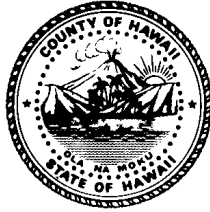


William P. Kenoi
Mayor



Walter K.M. Lau
Managing Director

Randall M. Kurohara
Deputy Managing Director

County of Hawai'i Office of the Mayor

25 Aupuni Street, Suite 2603 • Hilo, Hawai'i 96720 • (808) 961-8211 • Fax (808) 961-6553
KONA: 74-5044 Ane Keohokalole Hwy., Bldg. C • Kailua-Kona, Hawai'i 96740
(808) 323-4444 • Fax (808) 323-4440

February 19, 2014

The Honorable David Ige, Chair
and Members of the Senate Committee on Health
Hawai'i State Capitol, Room 211
415 South Beretania Street
Honolulu, Hawai'i 96813

**RE: Senate Bill 3091, RELATING TO THE HAWAII HEALTH SYSTEMS
CORPORATION PRIMARY CARE TRAINING PROGRAM**

Aloha, Chair Ige and Committee Members

Mahalo for this opportunity to express our strong support for Senate Bill 3091, which appropriates funding for the interdisciplinary Hawai'i Health Systems Corporation Primary Care Training Program at Hilo Medical Center.

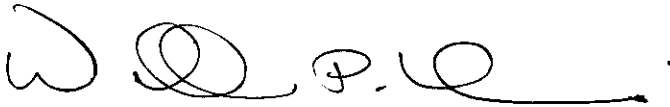
The state and Hawai'i Island continue to face a severe physician shortage, with a recent study estimating that Hawai'i County needs 150 more doctors to provide an adequate level of access to health care for our residents. Projections by the John A. Burns School of Medicine suggest the physician shortage will dramatically worsen in the next five years as many doctors retire. An important piece of the solution for our communities is the Hawai'i Island Family Medicine Residency Program, which was recently notified that it has met the requirements for two-year accreditation. The program is actively recruiting, and will welcome its first class in July. The program will also offer training to advanced practice nurses from programs at the University of Hawai'i at Manoa and Hilo, and to students from the UH-Hilo College of Pharmacy. This program will produce inter-disciplinary teams that can care for four times as many patients as independent practitioners and will expand to serve rural communities across the state. It is well documented throughout the nation that physicians attending rural training programs are much more likely to practice in a rural area. More than half of residents

The Honorable David Ige
Page 2
February 19, 2014

trained at rural sites stay and practice in this setting after they completed their residency. The same can be expected for advanced practice nurses, psychologists, and clinical pharmacists. We believe this program will help ease the physician shortage in our county and in rural areas across the state.

Mahalo for your consideration.

Aloha,

A handwritten signature in black ink, appearing to read 'W. P. Kenoi', with a long horizontal line extending to the right.

William P. Kenoi
MAYOR



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, February 19, 2014
TIME: 9:15 a.m.
PLACE: Conference Room 211

TO:

COMMITTEE ON WAYS AND MEANS

Senator David Y. Ige, Chair

Senator Michelle N. Kidani, Vice Chair

FROM: Hawaii Medical Association

Dr. Walton Shim, MD, President

Dr. Linda Rasmussen, MD, Legislative Co-Chair

Dr. Ron Keinitz, MD, Legislative Co-Chair

Dr. Christopher Flanders, DO, Executive Director

Lauren Zirbel, Community and Government Relations

Re SB 3091 RELATING TO THE HAWAII HEALTH SYSTEMS CORPORATION PRIMARY CARE TRAINING PROGRAM

Position: Strongly Support

This measure addresses primary care physician shortages by appropriating funds for the Hawaii Health Systems Corporation Primary Care Training Program at Hilo Medical Center.

HMA believes that increasing the potential pool of physicians and other health care providers is an important step forward in addressing Hawaii's worsening catastrophic shortage of health care providers. Data shows that Hawaii will have at least a 50% shortage of physicians in the next decade.

Mahalo for the opportunity to submit testimony on this important issue.

Officers

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

THE SENATE
THE TWENTY-SEVENTH LEGISLATURE
REGULAR SESSION OF 2014

COMMITTEE ON WAYS AND MEANS

Senator David Y. Ige, Chair
Senator Michelle N. Kidani, Vice Chair

NOTICE OF DECISION MAKING

DATE: Wednesday, February 19, 2014
TIME: 9:15 a.m.
PLACE: Conference Room 211
State Capitol
415 South Beretania Street

Support of SB 3091

Hawaii Health Systems Corporation – Primary Care Training Program
Steve Godzsak, Board Member, Hilo Medical Center Foundation

As member of the HMC Foundation, I resolve to strengthen the state’s provider workforce through the HHSC Primary Care Training Program (HHSCPCTP). Support of this program and of family medicine graduate education will increase providers practicing throughout the islands. I endorse the HHSCPCTP as a Means to Close the increasing Gap in health care providers in Hawaii.

