



STATE OF HAWAII  
**DEPARTMENT OF HUMAN SERVICES**

P. O. Box 339  
Honolulu, Hawaii 96809-0339

March 12, 2014

TO: The Honorable Della Au Belatti, Chair  
House Committee on Health

FROM: Barbara A. Yamashita, Deputy Director

SUBJECT: **S.B. 2469, S.D.2 - RELATING TO TELEHEALTH**

Hearing: Wednesday, March 12, 2014; 8:30 a.m.  
Conference Room 329, State Capitol

**PURPOSE:** The purpose of this bill is to require reimbursement for telehealth services to be equivalent to reimbursement for the same services provided via face-to-face contact between a health care provider and a patient; clarifies what health care providers are able to perform telehealth; and amends references to telemedicine to telehealth for consistency.

**DEPARTMENT'S POSITION:** The Department of Human Services (DHS) provides the following comments for consideration.

The DHS supports evidence-based telehealth to expand access to quality healthcare. The DHS currently covers telehealth psychiatric services and provides equivalent reimbursement for a face-to-face visit. However, the provider is required to have had at least one actual face-to-face visit prior to initiating telehealth psychiatric visits.

The DHS understands that telehealth services, properly delivered, can increase access to important medical services, but the DHS also believes that there must be a balance between safety and access, and does not support paying the same for disparate services. Payment typically follows Current Procedural Terminology methodology and is based on history, physical examination, and decision making. If a physical exam would provide important information to make a clinical assessment and plan, then a telehealth visit may limit the quality and potentially safety of the visit if a physical examination that would otherwise be performed in a face-to-face visit does not occur. This also results in providers being reimbursed at the same rate for visits in which the content and provider effort differed. However, the DHS does not oppose paying the same reimbursement for face-to-face and telehealth visits that involve comparable history, physical examination, and decision making.

The DHS has concerns that codifying how reimbursement is to be made for services could impact the Medicaid program. The DHS must obtain approval from the federal government for all services provided through the Medicaid program, including reimbursement rates. Should the State mandate a reimbursement methodology that is not approved by the Centers for Medicare and Medicaid Services, it will result in the DHS having to provide and fund those services with 100% State funds.

Thank you for the opportunity to testify on this measure.



**STATE OF HAWAII**  
STATE COUNCIL  
ON DEVELOPMENTAL DISABILITIES  
919 ALA MOANA BOULEVARD, ROOM 113  
HONOLULU, HAWAII 96814  
TELEPHONE: (808) 586-8100 FAX: (808) 586-7543  
March 12, 2014

The Honorable Della Au Belatti, Chair  
House Committee on Health  
Twenty-Seventh Legislature  
State Capitol  
State of Hawaii  
Honolulu, Hawaii 96813

Dear Representative Belatti and Members of the Committee:


SUBJECT: SB 2469 SD2 – Relating to Telehealth

The State Council on Developmental Disabilities **SUPPORTS SB 2469 SD2**. The purpose of this bill is to: (1) Require reimbursement for services provided through telehealth to be equivalent to reimbursement for the same services provided via face-to-face contact between a health care provider and a patient; (2) Clarify that a health care provider of telehealth includes primary care providers, mental health providers, and oral health providers, such as physicians and osteopathic physicians, advanced practice registered nurses, psychologists, and dentists; and (3) Amend references to "telemedicine" in the Hawaii Revised Statutes to "telehealth" for consistency.

The DD Council would like to highlight the second purpose noted within the bill, which is to clarify that a health care provider of telehealth includes primary care providers, mental health providers, and oral health providers, such as physicians and osteopathic physicians, advanced practice registered nurses, psychologists, and dentists. The DD Council is responsible for the development and implementation of a Five-Year State Plan. Our current State Plan (FY 2012-2016) includes an Objective, "Address all medical gaps in services, as indicated within the Individualized Service Plan by September 30, 2016." An activity to address the objective is to pursue statewide telemedicine opportunities. This bill would assist in the delivery of enhanced statewide health care services, increase access to services, and provide timely information to patients and health care providers.

Thank you for the opportunity to offer our **support of SB 2469 SD2**.

Sincerely,

  
Waynette K.Y. Cabral, MSW  
Executive Administrator

  
J. Curtis Tyler, III  
Chair



**LATE**

STATE OF HAWAII  
DEPARTMENT OF HEALTH  
P.O. Box 3378  
HONOLULU, HAWAII 96801-3378

In reply, please refer to:  
File:

**HOUSE COMMITTEE ON HEALTH**  
**SB2469, SD2, RELATING TO TELEHEALTH.**

**Testimony of Linda Rosen, M.D., M.P.H.**  
**Director of Health**

**Wednesday, March 12, 2014, 8:30 am**

1 **Department's Position:** Support.

