



UNIVERSITY OF HAWAII SYSTEM

Legislative Testimony

Testimony Presented Before the
Senate Committees on Higher Education and
Commerce, Consumer Protection and Health
Thursday, March 16, 2017 at 1:30 p.m.

By

Jerris Hedges, MD, Dean

and

Kelley Withy, MD, Professor, Department of Complementary and Alternative Medicine
Hawai'i/Pacific Basin Area Health Education Center (AHEC) Director

John A. Burns School of Medicine

University of Hawai'i at Mānoa

HB 428 HD1 – RELATING TO PHYSICIAN WORKFORCE ASSESSMENT

Chairs Kahele and Baker, Vice Chairs Kidani and Nishihara, and members of the committees:

Thank you for this opportunity to testify in **strong support** of HB 428 HD1, which permits continuation of the Hawai'i Physician Workforce Assessment program that supports research of the supply and demand of physicians in Hawai'i, as well as interventions to recruit physicians and increase career satisfaction of practicing physicians. Currently the program is scheduled to sunset on June 30, 2017.

HB 428 HD1 differs from its Senate companion, SB 141, in that SB 141 extends the repeal date another five (5) years while HB 428 removes the sunset date. We prefer the language of HB 428 which repeals the sunset date, allowing for nonstop efforts to recruit and retain physicians in our state, as is done with nursing licensure fees which goes to support the ongoing efforts of the Center of Nursing.

Hawai'i has a shortage of over 500 doctors, which has improved from a shortage of 600 in 2015. The physician shortage is compounded by the fact that we have the fifth oldest physician workforce in the country, and many of our physicians will be retiring in the next several years. Continuation of the physician workforce assessment enables the John A. Burns School of Medicine (JABSOM) to continue efforts to address the physician shortage through workforce support activities and research on the supply and demand of physicians in the State. The modest license fees help JABSOM implement interventions to recruit physicians and to identify ways to increase career satisfaction among practicing physicians so that they remain in practice.

Specific activities that have been undertaken with the funds paid by the physicians upon relicensure include:

Continuing Medical Education for over 4,000 person-hours per year. Offerings include:

1. An annual Hawai'i Health Workforce Summit for 500 providers to learn about changes in healthcare, avoidance of "practice burn out", new advances in rural health, geriatrics and electronic health records;
2. Project ECHO, weekly remote telehealth sessions addressing endocrinology/diabetes, behavioral health, and geriatrics (monthly).

Recruitment of new physicians to Hawai'i. Physicians have found employment in Hawai'i based on job advertisements at www.ahec.hawaii.edu where all open positions in the state are advertised in collaboration with the Hawai'i Physician Recruiters group.

Support for activities to recruit students into health careers such as those at www.ahec.hawaii.edu.

Support for state efforts to get expanded federal designations of Health Professions Shortage Areas.

Support for 13 physicians to receive loan repayment for working in underserved areas.

Support for the Hawai'i Ho'okipa Program, a welcoming program for newly arriving providers to get them integrated into the community where they work.

Support training for medical students in rural areas.

Creation of a Rural Health Coordinator at University of Hawai'i that will work with all health students working in rural areas to increase opportunities and track the impact of the rural training programs.

Medical malpractice reform education (2013).

Continuation of the Physician Workforce Assessment program will cost the physicians of Hawai'i \$60 every other year and will allow for continuation of the above activities as well as capacity to act rapidly when new ideas for solving the physician shortage are identified.

Thank you for this opportunity to testify.

**PRESENTATION OF THE
HAWAII MEDICAL BOARD**

TO THE SENATE COMMITTEE ON
HIGHER EDUCATION

AND

TO THE SENATE COMMITTEE ON
COMMERCE, CONSUMER PROTECTION, AND HEALTH

TWENTY-NINTH LEGISLATURE
Regular Session of 2017

Thursday, March 16, 2017
1:30 p.m.

