

JAN 20 2023

A BILL FOR AN ACT

RELATING TO PSYCHOLOGISTS.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF HAWAII:

1 SECTION 1. The legislature finds that there is a
2 significant shortage of prescribing mental health care providers
3 available to serve the needs of the State's residents. As a
4 means of addressing this shortfall, access to quality,
5 comprehensive, and affordable health care can be facilitated and
6 enhanced by collaborative practice between licensed clinical
7 psychologists and medical doctors. Authorizing qualified
8 clinical psychologists with appropriate advanced training to
9 prescribe from a limited formulary of psychotropic medication
10 will especially benefit residents who live in rural or medically
11 underserved communities, where mental health professionals with
12 prescriptive authority are in short supply.

13 The legislature further finds that the mental health needs
14 of the State continue to outpace present capacity. According to
15 the Annual Report on Findings from the Hawaii Physician
16 Workforce Assessment Project (December 2019), psychiatrist
17 shortages are highest in Hawaii and Maui counties. Hawai'i



1 county has the greatest shortage, at thirty-eight per cent,
2 followed by Maui county with a thirty-seven per cent shortage,
3 and then Kaua'i county with a twenty-two per cent shortage. The
4 2019 report reflected a nine per cent shortage of psychiatrists
5 in the city and county of Honolulu; however, these calculations
6 do not factor in the additional systemic barriers related to
7 accessing care in urban areas, such as long wait times to see
8 psychiatrists, psychiatrists not taking new patients due to
9 being overbooked, or certain psychiatrists not accepting
10 medicaid or medicare insurance.

11 The lack of access to appropriate mental health treatment
12 has serious and irrevocable consequences for many Hawai'i
13 residents. According to the department of health, of the ten
14 leading injury-related causes of death, death by suicide is the
15 number one cause among Hawai'i residents. Studies have shown
16 that people who attempt or commit suicide have often received
17 inadequate or no mental health treatment due to a shortage of
18 community mental health providers. While causes for suicide are
19 complex, the most commonly reported contributing factors are
20 mental health conditions that, when identified and treated,
21 respond favorably to therapy and psychotropic medication.



1 A 2016 Hawaii News Now article reported that sixty-one per
2 cent of all people arrested on Oahu in 2015 suffered from
3 serious mental illness or severe substance intoxication. This
4 almost two-fold increase occurred in the period following
5 substantial cuts to state-supported mental health services in
6 2009.

7 According to the National Alliance on Mental Illness and
8 the federal Substance Abuse and Mental Health Services
9 Administration, approximately thirty-two thousand adults in
10 Hawai'i, representing more than three per cent of the population,
11 live with serious mental illness. The actual scope of need in
12 the State is even greater since this figure excludes individuals
13 with clinical diagnoses such as unipolar depression, anxiety
14 disorders, adjustment disorders, substance abuse, or post-
15 traumatic stress disorder.

16 The legislature additionally finds that increasing the
17 number of prescribing mental health providers would be
18 beneficial to the State's homeless population. According to the
19 2019 Hawaii Statewide Point-In-Time Count, there are an
20 estimated 6,448 homeless persons in the State, with an estimated
21 1,681 of those persons meeting the definition of chronically



1 homeless. According to the 2019 Kauai Homeless Point-In-Time
2 Count, there are an estimated four hundred forty-three homeless
3 persons on Kaua'i. Of those persons, a large number fall into
4 four subpopulations that would likely benefit from increased
5 access to prescribing mental health providers, including eighty-
6 four adults with a serious mental illness; one hundred twenty-
7 nine adults with a substance use disorder; five adults with
8 HIV/AIDS; and eleven adult survivors of domestic violence.

9 Clinical psychologists are licensed health professionals
10 with an average of seven years of post-baccalaureate study and
11 three thousand hours of post-graduate supervised practice in the
12 diagnosis and treatment of mental illness. The American
13 Psychological Association has developed a model curriculum for a
14 master's degree in psychopharmacology for the education and
15 training of prescribing psychologists. However, the current
16 allowable scope of clinical psychologists' practice in Hawai'i
17 does not include prescribing medications. Currently, these
18 providers' patients must consult with and pay for another
19 provider to obtain psychotropic medication when it is indicated.

