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LAWRENCE M. REIFURTH
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PRESENTATION OF THE
DEPARTMENT OF COMMERCE AND CONSUMER AFFAIRS

TO THE HOUSE COMMITTEE ON CONSUMER PROTECTION AND COMMERCE

TWENTY-FIFTH LEGISLATURE
REGULAR SESSION OF 2009

Wednesday, February 18, 2009
2:00 p.m.

**TESTIMONY ON HOUSE BILL NO. 1362, H.D. 1, RELATING TO GENETIC
COUNSELORS.**

TO THE HONORABLE ROBERT N. HERKES, CHAIR,
AND MEMBERS OF THE COMMITTEE:

My name is Celia Suzuki, Program Specialist of the Professional and Vocational Licensing Division ("PVL D"), Department of Commerce and Consumer Affairs ("DCCA"). The DCCA thanks you for the opportunity to submit testimony on H.B. No. 1362, H.D. 1.

This bill proposes to establish a genetic counseling licensure program within the DCCA. The DCCA opposes the expansion of its licensing of regulatory programs in the absence of a demonstrated need. Further, the DCCA has numerous concerns with the bill but will focus on a few needed substantive amendments, if this bill moves forward and is to be implemented by DCCA.

First, for this Committee's information, there was an October 2006 sunrise report, wherein the Auditor determined that little evidence of consumer harm existed in Hawaii relating to genetic counselors and that regulation is not warranted nor should legislation be enacted to license genetic counselors. The DCCA respects that finding and thus does not support H.B. No. 1362, H.D. 1.

Second, as a regulatory program proposed to be implemented by DCCA, the bill's terminology needs to be amended for accuracy as it proposes a "licensing" regulatory scheme, but in fact contemplates a "certification" regulatory scheme. DCCA relies upon the Auditor's definitions of the various regulatory schemes, one of which is "Certification". The Auditor defines "Certification" as the restriction on the use of a professional title only for persons who meet certain qualifications, but it does not bar others who practice the same scope as long as they do not use the protected title. Also, state certification normally entails reliance on professional certification or credentialing by private organizations as the qualification for licensure. On the other hand, the Auditor describes "Licensing" as the most restrictive form of regulation which protects the title and practice of the profession, upon meeting certain specific qualifications. Such specific qualifications include satisfying education, experience (as applicable), and examination requirements for licensure. These qualifications do not mirror private certification standards nor is private certification recognized for licensure purposes. The Auditor's definition of a "certification" regulatory scheme clearly aligns with what this measure proposes and therefore we ask that all references to "licensing" be replaced with the term "certification" or its variations.

Third, the provision relating to "provisional license" in the bill should be deleted because such individual's competency to practice has not yet been established (i.e., by not having passed the certified examination) and such licenses should not be issued. DCCA's other licensing areas do not include and do not authorize the issuance of a license to independently practice until after all requirements have been met, including the examination. Therefore, regulation as proposed in the H.D. 1 would not conform to nor be consistent with DCCA's licensing statutes and would set a bad precedent.

In closing, the amendments proposed to the H.D. 1 by DCCA are necessary to be consistent with other DCCA licensing laws. We understand that supporters of the bill may not be aware of minimum criteria and standards for regulation should DCCA be designated as the administering agency. Our testimony raises but a few amendments and we will request other conforming amendments as the bill moves forward, should it continue to affect DCCA.

Thank you for the opportunity to testify on H.B. No. 1362, H.D. 1.



Wednesday – February 18, 2009
Conference Room 325
2:00 pm

The House Committee on Consumer Protection & Commerce

To: Representative Robert N. Herkes, Chair
Representative Glenn Wakai, Vice Chair

From: Ken Nakamura, MD - Chief Medical Officer
Kapi'olani Medical Specialists
Professor of Pediatrics/Neonatology Division
UH John A. Burns School of Medicine

**RE: Testimony in Strong Support of HB 1362 HD 1
Relating to Genetic Counselors**

My name is Ken Nakamura, MD and I am the Chief Medical Officer for Kapi'olani Medical Specialists and Professor of Pediatrics, Neonatology Division at the University of Hawaii John A. Burns School of Medicine. The Kapi'olani Medical Specialists are an affiliate of Hawaii Pacific Health (HPH), which is the four-hospital system of Kapi'olani Medical Center for Women & Children, Kapi'olani Medical Center at Pali Momi, Straub Clinic & Hospital, and Wilcox Hospital/Kauai Medical Clinic.

