

**Testimony of the Board of Acupuncture**

**Before the  
House Committee on Health, Human Services, & Homelessness  
Tuesday, March 15, 2022  
9:00 a.m.  
Via Videoconference**

**On the following measure:  
S.B. 2276, S.D. 2, RELATING TO ACUPUNCTURE**

Chair Yamane and Members of the Committee:

My name is Risé Doi, and I am the Executive Officer of the Board of Acupuncture (Board). The Board supports this bill.

The purpose of this bill is to make comprehensive updates to Hawaii Revised Statutes (HRS) chapter 436E, regarding acupuncture practitioners, to reflect modernized scopes of practice, titles, and licensing and renewal requirements, including thirty hours of continuing education per licensing biennium beginning July 1, 2025. Additionally, this bill allows the Board of Acupuncture to issue licenses by reciprocity.

The Board supports this measure because it modernizes the statutes to align with the current professional standards and activities provided by licensed acupuncturists.

Thank you for the opportunity to testify on this bill.



## DR. JAYNE

Jayne Tsuchiyama, D.Ac., D.A.O.M., Dipl. O.M.

Queen's Medical Center, 1301 Punchbowl, Honolulu, HI 96813  
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March 12, 2022

Committee on Health, Human Services & Homelessness  
Honorable Chair Representative Ryan Yamane, Honorable Vice Chair Representative Adrian Tam

SB2276 SD2 Hearing Date: MARCH 15, 2022 9AM

Position on SB2276 SD2: SUPPORT

Dear Honorable Chair Representative Ryan Yamane, Honorable Vice Chair Representative Adrian Tam, and committee members,

I am a nationally board certified, licensed Acupuncture Practitioner (LAc) in Hawaii and New York and active member of the Hawaii Acupuncture Association. I also sit on the Board of Commissioners for the NCCAOM, the National Certification Commission for Acupuncture and Oriental Medicine. I reside in Honolulu and practice acupuncture medicine at the Queen's Medical Center.

I have been practicing acupuncture medicine since 2004, focusing my efforts on the integration of western and eastern medicine within hospitals and research institutions. I have worked side by side with institutions such as the Queen's Medical Center, UH Cancer Research, MD Anderson, Susan G Komen Hawaii and Memorial Sloan Kettering. Working with academic and medical institutions requires stringent safety and credentialing standards, and is key to advancing healthcare integration - which is why I am writing this testimony in SUPPORT of: HD2276 SD2

Regulated medical professions require safety of the public and access to care to be of primary importance. Acupuncture medicine has been one of the fastest growing segments in American healthcare and with this the profession has seen standardization of education, national certifications, and the formation of both Master and Doctoral degrees. Hawaii's existing statute has not been updated in over 20 years and is outdated in its language, and deficient in its standards. The proposed Scope of Practice addresses these issues, while also improving the structure of the Bill for future updates.

- Legacy exemptions are defined.
- New definitions reflect current medical terminology, education, training and skills practiced by acupuncturists today.
- Simplify and rename application for licensure to eliminate outdated requirements while implementing current national standards for education, national board certification and continuing education requirements for license renewal.

Acupuncture medicine is used in the military for our Vets with remarkable results in treating pain, PTSD, depression, insomnia and more. This bill will ensure consistent and safe standards as we expand our treatment population.

Thank you for your time and consideration,

Dr. Jayne Tsuchiyama, D.Ac. DAOM, Dipl. OM (NCCAOM)



Dr. Joni Kroll, D.Ac.  
Mariya Gold, L.Ac.  
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March 12, 2022

Hawaii State Legislature  
House Committee on Health, Human Services, & Homelessness  
Representative Ryan I. Yamane, Chair  
Representative Adrian K. Tam, Vice Chair

**RE: SUPPORT OF SB2276 SD2**

Dear Honorable Chair Yamane, Vice Chair Tam and Members of the Committee,

I have been a licensed acupuncturist in Hawaii for 32 years. I have been a very active member of my profession from past president of Hawaii Acupuncture Association (HAA), Co-Founder of the non-profit AcuPlan Hawaii, RICO advisor and six years on the Board of Acupuncture, serving as the Chair for the past two years.

I am in full support of SB2276 SD 2, *with a minor amendment*, as it comprehensively updates and modernizes our statute, bringing it into alignment with current national standards in education and training as well as recognizing the advancements in research and integration into medical systems that our profession has experienced over the past thirty years.

I suspect there was an inadvertent removal of numbers (1) through (9) in the list of Powers and Duties of the Board in 436E-7 and recommend they be reinserted as is in written in the original SB2276:

**"§436E-7 Powers and duties of the board.** In addition to any other powers and duties authorized by law, the board shall:

(1) Adopt rules in accordance with chapter 91 to carry out the purposes of this chapter, with special emphasis on the health and safety of the public;

(2) [Develop] Define and clarify ongoing standards for licensure;

(3) Define and clarify standards and practices for license renewal, including continuing education requirements;

[(3)] (4) Prepare, administer, and grade examinations, provided that the board may contract with a testing agency to provide those services;

[(4)] (5) Issue, renew, suspend, and revoke licenses;

[(5)] (6) Register applicants or holders of a license;

[(6)] (7) Investigate and conduct hearings regarding any violation of this chapter and any rules of the board;

[(7)] (8) Maintain a record of its proceedings; [and]

[(8)] (9) Do all things necessary to carry out the functions, powers, and duties set forth in the chapter[.];

I fully support the addition of minimal Continuing Education Standards and find that 30 hours every two years is necessary, in line with national standards, and not a burden given how many courses can be taken online at very little cost.

To provide for Hawaii's current and future medical and social needs, statutory updates must accurately reflect the Acupuncture Medicine industry's education and continue to meet current best standards of practice and care for the safest medicine for all patients in the state of Hawaii.

Sincerely,

Dr. Joni Kroll, D.Ac., L.Ac  
Dipl Acup (NCCAOM)  
Dipl Acup Orthopedics (NBAO)  
Chair, State of Hawaii Board of Acupuncture

Committee on Health, Human Services & Homelessness

Honorable Chair Representative Ryan I. Yamane

Honorable vice chair representative Adrian K. Tam

Hawaii Acupuncture Association

Board of Directors and Members

haamember@aol.com

Hearing Date: Tuesday, March 15, 2022, 9:00am

Via Videoconference/online testimony

## Position on SB2276 SD2: SUPPORT

Dear Honorable Chair Representative Yamane, Honorable Vice Chair Representative Tam and Honorable Health, Human Services & homelessness Committee Members,

We, the Board of Directors of the Hawaii Acupuncture Association, represent our members and colleagues, as well as our patients and citizens of Hawaii in testifying today in support of measure SB2276 SD2.

Regulated medical professions require safety of the public and access to care to be of primary importance. Acupuncture has been one of the fastest growing segments in American healthcare due to increased access for the public via medical insurance and Medicare inclusion, as well as its demand as the primary alternative to opioid prescriptions and other medical conditions. The increase in scientific data has verified acupuncture medicine's efficacy in a range of health conditions. Simultaneously with increasing demand and evidence in efficacy, the educational, certification and continuing education standards have improved nationally. Since changes over the last twenty years have not been made to the Hawaii acupuncture medicine scope of practice, the statute must be updated now to represent the current state.