2 **Fiscal Implications:** Unknown.

3 **Purpose and Justification:** The purpose of this measure is to establish parity for reimbursement  
4 between qualified telehealth services and face-to-face healthcare encounters.

5 The Department of Health defers on any fiscal implications to the General Fund and to  
6 comments submitted by the Department of Human Services as it impacts Med-QUEST reimbursement  
7 policies, including the requirement to seek federal approval.

8 From a public health perspective, DOH contends that telehealth reimbursement parity will help  
9 ameliorate healthcare access issues in rural and underserved areas. Overall cost-effectiveness and  
10 improved health outcomes are likely to be achieved with enactment of this measure.

11 Thank you for the opportunity to testify.



March 12, 2014

The Honorable Della Au Belatti, Chair  
The Honorable Dee Morikawa, Vice Chair

Committee on Health

**Re: SB 2469, SD2 – Relating to Telehealth**

Dear Chair Belatti, Vice Chair Morikawa, and Members of the Committee:

My name is Rick Jackson and I am Chairperson of the Hawaii Association of Health Plans (“HAHP”) Public Policy Committee. HAHP is a non-profit organization consisting of nine (9) member organizations:

AlohaCare	MDX Hawai‘i
Hawaii Medical Assurance Association	‘Ohana Health Plan
HMSA	University Health Alliance
Hawaii-Western Management Group, Inc.	UnitedHealthcare
Kaiser Permanente	

Our mission is to promote initiatives aimed at improving the overall health of Hawaii. We are also active participants in the legislative process. Before providing any testimony at a Legislative hearing, all HAHP member organizations must be in unanimous agreement of the statement or position.

HAHP appreciates the opportunity to provide testimony in support to SB 2469, SD2 which requires reimbursement for services provided through telehealth to be equivalent to reimbursement for the same services provided via face-to-face contact between a health care provider and a patient; clarifies that a health care provider of telehealth includes primary care providers, mental health providers, and oral health providers such as physicians and osteopathic physicians, advanced practice registered nurses, psychologists, and dentists; amends references to "telemedicine" in the Hawaii Revised Statutes to "telehealth" for consistency.

HAHP is aware of the benefits of telehealth in improving access to care throughout Hawaii, and believes in the intent of this Bill. We further recommend that the bill make reference to “medically necessary telehealth services” to be clear that medical evidence should support reimbursement for such services.

Thank you for the opportunity to provide testimony.

Sincerely,

Rick Jackson  
Chair, Public Policy Committee



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**Wednesday – March 12, 2014 – 8:30am**  
**Conference Room 329**

**The House Committee on Health**

**To:** Representative Della Au Belatti, Chair  
Representative Dee Morikawa, Vice Chair

**From:** George Greene  
President & CEO  
Healthcare Association of Hawaii

**Re: Testimony in Support**  
**SB 2469 SD 2 — Relating to Telehealth**

The Healthcare Association of Hawaii (HAH) is a 116-member organization that includes all of the acute care hospitals in Hawaii, the majority of long term care facilities, all the Medicare-certified home health agencies, all hospice programs, as well as other healthcare organizations including durable medical equipment, air and ground ambulance, blood bank and respiratory therapy. In addition to providing quality care to all of Hawaii’s residents, our members contribute significantly to Hawaii’s economy by employing nearly 20,000 people statewide.

Thank you for the opportunity to testify in support of SB 2469 SD 2, which would (1) require reimbursement for telehealth services to be equivalent to reimbursement for the same medical services provided in person; and (2) include primary care providers, mental health providers, oral health providers, advanced practice registered nurses, psychologists, and dentists as eligible telehealth providers.

SB 2469 SD 2 would modernize the practice of medicine in Hawaii by promoting telehealth—which is used effectively and extensively throughout the county—by requiring coverage for telehealth services. Telehealth is vitally important to a state like Hawaii, where many segments of the population face challenges in accessing quality health care due to geography. SB 2469 SD 2 would allow residents on the neighbor islands and in rural areas to access essential services that are readily available to patients in Honolulu. HAH supports SB 2469 SD 2, which would improve the quality of healthcare—and quality of life—for patients throughout the state through the expanded use of telehealth.

Thank you for the opportunity to testify in support of SB 2469 SD 2.

