

SB 2468

Measure Title: RELATING TO PODIATRISTS.
Report Title: Podiatrists; Podiatry; Minimum Residency Requirements; Licensure
Description: Adopts the national standard of a minimum of twenty-four months in an accredited podiatric residency prior to licensure as a podiatrist, beginning on 01/01/2015.
Companion: HB1882
Package: None
Current Referral: CPN
Introducer(s): BAKER, Ige, Taniguchi

**PRESENTATION OF THE
HAWAII MEDICAL BOARD**

**TO THE SENATE COMMITTEE ON
COMMERCE AND CONSUMER PROTECTION**

**TWENTY-SEVENTH LEGISLATURE
Regular Session of 2014**

**Wednesday, February 12, 2014
9:00 a.m.**

WRITTEN TESTIMONY ONLY

TESTIMONY ON SENATE BILL NO. 2468, RELATING TO PODIATRISTS.

**TO THE HONORABLE ROSALYN H. BAKER, CHAIR,
AND MEMBERS OF THE COMMITTEE:**

My name is Constance Cabral, and I am one of the Executive Officers of the Hawaii Medical Board ("Board"). Thank you for the opportunity to provide written testimony on Senate Bill No. 2468, Relating to Podiatrists. The Board has not had an opportunity to discuss this bill, but will do so at its next meeting on February 13, 2014. Therefore, the Board is not able to offer comments on the proposed amendments.

Thank you for the opportunity to provide written testimony on Senate Bill No. 2468.



THE LEGISLATIVE CENTER

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February 12, 2014

Testimony To: Senate Committee on Commerce and Consumer Protection
Senator Rosalyn H. Baker, Chair

Presented By: Tim Lyons, Legislative Liaison
Hawaii Podiatric Medical Association

Subject: S.B. 2468 - RELATING TO PODIATRISTS

Chair Baker and Members of the Committee:

I am Tim Lyons, Legislative Liaison for Hawaii Podiatric Medical Association and I have been assisting the members of the HPMA with the bill before you today.

I would like to recommend that you consider an amendment to SB 2468 in order to accommodate those doctors who have been licensed previously and became so with a residency less than what is called for in this bill because that was the standard at that time. This could happen in a variety of situations such as an individual that left Hawaii and let it lapse after a number of years but now finds himself back in Hawaii again pursuing his practice. This could also happen to someone who had a change of heart

(perhaps out of necessity) about retirement and then needs to reenter the field. In essence what is needed is a grandfather clause to reduce the time period for the minimum residency to one (1) year or twelve (12) months which everyone in practice today has satisfactorily completed.

Thank you for your consideration.

Testimony to: Senator Rosalyn H. Baker, Chair
Senate Committee on Commerce and Consumer Protection
Subject: SB 2468-Relating to Podiatrists
Presented by: Dr. Robert LaReaux, President, Hawaii Podiatric Medical Association
Chair Baker and Members of the Committee:

I am Dr Robert LaReaux, representing the Hawaii Podiatric Medical Association and we support this bill.

The standard for the last ten years is that all podiatrists complete a 36 month residency program.

Licensure for MD's and DO's in Hawaii requires completion of an approved 12 month residency (24 months if foreign trained). The podiatry residency requirement, as written in Hawaii state law, is unenforceable and needs revision.

The new bill we are proposing will require podiatrists to complete at least a **24** month accredited residency program for licensure. **44 states** have residency requirements of either 12 or 24 months, similar to the revisions we are proposing for Hawaii. The majority call for a minimum of 12 months for licensure.

Amending this bill to a **12** month residency requirement , avoids all issues of grandfathering and we would support this change to our bill.



Maui Medical Group, Inc.

Health Care Excellence For Maui Since 1961

2/10/2014

Request for Support

Hawaii State Senate Bills 2467 and 2468

Aloha,

The Hawaii Podiatric Medical Association has submitted two vital health care bills to legislation. We are requesting passage of these bills to allow equal economic opportunity for equal medical training and expanded privileges to allow better continuation of care for our needful and large Hawaii Diabetic Population.