Investing in training family practice residents in the neighbor islands is expected to yield a meaningful return on investment including:

- Decreasing the number and rate of “potentially avoidable hospitalizations,” which the state now pays for through both its Medicaid program and unreimbursed care by state’s public hospital system, Hawaii Health Systems Corporation.
- Lowering the costs of treating expensive and debilitating conditions such as diabetes and coronary heart disease. Both have reached epidemic proportions in Hawaii County compared to Oahu and other areas of the state where there is greater access to primary care.
- Generating 5 new jobs via the multiplier effect and new tax revenue. (Source: The Lewin Group).

I recognize that the HHSCPCTP uses an advanced model of care delivery that eliminates the need to train or attract unrealistically high numbers of physicians. Today’s predominant model of care throughout the country involves one primary care physician with a medical assistant and receptionist caring for 2,000-2,500 clients. The TEAM model of care in which the HHSCPCTP is training Hawaii’s future providers allows one physician and their team to care for up to 10,000 patients. Critical team members include a nurse practitioner or physician assistant and specialists in chronic disease management such as pharmacists, certified diabetes educators, behavioral health providers, licensed nurses, and well trained non-licensed staff.

I also recognize that physicians attending rural training programs are much more likely to practice in a rural area. More than half of residents trained at rural sites stay and practice in that locale. The same can be expected for advanced practice nurses, psychologists, and clinical pharmacists. I strongly urge your support in appropriating \$2.8 million for SB3091 and include it as a budgetary line item in the Hawaii State Budget of HHSC.

I thank you, Chairman Ige, Vice Chair Kidani, and Committee members, for your foresight in supporting this measure. Please help the rural areas obtain more doctors and improve our community’s health by passing SB3091. Thank you.

I am writing on behalf of the Hawaii Island Healthcare Alliance in support of HB 1742 to support improved access to primary care for neighbor island citizens by developing family practice physicians and primary care providers through the Primary Care Training Program on Hawaii Island. We respectfully ask for your continued investment in improving access.

First of all, we want to express our deep appreciation to the legislature for authorizing a portion of the funding for this program during the 2013 session. That statewide support was a critical mile stone in the long standing island-wide effort to improve access to physicians and other healthcare providers on Hawaii Island. The Hawaii Island Healthcare Alliance and its numerous community partners are truly grateful for statewide support to grow local healthcare providers, improve health and reduce costs.

The shortage of providers in our state and especially on Hawaii Island has been well documented by the legislature and is a major reason for the significantly poorer health outcomes on Hawaii Island as well as higher costs because of higher utilization of expensive emergency room and hospital settings for treatment.

With the 2013 state contribution, in addition to private funding, the Primary Care Training Program has been able to develop a locally respected healthcare clinic, recruit high quality faculty, begin training students from several healthcare fields, obtain accreditation for training family practice residents, and initiate recruitment of medical school graduates for the first class of the family practice training program to begin July 1, 2014. The achievement of all of these milestones shows that the expectations of the initial state funding for this program have been well met and the program is well positioned to achieve its goals, with sufficient funding. During the startup years until it is sustainable on its own.

We, again, respectfully request your support by voting yes on SB 3091

Sincerely,

Sharon Vitousek MD

Chair, Hawaii Island Healthcare Alliance

From: mailinglist@capitol.hawaii.gov
To: [WAM Testimony](#)
Cc: RWSurber@aol.com
Subject: Submitted testimony for SB3091 on Feb 19, 2014 09:15AM
Date: Monday, February 17, 2014 11:42:53 AM

SB3091

Submitted on: 2/17/2014

Testimony for WAM on Feb 19, 2014 09:15AM in Conference Room 211

Submitted By	Organization	Testifier Position	Present at Hearing
Robert Surber	Hawaii Island Healthcare Alliance	Support	No