**Wednesday, March 12, 2014 – 8:30 am**  
**Conference Room 329**

**The House Committee on Health**

To: Representative Della Au Belatti, Chair  
Representative Dee Morikawa, Vice Chair

From: Michael Robinson, Executive Director  
Philanthropy & Government Relations

Re: **SB 2469, SD2 Relating to Telehealth  
Testimony in Support**

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My name is Michael Robinson, Executive Director, Philanthropy & Government Relations for Hawai'i Pacific Health (HPH). HPH is a not-for-profit health care system, and the state's largest health care provider and non-government employer. It is committed to providing the highest quality medical care and service to the people of Hawai'i and the Pacific Region through its four hospitals, more than 50 outpatient clinics and service sites, and over 1,600 affiliated physicians. HPH's hospitals are Kapi'olani Medical Center for Women & Children, Pali Momi Medical Center, Straub Clinic & Hospital and Wilcox Memorial Hospital. The system's leading strategic initiatives include women's health, pediatric care, cardiovascular services, cancer care, and bone and joint services. HPH ranks among the top three percent of hospitals nationwide in the adoption of electronic health records, with system-wide implementation that allows its hospitals and physicians to offer integrated, coordinated care throughout the state.

I write in support of SB 2469 SD2 which requires reimbursement for services provided through telehealth to be equivalent to reimbursement for the same services provided via face-to-face contact between a health care provider and a patient.

Telemedicine can serve as a cost effective solution in overcoming the healthcare access barriers created by our disperse island geography and concentration of medical specialists on Oahu. Access to care to medically underserved areas can be increased by reducing the social costs associated with travel for both patient and medical professional through the adoption of telehealth technology.

Hawai'i Pacific Health whose affiliated hospitals deliver and coordinate care for patients between Lana'i, Kauai, Oahu and Statewide adopts telehealth in a variety of care settings. For example we utilize telemedicine to provide direct patient care via fetal tile-ultrasound from Kapi'olani Medical Center to neighbor island patients, as well as tele-cardiology for use with ultrasound imaging to provide convenient care to cardiac patients throughout our state.

By ensuring that reimbursement for all services provided through telehealth is equivalent to reimbursement for same services provided via traditional face-to-face contact between a health care provider and a patient will further incentivize adoption of this technology. We urge your committee to pass SB 2469. Thank you for the opportunity to provide this testimony.



Written Testimony Presented Before the  
House Committee on Health  
March 12 , 2014, 8:30 a.m.

By  
Kathy Yokouchi, Policy Analyst  
Hawaii State Center for Nursing  
University of Hawai'i at Manoa

#### SB 2469, SD2 RELATING TO TELEHEALTH

Chair Belatti, Vice Chair Morikawa and members of the House Committee on Health, thank you for this opportunity to provide testimony in strong support on SB 2469, SD2.

The Hawaii State Center for Nursing supports the purpose of this Act is to:

- (1) Require reimbursement for services provided through telehealth to be equivalent to reimbursement for the same services provided via face-to-face contact between a health care provider and a patient;
- (2) Clarify that a health care provider of telehealth includes primary care providers, mental health providers, and oral health providers such as physicians and osteopathic physicians, advanced practice registered nurses, psychologists, and dentists.

Advanced Practice Registered Nurses (APRNs) fulfill a leadership role within Accountable Care Organizations (ACOs) by demonstrating enhanced care coordination skills and fostering positive patient-provider relationships in complex care conditions. Utilization of telehealth informatics tools within a preventative care model, such as ACOs, can reduce readmission rates, contain costs, and improve patient outcomes

Further, SB 2469, SD2 will enable APRNs to help realize the vision of the ACA by utilizing their skills in clinical integration, analytics and case management of chronic disease populations to improve upon the quality and efficiency of the health care system.

Therefore, Hawaii State Center for Nursing respectfully requests that this Committee pass SB 2469, SD2 unamended. Thank you for the opportunity to testify.





## HAWAII MEDICAL ASSOCIATION

1360 S. Beretania Street, Suite 200, Honolulu, Hawaii 96814  
Phone (808) 536-7702 Fax (808) 528-2376 www.hmaonline.net

DATE: Wednesday, March 12, 2014  
TIME: 8:30 AM  
PLACE: Conference Room 329

TO:  
COMMITTEE ON HEALTH  
Rep. Della Au Belatti, Chair  
Rep. Dee Morikawa, Vice Chair

FROM: Hawaii Medical Association  
Dr. Walton Shim, MD, President  
Dr. Linda Rasmussen, MD, Legislative Co-Chair  
Dr. Ron Kienitz, DO, Legislative Co-Chair  
Dr. Christopher Flanders, DO, Executive Director  
Lauren Zirbel, Community and Government Relations

RE: SB 2469 RELATING TO TELEHEALTH

Position: Support

This measure requires reimbursement for services provided through telehealth to be equivalent to reimbursement for the same services provided via face-to-face contact between a health care provider and a patient. Clarifies that a health care provider of telehealth includes primary care providers, mental health providers, and oral health providers such as physicians and osteopathic physicians, advanced practice registered nurses, psychologists, and dentists. This measure amends references to "telemedicine" in the Hawaii Revised Statutes to "telehealth" for consistency.