I am writing in **strong support of HB 1362 HD1** which would establish licensing and regulatory requirements for the practice of genetic counselors. Genetic counselors are frequently the primary providers of genetic information and counseling to pregnant women whose babies are at risk for birth defects and other genetic conditions. They are also the primary provider of genetic risk assessment for men and women with cancer or a significant family history of cancer. Genetic counselors also assist in the evaluation and management of children and adults with heritable conditions. Medical geneticists and genetic counselors work together much like other physicians work with nurses.

HB 1362 HD 1 will provide many benefits. First, it will ensure that genetic counselors practicing in Hawaii will have the training and knowledge to provide the best care to these families at a difficult time in their lives – when dealing with a sick infant and contemplating the impact on future reproductive and health care decisions. Second, it would provide the first step towards enabling genetic counselors to bill for their services from third party insurers. Third, licensure will help attract genetic counselors to practice in Hawaii as there are currently not enough trained genetic physicians to provide all genetic services and counseling.

Because of the invaluable work that genetic counselors provide I ask that you pass HB 1362 HD 1 from this committee. Thank you for the opportunity to testify.



Wednesday – February 18, 2009
Conference Room 325
2:00 pm

The House Committee on Consumer Protection & Commerce

To: Representative Robert N. Herkes, Chair
Representative Glenn Wakai, Vice Chair

From: Venkataraman Balaraman, MD
Kapi'olani Medical Specialists
Professor of Pediatrics/Neonatology Division
UH John A. Burns School of Medicine

**RE: Testimony in Strong Support of HB 1362 HD 1
Relating to Genetic Counselors**

My name is Venkataraman Balaraman, MD and I am a Neonatologist at Kapi'olani Medical Specialists and Professor of Pediatrics, Neonatology Division at the University of Hawaii John A. Burns School of Medicine. The Kapi'olani Medical Specialists are an affiliate of Hawaii Pacific Health (HPH), which is the four-hospital system of Kapi'olani Medical Center for Women & Children, Kapi'olani Medical Center at Pali Momi, Straub Clinic & Hospital, and Wilcox Hospital/Kauai Medical Clinic.

I am writing in **strong support of HB 1362 HD1** which would establish licensing and regulatory requirements for the practice of genetic counselors. Genetic counselors are frequently the primary providers of genetic information and counseling to pregnant women whose babies are at risk for birth defects and other genetic conditions. They are also the primary provider of genetic risk assessment for men and women with cancer or a significant family history of cancer. Genetic counselors also assist in the evaluation and management of children and adults with heritable conditions. Medical geneticists and genetic counselors work together much like other physicians work with nurses.

HB 1362 HD 1 will provide many benefits. First, it will ensure that genetic counselors practicing in Hawaii will have the training and knowledge to provide the best care to these families at a difficult time in their lives – when dealing with a sick infant and contemplating the impact on future reproductive and health care decisions. Second, it would provide the first step towards enabling genetic counselors to bill for their services from third party insurers. Third, licensure will help attract genetic counselors to practice in Hawaii as there are currently not enough trained genetic physicians to provide all genetic services and counseling.

Because of the invaluable work that genetic counselors provide I ask that you pass HB 1362 HD 1 from this committee. Thank you for the opportunity to testify.

