

Monday, March 14, 2022 at 1:00 PM  
Via Video Conference

**Senate Committee on Health**

To: Senator Jarrett Keohokalole, Chair  
Senator Rosalyn Baker, Vice Chair

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

Re: **HB 1575, HD2 – Testimony In Support  
Relating to Physician Assistants**

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My name is Michael Robinson, and I am the Vice President of Government Relations & Community Affairs at Hawai'i Pacific Health. Hawai'i Pacific Health is a not-for-profit health care system comprised of its four medical centers – Kapi'olani, Pali Momi, Straub and Wilcox and over 70 locations statewide with a mission of creating a healthier Hawai'i.

I am writing in SUPPORT of HB 1575, HD2 which expands the scope of practice for physician assistants and streamlines the process of reviewing records.

The 2021 annual report on findings from the Hawaii Physician Workforce Assessment found that Hawaii has an unmet need for seven hundred thirty-two full-time doctors. The islands of Maui and Hawaii face the most severe shortages, each needing forty per cent more healthcare providers. In contrast, the number of licensed physician assistants has grown by one hundred five per cent on the island of Hawaii, one hundred fourteen per cent on the island of Kauai and thirty-five per cent on the island of Maui.

Utilization of physician assistants provides a viable option to managing both the growing physician shortage and the growing medical demands of the State's aging population. Physician assistants are skilled health care providers trained to take medical histories, perform physical examinations, order and interpret laboratory tests, diagnose illness, develop and manage treatment plans, prescribe medications, and assist in surgery. Thus, they offer an effective and efficient method of delivering healthcare to our community.

Thank you for the opportunity to testify.



TO: Senate Committee on Health  
The Honorable Jarrett Keohokalole, Chair  
The Honorable Rosalyn H. Baker, Vice Chair

Hearing Date/Time: March 14, 2022, 1:00 p.m.  
Place: CR 225 & Via Videoconference

**Re: HB 1575 HD2, Relating to Physician Assistants**

Dear Chair Keohokalole, Vice Chair Baker, and Committee Members,

Thank you for this opportunity to provide testimony on HB 1575 HD2, which modernizes scope of practice for physician assistants in the state of Hawai`i.

**Hawai`i Academy of Physician Assistants (HAPA) STRONGLY SUPPORTS HB 1575 HD2, and requests an AMENDMENT**

HAPA is the Hawaii state chapter of The American Academy of Physician Assistants. According to the 2021 annual report on findings from the Hawaii physician workforce assessment report, Hawai`i has an unmet need for 732 full time physicians across the state with neighbor island counties facing the most severe shortages.

Paradoxically, since 2016, the number of practicing physician assistants has increased by 105% on the island of Hawai`i, 114% on Kauai, and 35% on Maui. Despite this increase, physician assistants remain underutilized due to Hawai`i's restrictive practice laws, which prevent physician assistants from practicing at the top of their training and education. HAPA supports HB 1575 HD2 because it removes some of these restrictions and helps bring Hawai`i physician assistant scope of practice into alignment with national practices.

HAPA appreciates the Legislature's passage of Act 181, Session Laws of Hawai`i 2019, which was a monumental bill that modernized physician assistant chart review and successfully lowered administrative burden for physicians, without compromising patient care. HB 1575 HD2 expands the review structure established in 2019 to include physician assistant prescribed controlled substances. Like 2019, we expect this change will continue to prioritize patient care while significantly decreasing physician administrative burden. In addition, HB 1575 HD2 will allow physician assistants, like advanced practice nurses (APRNs), to sign temporary disability insurance forms, disability parking permits, Provider Orders for Life Sustaining Treatment (POLST) forms, and other administrative forms that are time sensitive and critical for patients' quality of life and continuity of care but are often delayed by the physician shortage.

Physician assistants are highly skilled medical providers and authorized by the Affordable Care Act, along with physicians and APRNs, to serve as primary care provider (PCP). They receive rigorous medical training modeled on medical school curriculum which includes rotations in family medicine, internal medicine, general surgery, pediatrics, obstetrics and gynecology, emergency medicine, psychiatry, and other specialty electives. Physician assistant training programs typically require thousands of hours of previous clinical care experience before matriculation is even considered.



In practice, physician assistants routinely take medical histories, perform physical examinations, order and interpret laboratory tests, diagnose illnesses, develop and manage treatment plans, prescribe medications, and first-assist in surgery.

