



## **THE FAMILY MEDICINE CENTER**

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**Daniel H. Belcher, MD**

**Lynda M. Dolan, MD**

**Erin Kalua, MD**

**Jessica Anahu, DNP, APRN**

**Haley Rosehill-Reiger, APRN**

February 21, 2025

Testimony to support SB1245: Payment for Pharmacist Services Within a Pharmacists Scope of Practice

To The Honorable Chair Keohokalole Vice Chair Fukunaga and members of the Committee on Commerce and Consumer Protection:

The Family Medicine Center is a multi-provider primary care clinic located in Hilo, Hawaii and we appreciate the opportunity to submit testimony in support of Senate Bill 1245, Payment for Pharmacist Services Within a Pharmacists Scope of Practice.

Our practice has funded and employed a clinical pharmacist since 2018. The pharmacist plays an essential role in our healthcare team and has proved to be an invaluable resource to our patients. They are able to work collaboratively with our providers to manage patients' chronic conditions, offer in-person training on new medications, and provide medication reconciliation services. All of these services are within their current scope of practice. SB1245 would provide financial compensation for licensed pharmacists under the medical benefit of both private and public health plans, enabling pharmacists to continue providing healthcare services in Hawai'i across all patients and health plans. With the passage of this bill, we could see many more primary care clinics, like ours, employing pharmacists to increase the quality and access to medical services throughout the State.

We respectfully and strongly urge the Committee to pass SB1245 and thank you for the opportunity to testify.

Mahalo,

Lynda Dolan, MD

Daniel Belcher, MD

Erin Kalua, MD

Jessica Anahu, DNP APRN

Haley Rosehill-Reiger, APRN

Dayna Wong-Otis, PharmD, CDCES

**Testimony of the Board of Pharmacy**  
**Before the**  
**Senate Commerce and Consumer Protection Committee**  
**Tuesday, February 25, 2025**  
**9:32 p.m.**  
**Conference Room 229 and Videoconference**

**On the following measure:**  
**S.B. 1245 S.D. 1, RELATING TO PHARMACISTS**

Chair Keohokalole and Members of the Committee:

My name is James Skizewski, Executive Officer of the Board of Pharmacy (Board). The Board supports this bill.

The purpose of this bill is to mandate reimbursement for services provided by participating registered pharmacists practicing within their scope of practice by private and public health plans in the State.

The Board would like to stress the challenges the State currently faces regarding the shortage of healthcare providers, especially in rural areas and the neighbor islands. Pharmacies are geographically dispersed throughout the community with extended hours of operation, making access to health care provided through pharmacies convenient for patients in each locality. Patients have established relationships of trust with and recognize pharmacists as healthcare professionals. This measure will aide in the development of access to quality health care across the State, most importantly, in underserved rural areas of Hawaii.

The Board would like to further emphasize that this measure will only mandate reimbursements of pharmacists practicing within their scope. Pharmacists provide services such as: dispensing emergency contraception, performing immunizations, ordering routine drug therapy related tests, consultations, and prescribing and dispensing opioid antagonists. In response to the COVID-19 pandemic, pharmacists aided in ordering and administering COVID-19 tests and vaccines in pharmacies across the State, safely expanding patient access to care.

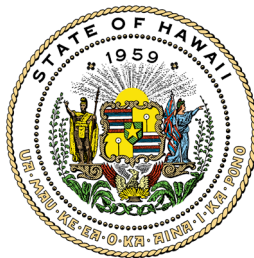
This measure will help ensure pharmacists are able to continue to serve their communities and provide access to quality health care across the State. Other States

that have enacted similar legislation include, but are not limited to, California, Colorado, Idaho, Nevada, Ohio, Oregon, Texas, Virginia, Washington, and Wisconsin.

The Board acknowledges the requirements outlined in Hawaii Revised Statue 23-51, which requires a social and financial audit, but would like to highlight that Advanced Practice Nurses (APRN) were added as a sole provider via Act 169 of 2009 without such an audit.

Finally, the Board requests the effective date related to this measure be amended to July 1, 2026.

Thank you for the opportunity to testify on this bill.