**TESTIMONY ON HOUSE BILL NO. 428, H.D. 1, RELATING TO PHYSICIAN WORKFORCE
ASSESSMENT.**

TO THE HONORABLE KAIALI'I KAHELE, CHAIR,
TO THE HONORABLE ROSALYN H. BAKER, CHAIR,
AND MEMBERS OF THE COMMITTEES:

The Hawaii Medical Board ("**Board**") thanks you for the opportunity to submit testimony on House Bill No. 428, H.D. 1, Relating to Physician Workforce Assessment. This measure proposes to continue to allow the John A. Burns School of Medicine ("**JABSOM**") to receive a portion of the physician workforce assessment fee to support physician workforce assessment and planning to effect the strategic recruitment and retention of physicians for rural and medically underserved areas of the State.

The Board reviewed this bill at its meeting on March 9, 2017, and prefers the current language in statute repealing the assessment fee on June 30, 2017. However, if this measure should move forward, the Board prefers language similar to that proposed in the companion, S.B. 141, S.D.2, which repeals the assessment fee on June 30, 2022, rather than an indefinite extension. The Board also recommends that any monies collected through the physician workforce assessment be used towards increasing medical class sizes at JABSOM and increasing graduate medical education class sizes in the State.

While the Board understands the importance of the physician workforce assessment and planning to effect the strategic recruitment and retention of physicians for rural and medically underserved areas of the State, the Board provided the following comments regarding the data presented:

- **Quality of data:** JABSOM uses a distinct methodology which is currently being used by very few states. JABSOM collects data through a survey based process, therefore deeply limiting any comparisons. For example, The Dartmouth Atlas of Health Care and the Association of American Medical Colleges used methodologies to examine all states, and have concluded findings contrary to JABSOM's study. Based on information presented by both organizations, Hawaii patients' access to care is at the national average, and in some cases better than the national average. The Board did recognize that there is a mal-distribution of specialists throughout the State; however, Hawaii has more physicians per 100,000 residents than many other states.
- **Access to care:** The primary issue should be access to care and the breakdown of access to care. Access to care is the focus of national health policy, and should be determined by how quickly a patient is able to see a physician and the distance which the patient must travel to see that physician. The Board noted that this has not been used as an outcome measure in any of the data presented by JABSOM.

Thank you for the opportunity to submit testimony on House Bill No. 428, H.D. 1,
Relating to Physician Workforce Assessment.



THE QUEEN'S HEALTH SYSTEMS

To: The Honorable Kaialii Kahele, Chair
The Honorable Michelle N. Kidani, Vice Chair
Members, Committee on Higher Education

The Honorable Rosalyn H. Baker, Chair
The Honorable Clarence K. Nishihara, Vice Chair
Members, Committee on Commerce, Consumer Protection, and Health

From: Paula Yoshioka, Senior Vice President, The Queen's Health Systems

Date: March 13, 2017

Hrg: Senate Committees on Higher Education and Commerce, Consumer Protection, and
Health Joint Hearing; Thursday, March 16, 2017 at 1:30pm in Room 414

Re: Support for HB 428, HD1, Relating to Physician Workforce Assessment

My name is Paula Yoshioka and I am a Senior Vice President at The Queen's Health Systems (QHS). We would like to express our **support** for HB 428, HD1, Relating to Physician Workforce Assessment. The Hawaii Physician Workforce Assessment Program supports research of the supply and demand of physicians in Hawaii, as well as interventions to recruit physicians and to increase career satisfaction of practicing physicians. Currently the program is scheduled to sunset on June 30, 2017. This bill removes the sunset date and allows this important program to continue.

At QHS, we support efforts to develop our current and future physician workforce given the projected shortage of physicians in our state. In FY 2015 we spent \$14.4 million in education and training to support current and future health care professionals in the community. Currently, Hawaii has a shortage of over 500 physicians, particularly in rural and underserved areas. This Program allows the John A. Burns School of Medicine (JABSOM) to be able to collect and analyze data on the physician workforce to help with education, recruitment, training, and further support programs to ensure that those physicians who wish to stay and practice in Hawaii have the resources to do so.