20 The legislature has previously authorized prescription
21 privileges for advanced practice registered nurses,



1 optometrists, dentists, and naturopathic physicians. Licensed
2 clinical psychologists with specialized education and training
3 for prescriptive practice have been allowed to prescribe
4 psychotropic medications to active duty military personnel and
5 their families in federal facilities and the United States
6 Public Health Service for decades. In recent years, Idaho,
7 Iowa, Illinois, Louisiana, and New Mexico have adopted
8 legislation authorizing prescriptive authority for advanced
9 trained psychologists. Many of these prescribing psychologists
10 have filled long-vacant public health positions or otherwise
11 serve predominantly indigent and rural patient populations.

12 Independent evaluations of the federal Department of
13 Defense psychopharmacological demonstration project by the
14 Government Accountability Office and the American College of
15 Neuropsychopharmacology, as well as the experiences in other
16 jurisdictions, have shown that appropriately trained
17 psychologists can prescribe and administer medications safely
18 and effectively.

19 The purpose of this Act is to require the board of
20 psychology to establish a pilot program to grant prescriptive
21 authority to certain prescribing psychologists, licensed in the



1 State before January 1, 2023, and who meet specific education,
2 training, and registration requirements.

3 SECTION 2. Chapter 465, Hawaii Revised Statutes, is
4 amended by adding a new part to be appropriately designated and
5 to read as follows:

6 "PART . PRESCRIBING PSYCHOLOGISTS

7 §465- Definitions. As used in this part, unless the
8 context otherwise requires:

9 "Advanced practice registered nurse with prescriptive
10 authority" means an advanced practice registered nurse, as
11 defined in section 457-2, with prescriptive authority granted
12 pursuant to section 457-8.6.

13 "Clinical experience" means a period of supervised clinical
14 training and practice in which clinical diagnoses and
15 interventions, which can be completed and supervised as part of
16 or subsequent to earning a post-doctoral master of science
17 degree in clinical psychopharmacology training, are learned.

18 "Controlled substance" has the same meaning as in
19 section 329-1.

20 "Forensically encumbered" means a person who: has been
21 detained by Hawaii courts for forensic examination or committed



1 to a psychiatric facility under the care and custody of the
2 director of health for appropriate placement by any court; has
3 been placed on conditional release or released on conditions by
4 a Hawaii court judge; or is involved in a case before the mental
5 health court or a jail diversion program.

6 "Narcotic drug" has the same meaning as in section 329-1.

7 "Opiate" has the same meaning as in section 329-1.

8 "Prescribing psychologist" means a clinical psychologist
9 who has undergone specialized training in clinical
10 psychopharmacology, passed a national proficiency examination in
11 psychopharmacology approved by the board, and been granted a
12 prescriptive authority privilege by the board.

13 "Prescription" means an order for a psychotropic medication
14 or any device or test directly related to the diagnosis and
15 treatment of mental and emotional disorders pursuant to the
16 practice of psychology.

17 "Prescriptive authority privilege" means the authority
18 granted by the board to prescribe and administer psychotropic
19 medication and other directly related procedures within the
20 scope of practice of psychology in accordance with rules adopted
21 by the board.



1 "Primary care provider" means a physician or osteopathic
2 physician licensed or exempt from licensure pursuant to
3 section 453-2 or an advanced practice registered nurse with
4 prescriptive authority.

5 "Psychotropic medication" means only those agents related
6 to the diagnosis and treatment of mental and emotional disorders
7 pursuant to the practice of psychology as defined in section
8 465-1, except drugs classified into schedule I, II, or III
9 pursuant to chapter 329; opiates; or narcotic drugs; provided
10 that psychotropic medication shall include stimulants for the
11 treatment of attention deficit hyperactivity disorder regardless
12 of the stimulants' schedule classification.