With their skillset and training, physician assistants play a critical role on care delivery teams and can pivot quickly to supply care when and where it is needed most. This has been invaluable during the pandemic when we rely heavily on physician assistants' unique adaptability to ensure care delivery in an ever-changing landscape.

**We request the following technical, clarifying amendment to Section 10 by moving language on page 20, lines 9-15 of section (i) and page 20, line 20 to page 21, lines 1-4 of section (ii) to follow section (iii) on page 21, line 18.**

SECTION 10. Section 453-5.3, Hawaii Revised Statutes, is amended by amending subsection (g) to read as follows:

"(g) For medical records of patients seen by physician assistants:

(1) Each physician assistant and supervising physician, osteopathic physician, or group of physicians shall establish written guidelines for the review of medical records as appropriate to the specific practice. These guidelines shall be kept in the office of the practice setting in which either the physician assistant or supervising physician, osteopathic physician, or group of [+]physicians[+] practices, and shall be made available to the Hawaii medical board and the regulated industries complaints office or its designees;

(2) The supervising physician, osteopathic physician, or group of physicians shall review medical records as required by this subsection; provided that:

(A) When supervising a physician assistant with less than one year of practice experience as a licensed physician assistant, the supervising physician, osteopathic physician, or group of physicians shall:

(i) For the first six months of supervision, review fifty per cent of the medical records within thirty days of the patient visit; [and] provided that the supervising physician, osteopathic physician, or group of physicians may, on a case-by-case basis, require physician assistants who begin in a new practice specialty with less than one year of full-time practice experience in the specialty to comply with this clause;

(ii) For the next six months of supervision, review twenty-five per cent of the medical records within thirty days of the patient visit[-



- ~~The]; provided that the board may, on a case-by-case basis, require physician assistants [that] who begin in a new practice specialty with less than one year of full-time practice experience in the specialty to comply with this [subparagraph;] clause; and~~
- (iii) For physician assistants who issue controlled substance prescriptions, at least fifty per cent of the records reviewed under clause (i) or (ii) shall include controlled substance prescriptions; provided that if the number of records that include controlled substance prescriptions amount to less than fifty per cent of the records in clause (i) or (ii), the supervising physician, osteopathic physician, or group of physicians shall review as many controlled substance prescriptions as are available[+].  
The board may, on a case-by-case basis, require physician assistants who begin in a new practice specialty with less than one year of full-time practice experience in the specialty to comply with this clause; and
- (B) When supervising a physician assistant with more than one year of practice experience as a licensed physician assistant, the supervising physician, osteopathic physician, or group of physicians shall:
- (i) Establish a process for the regular review of a sample of medical records of patients seen by the physician assistant[+], including a sample of controlled substance records, if available; and
- (ii) For at least thirty minutes each month, perform an audit and review of the medical records; and
- (3) Notwithstanding paragraph (2), a supervising physician, osteopathic physician, or group of physicians may require additional supervisory requirements at any time for patient safety."

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

Hawai`i Academy of Physician Assistants

**Testimony of the Hawaii Medical Board**

**Before the  
Senate Committee on Health  
Monday, March 14, 2022  
1:00 p.m.  
Via Videoconference**

**On the following measure:  
H.B. 1575, H.D. 2, RELATING TO PHYSICIAN ASSISTANTS**

Chair Keohokalole and Members of the Committee:

My name is Ahlani Quiogue, and I am the Executive Officer of the Hawaii Medical Board (Board). The Board supports this bill.

The purposes of this bill are to: (1) expand the scope of practice for physician assistants; and (2) require a sampling of medical records, rather than all medical records, to be reviewed when physician assistants prescribe controlled substances.

The Board supports this bill, as it: (1) broadens physician assistants' scope of practice to provide a wide range of services, which would benefit the citizens of Hawaii; and (2) alleviates the overly burdensome administrative requirement of having a supervising physician review all medical records that contain written orders or prescriptions for controlled substances.

The Board recognizes the important role physician assistants have in healthcare and believes this bill is a step in the right direction.

Thank you for the opportunity to testify on this bill.

Testimony of  
Jonathan Ching  
Government Relations Director

Before:  
Senate Committee on Health  
The Honorable Jarrett Keohokalole, Chair  
The Honorable Rosalyn H. Baker, Vice Chair

March 14, 2022  
1:00 p.m.  
CR 225 & Via Videoconference

**Re: HB1575, HD2, Relating to Physician Assistants**

Chair Keohokalole, Vice Chair Baker, and committee members, thank you for this opportunity to provide testimony on HB1575, HD2, which modernizes the practice of physician assistants.