We ask you to support the continuation of the Hawaii Physician Workforce Assessment Program. Thank you for your time and attention to this important issue.

To: The Honorable Kaialii Kahele, Chair
The Honorable Michelle N. Kidani, Vice Chair
Members, Committee on Higher Education

The Honorable Rosalyn H. Baker, Chair
The Honorable Clarence K. Nishihara, Vice Chair
Members, Committee on Commerce, Consumer Protection, and Health

From: Gerard Akaka, MD, Vice President of Native Hawaiian Affairs & Clinical Support, The Queen's Health Systems

Date: March 13, 2017

Hrg: Senate Committees on Higher Education and Commerce, Consumer Protection, and Health Joint Hearing; Thursday, March 16, 2017 at 1:30pm in Room 414

Re: Support for HB 428, HD1, Relating to Physician Workforce Assessment

My name is Gerard Akaka, MD, and I am the Vice President of Native Hawaiian Affairs & Clinical Support at The Queen's Health Systems (QHS). I would like to express my **support** for HB 428, HD1, Relating to Physician Workforce Assessment. The Hawaii Physician Workforce Assessment Program supports research of the supply and demand of physicians in Hawaii, as well as interventions to recruit physicians and to increase career satisfaction of practicing physicians. Currently the program is scheduled to sunset on June 30, 2017. This bill removes the sunset date and allows this important program to continue.

At QHS, we support efforts to develop our current and future physician workforce given the projected shortage of physicians in our state. In FY 2015 we spent \$14.4 million in education and training to support current and future health care professionals in the community. Currently, Hawaii has a shortage, particularly in rural and underserved areas. This Program allows the John A. Burns School of Medicine (JABSOM) to be able to collect and analyze data on the physician workforce to help with education, recruitment, training, and further support programs to ensure that those physicians who wish to stay and practice in Hawaii have the resources to do so.

I ask you to support the continuation of the Hawaii Physician Workforce Assessment Program. Thank you for your time and attention to this important issue.

Testimony of
Jonathan Ching
Government Relations Specialist

Before:
Senate Committee on Higher Education
The Honorable Kaiali'i Kahele, Chair
The Honorable Michelle N. Kidani, Vice Chair

Senate Committee on Commerce, Consumer Protection, and Health
The Honorable Rosalyn H. Baker, Chair
The Honorable Clarence K. Nishihara, Vice Chair

March 16, 2017
1:30 p.m.
Conference Room 414

Re: HB428 HD1 Relating to Physician Workforce Assessment

Chairs, Vice Chairs, and committee members, thank you for this opportunity to provide testimony on HB428 HD1, which will allow the John A. Burns School of Medicine to continue to receive a portion of the physician workforce assessment fee to support the physician workforce assessment and planning to effect the strategic recruitment and retention of physicians for rural and medically underserved areas of the State.

Kaiser Permanente Hawaii SUPPORTS HB428 HD1.

We support efforts to recruit and retain physicians in rural, remote, and underserved areas of our State. Prior to the Hawai'i Physician Workforce Assessment's inception in 2009, there was a lack of accurate baseline data on Hawai'i's physician workforce and their distribution throughout the state. The Hawai'i Physician Workforce Assessment Project, located within the John A. Burns School of Medicine, has provided the Legislature and members of the public with the most accurate data and analysis on the status of Hawai'i's physician workforce, as well as development of interventions to improve distribution of the physician workforce in Hawai'i.

Kaiser Permanente Hawaii recognizes the importance of the work by the Hawai'i Physician Workforce Assessment Project in finding tangible solutions to address the ongoing need for a strong physician workforce.

Therefore, we urge the committees to pass HB428 HD1. Mahalo for the opportunity to testify on this measure.