13 "Serious mental illness" means bipolar I disorder, bipolar
14 II disorder, delusional disorder, major depressive disorder with
15 psychotic features, psychosis secondary to substance use,
16 schizophrenia, schizophreniform disorder, and schizoaffective
17 disorder, as defined by the most current version of the
18 Diagnostic and Statistical Manual of Mental Disorders.

19 **§465- Administration.** (a) The board shall prescribe
20 application forms and fees for application for and renewal of
21 prescriptive authority privilege pursuant to this part.



1 (b) The board shall develop and implement procedures to
2 review the education and training credentials of a psychologist
3 applying for or renewing prescriptive authority privilege under
4 this part, in accordance with current standards of professional
5 practice.

6 (c) The board shall determine the exclusionary formulary
7 for prescribing psychologists.

8 (d) The board shall have all other powers that may be
9 necessary to carry out the purposes of this part.

10 **§465- Prescriptive authority privilege; requirements.**

11 Beginning on July 1, 2025, the board shall accept applications
12 for prescriptive authority privilege to qualified candidates.
13 Every applicant for prescriptive authority privilege shall
14 submit evidence satisfactory to the board, in a form and manner
15 prescribed by the board, that the applicant meets the following
16 requirements:

17 (1) The applicant possesses a current license pursuant to
18 section 465-7; was originally licensed in the State
19 before January 1, 2023; and practices in any county in
20 the State;



- 1 (2) The applicant successfully graduated with a
2 post-doctoral master's degree in clinical
3 psychopharmacology from a regionally-accredited
4 institution with a clinical psychopharmacology program
5 designated by the American Psychological Association,
6 or the equivalent of a post-doctoral master's degree,
7 as approved by the board; provided that any equivalent
8 shall include study in a program offering intensive
9 didactic education, including instruction in: anatomy
10 and physiology; biochemistry; neuroanatomy;
11 neurophysiology; neurochemistry; physical assessment
12 and laboratory examinations; clinical medicine and
13 pathophysiology; clinical and research pharmacology
14 and psychopharmacology; clinical pharmacotherapeutics;
15 research; and professional, ethical, and legal issues;
- 16 (3) The applicant has clinical experience that includes a
17 minimum of eight hundred hours completed in a clinical
18 prescribing practicum, completed in not less than
19 twelve months and not more than fifty-six months, and
20 consists of:



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- 1 (A) Supervision of a minimum of one hundred patients,
2 including geriatric, pediatric, and pregnant
3 patients;
- 4 (B) A minimum of eighty hours completed in a physical
5 assessment practicum in a primary care, family
6 practice, community, or internal medicine
7 setting;
- 8 (C) A minimum of one hundred hours of community
9 service with homeless, veteran, or low-income
10 populations;
- 11 (D) A minimum of two hours per week of supervision by
12 a primary care provider or a prescribing
13 psychologist; and
- 14 (E) Eight weeks of rotation in each of the following:
15 (i) Internal and family medicine;
16 (ii) Women's health;
17 (iii) Pediatrics; and
18 (iv) Geriatrics; and
- 19 (4) The applicant has successfully passed the nationally
20 recognized Psychopharmacology Examination for
21 Psychologists developed by the American Psychological



1 Association's Practice Organization's College of
2 Professional Psychology or other authority relevant to
3 establishing competence across the following content
4 areas: neuroscience; nervous system pathology;
5 physiology and pathophysiology; biopsychosocial and
6 pharmacologic assessment and monitoring; differential
7 diagnosis; pharmacology; clinical psychopharmacology;
8 research; and integrating clinical psychopharmacology
9 with the practice of psychology, diversity factors,
10 and professional, legal, ethical, and
11 interprofessional issues; provided that the passing
12 score shall be determined by the American
13 Psychological Association's Practice Organization's
14 College of Professional Psychology or other authority,
15 as applicable.

16 **§465- Prescriptive authority privilege; renewal. (a)**

17 The board shall implement a method for the renewal of
18 prescriptive authority privilege in conjunction with the renewal
19 of a license under section 465-11.