Comments: Aloha Honorable Committee Members I am writing on behalf of the Hawaii Island Healthcare Alliance in support of SB 3091 to ensure the sustainability of the Rural Family Practice Residency Program on Hawaii Island. First of all, we must express our deep appreciation to the legislature for authorizing funding for this program during the last session. This statewide support was a critical milestone in the long standing island –wide effort to improve access to physicians and other healthcare professionals on Hawaii Island. The shortage of providers has been well documented by the legislature and is a major reason for significantly poorer health outcomes on Hawaii Island. The Alliance and its numerous community partners are truly grateful for statewide support for this neighbor island program. Now we ask for your continued investment to ensure its ongoing success. With the receipt of state and other funding the program has been able to develop a locally respected healthcare clinic, recruit a faculty, begin training students from several healthcare fields, obtain accreditation for training family practice residents, and initiate recruitment for the first year of the residency program to begin July 2014. These achievements demonstrate that the expectations of the initial state funding have been well met and the program is positioned to achieve its goals. We, again, respectfully request your support by voting in favor of SB 3091. Robert Surber Keaau

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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THE SENATE
THE TWENTY-SEVENTH LEGISLATURE
REGULAR SESSION OF 2014

COMMITTEE ON WAYS AND MEANS

Senator David Y. Ige, Chair
Senator Michelle N. Kidani, Vice Chair

NOTICE OF DECISION MAKING

DATE: Wednesday, February 19, 2014
TIME: 9:15 a.m.
PLACE: Conference Room 211
State Capitol
415 South Beretania Street

Support of SB 3091

Relating To The Hawaii Health Systems Corporation Primary Care Training Program at
Hilo Medical Center.

Julie Tulang, President
Hilo Medical Center Foundation

Hilo Medical Center Foundation, supports of this program that invest in training family practice residents who will eventually work in rural communities through out the state. We endorse the HHSCPCTP as one of the ways to provide more primary care physicians that will hopefully:

1. Provide greater access to family medicine physicians who will play a key role in encouraging healthy lifestyles and early detection of health problems which will result in lowering the costs of treating expensive and debilitating conditions.
2. Fill the need for Primary Care Physicians in many communities of rural Hawaii, for Hawaii Island the recent closure of the Native Hawaiian Health Care Hilo Clinic illustrates that the need is even more glaring.

We recognize that the HHSCPCTP uses a model of care delivery that eliminates the need to train or attract unrealistically high numbers of physicians. The team model of care that HHSCPCTP has established will allow for one physician and their team to care for up to 10,000 patients. Critical team components include a nurse practitioner or physician assistant and specialists in chronic disease management such as pharmacists, certified diabetes educators, behavioral health providers, licensed nurses, and well trained non-licensed staff.

We are aware from personal experience that residents trained at rural sites stay and practice in this setting after they completed their residency. The same can be expected for advanced practice nurses, psychologists, and clinical pharmacists. This legislation will make a significant impact on rural communities throughout the state with this TEAM approach to community health.

We urge you to pass SB 3091, appropriate \$2.8 million and establish a budgetary line item in the Hawaii State Budget of HHSC for the Hawaii Health Systems Corporation Primary Care Training Program at Hilo Medical Center.

Thank you for the opportunity to provide comments in support of SB 3091.

Support of SB309 and HB1742
Hawaii Health Systems Corporation – Primary Care Training Program
Hawaii State Teachers Association-Retired, Hawaii Chapter

As a member of Hawaii State Teachers Association-Retired, Hawaii Chapter we resolve to strengthen the state's provider workforce through the HHSC Primary Care Training Program (HHSCPCTP).

Support of this program and of family medicine graduate education will generate greater numbers of providers practicing throughout the islands. We endorse the HHSCPCTP as a Means of Closing the Provider Gap in Hawaii.

Investing in training family practice residents in the neighbor islands is expected to yield a meaningful return on investment.

- Increasing the number of family practice physicians is expected to decrease the number and rate of "potentially avoidable hospitalizations," which the state now pays for through both its Medicaid program and unreimbursed care by state's public hospital system, Hawaii Health Systems Corporation.
- In rural areas of the state the impact of the Residency Program and greater access to family medicine physicians is projected to have a profound impact on lowering the costs of treating expensive and debilitating conditions. For example, diabetes and coronary heart disease have reached epidemic proportions in Hawaii County compared to Oahu and other areas of the state where there is greater access to primary care.
- The known economic multiplier effect of additional physicians in Hawaii means each additional physician is expected to generate 5 new jobs and new tax revenue. (Source: The Lewin Group).

We recognize that the HHSCPCTP uses an advanced model of care delivery that reduces the need to train or attract unrealistically high numbers of physicians. The current predominant model of care throughout the country involves one primary care physician caring for 2,000-2,500 individuals with a small staff, usually including a medical assistant and receptionist. The team model of care in which the HHSCPCTP is training Hawaii's future providers allows one physician and their team to care for up to 10,000 patients. Critical team components include a nurse practitioner or physician assistant and specialists in chronic disease management such as pharmacists, certified diabetes educators, behavioral health providers, licensed nurses, and well trained non-licensed staff.