Bill 2468 is asking to add a requirement of completing an accredited residency program in order to obtain a license for podiatric medicine for the state of Hawaii. Most all other states have already the same requirement in place.

Bill 2467 is in regards to scope of practice for podiatrists. Podiatrists, have extensive training, experience and qualifications to perform all levels of foot, ankle and lower leg surgery. The bill allows podiatrists to perform to the level of the foot and ankle as they are trained. As with any scope of practice issue, the individual surgeon must provide the proper documentation of residency training, board qualification/certification and undergo the appropriate granting of privileges, proctoring and peer review by the surgical facility in which they practice.

Thank you for supporting our efforts in regards to the Hawaii State Bills 2467 and 2468 and our efforts to ensure the most up to date quality foot and lower extremity care for our Hawaii Ohana.

Mahalo,

Dr. Steven King
 Maui Medical Group Inc. Member and Co-Owner
 Hawaii and American Podiatric Medical Associations Member
 Maui Memorial Medical Center Staff Member
 Aloha Surgery Center Staff Member
 Co-Principal Investigator SBIR A11-109 US Department of Defense and Army Medical
 Research and Materials Command "Advanced Composite Combat Boots for Reduction of Stress
 Fractures"
 Managing Member Kingetics LLC- a veteran owned Hawaii Small Business

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Maui Medical Group, Inc.

Health Care Excellence For Maui Since 1961

February 5, 2014

To Whom It May Concern:

The Board of Directors of Maui Medical Group supports and encourages the passing of Hawaii State Bills 2467 and 2468.

The Maui Medical Group has 4 satellite clinics comprising of 64 providers and 250 employees servicing approximately 45,000 patients on the island of Maui.

William H. Mitchell, MD
President, CEO

WAILUKU: 2180 Main Street, Wailuku, Maui, Hawaii 96793 / Telephone: 242-6464 / Fax: 244-0603
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TO: SENATOR BAKER, SENATOR TANIGUCHI/COMMITTEE ON COMMERCE AND CONSUMER PROTECTION

FROM: GREGORY MORRIS, DPM/ PODIATRY ADVISORY COMMITTEE

RE: HAWAII STATE BILLS 2467 AND 2468

FEBRUARY 10, 2014

Dear Senators Baker and Taniguchi/Committee on Commerce and Consumer Protection:

In regards to Hawaii State Bills 2467 and 2468 concerning podiatrists, the podiatry advisory committee for the Hawaii State Medical Board has the following recommendations.

State Bill #2468 is in regards to setting an additional standard/minimum requirement for obtaining a medical license to practice podiatric medicine in Hawaii. Currently, there is no requirement for residency or internship completion by an approved residency after completing and graduating from a 4 year podiatric medical education. It is now mandatory in most all other states to complete an accredited podiatry residency in order to obtain a license to practice podiatric medicine. Residency training for podiatrists is now a uniform three-year residency training program. In the past, podiatry residencies varied from 1-3 years in length, but have now all been changed to 3 years in order to provide uniform and consistent training among all graduating podiatric surgeons. The bill is recommending a minimum of a 2 year/24 month accredited residency completion prior to obtaining a medical license for the state of Hawaii. This will allow for podiatrists whom completed residencies in the past to obtain licenses in Hawaii if they completed the previous typical two-year residency program. The doctors of podiatric medicine who already have licenses to practice in Hawaii, will be exempt from the residency requirement. Once again, most of the states have already adopted a similar requirement to obtain licenses and I believe a good measure to continue to have high quality doctors of podiatric medicine here in Hawaii.

State Bill #2467 is in regards to correcting the surgical and nonsurgical scope of practice for doctors of podiatric medicine for Hawaii. As discussed in Bill #2468, all new doctors of podiatric medicine are required to complete a 3 year residency program where they are thoroughly trained in dealing with all surgical and nonsurgical issues of the foot, ankle and lower leg. Most doctors of podiatric medicine who have graduated in the past 15 years completed a similar 2 or 3 year residency program with the same sort of training. The current scope of practice for doctors of podiatric medicine in Hawaii has limited our surgical and nonsurgical care of our patients and not allowed us to practice medicine and surgery to the extent of our training and abilities.