**Kaiser Permanente Hawai‘i SUPPORTS HB1575, HD2 and requests an AMENDMENT**

Kaiser Permanente Hawai‘i is Hawai‘i’s largest integrated health system that provides care and coverage for approximately 265,000 members. Kaiser Permanente Hawai‘i believes that physician assistants should be permitted to practice medicine at the top of their training, education, and experience. Kaiser Permanente Hawai‘i appreciates the contributions made by licensed physician assistants and has a great deal of confidence in the quality of health care they provide to our members. Our physician-owned Hawai‘i Permanente Medical Group (HPMG) – Hawai‘i’s largest multispecialty medical group – employs over 650 physicians and licensed medical providers, including over 80 physician assistants. Within the Kaiser Permanente system, physician assistants collaborate with physicians and other medical professionals to provide high quality patient care in a variety of specialties and settings, including: Family Medicine, Internal Medicine, Pediatrics, Dermatology, Orthopedics, Cardiology, Endocrinology, Oncology, Obstetrics & Gynecology, Emergency Medicine, Nephrology, Occupational Medicine, Vascular Surgery, General and Cardiothoracic Surgery, Infectious Disease, Radiology, Urology and Otolaryngology (ears, nose and throat).

Kaiser Permanente Hawai‘i supports HB1575, HD2 because it removes barriers to practice for physician assistants and ensures greater access to health care for Hawai‘i residents, especially those who reside on the neighbor islands where need is greatest. Since 2016, the number of physician assistants has increased by 105% on the island of Hawai‘i, 114% on Kauai, and 35% on Maui. Despite this increase, physician assistants remain underutilized because Hawai‘i’s restrictive practice laws prevent physician assistants from practicing at the top of their training and education. We support HB1575, HD2 because it removes some of these restrictions and helps bring Hawai‘i physician assistant scope of practice into alignment with national practices.

HB1575, HD2 builds on the Legislature's previous successes modernizing physician assistants' practice in Hawai'i. In 2019, the Legislature passed Act 181, Session Laws of Hawai'i 2019, modernizing physician assistant chart review by collaborating physicians, which has successfully lowered administrative burden on physicians, without compromising patient care. HB 1575, HD2 expands the review structure established in 2019 to include physician assistant prescribed controlled substances. Similar to 2019, we expect this change will continue to prioritize patient care while significantly decreasing physicians' administrative burden. In addition, HB1575, HD2 will allow physician assistants, like advanced practice nurses (APRNs), to sign temporary disability insurance forms, disability parking permits, Provider Orders for Life Sustaining Treatment (POLST) forms, and other administrative forms that are time sensitive and critical for patients' quality of life and continuity of care but are often delayed by the physician shortage.

Physician assistants are skilled health care providers and authorized by the Affordable Care Act, along with physicians and APRNs, to serve as primary care provider (PCP). They receive rigorous medical training modeled on medical school curriculum which typically includes rotations in family medicine, internal medicine, general surgery, pediatrics, obstetrics and gynecology, emergency medicine, psychiatry, and other specialty electives. Physician assistant training programs typically require thousands of hours of previous clinical care experience before matriculation is even considered.

In practice, physician assistants routinely take medical histories, perform physical examinations, order and interpret laboratory tests, diagnose illnesses, develop and manage treatment plans, prescribe medications, and first-assist in surgery. With their skills and training, physician assistants play a critical role on our care delivery teams and are represented in every medical specialty within our medical group. Kaiser Permanente Hawai'i continues to focus on recruiting physician assistants because physician assistants possess a skillset and training that allows them to be able to pivot quickly to supply care when and where it is needed most. This has been invaluable during the pandemic when we rely heavily on our physician assistants' unique adaptability to provide care in an ever-changing landscape.

