that had long eluded me. The therapy taught me that vulnerability is strength—a crucial part of healing that allowed me to reconnect with the camaraderie I had missed since leaving the military. This therapy gave me the tools to see my life differently, to embrace the present, and to finally silence the dark thoughts that had plagued me for years.

Our San Diego community—and our country at large—needs to change how we treat our veteran neighbors. The VA and mental health providers must expand access to innovative treatments like psychedelic-assisted therapy, which has shown incredible promise in studies and personal stories alike. It's time to challenge outdated notions of masculinity that prevent many of us from seeking help and embrace treatments that allow us to be vulnerable, open, and honest about our struggles.

To my fellow veterans: you are not alone, and your battle is not in vain. I urge our community, our healthcare providers, and our lawmakers to support research and access to psychedelic-assisted therapies. Let's redefine what it means to be strong—to be a warrior. It's time to break free from the stigma, embrace innovation, and give veterans the tools they need to heal. For many of us, this is not just about treatment. It's about survival.

Having walked the line between hope and despair, I am proof that there is another way. Psychedelic-assisted therapy offered me a second chance at life, and I believe it can do the same for many others. It's time to stop fighting this battle alone and start exploring new paths to healing. The brotherhood we built on the battlefield can continue off it if we allow ourselves to be vulnerable, to reach out, and to support one another in our healing journeys. The future of veteran mental health depends on it.

Bio:

Joe Hudak is a retired Army Master Sergeant who served 20 years in the Army Special Forces as a Green Beret. As a resident of San Diego for over 13 years, he is now an advocate and counselor for innovative mental health treatments for veterans, including psychedelic-assisted therapy. He received a Foundational Healing Grant from the non-profit [Veterans Exploring Treatment Solutions \(VETS\)](#).

Aloha Chair San Buenaventura, Vice Chair Aquino, and Members of the Senate Health & Human Services Committee,

My name is Jessica Silva, I am writing **in strong support of SB3199**, the Mental Health Emerging Therapies Task Force to prepare the State for the integration of breakthrough therapies, expansion of pathways for clinical trials and clinical research, and development of policy recommendations for safe, ethical, and culturally informed implementation of emerging therapies.

I am writing to convey my experiences with both traditional clinical therapies and non-traditional mental health treatments throughout my husband's military career, and how they have affected our family.

My husband served as a Navy SEAL for 27 years. He completed 17 deployments, 14 of which were post-9/11 combat deployments assigned to SEAL Team 6. He sustained multiple traumatic brain injuries, physical injuries, but more subtle...the inevitable moral injuries that accompany being an eye-witness to the atrocities of war. The military was, as usual, more reactive than proactive in the provision of mental health services to their members (non-existent to the families until much later), and very little attention was paid to what sustained exposure to brutal conflict and an increased op-tempo will do to the human psyche. In addition to his personal fight, our entire family was subject to the pain of him being gone for half our kids' lives, as well as the added stress of so many casualties. Our kids were frequently seeing their mom dressed in black every time he deployed, having friends whose dads were never coming home, the news of men they knew dying. During one particular 10-year period, we experienced at least one casualty every time deployed. In 2011, we had front row seats for Extortion 17, losing dozens in one fell swoop. One morning at 3am, I received a call from a friend in Germany. "What troop is Jason?", she asked. I didn't know. She said an entire Chinook had gone down. Well, death notifications weren't made until after 6am. So I spent the next several hours sitting on the stairs by the door in the dark, waiting for the knock. I didn't learn until hours later that he was alive. When I heard his voice, I broke. Over time, it took its toll on all of us.

It was a gradual decline, a loss of resilience. It took longer and longer for him to mentally return home, until he just didn't return anymore. I saw him lose himself slowly, and I was unaware at the time that I was losing myself too. I was helpless in the face of so much loss, an endless stream of it. His self-medication with alcohol was his way to numb, and he paired it with isolation, becoming a shadow even when he was physically present. The member of our family that had been the playful dork, the silly dad, was a reactive, unsmiling specter around whom we all walked on eggshells. I forced couples therapy. For two self admitted over-achievers, we failed spectacularly. He experienced bouts of depression, anxiety, sleeplessness, nightmares, all the hallmarks of PTSD, made worse by another traumatic brain injury in 2008 when a suicide bomber set off his vest which brought down the building and sent fragments into his face, killing 2 other teammates (and the dog). One night when my son was around 8 years old, I had a hard time getting him to bed. He was being a typical silly kid, but I was tired and came downstairs and complained to my husband. He charged upstairs and pulled my son out of bed by his ankle, where he dangled in the air upside down. My son was so scared he peed his pants.

I was a single parent, even when he was home. He was so stuck in fight or flight mode that even a simple interaction would have him physically trying to escape the situation. He would literally exit the room mid-conflict.

My husband was shocked by his own behavior, but was reluctant to utilize the psychologists at the command due to the stigma that was associated with mental health, thinking he was weak, that he would lose his active status, his security clearance, and his credibility. A SEAL's worst punishment is being taken off the job. The strain showed up in our kids' behavior as well. My son was born in 2000 so all he knew was wartime. When he entered high school he started cutting himself, his grades declined, and he was getting into trouble. I was barely sleeping, waiting for the phone to ring, for CACO uniforms to show up at my door. When he was home, I worried that I would wake up to a suicide note. This was now YEARS that we were living in survival mode and we were exhausted.

When he retired in 2019, we thought we had won...we "made it", right? However, the fight for equilibrium lasted far beyond his career. There were many times when divorce was appearing to be the only way for me to survive the storm. Worse was his apathy, he would tell me to just leave. The only reason we are still married today is that neither of us quit on the same day. The time for ghosts to appear had come. The transition to civilian life is not an easy one for any service member, but it's the closest to hell I've ever been. The effects of trauma have a way of showing up at the worst times, in the worst way. I had ceased to be a wife a long time ago. Now I was a roommate, caretaker, administrator, nurse, whipping post. His rock bottom presented itself in the form of getting arrested for falling asleep drunk in his truck on the side of a mountain highway and having to meet his son's eyes when he picked him up from the Sheriff's office.

The decision for therapy was more of an ultimatum, and so began a different kind of fight. In search of a therapist, my husband encountered new obstacles. We were stuck in the VA healthcare system, a vast and complicated warren of unknowledgeable, uncaring administrators. Providers who were not fluent in the language of the injured warrior changed frequently, and were mostly interested in prescribing medication...lots of it. Appointments were few and far between. They expect people that are secretive by nature of their job, warriors who have never been vulnerable a day in their life, to suddenly want to unpack their years of trauma to a veritable stranger. Well, that's not happening. It's a frustrating and disheartening realization that even the VA doesn't know how the VA works, yet they expect broken, hurting people fresh from decades of war to figure it out. It's no surprise when you hear veterans are blowing their brains out in the VA parking lot. We both realized quickly that medication and sporadic talk therapy were not going to be effective, and continued to feel hopeless.

The entire family was suffering and we knew we were at a breaking point. I can not stress enough the absolute brick wall that is the time of transition to civilian life. Even if you have your whole plan on paper and organized on spreadsheets, you will still feel like you have fallen down a well. So much happened at once; we were no longer allowed to live in base housing, we were having a house built, my father in law died, we both were changing jobs, our kids had left the house, and let's not forget the isolation of COVID lockdown... for someone who is struggling with just regular day to day life, with very little resilience left, this feels insurmountable. After struggling to find appropriate mental health care, my husband started hearing about Ibogaine treatment from other veterans, and we decided to figure out a way to send him to a retreat. It's not cheap, there are questions about its legality, and finding a reputable retreat center was incredibly important for safety reasons. He was able to get a grant from a fellow SEAL's non-profit to a vetted retreat center and we held our breath.

It's not magic, but it felt like it to all of us. He was given some much needed relief, a chance to hit "pause" and catch his breath for long enough to incorporate new skills he was learning through the concurrent integration process. His craving for alcohol was GONE! It's been over 4 years and it is still non-existent. Then I went, too, working with psilocybin. I released years

worth of tears, from childhood trauma to hurt from my battered marriage, and the grip of helplessness eased. We were able to reconnect to our core selves, and then each other and begin our parallel paths to becoming fuller versions of ourselves, shedding the layers of guilt, shame, blame, regret, and pain that had been holding us prisoner for so long. To wake up without the weight of imminent fallout is a gift I never thought I would experience again.

Psychedelic therapy prompted massive post-traumatic growth for our whole family., and the work continues. We are the statistic we always wanted to be...still married after a SOF career. I believe it's only about 6% that can claim that. We are much more present for each other and our kids, and they have noticed the vast difference in us both. They can relax knowing they don't have to worry about us. We are no longer stuck in survival mode. We are not only living, we are thriving. Now my husband is finding purpose in peer mentoring other veterans that seek psychedelic treatment, using the attributes that made him a great warrior on a new mission to forge a path for others in his community. I have furthered my education and am now a certified coach for first responders undergoing psychedelic therapies. It works. If you are willing to face your demons and do the work of forming new habits and practices, and are searching for a more holistic approach to real healing, psychedelics can be an incredible tool. It's attainable, and most importantly, sustainable. No more years of meds or down spiraling. No more melting down. No more thoughts of suicide. Now we focus on living...and thriving.

Over the past two decades, researchers around the world have renewed scientific understanding of the benefits of breakthrough therapies, so it is with growing certainty that scientists and medical professionals are now working with policymakers to create access to safe and non-addictive therapies like psilocybin and MDMA for therapeutic uses. Research from major institutions around the world shows psilocybin to be a promising clinical treatment tool for a wide range of mental and psychiatric diagnoses including anxiety, addiction, depression, end-of-life anxiety, and more. Similarly, MDMA is showing groundbreaking efficacy in treating post-traumatic stress disorder (PTSD). As a result, psilocybin and MDMA are increasingly considered some of the most effective, non-addictive, and safe treatment options for treatment-resistant depression and PTSD respectively, when administered in clinical settings. These impressive results have led the U.S. Food & Drug Administration (FDA) to grant psilocybin and MDMA their Breakthrough Therapy Designation.

States now have an essential role to play in the movement toward safe, legal, therapeutic access to psilocybin, MDMA and other breakthrough therapies. Initiatives like the passage of Measure 109 in Oregon (2020) and Natural Medicine Health Act in Colorado (2022) are paving the way for people who suffer from treatment-resistant mental health ailments to get the help they need. **If passed, Hawai'i would also join Arizona, Connecticut, Maryland, Texas, and Washington, whose legislatures all passed bills funding research and trials for breakthrough therapies between 2021 and 2023.**

With mental health becoming a more present issue in our communities, everyone knows someone who stands to benefit from access to psilocybin, MDMA and other breakthrough therapies. Please support this measure, which supports research and prepares medical professionals for breakthrough therapies. We do not want the citizens of Hawai'i to miss out on these healing modalities.