March of Dimes Foundation
Hawaii Chapter
1451 S. King Street, Suite 504
Honolulu, Hawaii 96814
808-973-2155

February 17, 2009

To: Rep. Robert N. Herkes, Chair
Rep. Glenn Wakai, Vice Chair
Committee on Consumer Protection & Commerce

From: Michael Robinson, Chair
Public Affairs Committee
March of Dimes

Re: Support of HB1362

Chair Herkes, Vice Chair Wakai, and members of the committee:

I am writing to express strong support of House Bill 1362, establishing the Genetic Counseling Licensure Program within Department of Commerce and Consumer Affairs and requiring licensure in order to use the title of "licensed genetic counselor".

Rapid changes in scientific knowledge improve the chances for birth of a healthy baby and also create an ongoing need for information about childbearing. Individuals have different risks for having a baby born with an inherited disorder, birth defect, or other abnormal pregnancy outcome. Prospective parents who have unanswered questions about diseases and traits in their families, or about possible environmental or behavioral risk factors, or certain complications of pregnancy, are advised to take advantage of genetic counseling. For example, couples who have recurring miscarriages should be offered genetic testing to learn whether either of them has certain genetic risk factors for miscarriages.

Genetic counselors translate scientific knowledge into practical information that can help families learn about genetic testing and results so that they may make informed decisions. Genetic counseling should take into consideration the family's personal values, and religious and cultural beliefs. Genetic counselors facilitate medical management for genetic conditions, and provide emotional support to the family. Providers of genetic counseling include professional genetic counselors and doctors or nurses with special training in the subject. For physicians, nurses, therapists and other health care providers licensing is necessary to ensure that practitioners can perform at the highest standard. Licensing genetic counselors will ensure they have knowledge and training needed to provide this valuable service to Hawaii's families.

I strongly support SB 1208. Mahalo for allowing me to express that support.

march  of dimes®

Committee on Consumer Protection and Commerce
HB 1362, HD1, Relating to Genetic Counselors
Wednesday February 18, 2009
2:00 PM, Conference Room 325

To the Honorable Chair Robert N. Herkes and Members of the Committee on Consumer Protection and Commerce:

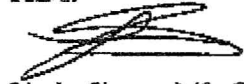
I strongly support **HB 1362, HD1**, relating to professional licensure of genetic counselors. I am a genetic counselor who was been practicing in Hawaii for almost 10 years.

Genetic counselors are health professionals with specialized graduate degrees and experience in the areas of medical genetics and counseling. They are board certified by the National Board of Genetic Counseling. Genetic counselors work as members of a health care team, providing information and support to families who have members with birth defects or genetic disorders and to families who may be at risk for a variety of inherited conditions. They serve as patient advocates and educators for other health care professionals and for the general public.

The American Medical Association (AMA) has recently approved a CPT® (Current Procedural Terminology) code for Genetic Counseling in recognition of the value of genetic counseling in the practice of medicine. These codes can only be used by licensed health professionals. Licensure is the first necessary step toward establishing genetic counselors as allied health professionals that may someday receive reimbursement from third party payors for the services they provide to patients. At this time, most genetic counselors in Hawai'i are not reimbursed for their services, making it difficult for hospitals and clinics to support these services. Just as physicians and nurses have both board certification and state licensure, so should genetic counselors.

Heightened public awareness, coupled with scientific advances in adult disorders and reproductive technologies, have increased the demand for genetic counselors. Genetic counselors are the primary source in Hawai'i to assist patients and their physicians who have questions about indications for genetic testing, validity of testing, reliability of laboratories providing genetic testing, and interpretation of genetic test results. The recent explosion of direct to consumer genetic testing truly underscores the need for the public to be able to recognize who is qualified to provide genetic counseling services and to interpret genetic test results.

Thank you for allowing me the opportunity to provide testimony in support of **HB 1362, HD1**.