**We request the following clarifying amendment to Section 10 to preserve the Board's ability to increase monitoring of physician assistant prescribing on a case-by-case basis when necessary to ensure high quality care. We request to amend Section 10 by moving language on page 20, lines 9-15 of section (i) and page 20, line 20 to page 21, lines 1-4 of section (ii) to follow section (iii) on page 21, line 18.**

SECTION 10. Section 453-5.3, Hawaii Revised Statutes, is amended by amending subsection (g) to read as follows:

"(g) For medical records of patients seen by physician assistants:

(1) Each physician assistant and supervising physician, osteopathic physician, or group of physicians shall establish written guidelines for the review of medical records as appropriate to the

specific practice. These guidelines shall be kept in the office of the practice setting in which either the physician assistant or supervising physician, osteopathic physician, or group of [†]physicians[†] practices, and shall be made available to the Hawaii medical board and the regulated industries complaints office or its designees;

(2) The supervising physician, osteopathic physician, or group of physicians shall review medical records as required by this subsection; provided that:

(A) When supervising a physician assistant with less than one year of practice experience as a licensed physician assistant, the supervising physician, osteopathic physician, or group of physicians shall:

(i) For the first six months of supervision, review fifty per cent of the medical records within thirty days of the patient visit; ~~and provided that the supervising physician, osteopathic physician, or group of physicians may, on a case-by-case basis, require physician assistants who begin in a new practice specialty with less than one year of full-time practice experience in the specialty to comply with this clause;~~

(ii) For the next six months of supervision, review twenty-five per cent of the medical records within thirty days of the patient visit[~~-~~ ~~The~~]; ~~provided that the board may, on a case-by-case basis, require physician assistants [that] who begin in a new practice specialty with less than one year of full-time practice experience in the specialty to comply with this [subparagraph;] clause; and~~

(iii) For physician assistants who issue controlled substance prescriptions, at least fifty per cent of the records reviewed under clause (i) or (ii) shall include controlled substance prescriptions; provided that if the number of records that include controlled substance prescriptions amount to less than fifty per cent of the records in clause (i) or (ii), the supervising physician, osteopathic physician, or group of physicians shall review as many controlled substance prescriptions as are available[†].

The board may, on a case-by-case basis, require physician assistants who begin in a new practice specialty with less than one year of full-time practice experience in the specialty to comply with this clause; and

(B) When supervising a physician assistant with more than one year of practice experience as a licensed

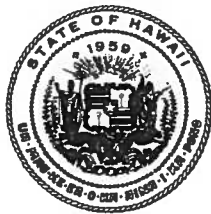


physician assistant, the supervising physician, osteopathic physician, or group of physicians shall:

- (i) Establish a process for the regular review of a sample of medical records of patients seen by the physician assistant~~[7]~~, including a sample of controlled substance records, if available; and
- (ii) For at least thirty minutes each month, perform an audit and review of the medical records; and

(3) Notwithstanding paragraph (2), a supervising physician, osteopathic physician, or group of physicians may require additional supervisory requirements at any time for patient safety."

Mahalo for the opportunity to testify in support of this important measure.



## DISABILITY AND COMMUNICATION ACCESS BOARD

1010 Richards Street, Room 118 • Honolulu, Hawaii 96813  
Ph. (808) 586-8121 (V) • Fax (808) 586-8129

March 14, 2022

### TESTIMONY TO THE SENATE COMMITTEE ON HEALTH

#### House Bill 1575, House Draft 2 – Relating to Physician Assistants

The Disability and Communication Access Board (DCAB) supports with comments House Bill 1575, House Draft 2 Relating to Physician Assistants.

The DCAB supports with changes to the amendments to Section 291-51, Hawaii Revised Statutes to include "licensed" physician assistant to the Definitions of Certificate of Disability and Person with Disability.

SECTION 2. Section 291-51, Hawaii Revised Statutes, is amended as follows:

1. By amending the definition of "certificate of disability" to read:

""Certificate of disability" means a medical statement issued by a licensed practicing physician, licensed physician assistant, or advanced practice registered nurse [which] that verifies that a person is disabled, limited, or impaired in the ability to walk."

2. By amending the definition of "person with a disability" to read:

""Person with a disability" means a person with a disability that limits or impairs the ability to walk, and who, as determined by a licensed practicing physician, licensed physician assistant, or an advanced practice registered nurse:

- (1) Cannot walk two hundred feet without stopping to rest, and who has been diagnosed with:
  - (A) An arthritic, neurological, orthopedic, renal, vascular, or oncological condition;
  - (B) Lung disease to such an extent that the person's forced (respiratory) expiratory volume for one second, when measured by spirometry, is less than one liter, or the arterial oxygen tension is less than sixty mm/hg on room air at rest; or
  - (C) A cardiac condition to the extent that the person's functional limitations are classified in severity as Class III or Class IV according to the standards set by the American Heart Association; and
- (2) Because of a condition identified in paragraph (1):
  - (A) Cannot walk two hundred feet under the person's own power without stopping to rest;
  - (B) Cannot walk without the use of, or assistance from, a brace, cane, crutch, another person, prosthetic device, wheelchair, or other assistive device; or
  - (C) Uses portable oxygen."