20 (b) To qualify for the renewal of prescriptive authority
21 privilege, a prescribing psychologist shall present evidence



1 satisfactory to the board that the prescribing psychologist has
2 completed at least eighteen hours, biennially, of acceptable
3 continuing education, as determined by the board, relevant to
4 the pharmacological treatment of mental and emotional disorders;
5 provided that a first-time prescribing psychologist shall not be
6 subject to the continuing education requirements under this
7 section for the first prescriptive authority privilege renewal.

8 (c) The continuing education requirement under this
9 section shall be in addition to the continuing education
10 requirement under section 465-11.

11 (d) The board may conduct random audits of licensees to
12 determine compliance with the continuing education requirement
13 under this section. The board shall provide written notice of
14 an audit to each licensee randomly selected for audit. Within
15 sixty days of notification, the licensee shall provide the board
16 with documentation verifying compliance with the continuing
17 education requirement established by this section.

18 **§465- Prescriptive authority privilege; prescribing**
19 **practices.** (a) It shall be unlawful for any psychologist not
20 granted prescriptive authority privilege under this part to
21 prescribe, offer to prescribe, administer, or use any sign,



1 card, or device to indicate that the psychologist is so
2 authorized.

3 (b) A valid prescription issued by a prescribing
4 psychologist shall be legibly written and contain, at a minimum,
5 the following:

6 (1) Date of issuance;

7 (2) Original signature of the prescribing psychologist;

8 (3) Prescribing psychologist's name and business address;

9 (4) Name, strength, quantity, and specific instructions
10 for the psychotropic medication to be dispensed;

11 (5) Name and address of the person for whom the
12 prescription was written;

13 (6) Room number and route of administration if the patient
14 is in an institutional facility; and

15 (7) Number of allowable refills, if applicable.

16 (c) A prescribing psychologist shall comply with all
17 applicable state and federal laws and rules relating to the
18 prescription and administration of psychotropic medication.

19 (d) A prescribing psychologist shall:

20 (1) Except as provided in paragraph (3), prescribe and
21 administer psychotropic medication only in



1 consultation with and pursuant to a written
2 collaborative agreement with a patient's primary care
3 provider that is established and signed prior to
4 prescribing any psychotropic medication for the
5 patient;

6 (2) Make any changes to a medication treatment plan,
7 including dosage adjustments, addition of medications,
8 or discontinuation of medications, only in
9 consultation and collaboration with a patient's
10 primary care provider;

11 (3) For patients who are forensically encumbered and for
12 patients with a diagnosis of serious mental illness
13 who are subject to the jurisdiction of the department
14 of health:

15 (A) Prescribe and administer psychotropic medication
16 only:

17 (i) In accordance with a treatment protocol
18 agreed to by the prescribing psychologist
19 and the treating department of health
20 psychiatrist; and



1 (ii) With notification to all other health care
2 providers treating the patient; and

3 (B) Enter into a collaborative agreement with the
4 department of health prior to prescribing any
5 psychotropic medication; and

6 (4) Document all consultations in the patient's medical
7 record.

8 (e) Except as provided in paragraph (d) (3), a prescribing
9 psychologist shall not prescribe or administer psychotropic
10 medication for any patient who does not have a primary care
11 provider.

12 (f) A prescribing psychologist shall not delegate
13 prescriptive authority to any other person.

14 **§465- Prescriptive authority privilege; exclusionary**
15 **formulary.** (a) A prescribing psychologist shall only prescribe
16 and administer medications for the treatment of mental health
17 disorders as defined by the most current version of the
18 Diagnostic and Statistical Manual of Mental Disorders.

19 (b) The exclusionary formulary for prescribing
20 psychologists shall consist of drugs or categories of drugs



1 adopted by the board, subject to the limitations in subsection
2 (d).

3 (c) The exclusionary formulary and any revised formularies
4 shall be made available to licensed pharmacies at the request of
5 the pharmacy and at no cost.

6 (d) Under the exclusionary formulary, prescribing
7 psychologists shall not prescribe or administer:

8 (1) Schedule I controlled substances pursuant to
9 section 329-14;

10 (2) Schedule II controlled substances pursuant to section
11 329-16;

12 (3) Schedule III controlled substances pursuant to section
13 329-18, including all narcotic drugs and opiates; and

14 (4) For indications other than those stated in the
15 labeling approved by the federal Food and Drug
16 Administration for patients seventeen years of age or
17 younger; provided that prescribing psychologists may
18 prescribe and administer stimulants for the treatment
19 of attention deficit hyperactivity disorder,
20 regardless of the stimulants' schedule classification.