Linda Cheng, MS, CGC

State of Hawaii
House of Representatives Committee on Consumer Protection and Commerce

HB 1362 HD1 RELATING TO GENETIC COUNSELORS
Wednesday, February 18, 2009
2:00 pm
State Capitol Building Conference Room 325

To the Honorable Rep. Robert H. Herkes, Chair, Glenn Wakai, Vice-Chair, and members of the Committee on Consumer Protection and Commerce:

Thank you for the opportunity to provide testimony on HB 1362 HD1. **I strongly support the passage of HB1362 HD1, which establishes a licensure program for genetic counselors.**

I respectfully request that the committee consider amending HB1362 HD1 so that the regulatory body is DOH. DOH is the best agency to regulate this program because they have the expertise and manpower, who are already salaried at DOH to execute the process. Given the economic crisis, this is a cost containment issue and using DOH as the regulatory body, will keep cost down.

Every day, more genetic tests are being offered by providers and marketed directly to the consumer (Direct-to-Consumer Testing). Well-funded companies have begun offering genome wide scans for under \$500. The public may not understand the consequences of the testing and will need to be able to find trained professionals to help them decide what tests may give them useful information and help them understand the test results.

Licensure provides the ability to remove a genetic counselor's right to practice if he/she is found to be incompetent. Genetic counselors are involved in ethically charged areas of reproductive and medical decision-making. Ensuring ethical and competent practice is a safeguard against improper use of genetic information. With no state regulation, incompetent genetic counselors cannot be restricted from practicing. This leaves families in Hawai'i vulnerable to physical and psychological harms.

Most genetic counselors in Hawai'i are not reimbursed for their services, making it difficult for hospitals and clinics to support these services. Neighbor island families who have the least access to subspecialty health services may receive inaccurate or NO genetic counseling leading to unnecessary genetic tests, or they may not be given access to testing. Licensure would be the first step towards genetic counselor reimbursement, making genetic counseling more affordable while ensuring quality health services are accessible to the public.

From the explosion of direct-to-consumer genetic testing to the issues surrounding accessible health care services in Hawai'i, licensure is needed to ensure access to quality specialty genetic counseling services in our state.

Sincerely,

Elaine White, M.S., C.G.C.
1617 South Beretania Street, Apt. #1102
Honolulu, Hawaii 96826
808-927-1139

Committee on Consumer Protection and Commerce
HB 1362, HD1, Relating to Genetic Counselors
Wednesday February 18, 2009
2:00 PM, Conference Room 325

To the Honorable Chair Robert N. Herkes and Members of the Committee on Consumer Protection and Commerce:

I strongly support **HB 1362, HD1**, relating to professional licensure of genetic counselors. Genetic counselors work as members of a health care team, providing information and support to families who have members with birth defects or genetic disorders and to families who may be at risk for a variety of inherited conditions.

The American Medical Association (AMA) has recently approved a CPT® (Current Procedural Terminology) code for Genetic Counseling in recognition of the value of genetic counseling in the practice of medicine. These codes can only be used by licensed health professionals. Licensure is the first necessary step toward establishing genetic counselors as allied health professionals that may someday receive reimbursement from third party payors for the services they provide to patients. At this time, most genetic counselors in Hawai'i are not reimbursed for their services, making it difficult for hospitals and clinics to support these services. Just as physicians and nurses have both board certification and state licensure, so should genetic counselors.

Heightened public awareness, coupled with scientific advances in adult disorders and reproductive technologies, have increased the demand for genetic counselors. Genetic counselors are the primary source in Hawai'i to assist patients and their physicians who have questions about indications for genetic testing, validity of testing, reliability of laboratories providing genetic testing, and interpretation of genetic test results. The recent explosion of direct to consumer genetic testing truly underscores the need for the public to be able to recognize who is qualified to provide genetic counseling services and to interpret genetic test results.

Thank you for allowing me the opportunity to provide testimony in support of **HB 1362, HD1**.