March 16, 2017
1:30 p.m.
Conference Room 414

To: The Honorable Kaiali'i Kahele, Chair
The Honorable Michelle Kidani, Vice Chair
Senate Committee on Higher Education

The Honorable Rosalyn Baker, Chair
The Honorable Clarence Nishihara, Vice Chair
Senate Committee on Commerce, Consumer Protection, and Health

From: Laura Esslinger, Chief Executive Officer
Paula Arcena, Chief Customer Officer
Rachel Wilkinson, Public Policy Analyst

Re: HB428 HD1 Relating to Physician Workforce Assessment

AlohaCare appreciates the opportunity to testify **in support** of HB428 HD1 which allows the John A. Burns School of Medicine to continue to receive a portion of the physician workforce assessment fee for ongoing physician workforce assessment and planning to support the recruitment and retention of physicians in the State, particularly those in rural and medically underserved areas.

AlohaCare is a non-profit, Hawaii based health plan founded in 1994 by Hawaii's community health centers. We serve Medicaid and Medicare Special Needs beneficiaries in all counties.

It is no secret Hawaii has a shortage of physicians, nurse practitioners, physician assistants, physical therapists and many other healthcare providers. Continuing the physician workforce assessment will help provide continuing medical education, new provider recruitment, training for medical students in rural areas, and support for physicians to receive loan repayment for working in underserved areas, among other beneficial aspects of this program.

Continuation of the Physician Workforce Assessment program will cost licensed physicians of Hawaii \$60 every other year and will allow for continuation of the above activities as well as capacity to act rapidly when new ideas for solving the physician shortage are identified.

Thank you for this opportunity to testify.

March 16, 2017; 1:30 pm

Conference Room 414

Senate Committee on Higher Education

To: Senator Kaialii Kahele, Chair
Senator Michelle Kidani, Vice Chair

Senate Committee on Commerce, Consumer Protection and Health

To: Senator Rosalyn Baker, Chair
Senator Clarence Nishihara, Vice Chair

From: Michael Robinson
Vice President – Government Relations & Community Affairs

Re: HB 428, HD1 – Testimony in Support

My name is Michael Robinson, Vice President, Government Relations and Community Affairs at Hawai'i Pacific Health (HPH). Hawai'i Pacific Health is a not-for-profit health care system, and the state's largest health care provider and non-governmental employer. Hawai'i Pacific Health 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. Hawai'i Pacific Health's hospitals are Kapi'olani Medical Center for Women & Children, Pali Momi Medical Center, Straub Clinic & Hospital and Wilcox Memorial Hospital.

I am writing in **strong support** of HB 428, HD1 which repeals the sunset date of June 30, 2017 and enables the John A. Burns School of Medicine (JABSOM) to continue its efforts of reducing the physical shortage through research of supply and demand, as well as continuing its programs to recruit physicians to Hawaii and increase career satisfaction of practicing physicians.

Hawaii has a shortage of over 500 doctors. The shortage is most acute for those on the neighbor islands and in rural, underserved communities. Without the continued commitment to address the physician shortage, the people of Hawaii will not have access to the healthcare they need. Through the physician workforce assessment JABSOM will be able to implement programs and interventions, such as loan repayment to physicians, recruitment, education and training, to help to bring more doctors to Hawaii.

Thank you for the opportunity to provide testimony on this bill.

Testimony Presented Before the
Senate Committees on Higher Education and
Commerce, Consumer Protection and Health
March 16, 2017; 1:30 pm

HB 428, HD1 –RELATING TO PHYSICIAN WORKFORCE ASSESSMENT

Chairs Kahele and Baker, Vice Chairs Kidani and Nishihara, and members of the committees:

Thank you for this opportunity to testify in **strong support** of HB 428, which permits continuation of the Hawai`i Physician Workforce Assessment program that supports research of the supply and demand of physicians in Hawai`i, as well as interventions to recruit physicians and increase career satisfaction of practicing physicians. Currently the program is scheduled to sunset on June 30, 2017. So if you don't act on this all the activities will end. This program costs the State of Hawaii nothing, as the physicians pay a small fee to make it possible.