A large portion of podiatric care is dealing with the diabetic population. Unfortunately, podiatrist perform an extensive amount of wound care, surgical debridements, and amputations of the diabetic foot. The current scope of practice states that we are only allowed to perform digital amputations. Often times, patients require further surgical debridement or amputations which are well within our training, abilities, and experience but we are unable to properly care for these patients. We have been taking care of these patients often times for years and are best trained to deal with surgical debridement and amputations, but are unable to help them. It is often difficult to find another surgeon willing to take on such patients, especially when it is urgent. Also, it is difficult for the patient to meet a new surgeon who will have to amputate, which is always psychologically difficult and horrible continuity of care for the patient. Most podiatric surgeons in Hawaii work closely with the vascular surgeons, orthopedic surgeons, general surgeons and wound care centers and would be even more beneficial to the medical community if we are allowed to perform surgery to level that we were trained. Therefore, the bill is requesting surgical amputation and debridement of the foot to level of the ankle.

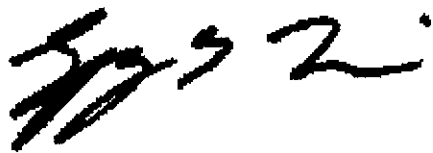
Besides increasing the level of amputation of the foot, we are requesting allowing for all ankle surgery. Currently, podiatric surgeons are unable to perform ankle fractures as written in the state law scope of practice. We have also been denied the ability to perform ankle fusions and ankle implants secondary to interpretation of the state law scope of practice by the foot and ankle orthopedic surgeons, which I have mentioned in the past I believe is a restriction of trade and conflict of interest to have podiatric surgeons ability to practice determined by their competitor. By correcting the scope of practice and allowing podiatric surgeons to perform all ankle surgeries, this would not only allow doctors of podiatric medicine to perform to the extent that they were trained and to the national standards and

norms, but would also allow for the greater good for the patients of Hawaii. Especially, on the outer islands but also here on Oahu, as some insurances and Worker's Compensation patients are often neglected secondary to lack of properly trained foot and ankle surgeons. Also, fair competition amongst podiatric surgeons and orthopedic surgeons that specialize in foot and ankle procedures can only benefit the people of Hawaii. Fair and equal competition amongst surgical specialties typically produces the best results. Patients would then be able to be treated for their ankle conditions by whichever surgeon they deem is the best for them, regardless of their medical degree whether it be an allopathic, osteopathic, or podiatric surgeon.

The third portion of the scope of practice deals with the soft tissue of the lower leg/below the knee, which governs the function of the foot. Most all of the muscles and tendons which govern the function of the foot arise from the lower leg. In order to correct many foot and ankle conditions, injuries and pathologies, podiatrists are required to perform surgical and nonsurgical treatment of the lower leg. Also, as mentioned previously, doctors of podiatric medicine treat diabetic, vascular, and other difficult wounds of the foot and leg. Clarification of being able to treat leg wounds combined with surgical treatment of the muscles, tendons, and soft tissues of the lower leg would greatly benefit podiatric surgeons.

Thank you again for allowing the podiatry advisory committee to review and give recommendations on the Hawaii State Bill 2467 and 2468. Both of these bills have been long overdue in order to allow doctors of podiatric medicine to best help the medical community and people of Hawaii. Both of these bills will continue to help strengthen the practice of podiatric medicine and surgery for Hawaii and continue to help bring new, young, well-trained doctors of podiatric medicine who may be reluctant to move to Hawaii to practice secondary to the restriction of their trade.

Sincerely,

A handwritten signature in black ink, appearing to read 'Gregory Morris', with a stylized flourish at the end.

Gregory Brett Morris, D.P.M.

Fellow, American College of Foot and Ankle Surgeons
Board Certified in Foot Surgery
Board Certified in Reconstructive Foot and Ankle Surgery
Hawaii Medical Board, Advisory Committee

Re: Relating to Podiatry: HB 1880/1882 and SB 2467/2468

Position: Support

Healthcare is changing. Medical care has become more specialized and focused in order to create and maintain a level of care that is required to continually deliver the highest quality care to every patient.