We recognize that it is well documented throughout the nation that physicians attending rural training programs are much more likely to practice in a rural area. More than half of residents trained at rural sites stay and practice in this setting after they completed their residency. The same can be expected for advanced practice nurses, psychologists, and clinical pharmacists.

We thank you, Committee members, for your foresight in supporting this measure. This legislation will make a significant impact in the rural communities throughout the neighbor islands due to this new paradigm of a TEAM approach in community health.

We strongly urge your support by passing with an appropriation of \$2.8 million for SB 3091/HB1742 and have it included as a budgetary line item in the Hawaii State Budget of HHSC.

Thank you.

J. Ann Swans

HSTA-R

Betty J. Wakabayashi

HSTA-R

Ingrid Nishimoto

HSTA-R

Betty Ann Yoshimura

HSTA-R

Miyuki Watanabe

HSTA-R

Ars C. Montano

HSTAR

"Health care that is safe, health care that works, and health care that leaves no one behind"

THE SENATE
THE TWENTY-SEVENTH LEGISLATURE
REGULAR SESSION OF 2014

COMMITTEE ON WAYS AND MEANS

Senator David Y. Ige, Chair
Senator Michelle N. Kidani, Vice Chair

NOTICE OF DECISION MAKING

DATE: Wednesday, February 19, 2014
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State Capitol
415 South Beretania Street

Howard Ainsley
East Hawaii Regional CEO
Hawaii Health Systems Corporation

On behalf of the East Hawaii Region of Hawaii Health Systems Corporation (HHSC) and its Board of Directors, thank you for the opportunity to present testimony in strong support of SB 3091, relating to appropriation of funds to the Hawaii Health Systems Corporation Primary Care Training Program at the Hilo Medical Center.

The East Hawaii Region of Hawaii Health System Corporation seeks to strengthen the state's provider workforce through the HHSC Primary Care Training Program (HHSCPCTP).

Support of this program and of family medicine graduate education will generate greater numbers of providers practicing throughout the islands. I endorse the HHSCPCTP as a Means of Closing the Provider Gap in Hawaii.

Investing in training family practice residents in the neighbor islands is expected to yield a meaningful return on investment.

- Increasing the number of family practice physicians is expected to decrease the number and rate of "potentially avoidable hospitalizations," which the state now pays for through both its Medicaid program and unreimbursed care by state's public hospital system, Hawaii Health Systems Corporation.
- In rural areas of the state the impact of the Residency Program and greater access to family medicine physicians is projected to have a profound impact on lowering the costs of treating expensive and debilitating conditions. For example, diabetes and coronary heart disease have reached epidemic proportions in Hawaii County compared to Oahu and other areas of the state where there is greater access to primary care.
- The known economic multiplier effect of additional physicians in Hawaii means each additional physician is expected to generate 5 new jobs and new tax revenue. (Source: The Lewin Group).

I recognize that the HHSCPCTP uses an advanced model of care delivery that eliminates the need to train or attract unrealistically high numbers of physicians. The current predominant model of care throughout the country involves one primary care physician caring for 2,000-2,500 individuals with a small staff, usually including a medical assistant and receptionist. The team model of care in which the HHSCPCTP is training Hawaii's future providers allows one physician and their team to care for up to 10,000 patients. Critical team components include a nurse practitioner or physician assistant and specialists in chronic disease management such as pharmacists, certified diabetes educators, behavioral health providers, licensed nurses, and well trained non-licensed staff.

I also recognize that it is well documented throughout the nation that physicians attending rural training programs are much more likely to practice in a rural area. More than half of residents trained at rural sites stay and practice in this setting after they completed their residency. The same can be expected for advanced practice nurses, psychologists, and clinical pharmacists.

A more robust primary care base will attract physicians in other needed specialties to the islands as they will be guaranteed appropriate referrals. The opportunity to teach residents and other health professions students on the outer islands will also attract physicians who might otherwise not stay or come to Hawaii.

HAWAII HEALTH SYSTEMS CORPORATION

In closing, like you and the island communities of East Hawaii, we are also very concerned about the recent notice that Hui Malama Ola No Oiwī's Primary Care Clinic, which has served Native Hawaiians since 2010, is shutting down in March. This situation will most certainly have a significant impact on the existing stressed level of primary care services in East Hawaii.

The recruitment and retention of physicians, advanced practice nurses and support teams in Hawaii's rural areas is an on-going challenge. An interdisciplinary residency program is an important step toward in alleviating our physician and nursing shortages.

I strongly urge your support in appropriating \$2.8 million for SB 3091 and have it included as a budgetary line item in the Hawaii State Budget of HHSC.

Thank you in advance for your support!