Mahalo

Jessica Silva

Testimony in Support of SB3199
Senate Committee on Health and Human Services

Hearing: Feb 18, 2026 at 1pm

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

My name is Julie Iezzi and I live in the Aina Haina in Honolulu. I am writing **in strong support of SB3199**, which establishes the Mental Health Emerging Therapies Task Force to prepare the State for the integration of breakthrough therapies, expansion of pathways for clinical trials and clinical research, and development of policy recommendations for safe, ethical, and culturally informed implementation of emerging therapies.

This is an issue close to my heart, as we have struggled for over a decade with one of our children, who has seen dozens of therapists and psychiatrists, tried various prescription drugs and undergone every treatment imaginable to deal with depression, and to no avail. Prior to the 1968 federal ban and subsequent international ban on Psychotropic substances, some amazing and effective research was underway, but unfortunately all came to an abrupt end.

Over the past two decades, researchers around the world have renewed scientific understanding of the benefits of breakthrough therapies, and it is with growing certainty that scientists and medical professionals are now working with policymakers to **create access to safe and non-addictive therapies like psilocybin and MDMA for therapeutic uses. Research from major institutions around the world shows psilocybin to be a promising clinical treatment tool for a wide range of mental and psychiatric diagnoses including anxiety, addiction, depression, end-of-life anxiety, and more. Similarly, MDMA is showing groundbreaking efficacy in treating post-traumatic stress disorder (PTSD). As a result, psilocybin and MDMA are increasingly considered some of the most effective, non-addictive, and safe treatment options for treatment-resistant depression and PTSD respectively, when administered in clinical settings.** These impressive results have led the U.S. Food & Drug Administration (FDA) to grant psilocybin and MDMA their Breakthrough Therapy Designation.

States now have an essential role to play in the movement toward safe, legal, therapeutic access to psilocybin, MDMA and other breakthrough therapies. Initiatives like the passage of Measure 109 in Oregon (2020) and Natural Medicine Health Act in Colorado (2022) are paving

the way for people who suffer from treatment-resistant mental health ailments to get the help they need.

With mental health becoming a more present issue in our communities, everyone knows someone who stands to benefit from access to psilocybin, MDMA and other breakthrough therapies. Please support this measure, which supports research and prepares medical professionals for breakthrough therapies. We do not want the citizens of Hawai'i to miss out on these healing modalities.

Mahalo

SB-3199

Submitted on: 2/15/2026 2:55:04 PM

Testimony for HHS on 2/18/2026 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Cy Hudson	Individual	Support	Written Testimony Only

Comments:

Sir/Ma'am,

My name is Cy Hudson. I served as an Army infantry officer. I commissioned from West Point in 2009, deployed to Afghanistan (OEF '11-'12), and exited service in 2014. For years after my service I lived with severe, undiagnosed, untreated PTSD.

I experienced daily suicidal thoughts but refused an official diagnosis because I knew that, for me, a diagnosis alone would not bring healing.

In 2022, as I was finishing my MBA, I ran out of reasons to live.as a last resort, based on a John's Hopkins clinical study I read, I traveled to Jamaica, where I participated in a psilocybin retreat. I took 6 grams of psilocybin under supervision. For the first time in years, I experienced immediate and profound relief from suicidal ideation; relief that lasted for months.

A year later, I participated in a program in Mexico with Mission Within, where I received ibogaine and 5-MeO-DMT treatments. This treatment not only brought emotional healing but also alleviated serious physical symptoms.

Before the treatment, whenever my heart rate rose above 160 beats per minute, my immune system would crash, and I would feel a painful shooting sensation from the base of my neck with tingling throughout my body. Since that experience, those symptoms have stopped.

In addition, the treatments allowed long-buried memories to surface, which I have been able to process in therapy for the first time. These plant medicines have done what years of conventional approaches could not: they gave me back my life.

I'm sharing my story so that other veterans don't have to walk the same path alone or pay for these treatments out-of-pocket as I did. With proper support and integration, these therapies can save lives.

Respectfully submitted,

Cy Hudson

Austin, Texas

5 October 2025

SB-3199

Submitted on: 2/15/2026 3:51:18 PM

Testimony for HHS on 2/18/2026 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Tiare Gray	Individual	Support	Written Testimony Only

Comments:

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

My name is Tiare Gray, I live in Honolulu and I am writing in strong support of SB3199, which establishes the Mental Health Emerging Therapies Task Force to prepare the State for the integration of breakthrough therapies, expansion of pathways for clinical trials and clinical research, and development of policy recommendations for safe, ethical, and culturally informed implementation of emerging therapies.

SB-3199

Submitted on: 2/15/2026 3:52:23 PM

Testimony for HHS on 2/18/2026 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Harvey Arkin	Individual	Support	Written Testimony Only

Comments:

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

My name is Harvey ArkinI live in Manoa and I am writing **in strong support of SB3199**, which establishes the Mental Health Emerging Therapies Task Force to prepare the State for the integration of breakthrough therapies, expansion of pathways for clinical trials and clinical research, and development of policy recommendations for safe, ethical, and culturally informed implementation of emerging therapies.

Over the past two decades, researchers around the world have renewed scientific understanding of the benefits of breakthrough therapies, so it is with growing certainty that scientists and medical professionals are now working with policymakers to create access to safe and non-addictive therapies like psilocybin and MDMA for therapeutic uses. Research from major institutions around the world shows psilocybin to be a promising clinical treatment tool for a wide range of mental and psychiatric diagnoses including anxiety, addiction, depression, end-of-life anxiety, and more. Similarly, MDMA is showing groundbreaking efficacy in treating post-traumatic stress disorder (PTSD). As a result, psilocybin and MDMA are increasingly considered some of the most effective, non-addictive, and safe treatment options for treatment-resistant depression and PTSD respectively, when administered in clinical settings. These impressive results have led the U.S. Food & Drug Administration (FDA) to grant psilocybin and MDMA their Breakthrough Therapy Designation.

States now have an essential role to play in the movement toward safe, legal, therapeutic access to psilocybin, MDMA and other breakthrough therapies. Initiatives like the passage of Measure 109 in Oregon (2020) and Natural Medicine Health Act in Colorado (2022) are paving the way for people who suffer from treatment-resistant mental health ailments to get the help they need.

With mental health becoming a more present issue in our communities, everyone knows someone who stands to benefit from access to psilocybin, MDMA and other breakthrough therapies. We do not want the citizens of Hawai'i to miss out on these healing modalities.

Mahalo for the opportunity to testify in support of SB3199.

SB-3199

Submitted on: 2/15/2026 4:39:12 PM

Testimony for HHS on 2/18/2026 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Michal C Cohen	Individual	Support	Written Testimony Only

Comments:

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

My name is Michal Cohen, LCSW and I live in Kaka’ako on Oahu. I am writing **in strong support of SB3199**, which establishes the Mental Health Emerging Therapies Task Force to prepare the State for the integration of breakthrough therapies, expansion of pathways for clinical trials and clinical research, and development of policy recommendations for safe, ethical, and culturally informed implementation of emerging therapies.

I am a licensed clinical social worker who works in private practice. Prior to establishing my own practice, I worked with both combat veterans and victims of military sexual trauma at the Department of Veterans Affairs, I have extensive knowledge and experience about the challenges people face when they have PTSD. Most of the current treatments for PTSD do not work.

I have lived through the horrific experience of losing a client to suicide. This client was waiting for psilocybin treatment to become legal. His trauma was quite extensive and none of the treatment options we tried worked. He took his own life because the treatment he read about with so much promise, was not legally available to him. People are literally losing their lives because of limited treatment options. Not everyone can afford to travel to Mexico for these treatments. We owe it to those suffering from PTSD and depression to offer a treatment that actually works and has been used for centuries for deep healing transformations.

Over the past two decades, researchers around the world have renewed scientific understanding of the benefits of breakthrough therapies, so it is with growing certainty that scientists and medical professionals are now working with policymakers to create access to safe and non-addictive therapies like psilocybin and MDMA for therapeutic uses. Research from major institutions around the world shows psilocybin to be a promising clinical treatment tool for a wide range of mental and psychiatric diagnoses including anxiety, addiction, depression, end-of-life anxiety, and more. Similarly, MDMA is showing groundbreaking efficacy in treating post-traumatic stress disorder (PTSD). As a result, psilocybin and MDMA are increasingly considered some of the most effective, non-addictive, and safe treatment options for treatment-resistant depression and PTSD respectively, when administered in clinical settings. These impressive

results have led the U.S. Food & Drug Administration (FDA) to grant psilocybin and MDMA their Breakthrough Therapy Designation.

States now have an essential role to play in the movement toward safe, legal, therapeutic access to psilocybin, MDMA and other breakthrough therapies. Initiatives like the passage of Measure 109 in Oregon (2020) and Natural Medicine Health Act in Colorado (2022) are paving the way for people who suffer from treatment-resistant mental health ailments to get the help they need.

With mental health becoming a more present issue in our communities, everyone knows someone who stands to benefit from access to psilocybin, MDMA and other breakthrough therapies. We do not want the citizens of Hawai'i to miss out on these healing modalities.

SB-3199

Submitted on: 2/15/2026 4:51:42 PM

Testimony for HHS on 2/18/2026 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Susan Alden	Individual	Support	Written Testimony Only

Comments:

Testimony in Support of SB3199

Hearing on February 18, 2026 at 1pm

Senate Committee on Health and Human Services

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

My name is Susan Alden. I've lived in Kailua, HI (Oahu) for the past 18 years, and I am writing in strong support of SB3199, which establishes the Mental Health Emerging Therapies Task Force to prepare the State for the integration of breakthrough therapies, expansion of pathways for clinical trials and clinical research, and development of policy recommendations for safe, ethical, and culturally informed implementation of emerging therapies.

My husband and I are both military veterans and we've seen the extraordinary benefits of these therapies among our fellow veterans, including those who are suffering from addiction and those who are treading dangerously down the path to suicide. I have been working in the mental health field as a body worker and Certified Yoga Therapist (I-AYT), specifically in veteran and active duty military health care facilities, over the past 20+ years. I've seen the remarkable potential of emerging therapies from multiple perspectives.

Over the past two decades, researchers around the world have renewed scientific understanding of the benefits of breakthrough therapies, so it is with growing certainty that scientists and medical professionals are now working with policymakers to create access to safe and non-addictive therapies like psilocybin and MDMA for therapeutic uses. Research from major institutions around the world shows psilocybin to be a promising clinical treatment tool for a wide range of mental and psychiatric diagnoses including anxiety, addiction, depression, end-of-life anxiety, and more. Similarly, MDMA is showing groundbreaking efficacy in treating post-traumatic stress disorder (PTSD). As a result, psilocybin and MDMA are increasingly considered some of the most effective, non-addictive, and safe treatment options for treatment-resistant depression and PTSD respectively, when administered in clinical settings. These results have led the FDA to grant both psilocybin and MDMA their Breakthrough Therapy Designation.

States now have an essential role to play in the movement toward safe, legal, therapeutic access to psilocybin, MDMA and other breakthrough therapies. Initiatives like the passage of Measure

109 in Oregon (2020) and Natural Medicine Health Act in Colorado (2022) are paving the way for people who suffer from treatment-resistant mental health ailments to get the help they need.