1 §465- Drug Enforcement Administration; registration.

2 (a) Every prescribing psychologist shall comply with all
3 federal and state registration requirements to prescribe and
4 administer psychotropic medication.

5 (b) Every prescribing psychologist shall file with the
6 board the prescribing psychologist's federal Drug Enforcement
7 Administration registration number. The registration number
8 shall be filed before the prescribing psychologist issues any
9 prescription for a psychotropic medication.

10 §465- Violation; penalties. Any person who violates
11 this part shall be guilty of a misdemeanor and, upon conviction,
12 subject to penalties as provided in section 465-15(b). Any
13 person who violates this part may also be subject to
14 disciplinary action by the board."

15 SECTION 3. Section 329-1, Hawaii Revised Statutes, is
16 amended as follows:

17 1. By adding two new definitions to be appropriately
18 inserted and to read:

19 "Prescribing psychologist" means a clinical psychologist
20 licensed under chapter 465 who has undergone specialized
21 training in clinical psychopharmacology, passed a national



1 proficiency examination in psychopharmacology approved by the
2 board of psychology, and has been granted a prescriptive
3 authority privilege by the board of psychology.

4 "Psychotropic medication" means only those agents related
5 to the diagnosis and treatment of mental and emotional disorders
6 pursuant to the practice of psychology as defined in section
7 465-1 except drugs classified into schedule I, II, or III
8 pursuant to this chapter; opiates; or narcotic drugs; provided
9 that psychotropic medication shall include stimulants for the
10 treatment of attention deficit hyperactivity disorder regardless
11 of the stimulants' schedule classification."

12 2. By amending the definition of "practitioner" to read:

13 ""Practitioner" means:

14 (1) A physician, dentist, veterinarian, scientific
15 investigator, or other person licensed and registered
16 under section 329-32 to distribute, dispense, or
17 conduct research with respect to a controlled
18 substance in the course of professional practice or
19 research in [~~this~~] the State;

20 (2) An advanced practice registered nurse with
21 prescriptive authority licensed and registered under



1 section 329-32 to prescribe and administer controlled
2 substances in the course of professional practice in
3 [~~this~~] the State; [~~and~~]

4 (3) A prescribing psychologist licensed and registered
5 under section 329-32 to prescribe and administer
6 psychotropic medication in the course of professional
7 practice in the State; and

8 [~~(3)~~] (4) A pharmacy, hospital, or other institution
9 licensed, registered, or otherwise permitted to
10 distribute, dispense, conduct research with respect to
11 or to administer a controlled substance in the course
12 of professional practice or research in [~~this~~] the
13 State."

14 SECTION 4. Section 329-38, Hawaii Revised Statutes, is
15 amended by amending subsection (i) to read as follows:

16 "(i) Prescriptions for controlled substances shall be
17 issued only as follows:

18 (1) All prescriptions for controlled substances shall
19 originate from within the State and be dated as of,
20 and signed on, the day when the prescriptions were
21 issued and shall contain:



- 1 (A) The first and last name and address of the
2 patient; and
- 3 (B) The drug name, strength, dosage form, quantity
4 prescribed, and directions for use. Where a
5 prescription is for gamma hydroxybutyric acid,
6 methadone, or buprenorphine, the practitioner
7 shall record as part of the directions for use,
8 the medical need of the patient for the
9 prescription.