THE SENATE
THE TWENTY-SEVENTH LEGISLATURE
REGULAR SESSION OF 2014

COMMITTEE ON WAYS AND MEANS

Senator David Y. Ige, Chair
Senator Michelle N. Kidani, Vice Chair

NOTICE OF DECISION MAKING

DATE: Wednesday, February 19, 2014
TIME: 9:15 a.m.
PLACE: Conference Room 211
State Capitol
415 South Beretania Street

Support of SB 3091

Hawaii Health Systems Corporation – Primary Care Training Program
Carol VanCamp, President, Japanese Chamber of Commerce & Industry of Hawaii

As member of the Japanese Chamber of Commerce & Industry of Hawaii, we resolve to strengthen the state's provider workforce through the HHSC Primary Care Training Program (HHSCPCTP).

Support of this program and of family medicine graduate education will generate greater numbers of providers practicing throughout the islands. We endorse the HHSCPCTP as a Means of Closing the Provider Gap in Hawaii.

Investing in training family practice residents in the neighbor islands is expected to yield a meaningful return on investment.

- Increasing the number of family practice physicians is expected to decrease the number and rate of “potentially avoidable hospitalizations,” which the state now pays for through both its Medicaid program and unreimbursed care by state's public hospital system, Hawaii Health Systems Corporation.
- In rural areas of the state the impact of the Residency Program and greater access to family medicine physicians is projected to have a profound impact on lowering the costs of treating expensive and debilitating conditions. For example, diabetes and coronary heart disease have reached epidemic proportions in Hawaii County compared to Oahu and other areas of the state where there is greater access to primary care.
- The known economic multiplier effect of additional physicians in Hawaii means each additional physician is expected to generate 5 new jobs and new tax revenue. (Source: The Lewin Group).

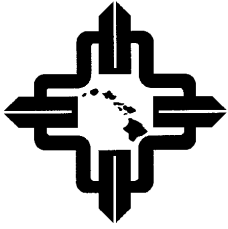
We recognize that the HHSCPCTP uses an advanced model of care delivery that eliminates the need to train or attract unrealistically high numbers of physicians. The current predominant model of care throughout the country involves one primary care physician caring for 2,000-2,500 individuals with a small staff, usually including a medical assistant and receptionist. The team model of care in which the HHSCPCTP is training Hawaii's future providers allows one physician and their team to care for up to 10,000 patients. Critical team components include a nurse practitioner or physician assistant and specialists in chronic disease management such as pharmacists, certified diabetes educators, behavioral health providers, licensed nurses, and well trained non-licensed staff.

We recognize that it is well documented throughout the nation that physicians attending rural training programs are much more likely to practice in a rural area. More than half of residents trained at rural sites stay and practice in this setting after they completed their residency. The same can be expected for advanced practice nurses, psychologists, and clinical pharmacists.

We thank you, Chairman Ige, Vice Chair Kidani and Committee members, for your foresight in supporting this measure. This legislation will make a significant impact in the rural communities throughout the neighbor islands due to this new paradigm of a TEAM approach in community health.

We strongly urge your support in appropriating \$2.8 million for SB 3091 and have it included as a budgetary line item in the Hawaii State Budget of HHSC.

We urge you to pass SB 3091. Thank you.



HAWAII HEALTH SYSTEMS
C O R P O R A T I O N

"Touching Lives Every Day"

THE SENATE
THE TWENTY-SEVENTH LEGISLATURE
REGULAR SESSION OF 2014

COMMITTEE ON WAYS AND MEANS

Senator David Y. Ige, Chair
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NOTICE OF DECISION MAKING

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PLACE: Conference Room 211
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415 South Beretania Street

SUPPORT SB 3091

RELATING TO THE HAWAII HEALTH SYSTEMS CORPORATION PRIMARY CARE TRAINING PROGRAM

Appropriates funds for the interdisciplinary Hawaii Health Systems Corporation Primary Care Training Program at Hilo Medical Center
Effective July 1, 2014.

By Boyd P. Murayama
Assistant Hospital Administrator
Medical Group Practice Director
Hilo Medical Center
Hawaii Health Systems Corporation (HHSC)

Thank you for the opportunity to provide testimony in support of SB 3091 to appropriate funds for rural integrated primary health care training program. As the Medical Group Practice Director at Hilo Medical Center, my responsibility is to oversee the daily operations of the clinic and work with all disciplines to coordinate the training and education component.

On Tuesday, October 22, 2013 the Accreditation Council for Graduate Medical Education (ACGME) informed Hilo Medical Center officials that the Hawaii Island Family Medicine Residency program has met the requirements for a 2-year accreditation, effective July 1, 2014. We will welcome the first class of four residents in the coming summer.