With mental health becoming a more present issue in our communities, everyone knows someone who stands to benefit from access to psilocybin, MDMA and other breakthrough therapies. We do not want the citizens of Hawai'i to miss out on these healing modalities.

Mahalo for the opportunity to testify in support of SB3199.

Respectfully,

Susan Alden

SB-3199

Submitted on: 2/15/2026 5:02:00 PM

Testimony for HHS on 2/18/2026 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
BRIAN ROSE	Individual	Support	Written Testimony Only

Comments:

Testimony in Support of SB3199

Senate Health and Human Services Committee | 02/18/2025 at 1PM

Aloha Senators Joy San Buenaventura, Jarrett Keohokalole, Dru Mamo Kanuha, Rachele Lamosao and Kurt Fevella

My name is Brian Rose, I live in upcountry Makawao, HI on the island of Maui. I am writing in strong support of SB3199, which establishes the Mental Health Emerging Therapies Task Force to prepare the State for the integration of breakthrough therapies, expansion of pathways for clinical trials and clinical research, and development of policy recommendations for safe, ethical, and culturally informed implementation of emerging therapies.

I have been a proud resident of Maui for 19yrs. I received my nursing degree from University of Hawai'i Maui in 2011 and have been a licensed RN and serving Hawai'i's community since 2012. From 2012-2017, I was RN at Maui Memorial Medical Hospital working with Telemetry and Pediatric patients. For the last 6 years I have been RN CHPN working as a Hospice RN, serving Maui, Lanai and Molokai. It has been my greatest honor to serve our community during this most beautiful and difficult phase of life, illness, death and dying. After witnessing and walking with 100's of patients and family members at the end of life, I have seen first hand the frequent challenges and sometimes trauma that patients face at the end of life. It is often referred to in the clinical community as death anxiety. Death anxiety can be debilitating and deeply impact a patient's ability to experience a dignified, connected and meaningful end of life process. The frequency of and the level of suffering I have seen around death anxiety is heartbreaking. At this most crucial and impactful time of pt's and families, it is our obligation to provide the best care possible and available. There are a number of preliminary and excellent early scientific studies that have shown with therapeutic sessions of psychedelics, like psilocybin, that those at the end of life and those with terminal diagnosis like cancer can have a significant reduction in associated anxiety and depression. I would love to see further studies exploring the therapeutic benefits of psychedelics and with this bill we can build momentum toward exploration, implementation and eventual legalization that would allow us as clinicians to have additional tools to help our patients have the most easeful, comfortable, potentially joyful and connected end of life experience. A positive death experience is an immeasurable benefit that will ripple from the patient, family into the larger community. It can strengthen bonds of communal

connection that are the net that links and supports us through the most difficult of times. Please strongly consider moving this bill forward.

Knowing the above, I would add that over the past two decades, researchers around the world have renewed scientific understanding of the benefits of breakthrough therapies, so it is with growing certainty that scientists and medical professionals are now working with policymakers to create access to safe and non-addictive therapies like psilocybin and MDMA for therapeutic uses. Research from major institutions around the world shows psilocybin to be a promising clinical treatment tool for a wide range of mental and psychiatric diagnoses including anxiety, addiction, depression, end-of-life anxiety, and more. Similarly, MDMA is showing groundbreaking efficacy in treating post-traumatic stress disorder (PTSD). As a result, psilocybin and MDMA are increasingly considered some of the most effective, non-addictive, and safe treatment options for treatment-resistant depression and PTSD respectively, when administered in clinical settings. These impressive results have led the U.S. Food & Drug Administration (FDA) to grant psilocybin and MDMA their Breakthrough Therapy Designation. States now have an essential role to play in the movement toward safe, legal, therapeutic access to psilocybin, MDMA and other breakthrough therapies. Initiatives like the passage of Measure 109 in Oregon (2020) and Natural Medicine Health Act in Colorado (2022) are paving the way for people who suffer from treatment-resistant mental health ailments to get the help they need. If passed, Hawai'i would also join Arizona, Connecticut, Maryland, Texas, and Washington, whose legislatures all passed bills funding research and trials for breakthrough therapies between 2021 and 2023. With mental health becoming a more present issue in our communities, everyone knows someone who stands to benefit from access to psilocybin, MDMA and other breakthrough therapies. Please support this measure, which supports research and prepares medical professionals for breakthrough therapies. We do not want the citizens of Hawai'i to miss out on these healing modalities.

Mahalo

Brian Rose RN CHPN

SB-3199

Submitted on: 2/15/2026 5:23:40 PM

Testimony for HHS on 2/18/2026 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Deborah Umiamaka	Individual	Support	Written Testimony Only

Comments:

To:the Honorable Members of the Hawai‘i State Legislature:

I am a Hawai‘i Island resident writing in ****strong**** support of SB3199, relating to the Department of Health and the Mental Health Emerging Therapies Task Force. This measure is in the best interests of Hawai‘i residents because it takes a proactive, coordinated, and safety-focused approach to new mental health treatments.

SB3199 establishes a formal task force to evaluate emerging mental health therapies and provide expert, evidence-based recommendations to the State. By studying these therapies in advance, the task force helps Hawai‘i prepare responsibly instead of reacting piecemeal after such treatments are already widespread. This structure supports sound policy grounded in science, not speculation.

The bill also promotes patient safety by ensuring that any new therapies are considered within clear standards of care, ethical safeguards, and appropriate oversight. As interest in breakthrough and nontraditional treatments grows, it is critical to protect residents from unsafe, unregulated, or exploitative practices. SB3199 directs the State to anticipate these risks and address them systematically.

In addition, SB3199 encourages coordination among agencies, clinicians, and stakeholders, reducing fragmented decision-making. A coordinated approach makes it easier to align coverage, workforce training, and access so that high-quality care can reach residents across our islands, including rural and underserved communities. Thoughtful planning now can reduce inequities later.

For these reasons, I respectfully urge you to PASS SB3199. This bill supports a responsible, forward-looking mental health system that protects public safety while expanding access to effective, emerging therapies for our communities.

Sincerely,

Deborah Umiamaka
Hawai‘i Island Resident

SB-3199

Submitted on: 2/15/2026 6:50:29 PM

Testimony for HHS on 2/18/2026 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Ruta Jordans	Individual	Support	Written Testimony Only

Comments:

My son is a veteran of Iraq. My daughter saw and learned about the Post Traumatic Stress Disorder that my son and his fellow soldiers experienced. Then she saw that the opioids given to soldiers by the VA only made them addicted and did nothing to help their mental health. But she also saw how Psilocybin and other psychedelics in a therapeutic setting can help with PTSD. Due to those experiences she now is a psychologist focusing on psychedelics at a VA hospital. Please support this bill in order to find ways that veterans in Hawaii can get real help for their mental health.

SB-3199

Submitted on: 2/15/2026 7:54:57 PM

Testimony for HHS on 2/18/2026 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
christina braddock	Individual	Support	Written Testimony Only

Comments:

**Testimony in Support of SB3199
Hearing on February 18, 2026 at 1pm
Senate Committee on Health and Human Services**

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

My name is Christina Braddock. I live in Hale‘iwa, on the North Shore of O‘ahu, and I am writing in *strong support of SB3199*, which establishes the Mental Health Emerging Therapies Task Force to prepare the State for the integration of breakthrough therapies, expansion of pathways for clinical trials and clinical research, and development of policy recommendations for safe, ethical, and culturally informed implementation of emerging therapies.

I offer my support not only as a medical provider, but also as a combat veteran and caregiver. After serving in the U.S. Army, I have seen firsthand the lasting impact that trauma, PTSD, depression, and treatment-resistant mental health conditions can have on individuals, families, and entire communities. I also care for my spouse, who lives with a traumatic brain injury (TBI), and I understand intimately how limited our current tools can be when it comes to long-term healing, neurological recovery, and mental wellness.

Over the past two decades, researchers around the world have renewed scientific understanding of the benefits of breakthrough therapies. Scientists and medical professionals are now working with policymakers to create access to safe and non-addictive therapies like psilocybin and MDMA for therapeutic uses. Research from major institutions shows psilocybin to be a promising clinical treatment tool for a wide range of mental and psychiatric diagnoses including anxiety, addiction, depression, end-of-life anxiety, and more. Similarly, MDMA is showing groundbreaking efficacy in treating post-traumatic stress disorder (PTSD). These results have led the FDA to grant both psilocybin and MDMA Breakthrough Therapy Designation.

States now have an essential role to play in the movement toward safe, legal, therapeutic access to psilocybin, MDMA, and other emerging therapies. Initiatives such as Oregon’s Measure 109 (2020) and Colorado’s Natural Medicine Health Act (2022) are paving the way for people suffering from treatment-resistant mental health conditions to receive the help they need.

With mental health becoming an increasingly urgent issue in our communities, everyone knows someone who stands to benefit from access to these therapies. Hawai‘i must not be left behind in

preparing safe, culturally informed, ethical pathways for healing. SB3199 is an important step toward ensuring our residents — including veterans, trauma survivors, caregivers, and those living with chronic mental health challenges — have access to the most promising therapeutic options available.

Mahalo for the opportunity to testify in strong support of SB3199.

Christina Braddock, APRN-Rx, MSN, CEN, CPTR, FNP-BC, PMHNP-S
Combat Veteran (U.S. Army)
Family Medicine Provider

SB-3199

Submitted on: 2/15/2026 8:13:54 PM

Testimony for HHS on 2/18/2026 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
James Braddock	Individual	Support	Written Testimony Only

Comments:

My Name is Jimmy Braddock, and I am writing in strong support of SB3199, which establishes the Mental Health Emerging Therapies Task Force to prepare the State of Hawai'i for the integration of breakthrough therapies, expansion of clinical trials and research pathways, and development of safe, ethical, and culturally informed policy recommendations for emerging mental health treatments.

I am speaking today as someone living with a traumatic brain injury. My injury happened innocently here in the State of Hawai'i — an accident that changed my life in an instant. Since that day, I have faced not only the medical and neurological challenges of brain injury recovery, but also the devastating reality that Hawai'i has very limited resources for long-term brain injury care, rehabilitation, and mental health support.

Brain injuries affect every part of life — cognition, mood, memory, emotional regulation, sleep, identity, and the ability to function day to day. Many survivors experience severe depression, anxiety, PTSD, and chronic neurological symptoms that do not respond well to traditional medications alone. Families and caregivers are often left without answers, without adequate services, and without hope.

Hawai'i is a place where catastrophic accidents and drownings happen far too often. Our oceans, roads, and remote geography mean that traumatic injuries are a reality for many residents and visitors. Yet the support systems for survivors are slim. Many people are forced to leave the islands entirely to seek specialized care — something most families cannot afford to do.

That is why SB3199 matters so deeply.