We want our profession to be able to serve the citizens in Hawaii safely and knowledgably. We want to integrate in hospitals, rehabilitation centers, nursing homes, hospice, and other care settings to provide the highest standard of care. As we integrate acupuncture medicine with allopathic medicine and within the health care delivery system in Hawaii, we want patients to be assured of evidence-based, evidence-informed medicine that is understandable and current.

To provide Hawaii's current and future medical and social needs, statutory updates must accurately reflect the standards of practice for our industry.

We note a possible inadvertent removal of the Board of Acupunctures' Powers and Duties and respectfully ask that this section be added into a revised draft of this bill to include:

"§436 E-7 Powers and duties of the board. In addition to any other powers and duties authorized by law, the board shall:

(1) Adopt rules in accordance with chapter 91 to carry out the purposes of this chapter, with special emphasis on the health and safety of the public.

(2) [Develop] Define and clarify ongoing standards for licensure.

(3) Define and clarify standards and practices for license renewal, including continuing education requirements.

(4) Prepare, administer, and grade examinations, provided that the board may contract with a testing agency to provide those services.

(5) Issue, renew, suspend, and revoke licenses.

(6) Register applicants or holders of a license.

(7) Investigate and conduct hearings regarding any violation of this chapter and any rules of the board.

(8) Maintain a record of its proceedings; [and]

(9) Do all things necessary to carry out the functions, powers, and duties set forth in the chapter

This recommendation, along with the following, reflect what Hawaii Acupuncture Association sees as necessary standards of practice for our industry in the State of Hawaii:

- Legacy exemptions are defined
- Expand and clarify upon the concepts of the two existing license designations: LAc, DAc in line with national trends
- Simplify and rename application for licensure to eliminate outdated requirements while implementing current national standards for education, national board certification, and continuing education
- New definitions aligned with current medical terminology, education, training, and skills practiced by acupuncturists, while maintaining and preserving the traditions of this complete medical system
- Reciprocity inclusive of applicants who have maintained licensure and certifications in other jurisdictions wanting to be licensed in the state of Hawaii

We ask for your support for SB2276 SD2 ensuring that this profession provides an educated and safe health care delivery system in Hawaii. Thank you for this opportunity to testify in SUPPORT of SB2276 SD2.

Respectfully,

Barbara Ota, DACM, DAc  
President, Hawaii Acupuncture Association

Jeffrey A. Tice, DACM, DAc  
Vice President, Hawaii Acupuncture Association



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## COMMITTEE ON HEALTH, HUMAN SERVICES & HOMELESSNESS

Rep. Ryan I. Yamane, Chair  
Rep. Adrian K. Tam, Vice Chair

Relating to Acupuncture  
**Testimony Supporting SB 2276 SD2**  
Tuesday, March 15, 2022

Dear Honorable Chair, Ryan Yamane and the Honorable Vice Chair, Adrian Tam, and Members of the House Committee on Health, Human Services and Homelessness:

My name is Dr. Wai Hoa Low, President and Chief Executive Officer (CEO), testifying on behalf of the Institute of Clinical Acupuncture and Oriental Medicine (ICAOM).

We are writing in **Support of SB 2276 SD2** that would make comprehensive updates to chapter 436E, Hawaii Revised Statutes, regarding acupuncture practitioners to reflect modernized scopes of practice, titles, and licensing and renewal requirements, including thirty hours of continuing education per licensing biennium.

Hawaii's consumers and students will appreciate the benefits and protection from this bill that revitalizes HRS 436E which has not been updated for over 20 years. Though we support the measure, we would like to take this opportunity to voice pertinent information to those opposing our measure as it courses through the various hearings.

Firstly, there has been testimony submitted by the American Academy of Medical Acupuncture (AAMA) requesting the repeal of HRS 436-3.5 which prohibits physicians and osteopaths from practicing acupuncture unless licensed under the Statute of Acupuncture Practitioners. HRS 436-3.5 has a lengthy legislative history dating back to 1985 which finally ended with the Director of the State of Hawaii Department of Commerce and Consumer Affairs requesting the State of Hawaii Department of the Attorney General (AG) for its legal advice in regards to medical acupuncture being outside of the scope of practice of acupuncture and whether those licensed physicians and osteopaths may practice medical acupuncture without having to be licensed by the Board of Acupuncture. The AG's Opinion No. 03-5 dated August 18, 2003 delineated the following:

1. There was a longstanding legal precedent that included several measures from physicians and osteopaths requesting to practice acupuncture. This resulted in the concerns expressed by the Board of Medical Examiners (BME) and Board of Osteopathic Examiners (BOE) regarding an internal lack of knowledge, expertise, and standards necessary to make rules and regulations about the certification of its licensees in acupuncture. This would create an additional burden for both Boards. Thus, the Legislature unequivocally stated that the physicians and osteopaths who desire to practice acupuncture must be licensed by the Board of Acupuncture. Therefore, there is no ambiguity in the law.
2. Medical acupuncture is not distinct from traditional acupuncture and does not fall outside of the scope of practice of acupuncture. Therefore, physicians must be licensed by the Board of Acupuncture. (State of Hawaii Department of The Attorney General, 2003)

Testimony Supporting SB 2276 SD2  
Relating to Acupuncture, Cont.  
Dr. Wai Hoa Low

Based on these findings, it is important to note that the public health, safety, and welfare of the people of Hawaii must be of paramount concern, and the regulation of those desiring to practice acupuncture must fall under the purview of the Board of Acupuncture.

Secondly, according to the World Health Organization (WHO), Acupuncture treats numerous disorders. For the first time in history, since its implementation in January 2022, the WHO has included Traditional Chinese Medicine (TCM) in **Chapter 26 of the ICD-11** (International Statistical Classification of Diseases and Related Health Problems). This initiative is not only a landmark for the ICD but also a milestone for TCM. It contributes to the integration of TCM with multiple Western medicine-based disciplines and the progressive reform of the world healthcare system.

We acknowledge the intent of the Hawaii Medical Association (HMA) to amend our measure in deleting the phrase of “advanced diagnostics, specialties, and therapeutics, based on additional traditional and biomedical internal medicine” due to concerns of liability exposure and causing potential harm to the consumer. However, we strongly disagree with their rationale. No one can dispute that TCM has a history of 2,000+ years and internal medicine plays an integral part of primary care for a billion people halfway around the world.

Our curriculum includes both Western and Eastern internal medicine classes. We do not intend to be compared to the internal medicine specialty of Western medicine with 8,000 hours. The WHO has already sanctioned TCM in Chapter 26 of the ICD-11 diagnostic codes in a section on TCM Internal Medicine (see attached link). These diagnostic codes are considered as the key reference source for healthcare practitioners and insurance companies around the world. If the WHO acknowledges TCM internal medicine, so it behooves our colleagues in Western medicine to do the same. One of our advanced techniques include specialty training in Neuro-Acupuncture that is used worldwide for those suffering from debilitating neurological disorders, namely stroke victims and traumatic brain injuries.