Many rural states support primary care residency programs with consistent funding, because of the economic return on investment, in addition to the program's improvement in population health and given the need to improve access to primary care in the State.

3675 KILAUEA AVENUE • HONOLULU, HAWAII 96816 • PHONE: (808) 733-4020 • FAX: (808) 733-4028

The physical isolation of Hawaii's neighbor islands, the multicultural heritage and demographics of this state, the health burden that resides in these communities, and the inequitable distribution of health workforce. Taken together, these underlying factors create health disparities that need to be addressed. We predict that if both content and location of the training is changed, that over time, there will be a positive impact of the community.

Health disparities exist in rural areas worldwide as well as in indigenous peoples and underrepresented minority groups. There are many causes of these disparities discussed in literature, including environmental factors, poverty and its correlates, and the appropriateness of the health care system to meet local needs.

In addition to Hawaii's geographic challenges, the indigenous people of Hawaii suffer a tremendous lack of parity in health status conditions. The Native Hawaiians have the lowest employment rates, the lowest rates of pursuing higher education and the shortest life expectancy of all major ethnic groups in Hawaii. Native Hawaiians lose more productive life years to heart disease, diabetes, stroke, chronic lung disease, chronic liver disease, accidents, cancer, and suicide than any other ethnic groups in the state.

Approximately 40% of physicians in Hawaii are primary care physicians by a broad definition including General Practitioners, Internal Medicine, Family Medicine, Pediatrics and OB/GYN. Approximately 19% are Family Physicians.

Family Medicine differs from other specialties in its scope of practice which encompasses all care settings and the entire lifespan. The 3 year curriculum regulated by the American College of Graduate Medical Education (ACGME) includes, Pediatrics, Surgery, OB/GYN, Emergency Medicine, Intensive Care, Adult Medicine, Geriatrics, Orthopaedics, and Sports Medicine among other. (Detailed curricula and guidelines are available at the ACGME website; www.acgme.org)

The rural and Native Hawaiian population of the neighbor islands are not receiving adequate healthcare and the resultant health disparities have been unchanged from recent history. The training program of family medicine physicians on the neighbor islands is a bold step to bring more healthcare providers to the area to train. It is well documented in literature that students and residents who train in rural areas are more likely to practice in rural areas.

Investing in training family practice residents in the neighbor islands is expected to yield a meaningful return on investment.

- Increasing the number of family practice physicians is expected to decrease the number and rate of "potentially avoidable hospitalizations," which the state now pays for through both its Medicaid program and unreimbursed care by state's public hospital system, Hawaii Health Systems Corporation.
- In rural areas of the state the impact of the Residency Program and greater access to family medicine physicians is projected to have a profound impact on lowering the costs of treating expensive and debilitating conditions. For example, diabetes and coronary heart disease have reached epidemic proportions in Hawaii County compared to Oahu and other areas of the state where there is greater access to primary care.

Hawaii County

- Currently, the rate of hospitalization for diabetes that is two times higher than Honolulu County, despite having a similar rate of diabetes (Source: HHIC).
- In 2009, only 72.9 percent of Hawaii County residents with hypertension reported taking medication, while 78.7 percent of hypertensive patients statewide did the same.
- Meanwhile, the county's coronary heart disease death rates are significantly higher than those of the rest of the state. In 2009, the Big Isle's death rate was 93.4 per 100,000 people, while the state average was 77.6. (Source: North Hawaii Outcomes Project)
- It is well documented that hospitalizations and Emergency Room visits decrease with improved access to quality primary care. Hawaii County has the most severe primary care shortage of all the counties. (Source: Hawaii Physician Workforce Study 2011)

HHSC PCTP uses an advanced model of care delivery that eliminates the need to train or attract unrealistically high numbers of physicians. The current predominant model of care throughout the country involves one primary care physician caring for 2,000-2,500 individuals with a small staff, usually including a medical assistant and receptionist. The team model of care in which the HHSCPCTP is training Hawaii's future providers allows one physician and their team to care for up to 5,000 patients. Critical team components include a nurse practitioner or physician assistant and specialists in chronic disease management such as pharmacists, certified diabetes educators, behavioral health providers, licensed nurses, and well trained non-licensed staff.

It is well documented throughout the nation that physicians attending rural training programs are much more likely to practice in a rural area. More than half of residents trained at rural sites stay and practice in this setting after they completed their residency. The same can be expected for advanced practice nurses, psychologists, and clinical pharmacists.

A more robust primary care base will attract physicians in other needed specialties to the islands as they will be guaranteed appropriate referrals. The opportunity to teach residents and other health professions students on the outer islands will also attract physicians who might otherwise not stay or come to Hawaii.