Licensed physician assistants who treat patients will have the authority to assess and verify patients who meet the definition of a person with a disability to apply for a disability parking permit.

Thank you for the opportunity to provide testimony.

Respectfully submitted,

*Kristine Pagano*  
for KIRBY L. SHAW  
Executive Director



March 14, 2022

To: The Honorable Jarrett Keohokalole, Chair,  
The Honorable Rosalyn H. Baker, Vice Chair, and  
Members of the Senate Committee on Health

Date: Monday, March 14, 2022

Time: 1:00 p.m.

Place: Conference Room 225 & Videoconference

From: Anne Perreira-Eustaquio, Director  
Department of Labor and Industrial Relations (DLIR)

**Re: H.B. 1575 H.D.2 RELATING TO PHYSICIAN ASSISTANTS**

**I. OVERVIEW OF PROPOSED LEGISLATION**

This measure seeks to broaden the scope and practice of physician assistants by amending multiple chapters of the Hawaii Revised Statutes (HRS) including Chapter 392, HRS, the Temporary Disability Insurance (TDI) law. The proposal will allow physician assistants to provide care to and certify the disabilities of individuals for TDI purposes.

DLIR supports this measure, specifically Section 9 that amends the TDI law.

**II. CURRENT LAW**

Sections 392-26(a) and 392-26(c), HRS, specify that an individual must be under the care of and have the individual's disability certified a person duly licensed to practice medicine, surgery, dentistry, chiropractic, osteopathy, or naturopathic medicine, or an advanced practice registered nurse.

**III. COMMENTS ON THE HOUSE BILL**

DLIR supports the intent of the measure to assist with the critical physician shortage by allowing Physician Assistants to certify an employee's disability after receiving treatment.



March 14, 2022

1 p.m.

Conference Room 225 & Videoconference

**To: Senate Committee on Health**

**Senator Jarrett Keohokalole, Chair**

**Senator Rosalyn H. Baker, Vice Chair**

**From: Grassroot Institute of Hawaii**

**Joe Kent, Executive Vice President**

RE: HB1575 HD2 — RELATING TO PHYSICIAN ASSISTANTS

***Comments Only***

Dear Chair and Committee Members:

The Grassroot Institute of Hawaii would like to offer its comments on [HB1575 HD2](#), which would expand the scope of practice for physician assistants.

It is well established that Hawaii is suffering from a doctor shortage. One [study](#) estimated that Hawaii is currently “short” by approximately 732 physicians, with the most severe shortages occurring in Maui and Hawaii counties.

However, across the state, and especially in rural areas, Hawaii is facing shortages of other kinds of health professionals as well, from primary care providers to nurses, specialists and staff.

Fixing the problem requires a multipronged strategy that will address everything from Hawaii’s high cost of living to the state’s regulatory scheme for healthcare facilities.

Perhaps most important is the need to reform licensing regulations for healthcare professionals.

One-fourth of all licensed workers in the U.S. work in healthcare.<sup>1</sup> Those licenses can be difficult to obtain, are expensive and carry geographic or “scope of practice” limitations.

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<sup>1</sup> Ryann Nunn, [“Improving Health Care Through Occupational Licensing Reform.”](#) RealClear Markets, Aug. 28, 2018

Licensing laws can also affect wages and overall medical costs. A study from the National Bureau of Economic Research<sup>2</sup> considered restrictions on nurse practitioners and found that fewer restrictions on nurse practitioners' scope of practice correlated with higher wages for nurses and lower wages for physicians. Higher restrictions increased the cost of a well-child medical exam by 3% to 16%.

A similar study from the Mercatus Center examining scope of practice for nurse practitioners and physician assistants found that less restrictive regulations for physician assistants reduced the cost of outpatient claims by Medicare recipients by more than 11%.<sup>3</sup>

By expanding the scope of practice for physician assistants in our state, this bill would reduce the burden on medical personnel and help address the shortage of qualified healthcare personnel in Hawaii.

Thank you for the opportunity to submit our comments.