We have evidence-based research on many TCM internal medicine disorders that are found in credible publications. Current Acupuncture research studies at the National Institutes of Health (NIH) and worldwide universities confirm the benefits of Acupuncture in treating not only pain, but also internal disorders.

The Acupuncture profession is tranquil, collaborative, and seeks harmony with other healthcare providers.

#### **RECOMMENDATION:**

ICAOM recommends to the House Committee on Health, Human Services and Homelessness to amend the language in HRS 436 E-2 to read as follows:

**“Practice of advanced acupuncture medicine” means the practice of acupuncture medicine and the use of advanced diagnostics, specialties, and therapeutics, based on additional traditional and biomedical training, as further determined by administrative rules.”**

Thank you for the opportunity to testify on this measure.

Respectfully,

Dr. Wai Hoa Low, President  
DAOM, MBA, D.Ac.



Testimony Supporting SB 2276 SD2  
Relating to Acupuncture, Cont.  
Dr. Wai Hoa Low

References:

26 Supplementary Chapter Traditional Medicine Conditions - Module I

<https://icd.who.int/browse11/l-m/en#/http%3a%2f%2fid.who.int%2fid%2fentity%2f718687701>

State Of Hawaii Department of The Attorney General. (2003, August 18). *Medical Acupuncture as it Relates to the Scope of Practice of Acupuncture (op. 03-05)*. The State of Hawaii.

<https://ag.hawaii.gov/wp-content/uploads/2013/01/03-05.pdf>

WHO International Standard Terminologies on Traditional Medicine in the Western Pacific Region  
Web-PDF pages 172 to 19

[http://apps.who.int/iris/bitstream/handle/10665/206952/9789290612487\\_eng.pdf?sequence=1&isAllowed=y](http://apps.who.int/iris/bitstream/handle/10665/206952/9789290612487_eng.pdf?sequence=1&isAllowed=y)



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### HOUSE COMMITTEE ON HEALTH, HUMAN SERVICES AND HOMELESSNESS

Representative Ryan I. Yamane, Chair

Representative Adrian K. Tam, Vice Chair

Date: March 15, 2022

From: Hawaii Medical Association

Roger Kimura MD, AMA Delegate for Hawaii

Bernard Robinson MD, AMA Delegate for Hawaii

Elizabeth Ann Ignacio MD, Chair, HMA Legislative Committee

### Re: **SB 2276 SD 2 Acupuncture; Licensure; Continuing Education**

### Position: **OPPOSE**

The HMA understands the intent of this measure to update Hawaii Revised Statutes regarding acupuncture practitioners to reflect modernized scopes of practice, titles, and licensing and renewal requirements.

- I. HMA would like to call attention to the issue of terminology raised by the proposed comprehensive updating of HRS 436E regarding the practice of acupuncture in Hawaii.

Please note the use of the term “physician” in the proposed amendment to SECTION 4. Section 436E-2:

“Acupuncture medicine physician” means an acupuncture practitioner engaged in the practice of advanced acupuncture medicine.

While individuals in diverse fields of intellectual education may call themselves, “Doctor,” by fulfilling education, training, and certification requirements specific to their fields of study, only Doctors of Medicine (MD) and Doctors of Osteopathic Medicine (DO) are recognized as physicians. For instance, a PhD Botanist is not recognized as a physician.

The public recognizes MDs and DOs as physicians and places great faith and trust in the treatment that we, as physicians by education, training, and certification in accredited institutions of higher learning, residency programs, and appropriate licensing bodies, provide to them. We are bound by oath to respect science while recognizing that there is an art to medicine that requires compassion. That we will deliver the right care, at the right time and, in recognition of modern realities, at the right price. That we do no (intentional) harm.

It is important that patients, that the public, be able to distinguish MDs and DOs from the many other health care providers who are also addressed as doctors.

This is the American Medical Association’s (AMA) Policy regarding the “Definition and Use of the Term Physician”:

#### HMA OFFICERS

President – Angela Pratt, MD President-Elect – Elizabeth Ann Ignacio, MD  
Immediate Past President – Michael Champion, MD Treasurer – Nadine Tenn Salle, MD  
Secretary – Thomas Kosasa, MD Executive Director – Marc Alexander



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H-405.951: “Our AMA: 1. Affirms that the term physician be limited to those people who have a Doctor of Medicine, Doctor of Osteopathic Medicine, or a recognized equivalent physician degree and who would be eligible for an Accreditation Council for Graduate Medical Education (ACGME) residency”<sup>1</sup>.

- II. HMA has concerns that the proposed amended language, while allowing flexibility to accommodate changes in existing requirements, might allow for education and training in acupuncture that do not comply with current standards, thereby potentially leading to decreased consumer/public safety. HMA requests that the Committees, with this comprehensive acupuncture update, maintain the specific requirements for training and eligibility for certification examinations for licensure in acupuncture.

These are the current requirements to apply for certification as a specialist in Acupuncture and/or Oriental Medicine in the United States as required by the National Certification Commission for Acupuncture and Oriental Medicine (NCCAOM):

An applicant must have a minimum of 1,905 hours of education and training within a three-year period to qualify for a Masters in Acupuncture. An applicant must have a minimum of 2,625 hours of education and training within a four-year period to qualify for a Masters in Oriental Medicine.

Please note that the above requirements are to qualify for a Masters Degree. A licensed acupuncturist (LAc) requires less education and training. No other profession allows its Masters or Licensed level individuals to be addressed as doctors. An individual must complete four years of formal, intensive training and one-five years of post-graduate residency training to be addressed as a physician, the total of which will easily reach or exceed 10,000 hours.

<https://www.nccaom.org/certification/nccaom-certification-eligibility/educational-eligibility/>

(1905/3 years total hours of education and training for M. Ac., 2625 hours/4 years for M. OM.

As an item of information, standard applicants, with training in the United States, for NCCAOM certification must attend an educational institution accredited by the Accreditation Commission for Acupuncture and Herbal Medicine. ACAOM is recognized by the United States Department of Education as the specialized accreditation agency for institutions/programs preparing acupuncture and Oriental medicine practitioners. ACAOM does not accredit any programs at the undergraduate/bachelor level. <https://acaom.org>

According to the ACAOM, there are currently no institutions of acupuncture education that are accredited to grant doctoral degrees in acupuncture (DAC) in Hawaii.

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“ Institute of Clinical Acupuncture and Oriental Medicine and its following programs are accredited by the Accreditation Commission for Acupuncture and Oriental Medicine (ACAOM):

Master of Acupuncture with a Chinese herbal medicine specialization”

<https://acaom.org/directory-menu/directory/?cn-s=&cn-cat=8>

- III. HMA has concerns regarding the use of language in HRS436 E-1, Section 4 regarding internal medicine training.