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SENATE COMMITTEE ON COMMERCE AND CONSUMER PROTECTION

The Honorable Jarrett Keohokalole, Chair  
The Honorable Carol Fukunaga, Vice Chair

**S.B. NO. 1245, S.D. 1, RELATING TO PHARMACISTS**

Hearing: Tuesday, February 25, 2025, 9:32 a.m.

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The Office of the Auditor offers comments on S.B. No. 1245, S.D. 1, which will mandate reimbursement for services provided by registered pharmacists practicing within their scope of practice under private and public health insurance plans in the State.

We were asked to assess the social and financial impacts of a similar health insurance proposal introduced in the 2023 Regular Session as S.B. No. 165 and issued Report No. 23-12, *Proposed Mandatory Health Insurance Coverage for Pharmacists Services*. We determined that the bill did not mandate health insurers to cover services provided by registered pharmacists because S.B. No. 165 applied only to those pharmacists who contracted with insurers. The bill, however, did not require insurers to contract with pharmacists. Insurers had complete discretion whether to contract – or not – with a pharmacist, meaning insurers would control whether their policies provided coverage for services provided by registered pharmacists. We determined that the proposed mandated coverage is not new insurance coverage. See Report No. 23-12, <https://files.hawaii.gov/auditor/Reports/2023/23-12.pdf>.

Because of the similarities between S.B. No. 1245, S.D. 1, and the bill that we reviewed in 2023, we do not believe the mandate, *in its current form*, requires the Legislature to request another assessment under Section 23-51, HRS.



# UNIVERSITY OF HAWAII SYSTEM

## ‘ŌNAEHANA KULANUI O HAWAII

### Legislative Testimony

### Hō'ike Mana'o I Mua O Ka 'Aha'ōlelo

Testimony Presented Before the  
Senate Committee on Commerce and Consumer Protection  
Tuesday, February 25, 2025 at 9:32 a.m.

By  
Bonnie Irwin, Chancellor  
and  
Rae Matsumoto, Dean  
Daniel K. Inouye College of Pharmacy  
University of Hawai'i at Hilo

#### SB 1245 SD1 – RELATING TO PHARMACISTS

Chair Keohokalole, Vice Chair Fukunaga, and Members of the Committee:

Thank you for the opportunity to submit testimony on SB 1245 SD1. The University of Hawai'i at Hilo (UH Hilo) supports SB 1245 SD1, which mandates reimbursement for services provided by participating registered pharmacists practicing within their scope of practice by private and public health plans in the State.

Pharmacists are among the most trusted and accessible health care professionals, with about 90% of Americans living within 5 miles of a pharmacy. With their doctoral level of training, pharmacists can provide high quality services, particularly related to the safe and effective use of medications. Most relevant to Hawai'i is the improved access to health care services when pharmacists are able to provide preventative care such as a vaccinations and health screenings (eg. blood pressure, A1C testing for diabetes), and chronic disease state management (eg. regular visits with their pharmacists within their health systems to monitor disease states that are treated with medications and make adjustments as needed). This facilitates access to high quality health care while reducing the burden on physicians for routine chronic disease state management once the diagnosis is made.

For example, a pharmacist may receive a physician referral for a specific area of care (diabetes, blood pressure, asthma). To address the patient's specific need, the pharmacist must initially conduct a review of the entire medication profile from a generalist standpoint. For example, a diabetes certified pharmacist may receive a referral to initiate and maintain a diabetes medication(s) and monitor the disease. In order to manage the diabetes itself, the pharmacist must address the entire medication profile and all of the patient's disease states, especially chronic diseases that include major organ systems such as heart, kidney, and liver. Ongoing management through regularly scheduled visits with the patient of all medications and diseases is performed

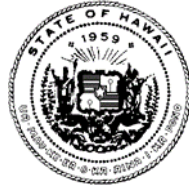
on a routine basis, with the patient being part of the pharmacist's panel for ongoing management. In this way, a patient with a chronic disease state can receive high quality of care from a doctoral level trained health professional, while relieving the burden on physicians.

These pharmacist services are routinely provided in select in-patient, out-patient and community/retail settings in Hawai'i, but because pharmacists are unable to be directly reimbursed for many of these services, building budget models that can sustainably pay for and expand these needed services are a challenge. SB 1245 SD1 will provide a path forward.

It should be noted that a similar bill was introduced in the 2023 legislative session (SB693) and a subsequent audit (SCR17) for financial and social assessment of pharmacy services under the medical benefit did not find any additional costs to the State or Hawai'i healthcare plans.