Over the past two decades, researchers around the world have renewed scientific understanding of the benefits of breakthrough therapies such as psilocybin and MDMA when administered in safe, clinical settings. These therapies are showing promise for treatment-resistant depression, PTSD, anxiety, addiction, and complex trauma — conditions that commonly overlap with traumatic brain injury recovery. The FDA has granted Breakthrough Therapy Designation to both psilocybin and MDMA because of their potential to transform mental health treatment.

States now have an essential role to play in creating safe, regulated pathways for therapeutic access and research. Oregon and Colorado have already taken steps forward. Hawai‘i must also be part of this movement so that residents suffering here are not left behind.

For people like me — and for countless others living with brain injuries, trauma, and invisible neurological suffering — emerging therapies represent hope. SB3199 is a necessary step toward building responsible access, research, and healing options in Hawai‘i, where the need is urgent and resources remain far too limited.

Mahalo for the opportunity to testify in strong support of SB3199.

Name : JAMES BRADDOCK

Resident & landowner in Hawai‘i /Severe Traumatic Brain Injury Survivor

SB-3199

Submitted on: 2/15/2026 8:21:48 PM

Testimony for HHS on 2/18/2026 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Jean'ne Nicole Marie Robertson-Leong	Individual	Support	Written Testimony Only

Comments:

Testimony in Support of SB3199

Hearing / Committee info | Hearing date and time

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

My name is Jean'ne Nicole Robertson-Leong, I live in [Aiea, Oahu / Hawai'i] and I am writing in strong support of SB3199, which establishes the Mental Health Emerging Therapies Task Force to prepare the State for the integration of breakthrough therapies, expansion of pathways for clinical trials and clinical research, and development of policy recommendations for safe, ethical, and culturally informed implementation of emerging therapies.

Over the past two decades, researchers around the world have renewed scientific understanding of the benefits of breakthrough therapies, so it is with growing certainty that scientists and medical professionals are now working with policymakers to create access to safe and non-addictive therapies like psilocybin and MDMA for therapeutic uses. Research from major institutions around the world shows psilocybin to be a promising clinical treatment tool for a wide range of mental and psychiatric diagnoses including anxiety, addiction, depression, end-of-life anxiety, and more. Similarly, MDMA is showing groundbreaking efficacy in treating post-traumatic stress disorder (PTSD). As a result, psilocybin and MDMA are increasingly considered some of the most effective, non-addictive, and safe treatment options for treatment-resistant depression and PTSD respectively, when administered in clinical settings. These impressive results have led the U.S. Food & Drug Administration (FDA) to grant psilocybin and MDMA their Breakthrough Therapy Designation.

States now have an essential role to play in the movement toward safe, legal, therapeutic access to psilocybin, MDMA and other breakthrough therapies. Initiatives like the passage of Measure 109 in Oregon (2020) and Natural Medicine Health Act in Colorado (2022) are paving the way for people who suffer from treatment-resistant mental health ailments to get the help they need.

With mental health becoming a more present issue in our communities, everyone knows someone who stands to benefit from access to psilocybin, MDMA and other breakthrough therapies. Please support this measure, which supports research and prepares medical professionals for breakthrough therapies. We do not want the citizens of Hawai'i to miss out on these healing modalities.

Mahalo

SB-3199

Submitted on: 2/16/2026 9:42:35 AM

Testimony for HHS on 2/18/2026 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Tracey Bryan	Individual	Support	Written Testimony Only

Comments:

Testimony in Support of SB3199

Hearing on February 18, 2026 at 1pm

Senate Committee on Health and Human Services

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

My name is Tracey Bryan, I live in Tyler, TX and I am writing in strong support of SB3199, which establishes the Mental Health Emerging Therapies Task Force to prepare the State for the integration of breakthrough therapies, expansion of pathways for clinical trials and clinical research, and development of policy recommendations for safe, ethical, and culturally informed implementation of emerging therapies.

My husband is a 20 year US Navy veteran who suffered from the effects of traumatic brain injuries and post traumatic stress after multiple combat deployments during his career. In 2022 he had the opportunity to travel to Mexico to receive treatment with psychedelic therapies. After 5 years of trying various pharmaceuticals, multiple inpatient programs, and weekly traditional therapy - we were desperate and this seemed like a last ditch effort to find some sort of end to the suffering. As someone who works in clinical research, I was skeptical. Surely if there was something more effective than what his doctors were offering - it would be available here in the US! His experience completely changed our lives in a way that is hard to explain on paper. He is living a life of joy, purpose, and hope now thanks to his treatment in Mexico. My perspective on our systems for pharmaceutical and substance regulation here in the US has shifted and not for the better. After seeing the healing that my husband and so many of his special operations brothers have received from these plant medicines outside of our country, I am ashamed that stigma and bureaucracy have been preventing us from exploring more widespread availability for therapies.

Over the past two decades, researchers around the world have renewed scientific understanding of the benefits of breakthrough therapies, so it is with growing certainty that scientists and medical professionals are now working with policymakers to create access to safe and non-addictive therapies like psilocybin and MDMA for therapeutic uses. Research from major institutions around the world shows psilocybin to be a promising clinical treatment tool for a wide range of mental and psychiatric diagnoses including anxiety, addiction, depression, end-of-

life anxiety, and more. Similarly, MDMA is showing groundbreaking efficacy in treating post-traumatic stress disorder (PTSD). As a result, psilocybin and MDMA are increasingly considered some of the most effective, non-addictive, and safe treatment options for treatment-resistant depression and PTSD respectively, when administered in clinical settings. These results have led the FDA to grant both psilocybin and MDMA their Breakthrough Therapy Designation.

States now have an essential role to play in the movement toward safe, legal, therapeutic access to psilocybin, MDMA and other breakthrough therapies. Initiatives like the passage of Measure 109 in Oregon (2020) and Natural Medicine Health Act in Colorado (2022) are paving the way for people who suffer from treatment-resistant mental health ailments to get the help they need.

With mental health becoming a more present issue in our communities, everyone knows someone who stands to benefit from access to psilocybin, MDMA and other breakthrough therapies. We do not want the citizens of Hawai'i to miss out on these healing modalities.

Mahalo for the opportunity to testify in support of SB3199.

Tracey Bryan

SB-3199

Submitted on: 2/16/2026 10:23:43 AM

Testimony for HHS on 2/18/2026 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Erica Harvitt	Individual	Support	Written Testimony Only

Comments:

Aloha Chair San Buenaventura, Vice Chair McKelvey, and Members of the Committee, My name is Erica Harvitt, and I am writing in strong support of SB3199, which establishes the Mental Health Emerging Therapies Task Force to prepare the State for the integration of breakthrough therapies, expansion of pathways for clinical trials and clinical research, and development of policy recommendations for safe, ethical, and culturally informed implementation of emerging therapies.

I have been working with psychedelic medicines for six years now on a personal level; and they have changed my life. I have experienced increased emotional regulation, decreased anxiety and depression, and minimization of my CPTSD symptoms.

Professionally, I am now a psychedelic researcher at Boston University completing my doctorate. Research has shown through hundreds of studies that psilocybin is more effective than psychotherapy and pharmaceuticals combined for both depression and anxiety; with promising research for PTSD. My research focuses on other benefits of the medicine, such as improvement in interpersonal connections and self-efficacy. I believe this medicine has the ability to create improvements at a community level.

Over the past two decades, researchers around the world have renewed scientific understanding of the benefits of breakthrough therapies, so it is with growing certainty that scientists and medical professionals are now working with policymakers to create access to safe and non-addictive therapies like psilocybin and MDMA for therapeutic uses. Research from major institutions around the world shows psilocybin to be a promising clinical treatment tool for a wide range of mental and psychiatric diagnoses including anxiety, addiction, depression, end-of-life anxiety, and more. Similarly, MDMA is showing groundbreaking efficacy in treating post-traumatic stress disorder (PTSD). As a result, psilocybin and MDMA are increasingly considered some of the most effective, non-addictive, and safe treatment options for treatment-resistant depression and PTSD respectively, when administered in clinical settings. These impressive results have led the U.S. Food & Drug Administration (FDA) to grant psilocybin and MDMA their Breakthrough Therapy Designation.

States now have an essential role to play in the movement toward safe, legal, therapeutic access to psilocybin, MDMA and other breakthrough therapies. Initiatives like the passage of Measure 109 in Oregon (2020) and Natural Medicine Health Act in Colorado (2022) are

paving the way for people who suffer from treatment-resistant mental health ailments to get the help they need.

With mental health becoming a more present issue in our communities, everyone knows someone who stands to benefit from access to psilocybin, MDMA and other breakthrough therapies. We do not want the citizens of Hawai'i to miss out on these healing modalities.

Mahalo for the opportunity to testify in support of SB3199.

Very sincerely,

Erica Harvitt OTD(c), OTR/L

e.harvitt@gmail.com

Testimony in Support of SB3199

House Committee on Health | 2026 Legislative Session

Aloha Chair Takayama, Vice Chair Keohokapu-Lee Loy, and Members of the HLT Committee,

My name is Julie, I live in California, and I am writing in strong support of **SB3199**, which establishes a mental health emerging therapies special fund to support clinical trials, training of mental health professionals, and more to bolster research and education around breakthrough therapies.

My testimony has to do with psychedelic therapy for psychological trauma. I have been witness to the transformative effect that ibogaine and 5-MeO-DMT had on my husband who is a Special Forces veteran with 20 years of service. He experienced many traumas in his life and in his service, the culmination of which resulted in a daily mental torture that made him long for death most days. I am a neuroscientist who recognized that his mental anguish was a manifestation of trauma that does not resemble mental processes in non-traumatized individuals. I watched and helped him go through myriad therapies to make the pain stop. None of it provided deep healing. He spent years in talk therapy, which provided crucial coping mechanisms. But coping is not living. It is surviving.

When the option for psychedelic therapy came into our reality, he jumped at the chance to try another way to find peace. What then ensued was nothing short of a miracle and something that a lifetime of therapy would never achieve. After a single dose of ibogaine, the abusive voices in his head stopped. Then, a single dose of 5-MeO-DMT showed him the essence of love and how to embrace it in his daily life. It was only after these therapies that he truly began living, perhaps for the first time in his life. And in that vein, it is important that people going through psychedelic therapy have mental health support before, during and after the therapy to properly integrate their experiences into their daily lives. Prior to that moment, their choices were not truly their own, and so it can be a scary time without proper support.

The bottom line is that these therapies are truly groundbreaking, though they have been used for millennia. That they are banned in any “free” country is a travesty and must be corrected, not only for our veterans who fought for this freedom, but for all people who have experienced trauma and live in daily anguish as a result. I have reviewed the literature on these substances and find no reason to restrict their access for therapeutic

settings and, on the contrary, I find much evidence of deep healing with even single exposures.

States now have an essential role to play in the movement toward safe, legal, therapeutic access to psilocybin, MDMA (to start with) and other breakthrough therapies. Initiatives like the passage of Measure 109 in Oregon (2020) and Natural Medicine Health Act in Colorado (2022) are paving the way for people who suffer from treatment-resistant mental health ailments to get the help they need. If passed, Hawai'i would also join Arizona, Connecticut, Maryland, Texas, and Washington, whose legislatures all passed bills funding research and trials for breakthrough therapies between 2021 and 2023.