HMA supports this measure on behalf of our neighbor island patients who rely on telehealth to maintain a regular relationship with their treating physician. Telehealth can be an important tool if used properly. HMA advises that a previous face-to-face consultation between the patient and the provider take place before a telehealth relationship is used to care for the patient.

The HMA also strongly supports provider to provider consultation via telehealth. Often times a patient will have a primary care provider on the island that they live on and a specialist that lives on Oahu. Telehealth allows these two providers to interact with the patient at one time. Provider to provider consultation is very important for patients that see providers on more than

### *Officers*

*President - Walton Shim, MD President-Elect – Robert Sloan, MD*  
*Secretary - Thomas Kosasa, MD Immediate Past President – Stephen Kemble, MD*  
*Treasurer – Brandon Lee, MD Executive Director – Christopher Flanders, DO*

one island and can be extremely helpful in an emergency medical situation.

We find the description of providers of telehealth is confusing because physicians seem to be listed as oral health providers. We would recommend amending the language in multiple parts of the bill to be more in line with this:

*Clarify that a health care provider of telehealth includes primary care providers, mental health providers, oral health providers, physicians and osteopathic physicians, advanced practice registered nurses, psychologists, and dentists; and*

Thank you for introducing this bill and for the opportunity to provide testimony.

**PRESENTATION OF THE  
HAWAII MEDICAL BOARD**

TO THE HOUSE COMMITTEE ON HEALTH

TWENTY-SEVENTH LEGISLATURE  
Regular Session of 2014

Wednesday, March 12, 2014  
8:30 a.m.

**TESTIMONY ON SENATE BILL NO. 2469, S.D. 2, RELATING TO TELEHEALTH.**

TO THE HONORABLE DELLA AU BELATTI, CHAIR,  
AND MEMBERS OF THE COMMITTEE:

My name is Ahlani Quiogue, and I am one of the Executive Officers of the Hawaii Medical Board ("Board"). The Board has no objections to SECTION 7 of this bill and takes no position on the other SECTIONS.

Thank you for the opportunity to provide comments on Senate Bill No. 2469,  
S.D. 2.



**UNIVERSITY OF HAWAI'I SYSTEM**  
Legislative Testimony

**LATE**

Written Testimony Presented Before the  
House Committee on Health  
March 12, 2014 at 8:30 a.m.

by  
Mary G. Boland, DrPH, RN, FAAN  
Dean and Professor  
School of Nursing & Dental Hygiene  
University of Hawai'i at Mānoa

**SB 2469 SD2 – RELATING TO TELEHEALTH**

Chair Belatti, Vice Chair Morikawa, and members of the House Committee on Health, thank you for this opportunity to provide testimony in strong support of this bill, SB 2469 SD2.

The UH Mānoa Nursing supports the purpose of this Act to:

- (1) Require reimbursement for services provided through telehealth to be equivalent to reimbursement for the same services provided via face-to-face contact between a health care provider and a patient; and
- (2) Clarify that a health care provider of telehealth includes primary care providers, mental health providers, and oral health providers such as physicians and osteopathic physicians, advanced practice registered nurses, psychologists, and dentists.

Advanced Practice Registered Nurses (APRNs) fulfill a leadership role within Accountable Care Organizations (ACOs) by demonstrating enhanced care coordination skills and fostering positive patient-provider relationships in complex care conditions. Utilization of telehealth informatics tools within a preventative care model, such as ACOs, can reduce readmission rates, contain costs, and improve patient outcomes. Further, SB 2469, SD2 will enable APRNs to help realize the vision of the Affordable Care Act by utilizing their skills in clinical integration, analytics, and case management of chronic disease populations to improve upon the quality and efficiency of the health care system.

Therefore, UH Mānoa Nursing respectfully requests that this Committee pass SB 2469 SD2 unamended. Thank you for the opportunity to testify.

# HMSA



An Independent Licensee of the Blue Cross and Blue Shield Association

March 12, 2014

**LATE**

The Honorable Della Au Belatti, Chair  
The Honorable Dee Morikawa, Vice Chair  
House Committee on Health

**Re: SB 2469, SD2 – Relating to Telehealth**

Dear Chair Au Belatti, Vice Chair Morikawa, and Members of the Committee:

The Hawaii Medical Service Association (HMSA) appreciates the opportunity to testify on SB 2469, SD2. HMSA supports this measure in its current form.