Sincerely,

Joe Kent  
Executive Vice President,  
Grassroot Institute of Hawaii

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<sup>2</sup> Morris Kleiner, et al., "[Relaxing Occupational Licensure Requirements: Analyzing Wages and Prices for a Medical Service.](#)" Working Paper 19906, National Bureau of Economic Research, February 2014.

<sup>3</sup> Edward J. Timmons, "[Healthcare Licensure Turf Wars: The Effects of Expanded Nurse Practitioner and Physician Assistant Scope of Practice on Medicaid Patient Access.](#)" Mercatus Working Paper, Mercatus Center, George Washington University, January 2016.



## THE QUEEN'S HEALTH SYSTEMS

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To: The Honorable Jarrett Keohokalole, Chair  
The Honorable Rosalyn Baker, Vice Chair  
Members, Senate Committee on Health

From: Jacce Mikulanec, Director, Government Relations, The Queen's Health Systems

Date: March 14, 2022

Re: Support for HB 1575 HD2: Relating to Physician Assistants

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The Queen's Health Systems (Queen's) is a nonprofit corporation that provides expanded health care capabilities to the people of Hawai'i and the Pacific Basin. Since the founding of the first Queen's hospital in 1859 by Queen Emma and King Kamehameha IV, it has been our mission to provide quality health care services in perpetuity for Native Hawaiians and all of the people of Hawai'i. Over the years, the organization has grown to four hospitals, and more than 1,500 affiliated physicians and providers statewide. As the preeminent health care system in Hawai'i, Queen's strives to provide superior patient care that is constantly advancing through education and research.

Queen's appreciates the opportunity to provide comments in support of HB 1575 HD2, which would expand the scope of practice for physician assistants (PA) and require a sampling of medical records, rather than all medical records, to be reviewed when physician assistants prescribe controlled substances. PAs continue to play an increasingly important role in addressing the need for quality health care professionals in our State – especially during the COVID19 pandemic and within our neighbor island and rural communities.

We appreciate the Committee's attention to this important issue and thank you for the opportunity to testify in support of HB 1575 HD2.

*The mission of The Queen's Health Systems is to fulfill the intent of Queen Emma and King Kamehameha IV to provide in perpetuity quality health care services to improve the well-being of Native Hawaiians and all of the people of Hawai'i.*

March 11, 2022

To: Honorable Senator Jarrett Keohokalole - Chair, Committee on Health  
Honorable Senator Rosalyn Baker - Vice Chair

Hearing: Monday, March 14, 2022 -- 1:00 p.m. -- Conference Room 225

RE: HB 1575, HD2- Relating to Physician Assistants - In Support

We are occupational therapy practitioners and are employed at one of Oahu's acute care hospital and outpatient clinics. We support HB 1575, HD 2 - Relating to Physician Assistants which expands the authorized scope of practice for physician assistants. Currently under HRS 453-5.5, Physician assistants are able to sign orders and plans of care for both Physical and Speech therapies, but not for Occupational Therapy. Occupational Therapy practitioners provide services to both inpatient and outpatients who have sustained a stroke, brain injury, spinal cord injury, hip fractures, amputations, hand & upper extremity conditions. Occupational Therapy practitioners are employed in hospitals, skilled nursing facilities, mental health agencies, schools to name a few throughout Hawaii.

At our hospital and outpatient clinics, we work closely with Physician Assistants in orthopedic surgery, neurosurgery and general surgery to name a few. On behalf of the OT practitioners at our facility and our professional state association, Occupational Therapy Association of Hawaii, we support HB 1575, HD 2 which will include changes to the current **CHAPTER 453 MEDICINE AND SURGERY**

**§453-5.5 Physician assistant; authority to sign documents** that will include orders for Occupational Therapy and plans of care.

With hope that your committee will pass HB 1575, HD 2. Passage of this bill will allow the consumer to receive complete orders from one referral source. At the present time, the consumer needs to see his/her physician to obtain a referral to Occupational Therapy as orders from a physician assistant is not covered under current regulation under HRS 453-5.5. Thus, the consumer, will experience a delay in receiving services. At our facility, Physician Assistants work alongside the primary physicians and have been writing orders for Occupational Therapy services. However, we have needed to ask that the MD's co-sign orders or additional orders need to be re-written by the primary physician. Furthermore, Medicare allows Physician Assistants to prescribe OT services, but depending on the Medicare fiduciary they reference the individual states statutes.