With mental health becoming a more present issue in our communities, everyone knows someone who stands to benefit from access to psilocybin, ibogaine and 5-MeO-DMT and other breakthrough therapies. Please support this measure, which provides a legal pathway for therapeutic access to psilocybin in Hawai'i. We do not want the citizens of Hawai'i to miss out on these healing modalities.

Mahalo,

SB-3199

Submitted on: 2/16/2026 1:24:20 PM

Testimony for HHS on 2/18/2026 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Margot Crandall, MD	Individual	Support	Written Testimony Only

Comments:

Aloha Chair San Buenaventura, Vice Chair McKelvey, and members of the committee,

My name is Margot Crandall, I live in Waiehu, Maui. I am writing in strong support of SB 3199, which establishes the Mental Health Emerging Therapies Task Force to prepare the State for the integration of breakthrough therapies, expansion of pathways for clinical trials and research, and development of policy recommendations for safe, ethical and culturally informed implementation of emerging therapies.

As a hospital based internal medicine physician on Maui for 10 years, and in primary care prior to that, I have extensive first hand knowledge of the toll that mental health issues and substance abuse take on our community. Particularly with substance abuse, the treatment options are limited and ineffective. I've listened to the stories and witnessed the pain of too many people fighting addiction. And I've watched too many die of the medical complications. Therapies like MDMA and psilocybin have been proven to be non-addictive and safe, with fewer side-effects than many pharmaceuticals. Integrating the use of these substances into treatment of addiction and other mental health disorders could be a game changer, saving lives. To be able to offer a hopeless patient a life changing therapy is of immeasurable value. Please pass this bill.

Mahalo for the opportunity to testify in support of SB3199.

SB-3199

Submitted on: 2/16/2026 3:02:50 PM

Testimony for HHS on 2/18/2026 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Maureen Pintner	Individual	Support	Written Testimony Only

Comments:

My name is Maureen Pintner, and I am writing in strong support of SB3199. In 2022, a cancer diagnosis brought me face-to-face with my mortality. I turned to psychedelics to address my existential anxiety, and the outcome has been profound. I went from being petrified of death to someone who embraces life by living each day to the fullest.

This experience gave me a new purpose: helping others overcome their fear of death. I am currently training as an end-of-life doula specializing in psychedelic-assisted therapy. Existential anxiety is an epidemic in our country, and it shouldn't be. These treatments have the ability to transform that angst into peace. I urge you to support SB3199 so that individuals can live and die with purpose, dignity, and peace.

Testimony in Support of SB3199

Hearing on February 18, 2026 at 1pm

Senate Committee on Health and Human Services

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

My name is Dr. Charlotte Charfen. I live and work in North Kohala on the Island of Hawai'i. I am writing in strong support of SB3199, which establishes the Mental Health Emerging Therapies Task Force to prepare the State for the integration of breakthrough therapies, the expansion of pathways for clinical trials and clinical research, and the development of policy recommendations for the safe, ethical, and culturally informed implementation of emerging therapies.

I am an end-of-life physician and a board-certified emergency medical provider, caring for patients facing terminal, serious, and life-limiting illness in my private practice in rural Hawai'i. Many of my patients experience profound existential distress and death anxiety that is not adequately addressed by conventional treatments alone. These patients have waited far too long for relief that research has shown is possible. Many died waiting for our governments to act in their best interest.

The evidence supporting psychedelic-assisted therapies, particularly psilocybin, for reducing death anxiety and existential distress is well established. Landmark studies conducted years ago at institutions such as Johns Hopkins University and NYU demonstrated significant and sustained reductions in death anxiety, depression, and psychological suffering in patients with terminal or life-limiting diagnoses. These are rigorous, peer-reviewed studies conducted at highly respected academic medical centers.

At present, ketamine is the only legal atypical psychedelic I am able to offer my patients. I use it carefully and responsibly, and I have seen meaningful benefits. However, ketamine is not appropriate for every patient, and it should not be the only option simply because it is the only one currently available under the law. My patients deserve access to the full spectrum of evidence-based therapies that may help them live their remaining time with greater peace and dignity.

SB3199 is a thoughtful and responsible step forward. It does not prematurely implement therapies or remove safeguards. Instead, it ensures that Hawai'i is prepared—clinically, ethically, and culturally—to integrate these therapies when pathways allow. This is sound public health policy.

I also want to highlight a contradiction that many of my patients struggle to understand. Hawai'i allows Medical Aid in Dying, and I help eligible patients access that option when appropriate. Yet those same patients do not have access to plant-based medicines that could reduce death anxiety, support emotional processing, and help them approach the end of life with less fear. From both a clinical and ethical perspective, it is difficult to justify allowing access to a medication to end one's life while denying access to a medicine that could help someone live their final days with greater comfort and meaning.

Patients at the end of life should have access to both options. Research shows that both psychedelic-assisted therapy and Medical Aid in Dying can reduce death anxiety. They are not mutually exclusive; they serve different needs at different moments.

Many of my patients will not live long enough to benefit from the eventual outcomes of this bill. That reality is precisely why preparation matters now. SB3199 offers a path forward so that future patients do not have to wait as long as this generation has.

For these reasons, I strongly urge you to support SB3199.

Mahalo for the opportunity to provide testimony and for your consideration.

Respectfully,

Dr. Charlotte Charfen, MD

End-of-Life Physician

North Kohala, Hawai'i

SB-3199

Submitted on: 2/17/2026 6:23:08 AM

Testimony for HHS on 2/18/2026 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Sian Strong	Individual	Support	Written Testimony Only

Comments:

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

My name is Sian Strong, I've lived in Kailua Kona for 25 years, and I am writing in strong support of SB3199.

My mom was a marriage, family, & child counselor.

My dad was a probation officer.

I had 2 uncles that were cops.

I served 4 yrs. in the USAF.

I've worked as an EMT, and Psych. Aide.

My wife is a nurse.

Plenty stories about mental health.

And almost none of them improved long term with the usual medical interventions.

Long overdue time for new treatments & protocols.

Please make it happen. Lives depend upon it.

Big Thanks from the Big Isle.

Sian Strong.

SB-3199

Submitted on: 2/17/2026 7:22:02 AM

Testimony for HHS on 2/18/2026 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Julia Hengst	Individual	Support	Written Testimony Only

Comments:

Testimony in Support of SB3199

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

My name is Julia Hengst. I live in Kahului, Maui and am a Licensed Marriage and Family Therapist (#613) licensed here. I am writing **in strong support of SB3199**, which establishes the Mental Health Emerging Therapies Task Force to prepare the State for the integration of breakthrough therapies, expansion of pathways for clinical trials and clinical research, and development of policy recommendations for safe, ethical, and culturally informed implementation of emerging therapies.

Several of my colleagues in California, where I am also licensed, have been approved to do breakthrough therapies for years. It is clearly the future of where medicine is going. People are suffering terribly and we need to use any tools we can to help. Please let Hawaii be among the early adopters.

Over the past two decades, researchers around the world have renewed scientific understanding of the benefits of breakthrough therapies, so it is with growing certainty that scientists and medical professionals are now working with policymakers to create access to safe and non-addictive therapies like psilocybin and MDMA for therapeutic uses. Research from major institutions around the world shows psilocybin to be a promising clinical treatment tool for a wide range of mental and psychiatric diagnoses including anxiety, addiction, depression, end-of-life anxiety, and more. Similarly, MDMA is showing groundbreaking efficacy in treating post-traumatic stress disorder (PTSD). As a result, psilocybin and MDMA are increasingly considered some of the most effective, non-addictive, and safe treatment options for treatment-resistant depression and PTSD respectively, when administered in clinical settings. These impressive results have led the U.S. Food & Drug Administration (FDA) to grant psilocybin and MDMA their Breakthrough Therapy Designation.

States now have an essential role to play in the movement toward safe, legal, therapeutic access to psilocybin, MDMA and other breakthrough therapies. Initiatives like the passage of Measure 109 in Oregon (2020) and Natural Medicine Health Act in Colorado (2022) are paving the way for people who suffer from treatment-resistant mental health ailments to get the help they need.

With mental health becoming a more present issue in our communities, everyone knows someone who stands to benefit from access to psilocybin, MDMA and other breakthrough therapies. Please support this measure, which supports research and prepares medical professionals for breakthrough therapies. We do not want the citizens of Hawai'i to miss out on these healing modalities.

Mahalo

Julia Hengst, LMFT #613 (HI) and #83000 (CA)

SB-3199

Submitted on: 2/17/2026 7:35:41 AM

Testimony for HHS on 2/18/2026 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Amanda Lillibridge	Individual	Support	Written Testimony Only

Comments:

Testimony in Support of SB3199

Hearing on February 18, 2026 at 1pm

Senate Committee on Health and Human Services

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

My name is Amanda Lillibridge, I live in Honolulu, and I am writing **in strong support of SB3199**, which establishes the Mental Health Emerging Therapies Task Force to prepare the State for the integration of breakthrough therapies, expansion of pathways for clinical trials and clinical research, and development of policy recommendations for safe, ethical, and culturally informed implementation of emerging therapies.

Outside of the undeniable science that has proven the efficacy of psychedelic breakthrough therapies as effective healing modalities, I can add that my anecdotal experience with the medicine has been nothing short of profound. These modalities have played a monumental role in my own personal health journey and trauma, and I can say without a doubt that I would not have found the hope, perspective shift, or healing from debilitating adolescent trauma without having encountered this medicine.

Over the past two decades, researchers around the world have renewed scientific understanding of the benefits of breakthrough therapies, so it is with growing certainty that scientists and medical professionals are now working with policymakers to create access to safe and non-addictive therapies like psilocybin and MDMA for therapeutic uses. Research from major institutions around the world shows psilocybin to be a promising clinical treatment tool for a wide range of mental and psychiatric diagnoses including anxiety, addiction, depression, end-of-life anxiety, and more. Similarly, MDMA is showing groundbreaking efficacy in treating post-traumatic stress disorder (PTSD). As a result, psilocybin and MDMA are increasingly considered some of the most effective, non-addictive, and safe treatment options for treatment-resistant depression and PTSD respectively, when administered in clinical settings. These results have led the FDA to grant both psilocybin and MDMA their Breakthrough Therapy Designation.

States now have an essential role to play in the movement toward safe, legal, therapeutic access to psilocybin, MDMA and other breakthrough therapies. Initiatives like the passage of Measure 109 in Oregon (2020) and Natural Medicine Health Act in Colorado (2022) are paving the way for people who suffer from treatment-resistant mental health ailments to get the help they need.

With mental health becoming a more present issue in our communities, everyone knows someone who stands to benefit from access to psilocybin, MDMA and other breakthrough therapies. We do not want the citizens of Hawai'i to miss out on these healing modalities.

Mahalo for the opportunity to testify in support of SB3199.