HMSA currently reimburses providers for services rendered via telehealth at the same level as a face-to-face encounter, as long as the patient is present during the examination. And, the examination must be an interactive medical examination and clinical assessment directed by the specialist or consulting provider.

As you know, HMSA also is heavily invested in furthering the usage of telehealth specifically through our Online Care program, aimed at improving access to care throughout the Islands. Residents can speak with an HMSA provider electronically, 24 hours-a-day, seven days-a-week. This is a program and not a claims-based telehealth service.

The earlier version of this Bill and its companion measure, HB 2411, HD1, jeopardized the Online Care program. However, as drafted, SB 2469, SD2, includes a provision that ensures programs such as HMSA's Online Care may continue.

Thank you for the opportunity to testify today.

Sincerely,

A handwritten signature in black ink, appearing to read "JD", with a long horizontal flourish extending to the right.

Jennifer Diesman  
Vice President  
Government Relations

Legislative Committee

Wailua Brandman, Chair  
Amy Vasconcellos, Vice Chair  
Beverly Laurongaboy Inocencio  
Mandy Ki'aha  
Sondra Leiggi  
Danielle Naahielua  
Moani Vertido  
Cynthia Cadwell, Ex-Officio



HAWAII ASSOCIATION of  
PROFESSIONAL NURSES

**LATE**

Written Testimony Presented Before the  
House Committee on Health  
March 12, 2014 8:30 am

SB 2469 SD2 RELATING TO TELEHEALTH

Chair Belatti, Vice Chair Morikawa and members of the House Committee on Health, thank you for this opportunity to provide testimony in **STRONG SUPPORT** on SB 2469, SD2.

The purpose of this act is twofold:

- (1) To require that reimbursement for services provided through telehealth to be equivalent to reimbursement for the same services provided via face-to-face contact between a health care provider and a patient ; and
- (2) To clarify that a health care provider of telehealth includes primary care providers, mental health providers, and oral health providers such as physicians and osteopathic physicians, advanced practice registered nurses, psychologists, and dentists.

Advanced Practice Registered Nurses (APRNs) fulfill a leadership role within Accountable Care Organizations (ACOs) by demonstrating enhanced care coordination skills and fostering positive patient-provider relationships in complex care conditions. Utilization of telehealth informatics tools within a preventative care model, such as ACOs, can reduce readmission rates, contain costs, and improve patient outcomes.

Further, SB 2469, SD2 will enable APRNs to help realize the vision of the ACA by utilizing their skills in clinical integration, analytics and case management of chronic disease populations to improve upon the quality and efficiency of the health care system.

Therefore, HAPN respectfully requests that this Committee pass SB 2469, SD2 unamended. Thank you for the opportunity to testify.

Amy Vasconcellos, Vice Chair  
Legislative Committee  
Hawaii Association of Professional Nurses



**LATE**

Written Testimony Presented Before the  
House Committee on Health  
March 12, 2014, 8:30 AM

By  
Dale Allison, PhD, WHNP-BC, FNP, APRN-Rx, FAAN  
Hawaii State Center for Nursing  
University of Hawai'i at Manoa

SB 2469, SD2 RELATING TO TELEHEALTH

Chair Belatti, Vice Chair Morikawa and members of the House Committee on Health, thank you for this opportunity to provide testimony in strong support on SB 2469, SD2.

The Hawaii State Center for Nursing supports the purpose of this Act is to:

- (1) Require reimbursement for services provided through telehealth to be equivalent to reimbursement for the same services provided via face-to-face contact between a health care provider and a patient;
- (2) Clarify that a health care provider of telehealth includes primary care providers, mental health providers, and oral health providers such as physicians and osteopathic physicians, advanced practice registered nurses, psychologists, and dentists.

Advanced Practice Registered Nurses (APRNs) fulfill a leadership role within Accountable Care Organizations (ACOs) by demonstrating enhanced care coordination skills and fostering positive patient-provider relationships in complex care conditions. Utilization of telehealth informatics tools within a preventative care model, such as ACOs, can reduce readmission rates, contain costs, and improve patient outcomes

Further, SB 2469, SD2 will enable APRNs to help realize the vision of the ACA by utilizing their skills in clinical integration, analytics and case management of chronic disease populations to improve upon the quality and efficiency of the health care system.

Therefore, Hawaii State Center for Nursing respectfully requests that this Committee pass SB 2469, SD2 unamended. Thank you for the opportunity to testify.