NAME (SIGNATURES ON FILE)	TITLE
Acoba, Jared, MD	Physician, Oncology
Aeby, Tod, MD	Physician, Obstetrics/Gynecology
Akaka, Gerard K, MD	Vice President, Medical Affairs Chief Medical Officer
Ayabe, Ronald, MD	Physician, Obstetrics/Gynecology

Testimony in support of HB 1362, HD1

For a copy of signatures on file, contact Linda Cheng (doublehelix2000@hotmail.com)

1

Bakhshi, Tiki, MD	Physician, Obstetrics/Gynecology Tripler Army Medical Center
Bales, Denny, MD	Physician, Cardiology
Behjati, K, MD	Physician, Nuclear Medicine
Berenberg, Jeffrey L, MD	Chief, Hematology/Oncology Services Tripler Army Medical Center
Boyle, KJ, MD	Physician, Obstetrics/Gynecology Tripler Army Medical Center
Brown, Vincent, MD	Physician, Radiation Oncology
Bryant-Greenwood, Peter, MD	Pathologist, Hawaii Pathologists Laboratory Director, Molecular Diagnostics Vice Chair, Department of Pathology, John A. Burns School of Medicine (JABSOM)
Cadman, Ed, MD	Former Dean, John A. Burns School of Medicine (JABSOM)
Camara Jr., Edward	Patient
Castillo, Marisia	Oncology Data Registry
Chadwick, Darlena, RN, MSN	Vice President, Oncology, Women's Health & Professional Services
Chen, Bruce, MD	Physician, Maternal Fetal Medicine
Chen, Chao, MD	Physician, Obstetrics/Gynecology
Cho, Jonathan, MD	Physician, Medical Oncology Cancer Research Center of Hawaii
Chong, Clayton, MD	Physician, Medical Oncology
Coel, Marc, MD	Physician, Radiology
Dao, Franklin, MD	Physician, Obstetrics/Gynecology
DeMare, Paul, MD	Physician, Radiation Oncology
Doi, Deanne	Oncology Conference Coordinator
Emura, Steven, MD	Assistant Professor, John A. Burns School of Medicine, Department of Obstetrics, Gynecology and Women's Health
Fischberg, Daniel, MD	Physician, Palliative Care
Fujita, Nathan, MD	Physician, Obstetrics/Gynecology

Testimony in support of HB 1362, HD1

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Furuike, Alvin, MD	Physician, Pulmonology
Gloeb, Jay, MD	Physician, Maternal Fetal Medicine
Goldstein, Norman, MD	Physician, Dermatology
Grace, Nalani	Medical Student
Halford, Peter, MD	Physician, Surgery
Hemmings, Daphne, MD	General Surgeon & Assistant Professor Medicine/Surgery
Hew, Denise, MD	Physician, Obstetrics/Gynecology
Higuchi, Carl, MD	Physician, Medical Oncology
Hill, Christina, MD	Physician, Maternal Fetal Medicine
Hirata, Blyth, RN	Registered Nurse
Hirata, Greigh, MD	Physician, Maternal Fetal Medicine
Huddleston, Christine	Sonographer (Obstetrics and Gynecology)
Humphrey, Terri	Sonographer
Huynh, Thanh, MD	Physician, Radiation Oncology
Ihara, Karla	Clinical Operations Manager
Ishihara-Wong, Debra	Director, Oncology
Kaaihue, Michelle	Patient Navigator Associate
Kawahara, Kaye, MD	Physician, Medical Oncology
Kelleher, Tim, RN	Registered Nurse
Kelsey, Constance, MA	Contract Coordinator, Revenue Management
Kessel, Bruce, MD	Physician, Gynecology
Kimbell, Jennifer, PhD	Research Development

Testimony in support of HB 1362, HD1

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Scott Kuwada, MD	Professor of Medicine John A. Burns School of Medicine (JABSOM)
Kwee, Sandi, MD	Medical Staff Physician
Lakey, Terry	Sonographer (Obstetrics and Gynecology)
Lau, Lorrin, MD	Physician, Obstetrics/Gynecology
Lau, Melanie, MD	Physician, Gynecology
Lederer, John, MD	Physician, Radiation Oncology
Lisehora, George, MD	Physician, Surgery
London, Eris	Nurse Practitioner, Women's Health
Loui, William, MD	Physician, Hematology-Oncology
Lum, Chris, MD	Physician, Director of Dermatopathology
Ma, Adrienne	Medical Student
Magee, Maggie	Registered Nurse
Matsuo, Alison	Manager, Cancer Center
Montero, Winston, MD	Resident Physician
Moon, Scott, MD	Physician, Radiation Oncology
Morita, Shane, MD	Physician, Surgical Oncology
Morris, Paul, MD	Physician, Surgery
Murunaka, Wanda, MD	Registered Nurse
Nakano, Gordon, MD	Physician, Hematology-Oncology
Nakasone, Ken, MD	Physician, Obstetrics/Gynecology
Ng, Karen, RN	Registered Nurse
Nishi, Steven, MD	Physician, Obstetrics/Gynecology
Nishioka, Jocelyn	Oncology Patient Navigator