It is clear that most areas of Hawaii have shortages of physicians, as well as nurse practitioners, physician assistants, physical therapists and many other healthcare providers. Continuing the physician workforce assessment will help in these ways:

Providing Continuing Medical Education for free.

Recruiting new providers on the website www.ahec.hawaii.edu

Creating the Health Career Navigator and supporting activities to recruit students into health careers such as those at www.ahec.hawaii.edu.

Support for state efforts to get expanded federal designations of Health Professions Shortage Areas.

Support for 13 physicians to receive loan repayment for working in underserved areas.

Support for the Hawai`i Ho`okipa Program, a welcoming program for newly arriving providers to get them integrated into the community where they work.

Support training for medical students in rural areas.

Creation of a Rural Health Coordinator at University of Hawai`i that will work with all health students working in rural areas to increase opportunities and track impact of the rural training programs.

Continuation of the Physician Workforce Assessment program will cost the physicians of Hawai`i \$60 every other year and will allow for continuation of the above activities as well as capacity to act rapidly when new ideas for solving the physician shortage are identified.

Thank you for this opportunity to testify!

Sincerely,

Erica Davis
Hawaii AHEC Associate Director
Email: davisel3@hawaii.edu



HAWAI'I ACADEMY OF FAMILY PHYSICIANS

Testimony Presented Before the
Senate Committees on Higher Education and
Commerce, Consumer Protection and Health
March 16, 2017; 1:30 pm

By: Hawai'i Academy of Family Physician

HB 428, HD1 –RELATING TO PHYSICIAN WORKFORCE ASSESSMENT

Chairs Kahele and Baker, Vice Chairs Kidani and Nishihara, and members of the committees:

Thank you for this opportunity to testify in **strong support** of HB 428, which permits continuation of the Hawai'i Physician Workforce Assessment program that supports research of the supply and demand of physicians in Hawai'i, as well as interventions to recruit physicians and increase career satisfaction of practicing physicians. Currently the program is scheduled to sunset on June 30, 2017. So if you don't act on this all the activities will end. This program costs the State of Hawaii nothing, as the physicians pay a small fee to make it possible.

It is clear that most areas of Hawaii have shortages of physicians, as well as nurse practitioners, physician assistants, physical therapists and many other healthcare providers. Continuing the physician workforce assessment will help in these ways:

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Support training for medical students in rural areas.

Creation of a Rural Health Coordinator at University of Hawai'i that will work with all health students working in rural areas to increase opportunities and track impact of the rural training programs.

Continuation of the Physician Workforce Assessment program will cost the physicians of Hawai'i \$60 every other year and will allow for continuation of the above activities as well as capacity to act rapidly when new ideas for solving the physician shortage are identified.

Thank you for this opportunity to testify,

Kelley Withy, MD, PhD, President HAFP

LĀNA'Ī COMMUNITY HEALTH CENTER

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



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

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

Testimony Presented Before the
House Committee on Higher Education and
House Committee on Commerce, Consumer Protection, and Health
March 16, 2017

HB428 HD1 –RELATING TO PHYSICIAN WORKFORCE ASSESSMENT

Aloha Kakou:

Thank you for this opportunity to testify in **strong support** of SHB428 HD1, which permits continuation of the Hawai'i Physician Workforce Assessment program that supports research of the supply and demand of physicians in Hawai'i, as well as interventions to recruit physicians and increase career satisfaction of practicing physicians. Currently the program is scheduled to sunset on June 30, 2017. So if you don't act on this all the activities will end!

It is clear that my community has a shortage of physicians, as well as nurse practitioners, physician assistants, physical therapists and many other healthcare providers. Continuing the physician workforce assessment will help in these ways:

- Providing Continuing Medical Education for me.
- Recruiting new providers on the website www.ahec.hawaii.edu
- Creating the Health Career Navigator and supporting activities to recruit students into health careers such as those at www.ahec.hawaii.edu.
- Support for state efforts to get expanded federal designations of Health Professions Shortage Areas.
- Support for 13 physicians to receive loan repayment for working in underserved areas.