Thank you for the opportunity to testify in support of SB 1245 SD1.

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



RYAN I. YAMANE  
DIRECTOR  
KA LUNA HO'OKELE

JOSEPH CAMPOS II  
DEPUTY DIRECTOR  
KA HOPE LUNA HO'OKELE

STATE OF HAWAII  
KA MOKU'ĀINA O HAWAI'I  
**DEPARTMENT OF HUMAN SERVICES**  
KA 'OIHANA MĀLAMA LAWELAWE KANAKA  
Office of the Director  
P. O. Box 339  
Honolulu, Hawaii 96809-0339

TRISTA SPEER  
DEPUTY DIRECTOR  
KA HOPE LUNA HO'OKELE

February 23, 2025

TO: The Honorable Senator Jarrett Keohokalole, Chair  
Senate Committee on Commerce and Consumer Protection

FROM: Ryan I. Yamane, Director

SUBJECT: **SB 1245 SD1 – RELATING TO PHARMACISTS.**

Hearing: February 25, 2025, Time 10:00 a.m.  
Conference Room 225 & Via Videoconference, State Capitol

**DEPARTMENT'S POSITION:** The Department of Human Services (DHS) appreciates the intent of this bill, provides comments, and respectfully requests three amendments,

- an extended effective date,
- the deletion of Section 4 that inappropriately adds pharmacists to section 346-53.64, Hawaii Revised Statutes (HRS), relating to Federally Qualified Health Centers, and
- the striking of a timeline to submit any needed state plan amendments to the Center for Medicare and Medicaid Services (CMS) for federal approval.

**PURPOSE:** Beginning 1/1/2026, mandates reimbursement for services provided by participating registered pharmacists practicing within their scope of practice by private and public health plans in the State. Effective 12/31/2050. (SD1)

The Senate Committee on Health and Human Services amended the measure by:

- (1) Deleting language that would have required each individual or group policy of accident and health or sickness insurance delivered or issued for delivery in this State after December 31, 2025, to recognize pharmacists licensed pursuant to chapter 461 as participating providers;
- (2) Inserting an effective date of December 31, 2050, to encourage further discussion;

and

- (3) Making technical, nonsubstantive amendments for the purposes of clarity and consistency.

DHS appreciates the importance of whole-person integrated health care as well as the current shortage of health care professionals in our state making timely access to that care challenging. For Medicaid, licensed pharmacists acting within their scope of practice are currently able to bill for their services under a pharmacy's billing number. If this bill aims to mandate that pharmacists be able to bill independently, DHS will need to implement some technical changes to the provider enrollment system as well as policy changes in the Medicaid State plan. If this is the case, DHS requests an extended effective date to implement these changes.

Section 4 adds a pharmacist to a list of providers who are "Qualified Providers" who can bill for their services in the Federally Qualified Health Center's unique prospective payment system (PPS). As background, a PPS rate pays the same amount for each eligible encounter regardless of the service, with a defined set of services eligible for the PPS encounter rate and a defined set of qualified providers who are allowed to bill for the PPS encounter. Pharmacists can be employed by FQHCs but are classified as allied health care professionals or "qualified non-physician providers." Thus, although pharmacists can contribute to services that are billable, they cannot bill independently in the FQHC setting and should not be added to the list of providers who can bill independently. For this reason, DHS also requests that Section 4 amending section 346-53.64, HRS, be deleted from the measure.

Section 8 mandates that DHS submit any necessary State Plan amendments within an unspecified timeframe. DHS requests that no date be specified given the complicated timeframe for drafting the amendment(s), consulting with the Centers for Medicare and Medicaid Services (CMS), publishing and seeking public comment, and incorporating public comments before the amendment can be submitted to CMS. Respectfully, please strike Section 8 on page 9, lines 5-6: "~~... .The department shall submit the medicaid state plan amendment no later than\_\_\_\_\_.~~"

Thank you for the opportunity to provide comments on this measure.





