

EXECUTIVE CHAMBERS

HONOLULU

July 10, 2007

STATEMENT OF OBJECTIONS TO SENATE BILL NO. 1004

Honorable Members  
Twenty-Fourth Legislature  
State of Hawaii

Pursuant to Section 16 of Article III of the Constitution of the State of Hawaii, I am returning herewith, without my approval, Senate Bill No. 1004, entitled "A Bill for an Act Relating to Psychologists."

The stated purpose of this bill "is to authorize appropriately trained and supervised licensed medical psychologists practicing in federally qualified health centers, to prescribe psychotropic medications for the treatment of mental illness."

This bill is objectionable because its actual effect goes beyond its stated purpose by allowing psychologists who obtain the second of the two tiers of prescriptive authority established by the bill -- a prescription certificate -- to practice outside of federally qualified health centers (FQHCs) and to prescribe medications to individuals who are not patients at FQHCs. Furthermore, this bill does not require medical supervision of psychologists holding a prescription certificate.

This bill is also objectionable because psychologists do not have the training necessary to prescribe drugs and this bill

STATEMENT OF OBJECTIONS  
SENATE BILL NO. 1004  
Page 2

does not require sufficient didactic and clinical training for prescriptive authority. Modeled after the Department of Defense's Psychopharmacology Demonstration Project (PDP), this bill differs significantly from the PDP. With respect to the didactic training differences, the bill lacks classroom training in two core areas, cell biology and clinical pharmacology, that is required by the PDP. Regarding the clinical training differences, the PDP specified the number of hours required and how many months must be inpatient and outpatient experience, whereas this bill fails to do so. The PDP, furthermore, required close supervision by a psychiatrist with advanced training in psychopharmacology while this bill only requires supervision two hours a week by a physician or psychiatrist.

Also, as noted in the 2007 report by the Legislative Reference Bureau, PDP psychologists trained in an "optimum learning environment in a comprehensive medical center that offered a wide range of medical care, proximity to a large number of physician and nonphysician health care providers, available diagnostic and treatment equipment and facilities, and other advantages or learning experiences that may not be available at small medical facilities." This bill, on the other hand, provides for practicum training in FQHCs that are smaller with limited staffing and equipment and not as well integrated into a larger medical environment. The clinical experience settings are

STATEMENT OF OBJECTIONS  
SENATE BILL NO. 1004  
Page 3

distinctly different and the bill's practicum training is not comparable to that provided for in the PDP model.

In addition, this bill gives psychologists with prescriptive authority a scope of practice broader than that afforded to the PDP psychologists. PDP psychologists were limited to prescribing psychotropic medications to patients between the ages of 18 and 65 with mental conditions but without medical complications as evaluated by the supervising psychiatrist. This bill allows psychologists to prescribe psychotropic medications to patients of all ages, including children, elderly, and those with medical illnesses in addition to mental conditions. Psychologists with limited didactic and clinical training are not prepared to handle the side effects of psychotropic medications on patients with medical complications.

In recognition of this concern, both the Board of Medical Examiners and the Board of Psychology, the professional licensing bodies for these two professions, have asked that this bill not become law.

For the foregoing reasons, I am returning Senate Bill No. 1004 without my approval.

Respectfully,



LINDA LINGLE  
Governor of Hawaii