E Ola nō Lāna'ī

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

- Support for the Hawai'i Ho`okipa Program, a welcoming program for newly arriving providers to get them integrated into the community where they work.
- Support training for medical students in rural areas.
- Creation of a Rural Health Coordinator at University of Hawai'i that will work with all health students working in rural areas to increase opportunities and track impact of the rural training programs.

Continuation of the Physician Workforce Assessment program will cost the physicians of Hawai'i \$60 every other year and will allow for continuation of the above activities as well as capacity to act rapidly when new ideas for solving the physician shortage are identified. This program is of critical importance to our rural, remote FQHC in providing loan repayment options to our employees. It is therefore also critical to our ability to provide badly needed services to our community.

Thank you for this opportunity to testify.

A handwritten signature in brown ink, appearing to be 'DVM' followed by a stylized flourish.

The Twenty-Ninth Legislature
Regular Session of 2017

THE STATE SENATE

Committee on Higher Education

Senator Kaiali'i Kahele, Chair

Senator Michelle N. Kidani, Vice Chair

Committee on Commerce, Consumer Protection, and Health

Senator Rosalyn H. Baker, Chair

Senator Clarence K. Nishihara, Vice Chair

**STATEMENT OF THE ILWU LOCAL 142 ON H.B. 428 HD 1
RELATING TO LOAN REPAYMENT FOR HEALTH CARE PROFESSIONALS**

The ILWU Local 142 supports H.B. 428 HD 1, which allows the John A. Burns School of Medicine to continue to receive a portion of the physician workforce assessment fee for ongoing physician workforce assessment and planning, to support the recruitment and retention of physicians in the State, particularly those in rural and medically underserved areas.

The current shortage of doctors is a national problem today, and this shortage has affected essentially all of the states, including Hawaii. In fact we have had recent assessments made of the doctors' and other health care professionals' shortage in Hawaii, which reflects an acute situation approaching a crisis. This is particularly true for the neighbor islands and other rural areas that are currently underserved.

For example, this has affected injured workers, under the workers' compensation system preventing them from immediately accessing medical treatment. When there is a delay in providing medical treatment it can lead to greater impairment for the worker, which does not serve the best interests of any party.

Given the limited number of doctors providing care on Kauai, there is currently no psychiatrist or psychologist who is willing to treat workers who sustain industrial injuries. This prevents injured workers, suffering from injuries involving behavioral health conditions, to access medical care on Kauai.

We need to be able to effectively address the shortage of doctors throughout the State. This will help all residents in Hawaii have access to quality medical care. H.B. 428 HD 1 is an important tool to achieve this critical long term goal.

The ILWU urges passage of H.B. 428 HD 1. Thank you for the opportunity to share our views and concerns on this matter.



Testimony Presented Before the
Senate Committees on Higher Education and
Commerce, Consumer Protection and Health
March 16, 2017; 1:30 pm

HB 428, HD1 –RELATING TO PHYSICIAN WORKFORCE ASSESSMENT

Chairs Kahele and Baker, Vice Chairs Kidani and Nishihara, and members of the committees:

Thank you for this opportunity to testify in **strong support** of HB 428, which permits continuation of the Hawai`i Physician Workforce Assessment program that supports research of the supply and demand of physicians in Hawai`i, as well as interventions to recruit physicians and increase career satisfaction of practicing physicians. Currently the program is scheduled to sunset on June 30, 2017. So if you don't act on this all the activities will end. This program costs the State of Hawaii nothing, as the physicians pay a small fee to make it possible.

It is clear that most areas of Hawaii have shortages of physicians, as well as nurse practitioners, physician assistants, physical therapists and many other healthcare providers. Continuing the physician workforce assessment will help in these ways:

Providing Continuing Medical Education for free.

Recruiting new providers on the website www.ahec.hawaii.edu

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Support for state efforts to get expanded federal designations of Health Professions Shortage Areas.

Support for 13 physicians to receive loan repayment for working in underserved areas.