**LATE**

LĀNA'Ī COMMUNITY HEALTH CENTER

P. O. Box 630142  
Lāna'i City, HI 96763-0142



Phone: 808-565-6919 x114  
Fax: 808-565-9111  
dshaw@lanaicommunityhealthcenter.org

*The Community is our Patient -- men, women, children, uninsured, insured!*

**Testimony Regarding  
SB2469**

**Relating to Health**

**Submitted by Diana M V Shaw, PhD, MPH, MBA, FACMPE  
Executive Director, Lāna'i Community Health Center  
Room 329 March 12, 2014 8:30AM**

**Written Testimony in Support of Senate Bill 2469**

I am writing to offer my support for SB2469. As a Board Member of the Hawaii State Rural Health Association and the Executive Director of the only FQHC on the small rural island of Lana'i, I believe strongly in the need to utilize technology in a manner that will increase our efficiency and quality while focusing also on patient convenience. SB2469 will assist with this effort through its requirement of reimbursement for services provided through telehealth to be equivalent to reimbursement for the same services provided via face-to-face contact between a health care provider and a patient. The clarification that a health care provider of telehealth includes primary care providers, mental health providers, and oral health providers, such as physicians and osteopathic physicians, advanced practice registered nurses, psychologists, and dentists will also assist with ensuring adequate medical resources. Lastly it amends references to "telemedicine" in the Hawaii Revised Statutes to "telehealth" for consistency.

This bill provides our rural health care organizations and providers with an effective means to provide access to services not readily available in rural remote settings, as well as those areas with low populations. I fully support SB2469 and encourage you to do the same as it will ensure effective use of our scarce resources.

Mahalo and Salamat for the opportunity to comment on this critically important plan,

A handwritten signature in black ink, appearing to read 'D.V. Shaw', is written over a light blue horizontal line.

Diana M. V. Shaw, PhD, MPH, MBA, FACMPE  
Executive Director

*E Ola nō Lāna'ī*

**LIFE, HEALTH, and WELL-BEING FOR LĀNA'Ī**



**LATE**

Hawaii House Committee on Health

Hearing: March 12, 2012

Re: SB2469: RELATING TO TELEHEALTH.

I am submitting testimony in support of SB 2469. Access to care will never be achieved in Hawaii with our current delivery system due to an expanding list of specialties services required to provide quality care. The neighbor islands do not have large enough populations to support these services and Oahu has shortages in pediatric specialty services and other very specialized areas.

Hawaii lags behind most rural states in developing telehealth services. The barriers in Hawaii have been many, but the potential for a robust services is not only clearly present, but essential for providing access to specialty care with the right service at the right time to the right place. Flying specialist to the neighbor islands will never be the answer, is costly and has not been sustainable over time. Telehealth has a track record for providing quality care equal or exceeding face to face visits for multiple specialties. At least 13 other states, recognizing the need to simplify telehealth services, have parity laws similar to this bill. Telehealth is a significant component to the recently release Health Care Transformation Plan for the State of Hawaii.

Lana'i Community Health Center is committed to improving care for the people in Lana'i through the use of telehealth. We have telehealth services for behavioral health, diabetic retinal eye exams, and dermatology and are expanding to obstetrics and pediatrics. We know, firsthand, the variation in payment policies among payers. Health plans lacking clear focus often fail to reimburse at all without appeals and prodding.

The parity bill for paying telehealth services equals to face to face services levels the playing field among the health plans and removes a major barrier in expand telehealth services on the neighbor islands. The cost of not having telehealth services is frequently born by the patients who take a day out of their lives and often money out of their pockets to travel to Oahu for specialty services. It is time for the legislature to support SB2469 that is good for our rural patients, greatly simplifies the administrative over health for the providers, has little cost impact to the health plans, and cost the tax payers nothing.

Thank you.



Joseph Humphry, MD

Medical Director and Director of Quality

Lana'i Community Health Center

**SB2469**

Submitted on: 3/10/2014

Testimony for HLT on Mar 12, 2014 08:30AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Leimomi Khan	Individual	Support	No

## Comments:

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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**morikawa2-Joanna**

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**From:** mailinglist@capitol.hawaii.gov  
**Sent:** Monday, March 10, 2014 11:10 AM  
**To:** HLTtestimony  
**Cc:** csmorimoto@aol.com  
**Subject:** Submitted testimony for SB2469 on Mar 12, 2014 08:30AM

**SB2469**

Submitted on: 3/10/2014

Testimony for HLT on Mar 12, 2014 08:30AM in Conference Room 329

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Present at Hearing</b>
Curt S. Morimoto	Individual	Support	No

Comments: There should be no difference in reimbursements.