Due to the known economic multiplier effect of additional physicians in Hawaii, each additional physician is expected to generate 5 new jobs and new tax revenue. (Source: Lewin Group)

Funding the Residency Program will benefit the state economically as well as the people of Hawaii Island.

Hilo Medical Center, which administers the Hawaii Island Family Medicine Program, requests a Line Item in the State's budget of \$2.8 million annually to support this program.

This funding is imperative as medical residency programs require significant resources, which are not adequately recouped through the provision of health services extended to patients by medical residents. In today's environment of rising healthcare costs and decreased reimbursement, the resulting financial shortfall is more dramatic, particularly when services are rendered to the underinsured through HHSC facilities.

I ask that you support SB 3091 and greatly appreciate your consideration.



Community Alliance for Mental Health

February, 5, 2014

Board of Directors

Anne Chipchase
President

Robert Scott Wall
Vice President

Brenda Kosky
Secretary

William Lennox
Treasurer

Susan King

Linda Takai

Randolph Hack

Gina Hungerford

To: the Senate Health Committee
Re: SB 3091

Aloha Sen. Green and members of the committee,

On behalf of the Community Alliance for Mental Health along with United Self Help we strongly support passage of SB 3091.

The shortage of medical personnel is one of the greatest task this state faces. On the Neighbor Island the problem is even worse. Addressing this shortage is necessary for us to complete the transformation of our health care system.

Scott Wall
VP/Legislative Advocate
Community Alliance for Mental Health

From: mailinglist@capitol.hawaii.gov
To: [WAM Testimony](#)
Cc: vvierra@msn.com
Subject: Submitted testimony for SB3091 on Feb 19, 2014 09:15AM
Date: Sunday, February 16, 2014 4:19:54 PM

SB3091

Submitted on: 2/16/2014

Testimony for WAM on Feb 19, 2014 09:15AM in Conference Room 211

Submitted By	Organization	Testifier Position	Present at Hearing
Victor V. Vierra	Individual	Support	No

Comments: Hawaii Island is facing a severe shortage of doctors. SB 3091 would go far in assisting us in providing sound medical care for a growing population. I respectfully request your support for this measure. Mahalo.

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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From: mailinglist@capitol.hawaii.gov
To: [WAM Testimony](#)
Cc: benm001@hawaii.rr.com
Subject: Submitted testimony for SB3091 on Feb 19, 2014 09:15AM
Date: Monday, February 17, 2014 7:23:57 PM

SB3091

Submitted on: 2/17/2014

Testimony for WAM on Feb 19, 2014 09:15AM in Conference Room 211

Submitted By	Organization	Testifier Position	Present at Hearing
Michael R. Ben	Individual	Support	No

Comments: Unless the legislature is able to devise another way of attracting physicians to come and open their practices on Hawai`i Island, I urge your support and passage of SB 3091. Physician shortage on Hawai`i Island has been discussed for too many years now and we are still in need of viable ideas to address this issue. SB 3091 is one such idea. Thank you.

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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From: mailinglist@capitol.hawaii.gov
To: [WAM Testimony](#)
Cc: lrogers@hhsc.org
Subject: Submitted testimony for SB3091 on Feb 19, 2014 09:15AM
Date: Monday, February 17, 2014 10:25:07 PM

SB3091

Submitted on: 2/17/2014

Testimony for WAM on Feb 19, 2014 09:15AM in Conference Room 211

Submitted By	Organization	Testifier Position	Present at Hearing
Lori Rogers	Individual	Support	Yes

Comments: Thank you for your continued consideration, help, and support for the need of doctors in the rural areas of Hawaii. Most Sincerely, Lori Rogers

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THE SENATE
THE TWENTY-SEVENTH LEGISLATURE
REGULAR SESSION OF 2014

COMMITTEE ON WAYS AND MEANS

Senator David Y. Ige, Chair
Senator Michelle N. Kidani, Vice Chair

NOTICE OF DECISION MAKING

DATE: Wednesday, February 19, 2014
TIME: 9:15 a.m.
PLACE: State Capitol
415 South Beretania Street
Conference Room 211

Support of SB 3091

Relating To The Hawaii Health Systems Corporation Primary Care Training Program.
Appropriates funds for the interdisciplinary Hawaii Health Systems Corporation Primary Care Training Program at
Hilo Medical Center

Katherine Anderson, Assistant Professor of Pharmacy Practice
Daniel K. Inouye College of Pharmacy