Support for the Hawai`i Ho`okipa Program, a welcoming program for newly arriving providers to get them integrated into the community where they work.

Support training for medical students in rural areas.

Creation of a Rural Health Coordinator at University of Hawai`i that will work with all health students working in rural areas to increase opportunities and track impact of the rural training programs.

Continuation of the Physician Workforce Assessment program will cost the physicians of Hawai`i \$60 every other year and will allow for continuation of the above activities as well as capacity to act rapidly when new ideas for solving the physician shortage are identified.

Thank you for this opportunity to testify!

David S. De Luz, Jr.
Vice President

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Testimony Presented Before the
Senate Committees on Higher Education and
Commerce, Consumer Protection and Health
March 16, 2017; 1:30 pm

HB 428, HD1 –RELATING TO PHYSICIAN WORKFORCE ASSESSMENT

Chairs Kahele and Baker, Vice Chairs Kidani and Nishihara, and members of the committees:

Thank you for this opportunity to testify in **strong support** of HB428, which permits continuation of the Hawai`i Physician Workforce Assessment program. Currently the program is scheduled to sunset on June 30, 2017. If no action is taken on this measure, all the activities will end!

There are a number of reasons to maintain this program, but the most compelling is this: The organization that publishes the most widely used physician workforce data at the national and state level is the American Association of Medical Colleges (AAMC), a fine organization. But the primary data source for its biennial physician supply report is The American Medical Association (AMA) Physician Masterfile. This data has been carefully scrutinized by impartial researchers, who published their findings in peer reviewed journals. In short, they found AMA Masterfile data inaccurate and misleading. The reasons for this appear to be beyond the AMA's control.

Planning our healthcare delivery system has far-reaching implications for virtually everyone in the state. And starting with proven inaccurate data is nonsensical, particularly when HB428 maintains a source of good provider workforce data at no cost to the taxpayer.

I urge you to maintain the flow of accurate physician/other provider workforce data by passing HB428.

Thank you for this opportunity to testify.

David Sakamoto
(808) 589-8081
dtsret@gmail.com

From: mailinglist@capitol.hawaii.gov
Sent: Tuesday, March 14, 2017 12:44 PM
To: HRE Testimony
Cc: aliapoint@gmail.com
Subject: Submitted testimony for HB428 on Mar 16, 2017 13:30PM

HB428

Submitted on: 3/14/2017

Testimony for HRE/CPH on Mar 16, 2017 13:30PM in Conference Room 414

| Submitted By | Organization | Testifier Position | Present at Hearing |
|---------------------|---------------------|---------------------------|---------------------------|
| Edward Johnston | Individual | Support | No |

Comments: This will be good for Hawai'i.

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
Sent: Tuesday, March 14, 2017 11:14 AM
To: HRE Testimony
Cc: kaburg@att.net
Subject: *Submitted testimony for HB428 on Mar 16, 2017 13:30PM*

HB428

Submitted on: 3/14/2017

Testimony for HRE/CPH on Mar 16, 2017 13:30PM in Conference Room 414

| Submitted By | Organization | Testifier Position | Present at Hearing |
|---------------------|---------------------|---------------------------|---------------------------|
| kelley burg | Individual | Support | No |

Comments:

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From: mailinglist@capitol.hawaii.gov
Sent: Tuesday, March 14, 2017 8:18 AM
To: HRE Testimony
Cc: geesey@hawaii.edu
Subject: Submitted testimony for HB428 on Mar 16, 2017 13:30PM

HB428

Submitted on: 3/14/2017

Testimony for HRE/CPH on Mar 16, 2017 13:30PM in Conference Room 414

| Submitted By | Organization | Testifier Position | Present at Hearing |
|---------------------|---------------------|---------------------------|---------------------------|
| Yvonne Geesey | Individual | Support | No |

Comments: Please support, mahalo!