Testimony in Support of SB3199

Hearing on February 18, 2026, at 1pm
Senate Committee on Health and Human Services

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

My name is Matthew Torres, I am a resident of Pahoia on Hawai'i Island, I serve as the Finance Officer for American Legion Post 3. I strongly support SB3199, establishing a Mental Health Emerging Therapies Task Force to prepare the State for safe, ethical, and culturally informed integration of breakthrough therapies, expanding clinical research pathways, and developing policy recommendations for implementation.

I am a retired combat veteran and have been married to Vanessa Torres for 21 years. She is providing testimony in person today. Before we were married, we deployed to Iraq together in 2003. I witnessed much of what she went through, and the rest she shared with me. The level of trauma she experienced during her service — both combat and non-combat — was greater than many of my peers. I am writing to offer my perspective on the treatment process and the value of psilocybin therapy, and how it has positively impacted her life, and our life together.

Vanessa was diagnosed with Complex Post-Traumatic Stress Disorder (C-PTSD) because of her military service. She sought treatment for years, working with multiple mental health professionals, from family counselors to a PhD neuropsychologist whom she saw consistently for five years. While therapy provided some progress, nothing fully resolved the underlying trauma. In 2024, we met a couple at a veteran's event who had gone through different forms of break-through therapy. With their guidance, Vanessa pursued treatment herself. However, the only legal options for safe, regulated access required traveling to Oregon, or internationally to Peru or Mexico.

Although portions of the program were covered, travel expenses were not, including airfare and lodging required due to distance. As retired veterans living on fixed incomes, this created a significant financial burden. Nevertheless, we

made it happen because we believed this treatment could finally help her confront what years of traditional therapy could not. I can tell you plainly; after treatment, she is a different person. No amount of EMDR, or talk and behavioral therapy brought her the level of peace that two sessions of plant-based medicine did. The change has been profound, not only for her, but for our family.

Because of what I have witnessed firsthand, I have applied to receive the same treatment this spring to address my own C-PTSD, it will be at our own personal expense once again.

Please consider the potential quality of life improvements this research provides to its participants, it is not only for combat veterans, but also for survivors of domestic violence, and for those affected by tragedies such as the Maui fires. We have sacrificed enough. We should not have to leave the state we live in and love to access care that could meaningfully restore our lives.

Several decades of research has shown the clinical effectiveness of psilocybin and MDMA in treating depression, addiction, and PTSD, particularly in treatment-resistant cases like those we have experienced. Both of these medications have received FDA Breakthrough Therapy designation. We now have an important role in establishing safe, legal, therapeutic access. Efforts in other states show that responsible legislation, like this bill proposes, can expand pathways for those in need. Hawai'i should be prepared to responsibly integrate these emerging therapies.

Mahalo for your time and consideration.

SB-3199

Submitted on: 2/17/2026 10:58:34 AM

Testimony for HHS on 2/18/2026 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Chris Frohlich	Individual	Support	Written Testimony Only

Comments:

Testimony in Support of SB3199—Relating to Mental Health

Before the Senate Committee on Health and Human Services

Thirty-Third Legislature, State of Hawai‘i (2026)

Chair, Vice Chair, and Members of the Committee:

My name is Chris Frohlich, and I respectfully submit testimony in strong support of SB3199.

Hawai‘i continues to face a serious mental health crisis. Veterans, first responders, trauma survivors, and many others across our islands struggle with PTSD, treatment-resistant depression, substance use disorders, and suicidality. Too many families have experienced preventable loss. While our providers work tirelessly, existing treatments do not help everyone. We must responsibly explore additional evidence-based options.

The United States Food and Drug Administration has granted Breakthrough Therapy designation to MDMA-assisted therapy for PTSD and psilocybin-assisted therapy for treatment-resistant depression after years of federally regulated research. As federal rescheduling or approval may occur, Hawai‘i should be prepared.

SB3199 does not legalize or prematurely authorize these therapies. Instead, it establishes a time-limited task force within the Department of Health to prepare our state for potential federal changes. The bill brings together public health leaders, legal experts, university researchers, Native Hawaiian health representatives, veteran-serving organizations, licensed clinicians, and individuals with lived experience. This ensures planning that is interdisciplinary, culturally informed, and grounded in community needs.

The task force will focus on patient safety, ethical implementation, workforce training, research expansion, and equitable access. It allows Hawai‘i to thoughtfully develop a roadmap rather than react to federal action. With other states already advancing similar efforts, this bill helps ensure our residents are not left behind in research participation or future access.

Importantly, the two-year sunset and required reports to the Legislature provide transparency, accountability, and careful oversight.

This bill is measured, science-based, and compassionate. It prepares Hawai‘i responsibly while centering safety and cultural integrity.

For our veterans.

For our first responders.

For families living with trauma.

For those who have not found relief through existing treatments.

I respectfully urge the Committee to pass SB3199.

Mahalo for the opportunity to testify.

Chris Frohlich

SB-3199

Submitted on: 2/17/2026 12:09:37 PM

Testimony for HHS on 2/18/2026 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Sam Tramonte	Individual	Support	Written Testimony Only

Comments:

My name is Samuel Tramonte, I live in Maui Meadows, in Kihei, Maui, and I am writing **in strong support of SB3199**, which establishes the Mental Health Emerging Therapies Task Force to prepare the State for the integration of breakthrough therapies, expansion of pathways for clinical trials and clinical research, and development of policy recommendations for safe, ethical, and culturally informed implementation of emerging therapies.

My life would not be the same without the very positive influence of psychedelics with regards to mental health, service to others, having an open heart, and living with virtue, inclusivity, equality, integrity, honor, spirituality, forgiveness, compassion, and love. At some point in the future our descendants will look back on 2026 and be curious around why it took us so very long to adopt policies that would help our own kind heal, ameliorate their condition, and be more loving and intelligent individuals. Please make the decision now that will help posterity. Our descendants are counting on us.

Sincerely,

Sam Tramonte

SB-3199

Submitted on: 2/17/2026 12:54:20 PM

Testimony for HHS on 2/18/2026 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
David Pullman	Individual	Support	Written Testimony Only

Comments:

Aloha,

I write in support of this bill which frankly I think is far too timid. Establishing a two-year commission to study something that has already been successfully implemented is pretty weak, but voting yes on this two-year punt should be a no-brainer. Users have known about the potential spiritual and psychological benefits of substances such as psilocybin mushrooms and MDMA for decades, while the medical establishment is just finally catching up. Every tool in the arsenal should be available for people struggling with mental health issues and these tools have a good safety profile and are highly beneficial for most people.

As a public defender, I write separately to implore the legislature to reclassify these substances and drastically reduce the penalties. Current law treats these benign substances the same way it treats methamphetamine, fentanyl, and heroin. Possession of a mere ounce carries a 20-year prison sentence. For mushrooms, an ounce costs about \$150 and constitutes between 6 and 30 doses. Many users casually purchase an ounce, which is really not considered very much in the psychedelic culture, and are in for a rude awakening when they find out they could be locked away in prison for two decades. I currently hAloha, I write in support of this bill which frankly I think is far too timid. Establishing a two-year commission to study something that has already been successfully implemented is pretty weak, but voting yes on this two-year punt should be a no-brainer. Users have known about the potential spiritual and psychological benefits of substances such as psilocybin mushrooms and MDMA for decades, while the medical establishment is just finally catching up. Every tool in the arsenal should be available for people struggling with mental health issues and these tools have a good safety profile and are highly beneficial for most people.

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year sentence for an ounce of "shrooms." This is unconscionable.

Meanwhile in California, for instance, the same possession is a misdemeanor with a maximum jail sentence of six months. Hawaii needs to correct it's draconian drug laws before more lives are ruined, not by the drugs, but by misguided disproportionately punitive sentences. Mahalo for your consideration.

LATE

Model Testimony 2/18/25

Aloha friends! Please be sure to go to make a copy of this document by going to File → Make a Copy to edit and personalize. And delete this heading of course. You can also copy/paste the below text directly into the testimony box if you prefer and personalize from there. Mahalo!

Testimony in Support of SB3199
Hearing on February 18, 2026 at 1pm
Senate Committee on Health and Human Services

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

My name is Russell Hill, I live in Kailua Kona on the Big Island and I am writing **in strong support of SB3199**, which establishes the Mental Health Emerging Therapies Task Force to prepare the State for the integration of breakthrough therapies, expansion of pathways for clinical trials and clinical research, and development of policy recommendations for safe, ethical, and culturally informed implementation of emerging therapies. As a board certified physician and community member, I am also interested in being part of this task force.

As a physician, and as a health care professional who has trained specifically in the therapeutic uses of psychedelics, I feel that the time for support and movement into this rapidly evolving field will provide a new paradigm into treating mental health. The lack of access and inequalities in our current care model, especially when it comes to mental health makes this even more necessary to move on now. I have seen over and over in patients in the emergency department, people with depression and PTSD, who have found a new lease on life after receiving therapeutic care and integration with psilocybin, MDMA, ayahuasca, and DMT. I hope to be actively involved in a research center that evaluates, treats, and trains, both patients and providers that will support patients during their treatment.

Over the past two decades, researchers around the world have renewed scientific understanding of the benefits of breakthrough therapies, so it is with growing certainty that scientists and medical professionals are now working with policymakers to create access to safe and non-addictive therapies like psilocybin and MDMA for therapeutic uses. Research from major institutions around the world shows psilocybin to be a promising clinical treatment tool for a wide range of mental and psychiatric diagnoses including anxiety, addiction, depression, end-of-life anxiety, and more. Similarly, MDMA is showing groundbreaking efficacy in treating post-traumatic stress disorder (PTSD). As a result, psilocybin and MDMA are increasingly considered some of the most effective, non-addictive, and safe treatment options for

treatment-resistant depression and PTSD respectively, when administered in clinical settings. These results have led the FDA to grant both psilocybin and MDMA their Breakthrough Therapy Designation.

States now have an essential role to play in the movement toward safe, legal, therapeutic access to psilocybin, MDMA and other breakthrough therapies. Initiatives like the passage of Measure 109 in Oregon (2020) and Natural Medicine Health Act in Colorado (2022) are paving the way for people who suffer from treatment-resistant mental health ailments to get the help they need.

With mental health becoming a more present issue in our communities, everyone knows someone who stands to benefit from access to psilocybin, MDMA and other breakthrough therapies. We do not want the citizens of Hawai'i to miss out on these healing modalities.

Mahalo for the opportunity to testify in support of SB3199.

Original Model Testimony for SB3199

Aloha friends! Please be sure to go to make a copy of this document by going to File → Make a Copy to edit and personalize. And delete this heading of course. You can also copy/paste the below text directly into the testimony box if you prefer and personalize from there. Mahalo for your support!

Testimony in Support of SB3199

Hearing / Committee info | Hearing date and time

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

My name is xxx, I live in [neighborhood, island / region / State] and I am writing **in strong support of SB3199**, which establishes the Mental Health Emerging Therapies Task Force to prepare the State for the integration of breakthrough therapies, expansion of pathways for clinical trials and clinical research, and development of policy recommendations for safe, ethical, and culturally informed implementation of emerging therapies.