## Hawai'i Island Community Health Center

75-5751 Kuakini Highway Suite 203, Kailua Kona, HI 96740

(808) 326-5629

[www.hicommunityhealthcenter.org](http://www.hicommunityhealthcenter.org)

**February 21, 2025**

The Honorable Jarrett Keohokalole  
Chair, Senate District 24  
Hawai'i State Capitol, Room 205  
Phone: (808) 587-7215

The Honorable Carol Fukunaga  
Vice Chair, Senate District 11  
Hawai'i State Capitol, Room 216  
Phone: (808) 586-6460

Dear Chair Keohokalole, Vice Chair Fukunaga and members of the committee,

I am writing to express my strong support for SB1245 mandating reimbursement for services provided by participating registered pharmacists practicing within their scope of practice by private and public health plans in Hawaii. Clinical pharmacists play a pivotal role in enhancing patient outcomes, particularly in the management of chronic diseases, and also reducing overall healthcare costs.

### **Impact on Chronic Disease Management:**

There is ample evidence that interventions and care from pharmacists are associated with improved clinical outcomes. For example: a systematic review by Chisholm-Burns et al. (2010) found that pharmacist involvement in patient care was associated with improved hemoglobin A1c, blood pressure, and lipid levels.

### **The Role of Clinical Pharmacy in Improving Medication Management**

#### **Reduction in healthcare expenditures:**

Investing in clinical pharmacy services yields significant cost savings. A study published in the *Journal of the American Medical Association Network Open* estimated that a hypertension management program delivered through pharmacists resulted in cost savings of \$10,000 per patient. This program, if implemented at a population level (assuming 50% intervention uptake) was estimated to save \$1.1 trillion in cost of care and 30.2 million life years over 30 years. Previous literature has cited an average return on investment (ROI) in pharmacy services of \$4 – for every \$1 spent on pharmacy services, an average of \$4 is saved in health care expenses. More recent literature published January 2025 looking specifically at pharmacy services provided in non-hospitalized patients found ROI ranging from \$1.29 to \$18.50.

[Cost-Effectiveness of Pharmacist Prescribing for Managing Hypertension in the United States | Health Policy | JAMA Network Open | JAMA Network](#)

[Evidence of the economic benefit of clinical pharmacy services: 1996-2000 - PubMed](#)

[Return on investment of pharmacists' services among non-hospitalized patients: A scoping review - ScienceDirect](#)

### **Pharmacist Accessibility:**

Research has demonstrated that patients find pharmacists to be readily accessible and trusted health professionals. A study published in the *Journal of the American Medical Association Network Open* found that patients were nearly twice as likely to visit pharmacists than their primary healthcare provider. The authors noted that primary care provider and pharmacist collaboration could benefit chronic disease management and prevention in light of patient preferences. An additional survey conducted in 2022 found that the majority of adults surveyed favored obtaining a more healthcare services at their local pharmacy and that such services should be covered by their insurance in the same manner as other provider services.

[Evaluation of Frequency of Encounters With Primary Care Physicians vs Visits to Community Pharmacies Among Medicare Beneficiaries - PMC](#)

[2023 forecast: Pharmacists push for greater role in patient care](#)

### **Support for the Proposed Bill:**

As of 2024, thirty-four states provide for pharmacists to bill for chronic disease management services in some capacity with three additional states allowing billing only for Medicaid plans for Medication Therapy Management Services.

This year marks my 30<sup>th</sup> year serving my community in various roles in the pharmacy profession. I've been a licensed pharmacist for 25 of those years. I have held a license to practice pharmacy in six states throughout my career. Hawaii is the only state in which I've practiced pharmacy where pharmacists are not currently able to bill for services beyond medication dispensing.

Pharmacists have made great advancements within our scope to collaborate with other providers. Our patient interactions, while collaborative in nature, typically occur independent of the primary care provider visit. I am honored and humbled to have been recognized as a provider amongst my peers and medical provider colleagues for efforts in caring for patients living with Hepatitis C when I received the Hawaii Primary Care Association's Healthcare Provider of the Year Award in 2024. I and my colleagues look forward to reimbursement aligning with that recognition.

Thank you for considering this important legislation.

Senator Jarrett Keohokalole & Carol Fukunaga

My name is Alyssa-Marie Pang, and I am the Director of Times Pharmacy. I am writing to express my strong support for granting pharmacists provider status, ensuring they receive reimbursement for the essential healthcare services they provide to our communities.