Podiatrists have become the primary providers of foot and ankle surgery. Training has changed over the past 20 years to create an environment where podiatrists are an essential part of a well-rounded healthcare team. The ever increasing diabetes population relies on the specialized foot and ankle care that podiatrists provide to ensure comprehensive care for hospital and outpatient care.

I moved back home to Kauai in 1999 and joined Kauai Medical Clinic and became a part of the Allied Healthcare Staff at Wilcox Memorial Hospital. After establishing myself to be an essential part of the healthcare team, hospital policy was revised to allow podiatrists to become part of the medical staff of Wilcox Memorial Hospital. Together with several orthopedic surgeons and a physiatrist, in 2004 we established the Bone and Joint Center at Kauai Medical Clinic to provide comprehensive care for the people of Kauai as well as our large visitor population.

Current Hawaii state law does not reflect the current standard of training and ability of podiatrists. Current law restricts podiatrists from doing "any amputation, except for digital amputation". Obviously, this law is outdated and does not reflect the current standard for the rest of the country. I know that I am the best trained and qualified to treat my diabetic patients, and I believe my colleagues on the medical staff at Wilcox Memorial Hospital know that no one is more passionate about healing these complicated wounds than myself.

The proposed bills allow podiatrists to perform to the level of the foot and ankle as they are trained. In fact, **45** states allow podiatrists to provide comprehensive foot and ankle care. In the esteemed orthopedic journal, Journal of Bone and Joint

Surgery America in 2012, Augusto Sarmiento, MD from the University of Miami School of Medicine wrote:

"...podiatrists, who for generations had limited their work to minor surgeries of the toes, managed, over a very short period of time, to become doctors/surgeons who currently care for patients with all types of musculoskeletal conditions below the knee. They treat traumatic injuries as well as degenerative, infectious, and congenital diseases with clinical and surgical means. They perform internal fixation of fractures of the tibia, ankle, os calcis, hindfoot, and forefoot. In addition, they perform total ankle arthroplasties and tendon transfers. In the process, they have become experts in the field to the point that it is ludicrous to argue that their qualifications do not allow them to cover such a wide territory."

Even locally, Dr Cass Nakasone of Straub Hospital submitted testimony regarding HB1880 on February 5, 2014:

"We certainly do not have enough fellowship trained orthopedic foot and ankle surgeons in Hawaii. There is a huge amputation burden due to our large diabetic population. Amputation are simple operations when compared to most foot and ankle surgeries. If the podiatrists want more surgical freedom, then with it should come more surgical responsibility. Allow them to perform amputations mid tibia and below so that they can help with the burden of the diabetic foot population and also have the privilege to perform a drastic surgery to resolve incurable complications of foot and ankle surgery."

I am the only full time resident podiatrist on Kauai and I have an overwhelming population of patients in need of care. It is not unusual for a patient with foot pain to wait 3 months for a consultation. I would like to have a skilled surgical foot and ankle partner, but the best trained podiatrists find the Hawaii state law to be prohibitive and restrictive. In fact, my group has tried for several years to hire an orthopedist interested in the foot and ankle, but that has proved very difficult.

I have dedicated my professional life to providing the best podiatric foot and ankle care to the residents and visitors of Kauai. I was raised on Kauai and graduated from Kauai High School. Coming home to serve the people of Kauai has been wonderful, and I plan to continue to work to keep medical care on Kauai and in Hawaii up to the standards of modern medicine in 2014.

Hawaii is one of the last 5 states restricting the ability of skilled podiatrists to care for patients appropriately, and it is time to revise our state standards.

Thank you for your time and consideration.