The proposed comprehensive amendments to HRS436E includes, 436E-1 Section 4: "Practice of advanced acupuncture medicine" means the practice of acupuncture medicine and the use of advanced diagnostics, specialties, and therapeutics, based on additional traditional and biomedical internal medicine training, as further determined by administrative rules.”

An Internal Medicine residency program requires a minimum of three years of intensive training, easily involving 8,000 hours of training, in order to qualify for the certification examination as an Internal Medicine physician. It is unlikely that training and licensure requirements for acupuncturists, as specified in the proposed amendments, will be satisfactory as equivalent training. The inclusion of the language regarding the use of internal medicine training may have the unintended consequences of exposing the consumer/public to harm and the certified acupuncturist to legal exposure. It may also increase the work of the licensing Board. Certified acupuncturists may have difficulty maintaining or obtaining malpractice insurance coverage and malpractice insurance premiums for acupuncturists are likely to increase in price.

The ultimate consequence of the proposed comprehensive update may be a decrease access to acupuncture services for consumers.

- IV. As an additional comment on scope of practice, the HMA is providing the Committee(s) with Medicare policy specific to acupuncture:

Medicare provides for a limited scope of practice of acupuncture, as specified in its coverage for acupuncture therapy <sup>3</sup>.

Medicare reimburses for acupuncture services only for the treatment of chronic low back pain for which known causes have been ruled out. Medicare covers twelve acupuncture treatments within ninety days and will only approve an additional eight treatments per calendar year if the initial series of acupuncture results in improvement, for a limit of twenty treatments per year.

<https://www.medicare.gov/coverage/acupuncture>

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## RECOMMENDATIONS

The HMA respectfully recommends the following amendments in principle, with language to be determined by the Committees. The HMA kindly requests review and/or collaboration with the Hawaii Acupuncture Board and the Hawaii Medical Board which may be impacted by this language.

1. Amend "Acupuncture medicine physician" to "Doctor of Acupuncture (DAc) means an acupuncture practitioner engaged in the practice of advanced acupuncture medicine who had completed a doctoral education program, and associated training, at an institution accredited by the ACAOM."
2. Restore the specific requirement currently in place for education and training for DAcs, MAcs, and LAcs. Language could be included to provide for automatic updates based on NACCAOM revisions, subject to the approval of the Hawaii Acupuncture Board.
3. Remove the language in HRS436 E-1, Section 4 regarding internal medicine training. "...and the use of advanced diagnostics, specialties, and therapeutics, based on additional traditional and biomedical internal medicine training..." so that the proposed language reads: "Practice of advanced acupuncture medicine" means the practice of acupuncture medicine ~~and the use of advanced diagnostics, specialties, and therapeutics, based on additional traditional and biomedical internal medicine training,~~ as further determined by administrative rules."

Thank you for allowing the Hawaii Medical Association to testify on this measure.

## REFERENCES, QUICK LINKS

1. [Definition and Use of the Term Physician H-405.951](#). American Medical Association AMA-assn.org. 2019.
2. [Acupuncture H - 270.974](#). American Medical Association AMA-assn.org. 2019.
3. [Acupuncture](#). Medicare.gov.

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**COMMITTEE ON HEALTH, HUMAN SERVICES & HOMELESSNESS**

Rep. Ryan I. Yamane, Chair  
Rep. Adrian K. Tam, Vice Chair

Relating to Acupuncture  
**Testimony Supporting SB 2276 SD2**  
Tuesday, March 15, 2022

Dear Honorable Chair, Ryan Yamane and the Honorable Vice Chair, Adrian Tam, and Members of the House Committee on Health, Human Services and Homelessness:

My name is Marilyn Allen, Vice-President of the American Acupuncture Council (AAC), Editor of Acupuncture Today, US Representative to World Health Organization (WHO) on the Committee for Traditional Medicine Resource, the Committee on Education and Implementation, and the Quality of Care and Patient Safety Technical Advisory Committee. I am also a Professor of Ethics, Laws, Regulations and Professional Development for several Traditional Medicine Universities across the U.S. I am testifying on behalf of the (AAC) in Support of SB 2276 SD2.

As of January 2022, the WHO has released its updated version of the international classification of disease -11 and the new classification of traditional medicine/acupuncture diagnostic codes for worldwide use. When ICD-11 is adopted in the United States, Acupuncture will be able to be integrated into the healthcare system. This needs to be reflected in the Hawaii practice act. The importance of this landmark ICD-11 is as follows:

1. Traditional medicine codes will provide a worldwide foundation for the Practice of Acupuncture.
2. The WHO general assembly accepted these codes unanimously.
3. The use of these codes will create and collect data to be used in research to further prove the efficacy of acupuncture.
4. Double coding by practitioners will help to begin to integrate both eastern and western ICD codes. Double coding means the use of a western code, a traditional medicine disorder and the pattern differentiation process.

Currently Medicare is conducting a nationwide research study on low back pain for seniors with Acupuncturists delivering treatment. It is being conducted in coordination with medical doctors because Acupuncturists are not included in Medicare yet. A Medicare Bill, HR 4803, has been introduced into the Congress of the United States. This bill simply conveys the message to have the word Acupuncturist added into the Social Security Act.

The Bureau of Labor and Statistics has collected data for the first time, through the census collection to include Acupuncturists as an independent occupation in the United States.

The Veterans Administration now includes Acupuncture as a part of their healthcare choices for veterans.

We fully support the Acupuncture Practice Act to be updated in your current practice standards for licensed Acupuncturist. The States of Colorado, Arizona, and Minnesota are currently updating their practice acts to reflect the full scope of practice for Acupuncturists. Traditional Medicine/Acupuncture must be given as choices and healthcare for the citizens of the great State of Hawaii. Thank you for the opportunity to testify on this measure.

Respectfully,

Marilyn Allen, MS  
Vice-President American Acupuncture Council

**SB-2276-SD-2**

Submitted on: 3/13/2022 7:35:14 PM

Testimony for HHH on 3/15/2022 9:00:44 AM

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Testify</b>
Steven Rosenblatt, MD, PhD	OceanMed Clinic	Support	Written Testimony Only

Comments:

Dear Honorable Representatives:

I am a licensed and practicing medical doctor in the State of Hawaii. I am also national board certified in Acupuncture and in Oriental Medicine. I served six years as a commissioner on the national Accreditation Commission for Schools of Acupuncture and Oriental Medicine.

I support this bill because it will not only strengthen the Acupuncture profession and bring it up to national standards, but will also serve to protect the citizens of the State of Hawaii by assuring high levels of professional care and adding important resources to the health care delivery system of the entire state.

Steven Rosenblatt, MD, PhD, LAc



**House Committee on Health, Human Services, & Homelessness**  
**Honorable Chair Representative Ryan I. Yamane**  
**Honorable Vice Chair Representative Adrian K. Tam**

**Tuesday March 15, 2022 at 9:00 a.m.**

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**Testimony in SUPPORT of SB 2276 SD 2**

**To the Honorable Chair Yamane, Vice Chair Tam, and Committee Members,**

My name is Jeffrey Tice, and am a Doctor of Acupuncture in the state of Hawaii (#732). My practice is in Wailuku, Maui where I co-own Longevity Health Center with my wife, Joyce Tamori. I am also vice president of Hawaii Acupuncture Association.