Pharmacists are among the most accessible healthcare professionals, serving on the front lines of patient care. They provide critical services beyond dispensing medications, including chronic disease management, immunizations, medication therapy management, opioid management and health screenings. Pharmacists often serve as the primary healthcare touchpoint for patients, ensuring they receive timely interventions that prevent costly hospitalizations and complications.

However, despite their extensive training and vital contributions, pharmacists face barriers to reimbursement for the care they provide. Without provider status, many of their services remain uncompensated, limiting their ability to expand clinical offerings and better support community health initiatives. Recognizing pharmacists as providers would not only ensure fair compensation but also enhance patient outcomes by allowing pharmacists to practice at the top of their license.

Granting pharmacists provider status is a necessary step to strengthen our healthcare system and improve access to quality care. I urge you to support this initiative and recognize pharmacists as essential healthcare providers who deserve reimbursement for their invaluable services.

Thank you for your time and consideration.

Sincerely,



Alyssa-Marie Pang

Director of Pharmacy

Email: [alyssa.pang@times-supermarket.com](mailto:alyssa.pang@times-supermarket.com)



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To: The Honorable Jarrett Keohokalole, Chair  
The Honorable Carol Fukunaga, Vice Chair  
Members, Senate Committee on Commerce & Consumer Protection

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

Date: February 25, 2025

Re: Support of SB1245 SD1 – Relating to Pharmacists

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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 10,000 affiliated physicians, caregivers, and dedicated medical staff 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 supports SB 1245 SD1, which mandates reimbursement for services provided by participating registered pharmacists practicing within their scope of practice by private and public health plans in the State. We believe this measure will ultimately provide greater access to health care services, particularly for our neighbor island patients; QHS hospitals, Molokai General Hospital and North Hawaii Community Hospital, serve rural communities that have limited access to care in many cases.

Allowing reimbursement to registered pharmacists to safely provide certain health care services is a cost-effective measure that brings us closer to meeting the health care needs of our community and helps strengthen the integrated care model that has proven so effective for many of our most vulnerable patients.

Thank you for the opportunity to testify on this measure.

*The mission of The Queen's Health System 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.*



**SanHi**

GOVERNMENT STRATEGIES

A LIMITED LIABILITY LAW PARTNERSHIP

DATE: February 24, 2025

TO: Senator Jarrett Keohokalole  
Chair, Senate Committee on Commerce and Consumer Protection

Senator Carol Fukunaga  
Vice Chair, Senate Committee on Commerce and Consumer Protection

FROM: Tiffany Yajima

RE: **S.B. 1245 S.D.1 - Relating to Pharmacists**  
**Hearing Date: Tuesday, February 25, 2025 at 9:32 a.m.**  
**Conference Room: 229**

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Dear Chair Keohokalole, Vice Chair Fukunaga, and Members of the Committee on Commerce and Consumer Protection:

We submit this testimony on behalf of Walgreen Co. ("Walgreens"). Walgreens operates stores at more than 9,000 locations in all 50 states, the District of Columbia, and Puerto Rico. In Hawaii, Walgreens has 13 stores on the islands of Oahu and Maui.

S.B. 1245 is intended to mandate reimbursement for services provided by registered pharmacists practicing within their scope of practice by private and public health plans in the State.

Walgreens **supports** this measure but notes that the S.D.1 deleted language that would have required each plan to recognize pharmacists licensed pursuant to chapter 461 as participating providers. If pharmacists are not recognized as participating providers, each plan has the discretion of whether to provide for reimbursement. Therefore, Walgreens respectfully requests the committee to restore this language, with additional amendments to more explicitly impose payment and reimbursement obligations on health plans as follows:

Page 2, Section 2, lines 6-18:

**\$431:10A- Services provided by participating registered pharmacists; coverage.** (a) Each individual or group policy of accident and health or sickness insurance delivered or issued for delivery in this State after December 31, 2025, shall:

(1) recognize pharmacists licensed pursuant to chapter 461-1 as participating providers;

- (2) include coverage for ~~a care service~~ provided by a participating registered pharmacist practicing within the scope of their license for purposes of health maintenance or treatment to the extent that the policy provides ~~benefits coverage for identical the same services~~ rendered by another health care provider; and
- (3) pay or reimburse a pharmacist or pharmacy for the cost of a service performed by a pharmacist within the scope of their practice.