Testimony in support of HB 1362, HD1

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Ohtani, Robb, MD	Physician, Obstetrics/Gynecology
Onizuka, Lisa	Sonographer
Pang, Laeton, MD	Physician, Radiation Oncology
Raddcliffe, Christine	Registered Nurse
Sardinha, Darlene	Administrative Secretary, Cancer Center
Sato, Norman, MD	Physician, Obstetrics/Gynecology
Sato, Renee, MD	Physician, Obstetrics/Gynecology
Seaver, Laurie, MD	Physician, Medical Geneticist
Shaeffer, David, MD	Physician
Shimizu, David, MD	Physician, Pathology
Silva, Jana, MD	Physician, Maternal Fetal Medicine
Stary, Creed, MD, PhD	Resident Physician
Sweeney, Henry, MS	Clinical Research
Takanishi, Danny, MD	Physician, Surgical Oncology
Tauchi-Nishi, Pamela, MD	Physician, Associate Director of Pathology
Teruya, Thomas, MD	Physician, Obstetrics/Gynecology
Thompson, Diane, MD	Medical Director, The Queen's Medical Center Women's Health Center
Tokairin, Dorn, MD	Physician, Obstetrics/Gynecology
Tom, James, MD	Physician, Clinical Research Associate
Tsai, Lynette, MD	Physician, Obstetrics/Gynecology
Tsukenojo, Melissa	Sonographer (Obstetrics and Gynecology)
Varcadipane, Joseph C, MD	Resident Physician

Testimony in support of HB 1362, HD1

5

For a copy of signatures on file, contact Linda Cheng (doublehelix2000@hotmail.com)

Wakai, Coolidge S, MD	Physician, Cardiovascular Diseases
Warren, Mika, MD	Pathologist
Weaver, A Michelle	Data Oncology Registry
Wilburn, Andrea	Oncology Patient Navigator
Wong, Grace, MD	Physician, Obstetrics/Gynecology
Woodruff, Kelley, MD	Physician, Hematology-Oncology
Yamada, Stacy	Clinical Dietician
Yamashiro, Charles, MD	Physician, Radiation Oncology
Yoshino, Harry, MD	Physician, Obstetrics/Gynecology
Yost, Fredrick, MD	Physician, Surgery
Zhang, Lei, MD, PhD	Resident Physician

Testimony in support of HB 1362, HD1

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**State of Hawaii
House of Representatives
Committee on Consumer Protection and Commerce**

HB 1362 HD1 RELATING TO GENETIC COUNSELORS

Wednesday, February 18, 2009

2:00 pm

State Capitol Building Conference Room 325

To the Honorable Rep. Robert H. Herkes, Chair, Glenn Wakai, Vice-Chair, and members of the Committee on Consumer Protection and Commerce:

Thank you for the opportunity to provide testimony on HB 1362 HD1, which establishes a licensure program for genetic counselors. I offer my testimony as a physician Medical Geneticist, and I strongly support the passage of HB 1362 HD1.

As a medical geneticist, a physician who works closely with genetic counselors on a daily basis, **I strongly support HB 1362 HD1 relating to the professional licensure of genetic counselors.** Genetic counselors are a vital part of the healthcare team that provides care to individuals throughout the lifespan. Genetic counselors are frequently the primary providers of genetic information and counseling to pregnant women whose babies are at risk for birth defects and other genetic conditions. They are also the primary provider of genetic risk assessment for men and women with cancer or a significant family history of cancer. Genetic counselors also assist me as I evaluate and manage children and adults with heritable conditions.