I fully support SB 2276 SD 2 to improve the language in the scope of practice for acupuncture medicine in the State of Hawaii and to elevate the licensure requirements for future generations of Licensed Acupuncturists to serve the people safely and effectively.

Acupuncture and associated modalities historically termed Traditional Chinese Medicine or Oriental medicine, is the oldest continuous, documented medicine on the planet, yet also one of the fastest growing today. It has a long history in Asia (4000+ years) yet is relatively new to the rest of the world (100 years). Hawaii was an early adopter of licensing acupuncture in the United States, predating formal accredited schools and national board certifications. Much has changed in the profession over the last four decades and especially in the last twenty plus years since the current statute, 436E was updated.

Acupuncturists licensed to practice in Hawaii practice under two titles, Licensed Acupuncturist (LAc) and Doctor of Acupuncture (DAc). Although two licenses are uncommon in the United States, the current trend is towards a two-tiered profession with Masters level education as the entry point, often specializing in acupuncture while the accredited Doctoral level for Doctors of Acupuncture Medicine to use a more complete practice of the medicine formerly known as Traditional Chinese Medicine or Traditional Oriental Medicine. Both of these education and scope of practice levels are justified with education and national certification in SB 2276 SD 2. The updated nomenclature, Acupuncture Medicine, preserves this historically significant practice of medicine and helps it smoothly integrate into the modern healthcare system in Hawaii.





Thank you for the opportunity to testify in support of SB 2276 SD 2.

Jeffrey A Tice, DACM, DAc

Jeffrey A Tice, DACM, DAc  
Longevity Health Center  
2045 Main St  
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**SB-2276-SD-2**

Submitted on: 3/14/2022 8:37:37 AM

Testimony for HHH on 3/15/2022 9:00:44 AM

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Testify</b>
Henry Strozier	Makai Natural Medicine	Support	Written Testimony Only

Comments:

Committee on Health, Human Services, & Homelessness

Honorable Chair Representative Ryan I. Yamane

Honorable Vice Chair Representative Adrian K. Tam

Henry Strozier  
Makai Natural Medicine  
808-226-3321  
henry@mak.ai

Hearing Date: March 15, 2022

Time: 9:00 am

Via Videoconference/online testimony

Conference Room 329

State Capitol

415 South Beretania Street

Position on SB2276 SD2: SUPPORT

Dear, Honorable Chair Representative Ryan I. Yamane, Honorable Vice Chair Representative Adrian K. Tam and Honorable Health, Human Services and Homelessness Committee,

I am a licensed Acupuncture Practitioner (LAc) and active member of the Hawaii Acupuncture Association.

I reside in Waianae and practice acupuncture medicine in Kapolei. I am writing this testimony in SUPPORT of SB2276 SD2.

Regulated medical professions require safety of the public and access to care to be of primary importance. Acupuncture medicine has been one of the fastest growing segments in American healthcare and with this the profession has seen standardization of education, national certifications, and the formation of both Master and Doctoral degrees. Hawaii's existing statute, which hasn't been updated in over 20 years, has become outdated in its language, as well as deficient in its standards. The proposed Scope of Practice addresses these issues, while also improving the structure of the Bill for future updates.

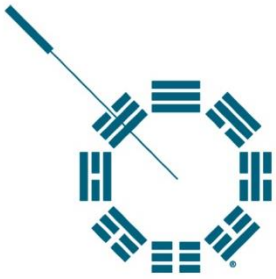
Below are the highlights that I find important:

- Simplify and rename application for licensure to eliminate outdated requirements while implementing current national standards for education, national board certification and continuing education requirements for license renewal.
- Legacy exemptions are defined.
- New definitions aligned with the current medical terminology, education, training and skills practiced by acupuncturists, while maintaining and preserving the traditions of this complete medical system.
- Reciprocity inclusive of applicants who have maintained licensure and certifications in other jurisdictions wanting to be licensed in the state of Hawaii.

It is time for Hawaii, with its long history of acupuncture, along with the highest per capita Acupuncture Practitioners of any state, to integrate the profession into Hawaii's healthcare delivery system with highest standard and care for the citizens of Hawaii. I respectfully ask you to please support this SB2276 SD2.

Respectfully,

H. E. Strozier, L.Ac.



## AMERICAN ACADEMY OF MEDICAL ACUPUNCTURE®

2512 Artesia Boulevard, Suite 200  
Redondo Beach, California 90278  
310.379.8261 VOICE • 310.379.8283 FAX

14 March 2022

House Committee on Health, Human Services, & Homelessness  
Representative Ryan Yamane, Chair

**Re: HI SB2276 SD2**  
**Position: OPPOSE**

Dear Chairman Yamane and Committee Members,

We are members of the American Academy of Medical Acupuncture (AAMA) and representatives of the organization's Legislative Committee. The AAMA opposes SB2276 for the following reasons.

1. "Physician" is a legal title with many ramifications under both Hawaii and federal law. The reference to "acupuncture medicine physician" in SB2276 should be changed to "acupuncture medicine doctor."
2. In the definition of "practice of advanced acupuncture medicine" the reference to "biomedical internal medicine training" has been removed in this draft of the bill. We request that reference to modern biomedical theories, practices, and techniques be deleted from the definitions of "acupuncture medicine" and "practice of acupuncture medicine" as well.
3. Finally we call for the repeal of Section 436E-3.5 which prohibits physicians and osteopaths from practicing acupuncture unless licensed as LAc's. It is poor public policy to restrict access to high quality, low-cost health care such as acupuncture. Centers for Medicare & Medicaid Services, Veterans Health Administration, and the majority of US states permit physicians to provide acupuncture services. The time has come for Hawaii's unnecessary restriction on physicians to end.

Respectfully,  
Donna Pittman, MD  
Gavin Elliott, MD  
James Bromberg, MD MPH JD



*Lifestyle*  
**Medical Center**

Medical Director: Elizabeth Chen Christenson, MD. LAc

**To: The Honorable Senate/Hawaii State Legislature**  
**Committee on Health, Human Services and Homelessness**  
**RE: Comment for Acupuncture Legislation (SB 2276) March 14, 2022**

My position on SB 2276 regarding the re-defining and terms of regulation of acupuncture in Hawaii comes from a dual medical education and clinical experience as both a licensed physician and a licensed LAc. Although I am fully in favor of the field of acupuncture being elevated and respected in Hawaii and throughout the US, I am most concerned that this is achieved through also respecting and acknowledging the concurrent elevation of :

- **Educational Standards**
- **Examination and Licensing Requirements**
- **Liability Mandates**
- **Continuing Education Requirements**

When I reviewed both HB 1679 and SB 2276, I found terminology that appeared to be out of context and others that contained discrepancies, such as:

- **Interchanging the terms “doctor” as in DAc (Doctor of Acupuncture) and “physician” of acupuncture medicine.**

This brings up legislative concerns of pre-existing federal and Hawaii state regulations and statutes which clearly define the determination of physician and address the regulation of licensing, duties, liabilities, etc... Assuming the title of a physician or a medical doctor is not a qualification of entitlement. Acupuncture is not currently a part of conventional medical school curricula, nor are acupuncturists given physician privileges in hospitals, emergency rooms or ICUs. Although a valuable form of traditional medicine, just renaming a “practitioner” a “physician” may require further substantial legislative and legal examination and considerations.