10 Except for electronic prescriptions, controlled
11 substance prescriptions shall be no larger than eight
12 and one-half inches by eleven inches and no smaller
13 than three inches by four inches. A practitioner may
14 sign a prescription in the same manner as the
15 practitioner would sign a check or legal document
16 (e.g., J.H. Smith or John H. Smith) and shall use both
17 words and figures (e.g., alphabetically and
18 numerically as indications of quantity, such as five
19 [~~5~~], or 5), to indicate the amount of controlled
20 substance to be dispensed. Where an electronic
21 prescription is permitted, either words or figures



1 (e.g., alphabetically or numerically as indications of
2 quantity, such as five or 5), to indicate the amount
3 of controlled substance to be dispensed shall be
4 acceptable. Where an oral order or electronic
5 prescription is not permitted, prescriptions shall be
6 written with ink or indelible pencil or typed, shall
7 be manually signed by the practitioner, and shall
8 include the name, address, telephone number, and
9 registration number of the practitioner. The
10 prescriptions may be prepared by a secretary or agent
11 for the signature of the practitioner, but the
12 prescribing practitioner shall be responsible in case
13 the prescription does not conform in all essential
14 respects to this chapter and any rules adopted
15 pursuant to this chapter. In receiving an oral
16 prescription from a practitioner, a pharmacist shall
17 promptly reduce the oral prescription to writing,
18 which shall include the following information: the
19 drug name, strength, dosage form, quantity prescribed
20 in figures only, and directions for use; the date the
21 oral prescription was received; the full name, Drug



1 Enforcement Administration registration number, and
2 oral code number of the practitioner; and the name and
3 address of the person for whom the controlled
4 substance was prescribed or the name of the owner of
5 the animal for which the controlled substance was
6 prescribed.

7 A corresponding liability shall rest upon a
8 pharmacist who fills a prescription not prepared in the
9 form prescribed by this section. A pharmacist may add
10 a patient's missing address or change a patient's
11 address on all controlled substance prescriptions
12 after verifying the patient's identification and
13 noting the identification number on the back of the
14 prescription document on file. The pharmacist shall
15 not make changes to the patient's name, the controlled
16 substance being prescribed, the quantity of the
17 prescription, the practitioner's Drug Enforcement
18 Administration number, the practitioner's name, the
19 practitioner's electronic signature, or the
20 practitioner's signature;



1 (2) An intern, resident, or foreign-trained physician, or
2 a physician on the staff of a Department of Veterans
3 Affairs facility or other facility serving veterans,
4 exempted from registration under this chapter, shall
5 include on all prescriptions issued by the physician:
6 (A) The registration number of the hospital or other
7 institution; and
8 (B) The special internal code number assigned to the
9 physician by the hospital or other institution in
10 lieu of the registration number of the
11 practitioner required by this section.
12 The hospital or other institution shall forward a copy
13 of this special internal code number list to the
14 department as often as necessary to update the
15 department with any additions or deletions. Failure
16 to comply with this paragraph shall result in the
17 suspension of that facility's privilege to fill
18 controlled substance prescriptions at pharmacies
19 outside of the hospital or other institution. Each
20 written prescription shall have the name of the



1 physician stamped, typed, or hand-printed on it, as
2 well as the signature of the physician;

3 (3) An official exempted from registration shall include
4 on all prescriptions issued by the official:

5 (A) The official's branch of service or agency (e.g.,
6 "U.S. Army" or "Public Health Service"); and

7 (B) The official's service identification number, in
8 lieu of the registration number of the
9 practitioner required by this section. The
10 service identification number for a Public Health
11 Service employee shall be the employee's social
12 security or other government issued
13 identification number.

14 Each prescription shall have the name of the officer
15 stamped, typed, or handprinted on it, as well as the
16 signature of the officer; ~~and~~

17 (4) A physician assistant registered to prescribe
18 controlled substances under the authorization of a
19 supervising physician shall include on all controlled
20 substance prescriptions issued:



1 (A) The Drug Enforcement Administration registration
2 number of the supervising physician; and

3 (B) The Drug Enforcement Administration registration
4 number of the physician assistant.

5 Each written controlled substance prescription issued
6 shall include the printed, stamped, typed, or hand-
7 printed name, address, and phone number of both the
8 supervising physician and physician assistant, and
9 shall be signed by the physician assistant[-]; and

10 (5) A prescribing psychologist authorized to prescribe and
11 administer psychotropic medication pursuant to
12 part of chapter 465 in consultation and
13 collaboration with a primary care provider shall
14 include on all psychotropic medication prescriptions
15 issued:

16 (A) The Drug Enforcement Administration registration
17 number of the licensed primary care provider;

18 (B) The printed, stamped, typed, or hand-printed
19 name, address, and phone number of both the
20 licensed primary care provider and prescribing
21 psychologist; and



1 (C) The signature of the prescribing psychologist."