Licensure would protect the public by ensuring that genetic counseling is provided only by individuals with the high level of training and certification that genetic counselors possess. A board-eligible or board-certified genetic counselor has a Master's Degree in Genetic Counseling which includes the science of genetics, psychosocial, legal and ethical aspects of genetics, and extensive supervised direct patient contact. They are certified by the American Board of Genetic Counseling or the American Board of Medical Genetics. They are required to maintain their certification and excellence in the rapidly changing field of human genetics by continuing education credits. The licensure of genetic counselors does not restrict any physician from providing counseling to their patients regarding hereditary diseases or risk factors, but a physician would not categorize himself or herself as a "genetic counselor" but instead as a physician and bill and expect reimbursement, as for any other type of medical office visit or consultation.

The ability for the public to identify an appropriately trained genetic counselor is increasingly important because of the explosion of direct-to-consumer (DTC) marketing of genetic testing. During the time that licensure of genetic counselors in Hawaii has been studied, a special report was commissioned by the U.S. Senate Special Committee on Aging regarding DTC marketing of genetic testing. Sen. Gordon Smith from Oregon noted during this hearing, **"I am deeply disturbed by the GAO's finding that consumers are being misled and exploited."**

RELATING TO GENETIC COUNSELORS

HB 1362

Page 2

Laurie H. Seaver, MD

Licensed genetic counselors are crucial as the primary source to assist patients and their physicians who have questions about indications for genetic testing, validity of testing, reliability of laboratories providing genetic testing, and interpretation of genetic test results. Even when genetic tests are medically indicated, there is abundant documentation of the lack of genetic knowledge in non-genetics health care providers at all levels who often do not understand the indications, benefits, limits and risks of genetic testing, nor do they know how to interpret the results. Genetic counselors are crucial members of our health care team to assist physicians and patients with information and counseling before and after genetic testing.

In recognition of the value of genetic counseling in the practice of medicine, the AMA has recently approved a CPT® (Current Procedural Terminology) code for Genetic Counseling. These codes can only be used by licensed health professionals. Licensure of genetic counselors is necessary in order for genetic counselors to bill for their services. Currently, hospitals or clinics have to subsidize this cost, which places these positions at risk with every budget cycle. We are all aware of the health care crisis in Hawaii, and that hospitals are increasingly abandoning such "non-billable", but yet vital, health care services. Licensure ensures the sustainability of genetic counselors in our hospitals; with licensure, Hawaii will likely lose genetic counselors to states that have licensure and where their services can thus be recognized and sustained within the healthcare setting.

Licensure of genetic counselors has the potential to reduce healthcare costs since genetic counselors are reimbursed at a lower rate than physicians. Further, there are not enough trained genetic physicians to provide all genetic services and counseling necessary in most communities. This is especially true in Hawaii, where, for several years there was no physician medical geneticist to care for children and non-pregnant adults. During this time, the genetic counselors provided vital communication and consistency to patients who were being seen by mainland physicians. **Genetic counselors are currently providing vital prenatal and cancer genetic counseling on the neighbor islands**, where there are no other genetic service providers except for my outreach clinics (only one clinic day a month rotating to different islands).

I hope that the State of Hawaii joins several other states that have passed Genetic Counselor Licensing bills, and several other states that are currently poised to pass similar legislation. These states are leaders in recognizing the importance and complexity of the genetic contribution to health and human disease and the need for highly qualified health care providers. The cost of such a licensure program for the State of Hawaii should be low, since the eligible genetic counselors are already passed national certification after stringent eligibility requirements and there are currently less than 20 genetic counselors in Hawaii that require licensure.

Thank you for allowing me the opportunity to provide testimony in support of HB 1362.

Laurie H. Seaver, MD
19 Ilikupono St.
Kailua, HI 96734
254-1819