**If this committee is to justify SB 2276 in its current rendition, it may be advised to investigate whether the semantics violate or misrepresent any pre-existing federal and/or state definitions, codes and regulations.** While the Board of Acupuncture is a recognized regulatory board in the Hawaii state list for Professional and Vocational Licensing, several of the issues raised in SB 2276 are contra-indicated or have been struck out in the current edited version. (See highlighted excerpts of federal and state definitions, codes, regulations p.2.).

- **SB 2276 may contain terms contrary to federal and/or state definitions of physician and medicine**

While SB2276 proposes to advance from acupuncture practitioner to acupuncture physician, it does not provide a legal or legislative avenue that does not require re-defining the term physician on a federal and/or state level and all relevant regulations.

- **No Educational Parameters Concurrent With “Physician” Status**

Of primary importance is the obvious strike out of defined required hours of advanced education that existed in the previous acupuncture regulations. Licensed physicians are required to graduate from an AMA approved medical school and complete a minimum 1-2 year residency program. SB 2276 omitted these advanced academic and clinical requirements.

**CODE OF FEDERAL REGULATIONS § 702.404 Physician defined.**

The term *physician* includes doctors of medicine (MD), surgeons, podiatrists, dentists, clinical psychologists, optometrists, chiropractors, and osteopathic practitioners within the scope of their practice as defined by State law.

The term includes chiropractors only to the extent that their reimbursable services are limited to treatment consisting of manual manipulation of the spine to correct a subluxation shown by X-ray or clinical findings. **Physicians** defined in this part may interpret their own X-rays. All **physicians** in these categories are authorized by the Director to render medical care under the Act. **Naturopaths, faith healers, and other practitioners of the healing arts which are not listed herein are not included within the term "physician" as used in this part.**

**HAWAII REVISED STATUTES (MEDICINE & SURGERY)**

**§453-2 License required; exceptions.** (a) Except as otherwise provided by law, no person shall practice medicine or surgery in the State, either gratuitously or for pay, or offer to practice medicine or surgery in the State, or advertise or announce one's self, either publicly or privately, as prepared or qualified to practice medicine or surgery in the State, or append the letters "Dr.", "M.D.", or "D.O." to one's name with the intent to imply that the person is a practitioner of medicine or surgery, without having a valid unrevoked license or a limited and temporary license obtained from the board of medical examiners.

**§453-4 Qualifications for examination and licensure.** (a) Except as otherwise provided by law, no person shall be licensed to practice medicine or surgery unless the applicant has passed an examination and has been found to possess the necessary qualifications. No applicant shall be eligible for the examination sooner than the first year of residency; provided that if the applicant is a graduate of a foreign medical school, the applicant shall be eligible no sooner than the second year of residency. (b) Before any applicant shall be eligible for licensure, the applicant shall furnish proof satisfactory to the board that: (1) **The applicant is of demonstrated competence and professional knowledge; and (2) The applicant is a graduate of: (A) A medical school or college whose program leading to the M.D. degree is accredited by the Liaison Committee on Medical Education or whose program leading to the D.O. degree is approved by the American 7 Osteopathic Association Commission on Osteopathic College Accreditation, and has served a residency of at least one year in a program that has been accredited for the training of resident physicians or osteopathic physicians by the Accreditation Council for Graduate Medical Education or the American Osteopathic Association...**

**§453-6 Fees; expenses.** (a) **No applicant shall be examined under this chapter until the applicant has paid to the board application, examination, and license fees.** The board may provide separate fees for licensure by endorsement and for limited and temporary licenses. (b) **Every physician or surgeon holding a license under this chapter shall renew the license with the board no later than January 31 of each even-numbered year.** Every osteopathic physician or surgeon holding a license previously issued under chapter 460 and this chapter shall renew the license with the board no later than June 30 of each even-numbered year. Every physician, osteopathic physician, or surgeon shall pay a renewal fee and comply with the category 1 or 1A continuing medical education requirements provided in rules adopted by the board. (c) **A physician, osteopathic physician, or surgeon shall meet the category 1 or 1A continuing medical education requirements by obtaining credit hours in a category 1 or 1A continuing medical education program accredited by the American Medical Association.**

**§453-7 Form of license.** **The form of license to practice medicine and surgery shall be substantially as follows: State of Hawaii, Board of Medical Examiners License to Practice Medicine and Surgery ....., having been duly examined by the Board of Medical Examiners, and having been found to be possessed of the necessary qualifications, is hereby licensed to practice medicine and surgery in the State of Hawaii.**

This license is granted and accepted on the express condition that it may be revoked at any time for any of the causes enumerated in section 453-8, Hawaii Revised Statutes, which cause or causes shall have been proven to the satisfaction of the Board of Medical Examiners. Given under the seal of the Board of Medical Examiners this.....day of ....., A.D..... By..... Chairperson, Board of Medical Examiners.

I was born in Taiwan and awarded a medical degree from the School of Medicine and Surgery at the University of Siena, Italy and subsequently passed the required training and national board examinations in the US to be a licensed and board certified physician. In addition, I received a certification as a medical acupuncturist and licensing in the State of Hawaii as an LAc . I have over 45+ years of cross cultural medical education and clinical and private practice experience in both allopathic medicine and TCM (Traditional Chinese Medicine). I am a physician member of:

- **AMA** (American Medical Association)
- **HMA** (Hawaii Medical Association)
- **AAMA** (American Academy of Medical Acupuncture)
- **HAA** (Hawaii Acupuncture Association)
- **AcuPlan Hawaii**
- **ICAOM Graduate** (Institute of Clinical Acupuncture and Oriental Medicine) in Hawaii
- **Associate Clinical Professor, John A Burns School of Medicine, Univ. of HI**

I hold great respect for all of these organizations and understand the valid concerns on both sides of the aisle. While there is clear merit in advancing the status of acupuncturists in Hawaii, I chose to offer a neutral commentary based on my observations of the bill's major requests. I reserve a final opinion as I have several concerns regarding the clarity of the semantics of the bill's narrative, that I believe need to be revisited and amended, including, but not limited to:

- **Broad-based use of terminology** related directly to allopathic medicine, yet, loosely translated to acupuncture without clarification
- **Omission of liability requirements** mandated to practicing physicians/doctors, such as medical malpractice insurance
- **Non-delineation of specific diagnostics, biomedical references, advanced acupuncture techniques, etc...**

Acupuncture is a recognized major branch of TCM (Traditional Chinese Medicine), whose efficacy and safety has an impressive body of evidence-based clinical studies. TCM was endorsed in 2019 by the WHO (World Health Organization) to its 129 member nations as an acknowledged and credible healthcare system. The key point, however, is acupuncture is a branch of TCM, not the entire system.