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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**morikawa2-Joanna**

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**From:** mailinglist@capitol.hawaii.gov  
**Sent:** Monday, March 10, 2014 2:57 PM  
**To:** HLTtestimony  
**Cc:** bishopmattj@gmail.com  
**Subject:** \*Submitted testimony for SB2469 on Mar 12, 2014 08:30AM\*

**SB2469**

Submitted on: 3/10/2014

Testimony for HLT on Mar 12, 2014 08:30AM in Conference Room 329

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Present at Hearing</b>
Matt Bishop	Individual	Support	No

Comments:

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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Written Testimony Presented Before the  
House Committee on Health  
March 12, 2014, 8:30 a.m.

By  
Lenora Lorenzo DNP, APRN, FAANP  
Family, Geriatrics and Diabetes Nurse Practitioner  
Region 9 Director, American Association of Nurse Practitioners

#### SB 2469, SD2 RELATING TO TELEHEALTH

Chair Belatti, Vice Chair Morikawa and members of the House Committee on Health, thank you for this opportunity to provide testimony in strong support on SB 2469, SD2.

The American Association of Nurse Practitioners and I as a practicing Nurse Practitioner supports the purpose of this Act is to:

(1) Require reimbursement for services provided through telehealth to be equivalent to reimbursement for the same services provided via face-to-face contact between a health care provider and a patient;

(2) Clarify that a health care provider of telehealth includes primary care providers, mental health providers, and oral health providers such as physicians and osteopathic physicians, advanced practice registered nurses, psychologists, and dentists.

As a practicing Nurse Practitioner, I have been delivering health care for chronic conditions like Diabetes, and Hypertension for 5 years to our Hawaiian neighbor islands and remote US Pacific Territory Islands of Guam and Samoa. Our Veterans Administration telehealth care demonstrate good outcomes and the efficacy of telehealth in increasing access to high quality health care.

Advanced Practice Registered Nurses (APRNs) fulfill a leadership role within Accountable Care Organizations (ACOs) by demonstrating enhanced care coordination skills and fostering positive patient-provider relationships in complex care conditions. Utilization of telehealth informatics tools within a preventative care model, such as ACOs, can reduce readmission rates, contain costs, and improve patient outcomes. Further, SB 2469 will enable APRNs to help realize the vision of the ACA by utilizing their skills in clinical integration, analytics and case management of chronic disease populations to improve upon the quality and efficiency of the health care system.

Therefore, the American Association of Nurse Practitioners and I as a practicing Nurse Practitioner requests that this Committee pass SB 2469 unamended. Thank you for the opportunity to testify.

## Testimony

SB2469

Aloha. I am a graduate student in the School of Social Work at the University of Hawaii at Manoa. I am testifying on Senate Bill 2469, which addresses the use of telehealth as a solution to providing health care from a distance and seeing to it that there is equivalent reimbursement for this kind of service as face-to-face services.

I am for this bill being passed, as I believe it would be beneficial for the people of Hawaii. This modality of providing health services only increases access and enables access for some who otherwise have no transportation or ability to make it to a physical office. Currently, I am assisting the elderly population and working with their limitations. Telehealth would be an excellent accommodation for this population and especially for those trying to remain in their communities. Mahalo for your consideration.

**morikawa2-Joanna**

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**From:** mailinglist@capitol.hawaii.gov  
**Sent:** Monday, March 10, 2014 8:41 PM  
**To:** HLTtestimony  
**Cc:** teresa.parsons@hawaii.edu  
**Subject:** Submitted testimony for SB2469 on Mar 12, 2014 08:30AM

**SB2469**

Submitted on: 3/10/2014

Testimony for HLT on Mar 12, 2014 08:30AM in Conference Room 329

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Present at Hearing</b>
Teresa Parsons	Individual	Support	No

Comments: Senators, I stand in STRONG SUPPORT of SB 2469 SD2 which will benefit the people of Hawai'i, especially in remote and underserved areas. Mahalo for pushing this important measure through to a full vote.