Tyler Akira Chihara, DPM, FACFAS

Bone and Joint Center at Wilcox Health
Medical Staff, Wilcox Memorial Hospital
Treasurer, Hawaii Podiatric Medical Association

RE: SB 2467 and SB 2468

I am writing in support of SB 2467 and SB 2468. Currently, Hawaii is one of just a handful of states that do not allow the scope of practice (SB 2467) and the requirement for practicing in Hawaii (SB 2468) to be on par on a National level. I know you have read through several written testimonies with supporting evidence regarding the basis of these Bills and my testimony in support is generated through my 24 years of being a Podiatrist in private practice.

I am a former Clinical Faculty Member with the John A. Burns School of Medicine, Department of Family Medicine and Community Health and I have had numerous Family Practice Residents rotate through my office. I also participate with several Podiatry schools in allowing Podiatric Residents (who are Hawaii residents) rotate through my practice. Having both the Family Practice Residents and the Podiatric Residents rotate through my office has made me feel very assured that medicine and health care in Hawaii is going in the right direction. However in the real world and unfortunately for Hawaii and JABSM, there is a shortage of Family Practice Residents. Those that do complete their program do not stay here to practice due to economic restraints and we are losing very good Primary care providers. Podiatry in contrast is unable to harbor local talent and I tell my Podiatry Residents, who have rotated through my office, that you should practice where you want to live. And yes, all of them want to come home but the current scope of practice is limited and their talents of providing top-notch podiatric care would go for none. Podiatry is an important member of the health team – be it with diabetic foot care and limb salvage or with acute foot and ankle trauma – and both Bills are being brought up for legislation as the Podiatric profession has progressed significantly and is well established on the National level.

Thus far, I have seen how health care in Hawaii has changed – all for the better. Thank you for letting me provide written testimony.

Sincerely,

Michael K.Y. Chun, DPM
Private Practice
Pali Momi Medical Center
98-1079 Moanalua Rd, Ste #400
Aiea, Hawaii 96701
808-488-8101

February 10, 2014

Testimony to: Senator Rosalyn H. Baker, Chair
Senate Committee on Commerce and Consumer Protection

Subject: SB 2468—Residency requirement of state licensure

Presented by: Liane Lin-Watanabe, DPM
New PMSR/RRA graduate

Chair Baker and Members of the Committee:

I am Liane Lin-Watanabe, DPM, a November 2013 graduate of a three-year podiatric medicine and surgery residency program with the added reconstructive rearfoot and ankle credential, and I support these bills.

Regarding the residency requirement for state licensure, please consider how podiatric medical education and training are lead by the Council on Podiatric Medical Education.

The CPME is an autonomous accrediting agency for podiatric medical education. Deriving its authority from the House of Delegates of the American Podiatric Medical Association, the Council is empowered to develop and adopt standards and policies as necessary for the implementation of all aspects of its accreditation, approval, and recognition purview.¹

Note that on July 1, 2011, the CPME formally increased the national residency standard from two-year and three-year residencies in Podiatric Medicine and Surgery (PM&S-24 and PM&S-36) to a single three-year residency—the Podiatric Medicine and Surgery Residency (PMSR). Furthermore, as dictated by the CPME, “residencies that can provide a sufficient volume and diversity in reconstructive rearfoot and ankle (RRA) procedures may grant an added RRA credential.”²

Therefore, adopting the national residency training standard or at least a minimum requirement for state licensure will help to maintain and attract well-trained podiatrists to Hawaii.

I appreciate your time and consideration. Thank you for allowing my testimony.

Sincerely,
Liane Lin-Watanabe, DPM

¹ cpme.org

² cpme.org

Senators Baker and Taniguchi, and Members of the Committee:

I am Linda Ho practicing podiatrist and I support this bill. I was born and raised here, a proud graduate of Pearl City High School Class of 2002, and I studied in the mainland, always with the intent of going home to bring back and contribute what I was able to find as my purpose in life back home. As fate would have it, the path lead to podiatric medicine. Podiatric medicine is a profession that is an untapped resource whose potential can only bring benefit to the people of Hawaii. With Hawaii's population of growing diabetic patients, Hawaii's population of increasingly active seniors with the baby boomers, our generalized population of proudly barefooted walkers, it is our profession that helps keep our nation healthy and on their feet. These two bills SB 2467 and 2468 will assist with fortifying our profession's goal to uphold the quality of care that Hawaii's people deserve to keep them on their feet: to ensure that qualified and trained podiatrists can fully demonstrate what we were trained to do from an either 24 month or 36 month residency. I have colleagues who are also Kama'aina who are training in the mainland, with the intention to return home to indeed serve our home. I am hopeful that these bills will enable them to fill the constant brain drain that this state is suffering from.

