

JOSH GREEN, M.D.  
GOVERNOR  
KE KIA'ĀINA

**LATE**



MIKE LAMBERT  
DIRECTOR

SYLVIA LUKE  
LT GOVERNOR  
KE KE'ENA

STATE OF HAWAII | KA MOKU'ĀINA O HAWAII  
**DEPARTMENT OF LAW ENFORCEMENT**  
*Ka 'Oihana Ho'okō Kānāwai*  
715 South King Street  
Honolulu, Hawaii 96813

JARED K. REDULLA  
Deputy Director  
Law Enforcement

TESTIMONY ON HOUSE BILL 951  
RELATING TO PRESCRIPTION DRUGS  
Before the House Committee on  
CONSUMER PROTECTION & COMMERCE  
Wednesday, February 19, 2025, 2:00 PM  
State Capitol Conference Room 329 & Videoconference

Chair Matayoshi, Vice Chair Chun and members of the Committee:

The Department of Law Enforcement (DLE)'s Narcotics Enforcement Division (NED) is the State's regulator for the controlled substances industries in Hawaii and the agency charges with enforcement of chapter 329, HRS, the Uniform Controlled Substances Act. The DLE supports House Bill 951.

This bill would allow a patient seen in-person by another health care provider in the same medical group as the prescribing physician to be prescribed an opiate prescription for a three-day supply or less via telehealth.

This bill balances DLE's concerns for public safety and proper prescribing by allowing a very limited pathway to prescribe an opioid via telehealth, so long as it is done by another prescriber in the same medical group, and for an opioid telehealth prescription for a three-day supply or less. The collaboration of healthcare providers in the same medical group, with access to the same patient records, balances the DLE's public safety concerns with the evolving need for patient access to medications. As a result, the DLE supports this proposal.

Thank you for the opportunity to testify in support of this bill.

Testimony of  
Jonathan Ching  
Government Relations Director

Before:  
House Committee on Consumer Protection & Commerce  
The Honorable Scot Z. Matayoshi, Chair  
The Honorable Cory M Chun, Vice Chair

February 19, 2025  
2:00 p.m.  
Conference Room 329  
Via Videoconference

**Re: HB 951, HD 1, Relating to Prescription Drugs.**

Chair Matayoshi, Vice Chair Chun, and committee members, thank you for this opportunity to provide testimony on HB 951, HD 1, which allows a patient, who has been seen in-person by a physician in the same medical group as the prescribing physician, to be prescribed an opiate for a three-day supply or less via telehealth.

**Kaiser Permanente Hawai‘i SUPPORTS HB 951, HD 1, and requests an AMENDMENT.**

Kaiser Permanente Hawai‘i is one of the nation’s largest not-for-profit health plans, serving 12.6 million members nationwide, and more than 271,000 members in Hawai‘i. In Hawai‘i, more than 4,200 dedicated employees and more than 650 Hawai‘i Permanente Medical Group physicians and advance practice providers work in our integrated health system to provide our members coordinated care and coverage. Kaiser Permanente Hawai‘i has more than 20+ medical facilities, including our award-winning Moanalua Medical Center. We continue to provide high-quality coordinated care for our members and deliver on our commitment to improve the health of our members and the people living in the communities we serve.

HB 951, HD 1 permits patients who have seen their physician in-person to be prescribed a limited supply of opiates by another physician within the same medical group via telehealth. Kaiser Permanente Hawai‘i supports this bill because it provides timely access to pain management while still protecting patients from the harmful effects of overprescribing, inappropriate long-term use, and addiction.

Acute pain requires prompt intervention, and this bill ensures patients receive immediate treatment for pain even when their regular provider is unavailable. Under current law, patients in this situation must try to quickly find another provider to satisfy the face-to-face requirement. This is

challenging given the ongoing shortage of healthcare providers and creates inefficiencies in care delivery.

HB 951, HD 1 allows physicians in the same medical group who have access to the patient's history to fill that gap by prescribing a limited supply—three days—of opiates. This balances the need for timely pain treatment with the responsibility to prevent opioid-related harm. **This safeguard ensures appropriate and safe pain management, minimizes the risk of misuse and addiction, and provides time for the patient to reach their usual provider or schedule an appointment to see a new provider.**

Allowing providers to prescribe a three-day supply of opiates based on another provider's evaluation, within the same medical group, offers significant benefits and supports care coordination. **It enhances access to pain management, ensures continuity of care, improves patient convenience, optimizes healthcare resources, enables swift response to acute pain, and adheres to clinical guidelines.** For these reasons, Kaiser Permanente Hawai'i supports this measure as a proactive step toward improving patient care and outcomes.

Hawaii law grants prescriptive authority for opiates to physicians (MD/DO), advanced practice registered nurses (APRN/NP), and physician assistants (PA), and to acknowledge the vital role each of these providers plays in ensuring our community has access to safe, high quality health care, we request the following amendment:

SECTION 2. Section 453-1.3, Hawaii Revised Statutes, is amended by amending subsection (c) to read as follows:

"(c) Treatment recommendations made via telehealth, including issuing a prescription via electronic means, shall be held to the same standards of appropriate practice as those in traditional physician-patient settings that do not include [+]an[+] in-person visit but in which prescribing is appropriate, including on-call telephone encounters and encounters for which a follow-up visit is arranged. Issuing a prescription based solely on an online questionnaire is not treatment for the purposes of this section and does not constitute an

acceptable standard of care. For the purposes of prescribing opiates or certifying a patient for the medical use of cannabis, a physician-patient relationship shall only be established after an in-person consultation between the prescribing physician and the patient[-];  
provided that a patient seen in-person by another [physician] health care provider in the same medical group as the prescribing [physician] provider authorized pursuant to section 329-33, Hawaii Revised Statutes, may be prescribed an opiate prescription for a three-day supply or less via telehealth [~~by the prescribing physician~~]."

This amendment will eliminate unnecessary administrative burden that hinders healthcare professionals from practicing at the top of their license as provided by Hawaii Revised Statutes and Hawaii Administrative Rules.

Mahalo for the opportunity to testify on this important measure.

**LATE**

**HB-951-HD-1**

Submitted on: 2/19/2025 8:49:38 AM

Testimony for CPC on 2/19/2025 2:00:00 PM

Submitted By	Organization	Testifier Position	Testify
TY Cheng	Aloha Green Apothecary	Support	Written Testimony Only

Comments:

Support

**HB-951-HD-1**

Submitted on: 2/14/2025 10:22:43 PM

Testimony for CPC on 2/19/2025 2:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Wailua Brandman	Individual	Comments	Written Testimony Only

Comments:

Please be sensitive to using provider neutral language. Physicians are not the only prescribers who prescribe controlled substance schedule II.

**HB-951-HD-1**

Submitted on: 2/14/2025 11:33:18 PM

Testimony for CPC on 2/19/2025 2:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Ruth Love	Individual	Comments	Written Testimony Only

Comments:

I feel a 3 day prescription reill for opiates puts an undue hardship on patients and their caregivers.

It should be a 7 day refill as long as by a health care provider is in the same practice. Telehealth prescribing by an associated provider makes sense if it is for a condition the providers group is or has been addressing.

Thank you

Mrs Ruth Love