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Kelley Withy  
571 Kaimalino St.  
Kailua, HI 96734

**LATE**

Written Testimony in Support of SB2469

I am writing to offer my strongest support for SB2469. As President of the Hawaii State Rural Health Association, Director of the Area Health Education Center and a physician workforce researcher, I would like to take the opportunity to thank you for working toward expanding the telemedicine network in Hawaii. My research has shown that Hawaii has 700 fewer physicians than a comparable population on the mainland US. The shortage is most severe in rural areas such as Hawaii Island. The shortage is for primary care and all specialties except plastic surgery. Therefore telemedicine is essential to meet the needs of patients in rural Hawaii. However there have been four major hurdles to implementing telemedicine. The first is the cost of the equipment, which has been decreasing recently. The second is provider and patient acceptance which is also improving. The third is equity of medical liability coverage which will require some frank conversation with one of our medical insurance providers. And the fourth one is payment. While both Medicare and some private insurers report that they will pay for telemedicine in certain situations, providers are hesitant to bill for fear of audit or rejection of the bill. SB2469 will help alleviate this fear and go a long way to encouraging providers to utilize telemedicine services, therefore increasing access to healthcare for our populations most in need. Thank you for your attention to this matter and please keep up the good work!

Kelley Withy, MD, PhD

Written Testimony Presented Before the  
House Committee on Health  
March 12, 2014, 8:30 a.m.



SB 2469, SD2 RELATING TO TELEHEALTH

Chair Belatti, Vice Chair Morikawa and members of the House Committee on Health, thank you for this opportunity to provide testimony in strong support on SB 2469, SD2.

I, Mandy Ki'aha, support the purpose of this Act is to:

- (1) Require reimbursement for services provided through telehealth to be equivalent to reimbursement for the same services provided via face-to-face contact between a health care provider and a patient;
- (2) Clarify that a health care provider of telehealth includes primary care providers, mental health providers, and oral health providers such as physicians and osteopathic physicians, advanced practice registered nurses, psychologists, and dentists.

Advanced Practice Registered Nurses (APRNs) fulfill a leadership role within Accountable Care Organizations (ACOs) by demonstrating enhanced care coordination skills and fostering positive patient-provider relationships in complex care conditions. Utilization of telehealth informatics tools within a preventative care model, such as ACOs, can reduce readmission rates, contain costs, and improve patient outcomes

Further, SB 2469, SD2 will enable APRNs to help realize the vision of the ACA by utilizing their skills in clinical integration, analytics and case management of chronic disease populations to improve upon the quality and efficiency of the health care system.

Therefore, Mandy Ki'aha respectfully requests that this Committee pass SB 2469, SD2 unamended. Thank you for the opportunity to testify.

**morikawa2-Joanna**

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**From:** mailinglist@capitol.hawaii.gov  
**Sent:** Tuesday, March 11, 2014 1:54 PM  
**To:** HLTtestimony  
**Cc:** James.Spira@PacificBehavioralHealth.Org  
**Subject:** Submitted testimony for SB2469 on Mar 12, 2014 08:30AM



**SB2469**

Submitted on: 3/11/2014

Testimony for HLT on Mar 12, 2014 08:30AM in Conference Room 329

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Present at Hearing</b>
James L Spira, PhD, MPH	Individual	Support	No

Comments: Research that I and my colleagues have conducted at the University of Hawaii, Department of Psychiatry, as well as at the US Department of Veterans Affairs shows that evidence-based psychotherapy can be delivered successfully, and without decrease in effectiveness or increase in risk, to patients through Telehealth. Further, it is in the best interest of rural patients or those who for financial or health reasons lack ability to travel for treatment. VA Pacific Islands Healthcare System has successfully utilized telemental health of this type throughout the Pacific Region (including neighbor islands, Guam, Saipan, and Samoa). There is no reason why licensed clinical providers throughout the State of Hawaii should not be as successful. Thank you for taking this testimony. James L. Spira, PhD, MPH, ABPP Professor, Department of Psychiatry, University of Hawaii School of Medicine

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Written Testimony Presented Before the  
House Committee on Health  
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By

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SB 2469, SD2 RELATING TO TELEHEALTH

Chair Belatti, Vice Chair Morikawa and members of the House Committee on Health, thank you for this opportunity to provide testimony in strong support on SB 2469, SD2.

I support the purpose of this Act is to:

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- (2) Clarify that a health care provider of telehealth includes primary care providers, mental health providers, and oral health providers such as physicians and osteopathic physicians, advanced practice registered nurses, psychologists, and dentists.

Advanced Practice Registered Nurses (APRNs) fulfill a leadership role within Accountable Care Organizations (ACOs) by demonstrating enhanced care coordination skills and fostering positive patient-provider relationships in complex care conditions. Utilization of telehealth informatics tools within a preventative care model, such as ACOs, can reduce readmission rates, contain costs, and improve patient outcomes

Further, SB 2469, SD2 will enable APRNs to help realize the vision of the ACA by utilizing their skills in clinical integration, analytics and case management of chronic disease populations to improve upon the quality and efficiency of the health care system.

Therefore, I respectfully request that this Committee pass SB 2469, SD2 unamended.  
Thank you for the opportunity to testify.

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