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From: mailinglist@capitol.hawaii.gov
Sent: Monday, March 13, 2017 6:34 PM
To: HRE Testimony
Cc: mendezj@hawaii.edu
Subject: *Submitted testimony for HB428 on Mar 16, 2017 13:30PM*

HB428

Submitted on: 3/13/2017

Testimony for HRE/CPH on Mar 16, 2017 13:30PM in Conference Room 414

| Submitted By | Organization | Testifier Position | Present at Hearing |
|-----------------------|---------------------|---------------------------|---------------------------|
| Javier Mendez-Alvarez | 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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From: mailinglist@capitol.hawaii.gov
Sent: Monday, March 13, 2017 1:48 PM
To: HRE Testimony
Cc: doug@shipmanlawhilo.com
Subject: Submitted testimony for HB428 on Mar 16, 2017 13:30PM

HB428

Submitted on: 3/13/2017

Testimony for HRE/CPH on Mar 16, 2017 13:30PM in Conference Room 414

| Submitted By | Organization | Testifier Position | Present at Hearing |
|---------------------|---------------------|---------------------------|---------------------------|
| Douglass Adams | Individual | Support | No |

Comments: Dear Chair Kahele, Chair Baker, and members of your respective committees, I support passage of HB428 HD1. Much work remain to be done to improve health care in our county and state. This work requires data collection and analysis to enable smart decisions. HB428 HD1 is a major contributor to understanding the physician shortages that we suffer and must overcome in the future. Mahalo for your consideration of this bill. Douglass S. Adams Hilo, Hawai'i

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Testimony Presented Before the
Senate Committees on Higher Education and
Commerce, Consumer Protection and Health
March 16, 2017; 1:30 pm

HB 428, HD1 –RELATING TO PHYSICIAN WORKFORCE ASSESSMENT

I write today to testify in **strong support** of HB 428, which permits continuation of the Hawai'i Physician Workforce Assessment program that supports research of the supply and demand of physicians in Hawai'i, as well as interventions to recruit physicians and increase career satisfaction of practicing physicians. Currently the program is scheduled to sunset on June 30, 2017. So if you don't act on this all the activities will end. This program **COSTS** the State of Hawaii **NOTHING**, as the physicians pay a small fee to make it possible.

As we all well know most areas of Hawaii have shortages of physicians, as well as nurse practitioners, and many other healthcare providers. Continuing the physician workforce assessment will help in multiple ways including:

Providing Continuing Medical Education for free.

Recruiting new providers on the website www.ahcc.hawaii.edu

Support for 13 physicians to receive loan repayment for working in underserved areas.

Support training for medical students in rural areas.

Creation of a Rural Health Coordinator at University of Hawai'i that will work with all health students working in rural areas to increase opportunities and track impact of the rural training programs.

Continuation of the Physician Workforce Assessment program will cost the physicians of Hawai'i \$60 every other year and will allow for continuation of the above activities as well as capacity to act rapidly when new ideas for solving the physician shortage are identified.

I cannot support this measure strongly enough, and, as it is revenue neutral, I cannot understand why it would not be passed.

Thank you for this opportunity to testify!

From: mailinglist@capitol.hawaii.gov
Sent: Wednesday, March 15, 2017 9:36 AM
To: HRE Testimony
Cc: mkaleikini@ormat.com
Subject: Submitted testimony for HB428 on Mar 16, 2017 13:30PM

HB428

Submitted on: 3/15/2017

Testimony for HRE/CPH on Mar 16, 2017 13:30PM in Conference Room 414

| Submitted By | Organization | Testifier Position | Present at Hearing |
|---------------------|---------------------|---------------------------|---------------------------|
| Mike Kaleikini | Individual | Support | No |

Comments: Chairs Kahele and Baker, Vice Chairs Kidani and Nishihara, and members of the committees. Mahalo for the opportunity to submit testimony in strong support of HB 428. The continuation of the Hawai'i Physician Workforce Assessment program is critical for the health and wellbeing of Hawai'i. This program, which sunsets in June 2017, has no cost to the State of Hawai'i, as the physicians pay a fee to make this program possible. Mahalo for this opportunity to provide testimony in support.

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