As a faculty member of the college of pharmacy and preceptor for pharmacy students train at Hawaii Island Family Health Center, I support this program that invests in training family practice residents as well as many other medical disciplines who will eventually work in rural communities through out the state. I endorse the HHSCPCTP as one of the ways to provide more primary care physicians that will hopefully:

1. Improve patient care. Patients have difficulty finding a primary care physician. Due to lack of regular care, there is a higher rate of “potentially avoidable hospitalizations,” which the state now pays for through both its Medicaid program and unreimbursed care by state’s public hospital system, Hawaii Health Systems Corporation.
2. Provide greater access to family medicine physicians in rural area of our state, lowering the costs of treating expensive and debilitating conditions. Compared to Oahu and other areas of the state where there is greater access to primary care, we have higher rates of untreated chronic disease.

HHSCPCTP uses a model of care delivery that eliminates the need to train or attract unrealistically high numbers of physicians. The team model of care in which the HHSCPCTP is training Hawaii’s future providers allows one physician and their team to care for up to 10,000 patients. Critical team components include a nurse practitioner or physician assistant and specialists in chronic disease management such as pharmacists, certified diabetes educators, behavioral health providers, licensed nurses, and well trained non-licensed staff.

We are aware from personal experience that residents trained at rural sites stay and practice in this setting after they completed their residency. The same can be expected for advanced practice nurses, psychologists, and clinical pharmacists. This legislation will make a significant impact in the rural communities throughout the state with this TEAM approach in community health.

We urge you to pass SB 3091. Thank you for the opportunity to provide testimony in support of SB 3091.

Sincerely,

Katherine Anderson, Pharm.D.

From: mailinglist@capitol.hawaii.gov
To: [WAM Testimony](#)
Cc: mcvickar@hawaiiantel.net
Subject: *Submitted testimony for SB3091 on Feb 19, 2014 09:15AM*
Date: Sunday, February 16, 2014 3:20:20 PM

SB3091

Submitted on: 2/16/2014

Testimony for WAM on Feb 19, 2014 09:15AM in Conference Room 211

Submitted By	Organization	Testifier Position	Present at Hearing
John McVickar	Individual	Support	No

Comments:

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From: mailinglist@capitol.hawaii.gov
To: [WAM Testimony](#)
Cc: ulua3@hotmail.com
Subject: Submitted testimony for SB3091 on Feb 19, 2014 09:15AM
Date: Sunday, February 16, 2014 5:06:27 PM

SB3091

Submitted on: 2/16/2014

Testimony for WAM on Feb 19, 2014 09:15AM in Conference Room 211

Submitted By	Organization	Testifier Position	Present at Hearing
jack stevenson	Individual	Support	No

Comments: You need to support this once and for all - too much time spent by many people asking for this.

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From: mailinglist@capitol.hawaii.gov
To: [WAM Testimony](#)
Cc: nishieast888@gmail.com
Subject: *Submitted testimony for SB3091 on Feb 19, 2014 09:15AM*
Date: Sunday, February 16, 2014 7:32:14 PM

SB3091

Submitted on: 2/16/2014

Testimony for WAM on Feb 19, 2014 09:15AM in Conference Room 211

Submitted By	Organization	Testifier Position	Present at Hearing
DELBERT NISHIMOTO	Individual	Support	No

Comments:

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From: mailinglist@capitol.hawaii.gov
To: [WAM Testimony](#)
Cc: cvancamp3@hawaii.rr.com
Subject: Submitted testimony for SB3091 on Feb 19, 2014 09:15AM
Date: Monday, February 17, 2014 6:27:38 AM

SB3091

Submitted on: 2/17/2014

Testimony for WAM on Feb 19, 2014 09:15AM in Conference Room 211

Submitted By	Organization	Testifier Position	Present at Hearing
Carol A. VanCamp	Individual	Support	No

Comments: This bill is critical to continuing the HHSC medical residency program that has already been established. It will help our state attract more doctors in the face of huge shortages currently and more anticipated in the future.

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From: mailinglist@capitol.hawaii.gov
To: [WAM Testimony](#)
Cc: ahamane@hawaiiintel.net
Subject: Submitted testimony for SB3091 on Feb 19, 2014 09:15AM
Date: Sunday, February 16, 2014 2:58:00 PM

SB3091

Submitted on: 2/16/2014

Testimony for WAM on Feb 19, 2014 09:15AM in Conference Room 211

Submitted By	Organization	Testifier Position	Present at Hearing
Amy Hamane	Individual	Support	No

Comments: I urge you to please support the Family Medicine Residency program in Hilo. We are ready to accept our first student residents but need your support. Please do not let this opportunity to gain new physicians go down the drain as it did in 1999 due to lack of funding. Thank you for your help!

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