[Insert personal story / relevant professional background here]

Over the past two decades, researchers around the world have renewed scientific understanding of the benefits of breakthrough therapies, so it is with growing certainty that scientists and medical professionals are now working with policymakers to create access to safe and non-addictive therapies like psilocybin and MDMA for therapeutic uses. Research from major institutions around the world shows psilocybin to be a promising clinical treatment tool for a wide range of mental and psychiatric diagnoses including anxiety, addiction, depression, end-of-life anxiety, and more. Similarly, MDMA is showing groundbreaking efficacy in treating post-traumatic stress disorder (PTSD). As a result, psilocybin and MDMA are increasingly considered some of the most effective, non-addictive, and safe treatment options for treatment-resistant depression and PTSD respectively, when administered in clinical settings. These impressive results have led the U.S. Food & Drug Administration (FDA) to grant psilocybin and MDMA their Breakthrough Therapy Designation.

States now have an essential role to play in the movement toward safe, legal, therapeutic access to psilocybin, MDMA and other breakthrough therapies. Initiatives like the passage of Measure 109 in Oregon (2020) and Natural Medicine Health Act in Colorado (2022) are paving the way for people who suffer from treatment-resistant mental health ailments to get the help they need.

With mental health becoming a more present issue in our communities, everyone knows someone who stands to benefit from access to psilocybin, MDMA and other breakthrough therapies. Please support this measure, which supports research and prepares medical professionals for breakthrough therapies. We do not want the citizens of Hawai'i to miss out on these healing modalities.

Mahalo



LATE

February 18, 2026

The Honorable Joy A. San Buenaventura
Chair, Senate Committee on Health and Human Services
Hawaii State Capitol
415 S Beretania St. #213
Honolulu, HI 96813

Dear Chair San Buenaventura,

We write to you to express our strong support for SB 3199, legislation establishing the Mental Health Emerging Therapies Task Force within the Hawaii Department of Health to prepare the State for the safe, research-informed integration of FDA-designated breakthrough therapies, including MDMA- and psilocybin-assisted therapies, for conditions such as PTSD, depression, and other serious mental health challenges. This critical legislation is an important step toward addressing the alarming mental health crisis affecting our nation's veterans and ensuring they have access to innovative, evidence-based treatments.

Veterans are one of the most vulnerable populations when it comes to mental health. Since 2001, over 125,000 veterans have died by suicide, and 29% of Global War on Terrorism veterans are known to suffer from post-traumatic stress disorder (PTSD). The disproportionate incidence of PTSD among veterans is also a driver of the disproportionate incidence of suicide among them. We lose no less than 17 and by some estimates as many as 44 U.S. veterans to suicide every day, at nearly double the rate of non-veteran Americans lost to suicide each year.¹

Clearly, current mental health treatment options available to our veterans through VA healthcare facilities have been far from universally effective. Our veterans and their families need access to alternative therapies that address the complexity of the challenges they face following service to our nation. As demonstrated by ongoing medical and scientific research, psychedelic therapies are rapidly emerging as an effective tool in treating PTSD, traumatic brain injury (TBI), treatment-resistant depression, substance use disorder, anxiety, and other mental health indications that fuel disproportionate rates of suicide among the veteran population.

Founded in 2019, Veterans Exploring Treatment Solutions (VETS) is a 501(c)(3) non-profit organization working to end the veteran suicide epidemic by providing resources, research, and advocacy for U.S. military veterans seeking psychedelic-assisted therapies for TBI, PTSD, addiction, and other health conditions. VETS envisions a world where our veterans

¹ "44 Veteran Suicides a Day - What We're Doing Isn't Working, Alternative Treatments Are Needed! - SOAA." SOAA, 30 June 2023, soaa.org/44-veteran-suicides-daily/.

have access to the most advanced healthcare options to heal from the mental and physical wounds of war. VETS has supported over 1,000 U.S. Special Operations Forces (SOF) veterans and veteran spouses to access psychedelic-assisted therapy (PAT) treatment abroad, paired with preparation and integration coaching, through our “Foundational Healing Grants” Program.

SB 3199 can be a forward-looking initiative that establishes a formal state framework to prepare Hawaii for FDA-designated breakthrough therapies, including psychedelic-assisted treatments, through research expansion, workforce development, and implementation planning. The passage of SB 3199 would position Hawaii at the forefront of responsible mental health innovation, building upon efforts in states like Texas, California, and New Jersey that have advanced clinical research and policy readiness for emerging therapies.

SB 3199 does not legalize or decriminalize psychedelic substances; rather, it takes a responsible, evidence-based approach by establishing a state task force to prepare Hawaii for federally approved breakthrough therapies through careful planning, research expansion, and regulatory alignment. This framework strengthens Hawaii’s readiness for FDA action, supports the development of safe and culturally informed implementation models, and positions the State as a national leader in responsibly advancing innovative mental health treatments for veterans and other trauma-affected communities.

With bipartisan support, states across the nation are recognizing the need to act urgently, and Hawaii has a unique opportunity to continue leading by example with a comprehensive, forward-thinking approach. By enacting this legislation, Hawaii will not only honor its commitment to those who have served but also continue a precedent for responsible, research-driven policymaking that could save countless lives.

Thank you for your leadership and commitment to our nation’s heroes. VETS stands ready to assist in any way possible to support the successful implementation of this vital initiative.

Respectfully,

Logan Davidson

Logan Davidson
Legislative Director

✉ info@vetsolutions.org

📷 [veteransolutions](#)

🖱 vetsolutions.org



LATE

TESTIMONY IN SUPPORT OF SB 3199



HAWAII HEALTH &
HARM REDUCTION CENTER

677 Ala Moana Blvd, Ste 226
Honolulu, HI 96813

(808) 521-2437

www.hhhrc.org

*"Reducing harm,
promoting health,
creating wellness, and
fighting stigma
in Hawai'i and
the Pacific."*

TO: Chair San Buenaventura, Vice Chair McKelvey, & HHS
Committee

FROM: Nikos Leverenz, Policy & Advancement Manager

DATE: February 18, 2026 (1:00 P.M.)

Hawai'i Health & Harm Reduction Center (HHHRC) strongly supports SB 3199, which Establishes the Mental Health Emerging Therapies Task Force to prepare the State for the integration of breakthrough therapies, expansion of pathways for clinical trials and clinical research, and development of policy recommendations for safe, ethical, and culturally informed implementation of emerging therapies.

HHHRC Executive Director Heather Lusk and I served on the Breakthrough Therapies Task Force with the Office of Wellness and Resilience to explore ways to improve the treatment of post-traumatic stress disorder (PTSD) and major depressive disorder in Hawai'i. This state should carefully explore ways to develop a research-driven infrastructure of care that could benefit many residents who struggle with serious and long-term mental health conditions, as well as those who are nearing their end of life. We hope that the bill can be amended to provide more representation of those with lived expertise and less representation of government departments who are disinclined to support expanded access to pharmacotherapies that are currently misclassified under the federal Controlled Substances Act.

HHHRC's mission is to reduce harm, promote health, create wellness, and fight stigma in Hawai'i and the Pacific. We work with many individuals impacted by poverty, housing instability, and other social determinants of health. Many have behavioral health problems, including those related to substance use and mental health conditions, and have also been deeply impacted by trauma related to histories of physical, sexual, and psychological abuse.

Mahalo for the opportunity to provide testimony.

LATE

SB-3199

Submitted on: 2/18/2026 9:56:23 AM

Testimony for HHS on 2/18/2026 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Nikos Leverenz	Testifying for Drug Policy Forum of Hawaii	Support	Remotely Via Zoom

Comments:

Chair San Buenaventura, Vice Chair McKelvey, & HHS Committee:

Drug Policy Forum of Hawai‘i (DPFH) **strongly supports** SB 3199, which establishes the Mental Health Emerging Therapies Task Force to prepare the State for the integration of breakthrough therapies, expansion of pathways for clinical trials and clinical research, and development of policy recommendations for safe, ethical, and culturally informed implementation of emerging therapies.

This state should carefully explore ways to develop a research-driven infrastructure of care that could benefit many residents who struggle with serious and long-term mental health conditions, as well as those who are nearing their end of life. We hope that the bill can be amended to provide more representation of those with lived expertise and less representation of government departments who are disinclined to support expanded access to pharmacotherapies that are currently misclassified under the federal Controlled Substances Act.

Since 1993 DPFH has advanced public discussions and policy changes around Hawai‘i’s drug polices, which continue to advance severe criminal penalties and extended periods of criminal legal supervision. DPFH also supports policy changes around substance use and behavioral health issues that are anchored in harm reduction, public health, and human rights. These changes include broader access to community-based behavioral health treatment, the repeal of cannabis prohibition in favor of rational regulation, reducing the severity of sentencing laws, prosecutorial practices, penological practices, and criminal legal supervision, and advancing other changes to laws and policies that reduce the impact of the criminal legal system on individuals and families from under-resourced communities.

Mahalo for the opportunity to provide testimony.



LATE

Testimony in Support of SB 3199

Hawaii Senate Health and Human Services Committee

February 18, 2026

Chairman Buenaventura, Vice Chair McKelvey, and esteemed members of the Committee,

My name is Jesse MacLachlan, and I am proud to offer testimony in support of SB 3199, establishing the Mental Health Emerging Therapies Task Force.

By way of introduction, I serve as the State Policy and Advocacy Director at Reason for Hope, a nonprofit organization dedicated to combating the mental health crisis in our country by ensuring safe, affordable, and equitable access to innovative mental health treatments. Prior to joining Reason for Hope, I served as a State Representative in the Connecticut General Assembly. After leaving office, I led the advocacy behind the first psilocybin therapy working group in the country within the Connecticut Department of Mental Health and Addiction Services. The recommendations from that working group ultimately led to the creation of Connecticut's state-supported psychedelic therapy pilot program, another first in the country, which is now operating in partnership with the Yale Program for Psychedelic Science and serving Veterans, first responders, and frontline healthcare workers through FDA-regulated clinical research.

SB 3199 represents a thoughtful and responsible next step for Hawaii. The mental health crisis continues to impact Veterans, first responders, trauma survivors, and families across this State. Traditional treatments for conditions such as PTSD, treatment-resistant depression (TRD), and major depressive disorder (MDD) have not been sufficient for many individuals. At the same time, the U.S. Food and Drug Administration has granted Breakthrough Therapy designation to MDMA-assisted therapy for PTSD, multiple psilocybin-assisted therapies for treatment-resistant depression, as well as a 5-MeO-DMT compound for treatment-resistant depression, recognizing their potential to provide substantial improvement over existing treatments.

Federal rescheduling and approval may be on the horizon. The question is not whether these therapies are advancing. The question is whether Hawaii will be prepared.

SB 3199 wisely establishes a two-year task force within the Department of Health to prepare the State for potential federal action. This bill ensures that Hawaii's regulatory, clinical, research, and workforce infrastructure is aligned and ready if and when federal approvals occur.