In addressing the concerns presented at the last hearing, the main point I would like to drive home is the opportunity that these bills offer is to increase the chance for newly trained podiatrists to demonstrate what further training and skills that have been developed to improve the care of the people of Hawaii. Innovation brings the SINGLE chance of improvement and change...fear and apathy established with the status quo promises no offer of change and improvement. If it is the opinion that the current foot care for the people of Hawaii is of contention, closing the doors on bringing new talent only fosters this negative attitude. It is not an issue of self interest that I offer this testimony: rather it is from bearing witness to multiple hands other than mine that offer the skill and care that we all want for our community. I want to give that opportunity to those I've seen heal, and I dont' want the people of Hawaii to be robbed of that opportunity.

Thank you for your consideration.

Linda Ho DPM

Sandra Au, DPM
Aloha Foot Centers

Testimony to: Senator Baker, Committee on Commerce and Consumer Protection

Date and time of hearing: February 12, 2014 9:00am

In support of SB 2468 – Relating to Podiatrists

Chair Baker and members of the Committee:

My name is Sandra Au, I am a podiatrist practicing on the Windward side of the island and I support this bill. I graduated from a 3 year residency and the current standard for podiatric graduates is a 36 month residency. A few years ago the minimum was a 24 month residency but currently all podiatric residencies are 36 months. I support the change to require a residency in order to obtain a Hawaii state license. A residency requirement is the standard in state laws across the nation and this will ensure that only well trained graduates will be able to practice in Hawaii.

Thank you for your time and consideration and allowing my testimony.

Sincerely,
Sandra Au, DPM
Aloha Foot Centers

Chair Baker and Committee Members

I support SB2468.

This is intended to bring Hawaii up to par with other states in regards to the residency requirement. The intent is to prevent Hawaii from becoming a haven for those with less than desirable amount of training.

Thank you

Dr. Rand D. Mundo

Senator Rosalyn H Baker, Chair
Senate Committee on Commerce and Consumer Protection

Dear Senator,

I wish to document my support for bills SB2467 and SB2468, relating to Podiatrists. This is vital to ensure high quality Podiatrists in the future for Hawaii.

Sincerely,

Steven Garon MD
Hilo, Hawaii
garonzzz@aol.com

Testimony to: Senator Rosalyn H. Baker, Chair
Senate Committee on Commerce and Consumer Protection
Subject: SB 2468-Relating to Podiatrists
Presented by: Dr. Nathalie Sowers

Chair Baker and Members of the Committee:

I am Dr. Greg Morris and I support this bill.

Bill 2468 is simply asking to add a requirement of completing an accredited residency program in order to obtain a license for podiatric medicine for the state of Hawaii. All but a handful of states have a similar requirement in place. This will help set a baseline consistent with our allopathic colleagues.

Thank you

Testimony to: Senator Rosalyn H. Baker, Chair
Senate Committee on Commerce and Consumer Protection
Subject: SB 2468-Relating to Podiatrists
Presented by: Dr. Nathalie Sowers

Chair Baker and Members of the Committee:

I am Dr. Nathalie Sowers and I support this bill.

Our MD and DO colleagues are only required to complete at least a one-year residency. HRS § 453-4 (2013) I support this bill with the amended change to a 12 month residency minimum

Thank you

SB2468

Submitted on: 2/10/2014

Testimony for CPN on Feb 12, 2014 09:00AM in Conference Room 229

Submitted By	Organization	Testifier Position	Present at Hearing
GDPascual	Individual	Support	Yes

Comments: Position: Support I favor change from a no residency to residency trained podiatrist

Please note that testimony submitted less than 24 hours prior to the hearing, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

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