The systems of TCM and allopathy remain distinctly different in their ideologies and technologies, including the more personalized approach to the individual in TCM as compared to the disease/treatment approach favored in allopathy. They are connected in a common quest for ultimate health and healing, yet, as different as night and day. They have much to learn from each other.

Sincerely,

**Elizabeth Chen Christenson, MD, LAc**  
**Medical Director, CHI Lifestyle Medical Center**

**934 Maunawili Circle Kailua, Hawaii 96734-4619**  
**Phone: 808-261-7801**  
**Email: [chimedical@hawaii.rr.com](mailto:chimedical@hawaii.rr.com)**  
**Website: [www.ChiLifestyleMedicine.com](http://www.ChiLifestyleMedicine.com)**

**SB-2276-SD-2**

Submitted on: 3/12/2022 3:56:25 PM

Testimony for HHH on 3/15/2022 9:00:44 AM

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Testify</b>
Mee Yuk Chan	Individual	Oppose	Written Testimony Only

Comments:

I oppose



**SB-2276-SD-2**

Submitted on: 3/12/2022 3:59:13 PM

Testimony for HHH on 3/15/2022 9:00:44 AM

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Testify</b>
tammy Leung	Individual	Oppose	Written Testimony Only

Comments:

I oppose

**SB-2276-SD-2**

Submitted on: 3/12/2022 4:06:32 PM

Testimony for HHH on 3/15/2022 9:00:44 AM

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Testify</b>
Clara Wong	Individual	Oppose	Written Testimony Only

Comments:

I oppose

**SB-2276-SD-2**

Submitted on: 3/12/2022 6:40:57 PM

Testimony for HHH on 3/15/2022 9:00:44 AM

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Testify</b>
Nancy and Errol Rubin	Individual	Support	Written Testimony Only

Comments:

We support continued education and licensing for all public health professions. That the Acupuncture board of Hawaii wants to assure the public that they are credible and educated is a gift to us all.

House of Representatives on Health, Human Services, & Homelessness

Honorable Chair Representative Ryan I. Yamane

Honorable Vice Chair Adrian K. Tam

Barbara Ota, DACM, DAc

Otab83@gmail.com

Hearing Date: Tuesday, March 15<sup>th</sup>, 2022, at 9:00 am

Via Videoconference/online testimony

Position on SB 2276 SD2: SUPPORT

Dear Honorable Chair Representative Yamane, Honorable Vice Chair Representative Tam, and Honorable Committee Members,

I am Barbara Ota, a Doctor of Acupuncture and Chinese Medicine, licensed as a Doctor of Acupuncture in Hawaii and serve as President of the Hawaii Acupuncture Association, thus I am very active, not only in the care and health of my patients, but in the health and concerns of this profession.

I reside on the Big Island of Hawaii on the Kohala Coast and practice acupuncture medicine here in the State of Hawaii. I am writing this testimony in SUPPORT of SB 2276 SD2.

Regulated medical professions require safety of the public and access to care to be of primary importance. Acupuncture medicine has been one of the fastest growing segments in American healthcare and with this the profession has seen standardization of education, national certifications, and the formation of both Master and Doctoral degrees. Hawaii's existing statute, which hasn't been updated in over 20 years, has become outdated in its language, as well as deficient in its standards. The proposed Scope of Practice addresses these issues, while also improving the structure of the Bill for future updates.

Below are the highlights that I find important:

- Simplify and rename application for licensure to eliminate outdated requirements while implementing current national standards for education, national board certification and continuing education requirements for license renewal.
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- New definitions aligned with the current medical terminology, education, training and skills practiced by acupuncturists, while maintaining and preserving the traditions of this complete medical system.
- Expand and clarify upon the concepts of the two existing license designations: LAc, DAc. in line with national trends.
- Reciprocity inclusive of applicants who have maintained licensure and certifications in other jurisdictions wanting to be licensed in the state of Hawaii.

It is time for Hawaii, with its long history of acupuncture, along with the highest per capita Acupuncture Practitioners of any state, to integrate the profession into Hawaii's healthcare delivery system with highest standard and care for the citizens of Hawaii. I respectfully ask you to please support this SB2276 SD2.

I extend to you and your esteemed colleagues my aloha. Thank you for your time and consideration.

Respectfully,

Barbara Ota, DACM, DAc



**Liberata J. Orallo**

DACM, Dipl. Ac (NCCAOM) DAc, LMT  
444 Nahua Street Suite 1805 Honolulu, Hawaii 96815  
[ljorallo@gmail.com](mailto:ljorallo@gmail.com) (808) 429-4000  
Hawaii License Acu 666 NPI 1003406059

**House Committee on Health, Human Services & Homelessness**

March 15, 2022

Tuesday, 9:00 am Via VideoConference  
(Written Testimony Only)

**Testimony in Support of SB 2276 SD2**

Relating to Acupuncture

To the Honorable Chair, Representative Ryan Yamane, and the Honorable Vice Chair, Adrian Tam, and Members of the House Committee on Health, Human Services & Homelessness:

My name is Dr. Liberata J. Orallo, a licensed Doctor of Acupuncture in private practice in Honolulu, a Clinic Supervisor for Acupuncture Interns from the Institute of Clinical Acupuncture and Oriental Medicine (ICAOM) at the Acupuncture Clinic of the Rehabilitation Hospital of the Pacific, a member of the Governing Board of ICAOM, and an active member of the Hawai'i Acupuncture Association (HAA).

I stand in support of SB 2276 SD2 which amends Hawaii Revised Statutes 436E, Acupuncture Practitioners. Our current statute is in dire need of being updated to not only reflect our profession's graduate level education and training in the formation of both Master and Doctoral degrees as set forth by the nationally accredited commissions, but also to designate licensing requirements to be in line with stringent national credentialing standards and implement continuing education for renewal. Our standards of practice and current modalities of care must also be addressed while still maintaining and preserving the traditions of our unique medical system.

In that light, it is exciting to report that the 11<sup>th</sup> revision of the World Health Organization's (WHO) International Statistical Classification of Diseases and Related Health Problems (ICD) will now include Traditional Medicine (TM) for the first time. It was adopted in May 2019 and came into effect on January 1, 2022. The ICD11 provides a common language that allows health professionals to share standardized information across the world for diagnosis used in medical billing, epidemiology, research, and cataloguing causes of death. In *Pharmaceutical Medicine (Lam et al, July 2019)*, it states that "ICD-11 will progressively transform the existing healthcare system from a Western

Medicine dominant to an integrative Western Medicine and Traditional Chinese Medicine health care system. The rationale is to include the best practices of both conventional and complementary therapies, uniting these practices into an integrative approach, especially when positive evidence about the efficacy and safety of TM for certain conditions and diseases is documented.”

The Hawai'i Acupuncture Association (HAA) and the Hawai'i State Board of Acupuncture (BOA) have worked tirelessly to clarify the parameters in the revision of HRS 436E.