The task force model is both prudent and consistent with best practices across the country. Connecticut first established a state working group before launching its pilot program. Maryland formed a state task force to study and prepare for integration of emerging therapies. Washington State has passed legislation to evaluate regulatory frameworks and invest in research. Illinois has appropriated funds to support research into psychedelic-assisted therapies for Veterans. Texas, New Mexico, Georgia, Indiana, and New Jersey have similarly invested in research funding and implementation planning.

By bringing together public health officials, legal experts, university researchers, Native Hawaiian health leaders, Veteran-serving organizations, clinicians, and individuals with lived experience, SB 3199 ensures that any future integration of breakthrough therapies is safe, ethical, culturally informed, and grounded in community need.



For Veterans in particular, many of whom are currently traveling out of state or out of country to seek care, proactive preparation at the state level could mean the difference between timely access and prolonged delay.

We owe it to those suffering from PTSD, depression, and trauma-related conditions to ensure that when new, evidence-based treatments become available, Hawaii is ready.

SB 3199 is measured, forward-looking, and responsible. I respectfully urge the Committee to pass this bill and position Hawaii as a leader in thoughtful mental health innovation.

Thank you for your time and consideration. I stand ready to assist in any way to ensure the success of this important initiative.

Sincerely,

Jesse MacLachlan
State Policy and Advocacy Director
Reason for Hope



LATE

February 18, 2026

Chairman Buenaventura, Vice Chair McKelvey, and esteemed members of the Committee,

My name is Martin R. Steele and I am proud to offer testimony on behalf of the Veteran Mental Health Leadership Coalition in support of Senate bill 3199, an act Establishing the Mental Health Emerging Therapies Task Force

For background, I am a retired Lieutenant General in the U.S. Marine Corps, and I had the privilege of wearing the uniform of a U.S. Marine for nearly 35 years, rising from an enlisted private in 1965 to three-star general, and retiring in 1999 as Deputy Chief of Staff for Plans, Policies, and Operations, which is the civilian equivalent of Chief Operating Officer of the Marine Corps. I lived in Honolulu from 1995-1997 where, as a Major General, I served as Strategic Policy and Planning Officer of the J-5, US Pacific Command.

Since retiring from active duty, I have dedicated my career to combating the Veteran mental health and suicide crises. This includes serving as Associate Vice President for Veterans Research and the Executive Director of Military Partnerships at the University of South Florida in Tampa, working with scientists exploring the co-morbidities between traumatic brain injury (TBI) and PTSD; and I was appointed to the VA Commission on Care in 2015, which was established during the Obama Administration to make recommendations about the future of VA health care. I have testified before Congress three times on Veteran suicide prevention.

Our nation's Veterans face a mental health crisis that demands urgent action. Every day, approximately 44 Veterans die by suicide, overdose, or other forms of self-harm. Combat Veterans disproportionately suffer from a complex mix of post-traumatic stress disorder (PTSD), depression, and traumatic brain injury (TBI), conditions that often overlap and significantly increase the risk of suicidal ideation, attempts, and deaths by suicide.

Currently, most Veterans with these conditions are prescribed SSRIs or other slow-acting medications, which must be taken daily, often indefinitely. These treatments frequently provide only minimal relief or no relief at all, and many patients experience intolerable side effects. Moreover, there are no FDA-approved medications for TBI, leaving critical gaps in care for Veterans with this debilitating condition.

Fortunately, in recent years, groundbreaking research has resulted in FDA Breakthrough Therapy designations for MDMA-assisted therapy to treat PTSD and three different psilocybin therapies for treatment-resistant depression (TRD) or major depressive disorder (MDD). 5-MeO-DMT has also received Breakthrough Therapy designation for the treatment of treatment-resistant depression. Recent research out of Stanford University also suggests that an ibogaine-based treatment may qualify for a future Breakthrough Therapy designation for TBI, a condition that, as noted, still has no approved medications.

Significantly, the FDA only grants Breakthrough Therapy designations to treatments that have shown potential for **substantial improvement** over existing therapies to treat a serious condition, thereby expediting research and development. Unlike SSRIs, which often take weeks or months to exert their effects, the above referenced therapies are rapid-acting with potential to provide robust and durable therapeutic benefits across various conditions. Evidence suggests that these clinical improvements arise



through a combination of enhanced neuroplasticity, moderated fear responses, and profound psychological insights, allowing Veterans to process trauma and achieve meaningful, long-lasting recovery.

However, despite their incredible promise, these powerful and time- and labor-intensive treatments do not fit neatly into our current mental healthcare system. Clinical trials typically feature:

- Preparation sessions to build rapport and set therapeutic goals;
- Medication administration sessions that may last six hours or more each;
- Integration sessions to help patients process and apply newfound insights.

Such protocols require an interdisciplinary approach, with specialized training for healthcare professionals and sufficient clinical infrastructure.

Additionally, because these therapies involve controlled substances currently classified under Schedule I, research has been significantly limited and underfunded, and few opportunities exist for Veterans to participate in clinical trials or for clinicians to receive necessary training. Further, under the current Right to Try framework, doctors cannot access these investigational drugs to treat patients with terminal or life-threatening conditions, forcing many Veterans, including many members of our own coalition, to leave the country to access these potentially life-saving treatments. While most report astonishing improvements from treatments overseas, it is unconscionable that Veterans must go to such lengths to save their own lives.

Even after anticipated FDA approvals, the time and labor-intensive nature of current protocols means that cost, workforce availability, and clinical infrastructure will be major barriers to implementation, particularly within the Veterans' Affairs healthcare system, where early demand is expected to significantly outpace availability. **It is therefore crucial to build infrastructure, train healthcare professionals, develop scalable care models, and secure robust insurance coverage to ensure access for Hawaii's Veterans** and member of the public in need of effective mental healthcare. Unlike many medical sectors, we cannot rely on large pharmaceutical companies to drive this process, as they have mostly stayed on the sidelines due to uncertain profitability.

S.B. 3199 wisely recognizes this reality. Rather than waiting for federal approval and reacting afterward, this bill establishes a two-year task force charged with preparing Hawaii's public health and clinical systems for safe, ethical, and culturally informed integration of emerging therapies.

The bill appropriately focuses on:

- Preparing the State for federal rescheduling and approval of breakthrough therapies;
- Expanding pathways for local clinical trials and university-based research partnerships;
- Developing workforce training and certification pathways;
- Evaluating best practices regarding patient safety, equity, culturally informed care, and harm reduction; and
- Delivering interim and final recommendations to the Legislature.

This is a prudent, forward-looking approach.



Importantly, Hawaii would not be alone in taking such preparatory steps. Connecticut established a state working group in 2022 that ultimately led to the creation of a Psychedelic Therapy Pilot Program in partnership with its Department of Mental Health and Addiction Services and Yale University. Maryland recently formed a state task force to study and prepare for the integration of emerging therapies. Other states, including Texas, New Mexico, Washington State, Georgia, Indiana, Maryland, Illinois, and New Jersey have also taken proactive measures to study, fund, or establish frameworks around these therapies.

By establishing this task force, Hawaii signals that it intends to lead rather than follow. The inclusion of representatives from public health agencies, the Attorney General's office, university partners, Native Hawaiian health organizations, Veteran-serving institutions, licensed clinicians, and individuals with lived experience ensures that the task force's work will be balanced, culturally grounded, and responsive to community needs.

This legislation prepares Hawaii's systems for potential federal action, ensuring that if and when approval occurs, the State is ready with clear regulatory alignment, trained professionals, research infrastructure, and patient safeguards. For Hawaii's Veterans, many of whom currently travel out of state or out of country seeking care, this preparation could mean the difference between timely access and years of delay.

S.B. 3199 represents a responsible and necessary step toward addressing the urgent mental health needs of Hawaii's residents, particularly Veterans and trauma survivors. It positions the State to respond thoughtfully, safely, and effectively to emerging federal developments in mental health treatment.

I appreciate your leadership and stand ready to assist in any way to ensure the success of this important initiative.

Sincerely,

Martin R. Steele

Martin R. Steele

Lieutenant General, US Marine Corps (Retired)

Founder and President

Veteran Mental Health Leadership Coalition

LATE

SB-3199

Submitted on: 2/17/2026 5:52:14 PM

Testimony for HHS on 2/18/2026 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Amalia Pangelinan	Individual	Support	Written Testimony Only

Comments:

Aloha, Chair and Members of the Committee,

I am writing in support of this bill to establish the Mental Health Emerging Therapies Task Force.

Hawai'i is facing a mental health crisis especially among veterans, first responders, and people who have experienced trauma. Too many families are impacted by suicide and treatment-resistant conditions. I believe we need to be prepared to consider every safe and evidence-based option available for our community. This bill simply creates a temporary task force to study the issue, bring experts together and community voices, as well as make recommendations to the Legislature. Thank you for your time.

Respectfully,

Amalia Pangelinan

LATE

SB-3199

Submitted on: 2/18/2026 6:29:12 AM

Testimony for HHS on 2/18/2026 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Melanie Lemay	Individual	Support	Written Testimony Only

Comments:

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

My name is Melanie Lemay. I live in Kapahi on Kauai and I am writing in strong support of SB3199, which establishes the Mental Health Emerging Therapies Task Force to prepare the State for the integration of breakthrough therapies, expansion of pathways for clinical trials and clinical research, and development of policy recommendations for safe, ethical, and culturally informed implementation of emerging therapies.

I know people who had successful results with this kind of therapy, releasing fear and anxiety, living a much peaceful life.

Over the past two decades, researchers around the world have renewed scientific understanding of the benefits of breakthrough therapies, so it is with growing certainty that scientists and medical professionals are now working with policymakers to create access to safe and non-addictive therapies like psilocybin and MDMA for therapeutic uses. Research from major institutions around the world shows psilocybin to be a promising clinical treatment tool for a wide range of mental and psychiatric diagnoses including anxiety, addiction, depression, end-of-life anxiety, and more. Similarly, MDMA is showing groundbreaking efficacy in treating post-traumatic stress disorder (PTSD). As a result, psilocybin and MDMA are increasingly considered some of the most effective, non-addictive, and safe treatment options for treatment-resistant depression and PTSD respectively, when administered in clinical settings. These impressive results have led the U.S. Food & Drug Administration (FDA) to grant psilocybin and MDMA their Breakthrough Therapy Designation.

States now have an essential role to play in the movement toward safe, legal, therapeutic access to psilocybin, MDMA and other breakthrough therapies. Initiatives like the passage of Measure 109 in Oregon (2020) and Natural Medicine Health Act in Colorado (2022) are paving the way for people who suffer from treatment-resistant mental health ailments to get the help they need.

With mental health becoming a more present issue in our communities, everyone knows someone who stands to benefit from access to psilocybin, MDMA and other breakthrough therapies. We do not want the citizens of Hawai'i to miss out on these healing modalities.

Mahalo for the opportunity to testify in support of SB3199.