2 SECTION 5. Section 329-39, Hawaii Revised Statutes, is
3 amended by amending subsection (b) to read as follows:

4 "(b) Whenever a pharmacist sells or dispenses any
5 controlled substance on a prescription issued by a physician,
6 dentist, podiatrist, [~~or~~] veterinarian, or any psychotropic
7 medication on a prescription issued by a prescribing
8 psychologist, the pharmacist shall affix to the bottle or other
9 container in which the drug is sold or dispensed:

- 10 (1) The pharmacy's name and business address;
- 11 (2) The serial number of the prescription;
- 12 (3) The name of the patient or, if the patient is an
13 animal, the name of the owner of the animal and the
14 species of the animal;
- 15 (4) The name of the physician, dentist, podiatrist, [~~or~~]
16 veterinarian, or prescribing psychologist by whom the
17 prescription is written; and
- 18 (5) Such directions as may be stated on the prescription."

19 SECTION 6. Section 346-59.9, Hawaii Revised Statutes, is
20 amended by amending subsection (h) to read as follows:



1 "(h) All psychotropic medications covered by this section
2 shall be prescribed by a psychiatrist, a physician, or an
3 advanced practice registered nurse with prescriptive authority
4 under chapter 457 and duly licensed in the State[-], or a
5 prescribing psychologist authorized under part _____ of
6 chapter 465."

7 SECTION 7. Chapter 465, Hawaii Revised Statutes, is
8 amended by designating sections 465-1 to 465-15 as part I and
9 inserting a title before section 465-1 to read as follows:

10 **"PART I. GENERAL PROVISIONS"**

11 SECTION 8. Section 465-3, Hawaii Revised Statutes, is
12 amended by amending subsection (e) to read as follows:

13 "(e) [~~Nothing~~] Except as provided in part _____, nothing
14 in this chapter shall be construed as permitting the
15 administration or prescription of drugs, or in any way engaging
16 in the practice of medicine as defined in the laws of the
17 State."

18 SECTION 9. (a) The board of psychology shall submit a
19 report of its findings and recommendations, including any
20 proposed legislation, on the authorization of prescriptive
21 authority to prescribing psychologists who meet specific



1 education, training, and registration requirements pursuant to
2 this Act to the legislature no later than twenty days prior to
3 the convening of the regular session of 2025.

4 (b) The board of psychology shall collaborate with the
5 department of health when preparing information in the report
6 regarding the treatment of patients who are forensically
7 encumbered or patients with a diagnosis of serious mental
8 illness who are subject to the department of health's
9 jurisdiction.

10 SECTION 10. Statutory material to be repealed is bracketed
11 and stricken. New statutory material is underscored.

12 SECTION 11. This Act shall take effect on July 1 2023;
13 provided that:

14 (1) The amendments made to section 329-38(i), Hawaii
15 Revised Statutes, by section 4 of this Act shall not
16 be repealed when that section is reenacted on
17 June 30, 2023, pursuant to section 6 of Act 66,
18 Session Laws of Hawaii 2017;

19 (2) This Act shall repeal on August 31, 2028; and

20 (3) Upon repeal of this Act, section 329-1, 329-38,
21 329-39, 346-59.9, and 465-3, Hawaii Revised Statutes,



1 shall be reenacted in the form in which they read on
2 July 1, 2023.

3

INTRODUCED BY:





S.B. NO. 760

Report Title:

Board of Psychology; Psychologists; Prescriptive Authority;
Prescribing Psychologists; Pilot Program

Description:

Requires the Board of Psychology to establish a pilot program to grant prescriptive authority to qualified psychologist applicants statewide. Repeals on 8/31/2028.

The summary description of legislation appearing on this page is for informational purposes only and is not legislation or evidence of legislative intent.