I would like to also comment that opposing testimony from the American Academy of Medical Acupuncture (AAMA) requesting the repeal of HRS 436E-3.5 prohibiting physicians and osteopaths from practicing acupuncture unless licensed under the Board of Acupuncture (BOA) is a subject that has been thoroughly researched and addressed by the Attorney General in Opinion No. 03-5 dated August 18, 2003 (see attached link). Without any ambiguity, physicians and osteopaths cannot practice medical acupuncture without being licensed by the BOA, and medical acupuncture does not fall outside of the scope of acupuncture since it is not sufficiently distinct from TM.

Hawai'i has the highest per capita of Acupuncture Practitioners of any State. What is paramount in this measure is ensuring that the health, safety, and welfare of the public has been met. The public deserves no less than competent practitioners.

I kindly ask the Committee for the passage of **SB 2276 SD2**.

Thank you for the opportunity to testify on this measure and for your time and consideration.

#### References:

Lam, W.C., Lyu, A. & Bian, Z. ICD-11: Impact on Traditional Chinese Medicine and World Healthcare Systems. *Pharm Med* **33**, 373–377 (2019). <https://doi.org/10.1007/s40290-019-00295-y>

State Of Hawaii Department of The Attorney General. (2003, August 18). *Medical Acupuncture as it Relates to the Scope of Practice of Acupuncture (op. 03-05)*. The State of Hawaii. <https://ag.hawaii.gov/wp-content/uploads/2013/01/03-05.pdf>

**SB-2276-SD-2**

Submitted on: 3/14/2022 8:01:10 AM

Testimony for HHH on 3/15/2022 9:00:44 AM

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Testify</b>
Janet H. Boyd	Individual	Support	Written Testimony Only

Comments:

Committee on Health, Human Services, & Homelessness

Honorable Chair Representative Ryan I. Yamane

Honorable Vice Chair Representative Adrian K. Tam

7seasacupuncture@gmail.com    Hearing Date: March 15, 2022

Time: 9:00 am

Via Videoconference/online testimony

Conference Room 329

State Capitol

415 South Beretania Street

Position on SB2276 SD2: SUPPORT

Dear, Honorable Chair Representative Ryan I. Yamane, Honorable Vice Chair Representative Adrian K. Tam and Honorable Health, Human Services and Homelessness Committee,

I am a licensed Acupuncture Practitioner (LAc) and active member of the Hawaii Acupuncture Association.



I reside Koloa and practice acupuncture medicine Koloa, Lihue and Kapaa I am writing this testimony in SUPPORT of SB2276 SD2.

Regulated medical professions require safety of the public and access to care to be of primary importance. Acupuncture medicine has been one of the fastest growing segments in American healthcare and with this the profession has seen standardization of education, national certifications, and the formation of both Master and Doctoral degrees. Hawaii's existing statute, which hasn't been updated in over 20 years, has become outdated in its language, as well as deficient in its standards. The proposed Scope of Practice addresses these issues, while also improving the structure of the Bill for future updates.

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I extend to you and your esteemed colleagues my aloha. Thank you for your time and consideration.

Respectfully,

Janet H. Boyd D.A.C.M. L.Ac



March 14, 2022

From: Samantha Preis, L.Ac., Dipl. O.M.  
President, Acuplan Hawaii  
46-005 Kawa St., Suite 304  
Kaneohe, HI 97644  
[windwardqi@gmail.com](mailto:windwardqi@gmail.com)  
(808) 247-9800

RE: Support of SB2276                      Acupuncture Scope of Practice Update

To the Honorable Chair Rep. Yamane, Vice Chair Tam, and members of the Health, Human Services and Homelessness Committee,

I am writing to you on behalf of Acuplan Hawaii, an organization of over 50 acupuncturists in Hawaii that seek to promote the professional status of acupuncture by connecting with medical professionals and increasing availability of acupuncture through insurance coverage. We contract as exclusive providers for University Health Alliance (UHA) and Hawaii Medical Assurance Association (HMAA) and Hawaii-Western Management Group (HWMG). **We are in strong support of SB2276.**

HMSA, Kaiser, The Veteran's Administration and many medicare supplement plans all cover acupuncture in some or all of their plans. These insurance companies can determine reimbursement based on what is allowed under our scope of practice. Right now, our scope leaves a lot of room for confusion which results in rejected claims. As evidence for acupuncture grows, coverage will grow and clear language in the scope of practice will be crucial. Compensation for essential services such as evaluations and adequate treatment time must be appropriate and recognized.

The profession of acupuncture is evolving as we now have both Master's and Doctorate degrees. We must evolve along with it. Updating the scope of practice will allow acupuncturists to practice in Hawaii to our fullest potential and bring Hawaii up to the national standards of competency and safety. It will better protect the public against unlicensed and unqualified individuals who may pose a danger to public safety by practicing without a license.

Hawaii Acupuncture Association directors have made efforts to consult with the members of the various segments of the acupuncture community in Hawaii on the wording and crafting of these changes. We have all lent our support to this update and hope it will pass this legislative session to elevate us all.

Respectfully,

Samantha Preis, L.Ac., Dipl. O.M.

Committee on Health, Human Services, & Homelessness

Honorable Chair Representative Ryan I. Yamane

Honorable Vice Chair Representative Adrian K. Tam

Dr.Soraya Applegate DACM, L.Ac  
Soulistic Holistics Hawaii  
45-696 Kamehameha Highway  
Kaneohe HI 96744  
808 721 3083  
Soraya@SoulisticHolisticsHawaii.com

Hearing Date: March 15, 2022

Time: 9:00 am

Via Videoconference/online testimony

Conference Room 329

State Capitol

415 South Beretania Street

Position on SB2276 SD2: SUPPORT

Dear, Honorable Chair Representative Ryan I. Yamane, Honorable Vice Chair Representative Adrian K. Tam and Honorable Health, Human Services and Homelessness Committee,

I am a licensed Dr. of Acupuncture DACM, Lac and active member of the Hawaii Acupuncture Association.

I reside in Kaneohe, Oahu and practice acupuncture medicine Kaneohe. I am writing this testimony in SUPPORT of SB2276 SD2.

Regulated medical professions require safety of the public and access to care to be of primary importance. Acupuncture medicine has been one of the fastest growing segments in American healthcare and with this the profession has seen standardization of education, national certifications, and the formation of both Master and Doctoral degrees. Hawaii's existing statute, which hasn't been updated in over 20 years, has become outdated in its language, as well as deficient in its standards. The proposed Scope of Practice addresses these issues, while also improving the structure of the Bill for future updates.

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It is time for Hawaii, with its long history of acupuncture, along with the highest per capita Acupuncture Practitioners of any state, to integrate the profession into Hawaii's healthcare delivery system with highest standard and care for the citizens of Hawaii. I respectfully ask you to please support this SB2276 SD2.

I extend to you and your esteemed colleagues my aloha. Thank you for your time and consideration.

Respectfully,

Soraya Faris Applegate

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