If you have any questions, we can be reached at (808) 522-4602.

Sincerely,

*Avis Sakata, OTR/L*

Avis Sakata, OTR/L

Occupational Therapy Team Lead



**Additional OT staff in agreement with testimony:**

**Whitney Reigh Asao, OTD**

**Ashley Cadavona, OTR**

**Brian Coyle, COTA**

**Farrah Dimagiba, OTR**

**Lisa Hall, OTR**

**Casey Imelio, OTR**

**Wendy Kondo, OTR**

**Andrea Muraoka, OTR**

**Bernice Oishi, COTA**

**Vandana Pal, OTR**

**Melissa Pang, OTR**

**Tisha Taba, OTR**

**Katie Watanabe, OTR**

**Dale Yasumoto, OTR**

March 13, 2022

To: Honorable Senator Jarret Keohokalole – Chair, Committee on Health  
Honorable Senator Rosalyn Baker– Vice Chair

Hearing: Monday, March 14, 2022 – 1:00 p.m.

RE: HB 1575, HD2 – Relating to Physician Assistants – In Support

I support the intent of HB 1575, HD2 – Relating to Physician Assistants which includes expansion of the authorized scope of practice for physician assistants. HB 1575 HD2 will allow physician assistants to sign orders and plans of care for occupational therapy services.

Currently under Hawaii Revised Statutes (HRS) 453-5.5, Physician assistants can sign orders and plans of care for both Physical and Speech therapies, however, not for Occupational Therapy (OT). Allowing physician assistants to sign occupational therapy orders will allow consumers timely access to occupational therapy services. Consumers will not need to wait for a physician’s co-signature or for the physician to re-write the orders for OT services.

The proposed HB1575, HD2 will amend Hawaii Revised Statutes §453-5.5 Physician assistant; authority to sign documents and will allow Physician Assistants to sign orders and plans of care for Occupational Therapy services.

Thank you for your consideration to approve HB1575, HD2 and for the opportunity to present testimony.

Sincerely,



Virginia Tully



**LATE**

DATE: 13 Mar 2022

To: Senator Jarret Keohokalole, Chair  
Senator Rosalyn H. Baker, Vice Chair  
Senate Committee on Health

RE: **Testimony in Strong Support of HB 1575 HD2, RELATING TO PHYSICIAN ASSISTANTS**

Hrg: 14 Mar 2022, 1:00 PM conference room 225 & Videoconference

Dear Chair Keohokalole, Vice Chair Baker and Committee Members,

The Hawai'i Public Health Association (HPHA) is a group of over 450 community members, public health professionals, and organizations statewide dedicated to improving public health. Our mission is to promote public health in Hawai'i through leadership, collaboration, education and advocacy. Additionally, HPHA aims to call attention to issues around social justice and equity in areas that extend beyond the traditional context of health (e.g., education, digital equity, cultural sensitivity), which can have profound impacts on health equity and well-being. Therefore, as stewards of public health, HPHA is also advocating for equity in all policies.

We are providing this testimony in **strong support of HB 1575 HD2**, which seeks to improve patients' access to care by reasonably expanding the scope of practice for physician assistants (PAs). In 2021, the annual report on the physician workforce in Hawai'i estimated a shortage of over 700 full time physicians. Physician shortages are a barrier to access timely medical care, especially for remote rural communities, and can lead to significant health disparities and poor community health outcomes. PAs are an essential part of the solution to expand access to healthcare and reduce health disparities.

The people of Hawai'i deserve access to safe, timely, and nearby medical care. Hawai'i PAs remain committed to this kind of quality healthcare delivery in our community. The PA profession has had significant growth both nationally and in the state of Hawai'i over the last decade. PAs have demonstrated the ability to deliver high quality medical care along with physicians and advanced practice nurses, fill gaps in care, and reduce health disparities by expanding access to quality health care. PAs are highly educated and trained in the medical curriculum and model, and are nationally certified to provide a wide range of clinical services. This bills help to reduce barriers to PA practice and thus, improve community access to quality medical care.

We support HB 1575 HD2 and respectfully ask that you pass this measure. Thank you for the opportunity to provide testimony on this important public health issue as it relates to access to health care.

Sincerely,

A handwritten signature in black ink, appearing to read 'J. Leocadia Conlon'.

J. Leocadia Conlon, PhD, MPH, PA-C  
Legislative Committee Chair  
Hawai'i Public Health Association