Page 3, Section 3, lines 4-14:

**§432:1- Services provided by participating registered pharmacists; coverage.** (a) Each

individual and group hospital or medical service plan contract delivered or issued for delivery in this State after December 31, 2025, by a mutual benefit society shall:

- (1) recognize pharmacists licensed pursuant to chapter 461 as participating providers; and
- (2) ~~include provide~~ coverage for ~~care a service~~ provided by a participating registered pharmacist practicing within the scope of their license for purposes of health maintenance or treatment to the extent that the plan contract provides ~~benefits coverage for identical the same services~~ rendered by another health care provider; and
- (3) pay or reimburse a pharmacist or pharmacy for the cost of a service performed by a pharmacist within the scope of their practice.

The practice of pharmacy has evolved alongside significant changes in healthcare delivery. Patient demand on the healthcare system is expected to increase significantly and outpace current provider supply over the next few years. As a result, pharmacists today play a vital role in health care and are increasingly providing patient care services beyond the traditional prescription dispensing function.

Pharmacists are now offering patient care services such as medication therapy management, immunizations, health screenings, chronic disease management, and patient education and counseling. In addition, over the past decade the legislature has expanded on pharmacy services and given pharmacists the ability to perform tasks such as prescribing and dispensing contraceptive supplies (Act 67 (2017)), ordering and performing certain CLIA-waived tests (Act 103 (2023)), and most recently, allowing pharmacists the ability order immunizations and for pharmacists, pharmacy technicians and pharmacy interns the ability to administer minor immunizations (Act 104 (2024)).

This measure is the next step to ensure that pharmacists are fairly reimbursed by health plans in the State for the clinical services they provide within their scope of practice. This will also help to ensure that pharmacies can continue to serve our communities. Pharmacists are accessible, especially in underserved areas, making them a vital resource for healthcare delivery. They also help with cost savings by preventing hospital readmissions and managing chronic conditions thereby reducing overall healthcare costs and increasing positive patient outcomes.

With these amendments, Walgreens asks the committee to pass this measure.

Thank you for the opportunity to submit this testimony.



Testimony to support SB1245: Payment for Services Within a Pharmacist's Scope of Practice  
Committee on Commerce and Consumer Protection (CPN)  
February 25, 2025

**Testimony in SUPPORT of SB1245**

To the Honorable Chair Keohokalole, Vice Chair Fukunaga, and Members of the Committee,

My name is Kevin Glick, PharmD, Owner Lihue Pharmacy Group and I appreciate the opportunity to submit testimony in strong support of SB1245, a bill to mandate reimbursement for pharmacist provided services that already exist within a pharmacist's scope of practice.

My team and I currently practice in the community setting. Some examples of services that I currently provide without direct reimbursement include administration of long acting antipsychotics, B-12 shots, GLP-1 education and initial administration. Additional services we would be able to provide with financial leverage created by this bill would be [hormonal contraception prescribing, consultation and management of chronic disease states, partnerships with providers, etc.]

A story that I have about being embedded as a trusted member of the community and the services I would/can provide is that during the COVID-19 epidemic when patients could not access their MD we administered antipsychotic injections to many patients here on Kauai thus preventing countless episodes of decompensation.

Additional experiences I've had related to a lack of reimbursement for pharmacist services include drug education. While our patients appreciate the extra services that we provide, which are within our scope of practice, in order to sustainably offer and expand access to these services, we need to be paid for them.

SB1245 would provide financial compensation for licensed pharmacists under the medical benefit of both private and public health plans, enabling pharmacists to continue providing healthcare services in Hawai'i across all patients and health plans. I believe that ensuring providers already practicing within our communities are properly leveraged to utilize the fullest scope of their statutorily granted authority will only serve to increase both quality of and access to medical services throughout the State.

I respectfully and strongly urge the Committee to pass SB1245 and thank you for the opportunity to testify and advance the pharmacy profession.

Aloha,

Kevin Glick, PharmD

Lihue Pharmacy Group



Testimony to support SB1245: Payment for Services Within a Pharmacist's Scope of Practice  
Committee on Commerce and Consumer Protection  
February 21, 2025  
**Testimony in SUPPORT of SB1245**

To the Honorable Chair Keohokalole, Vice Chair Fukunaga, and Members of the Committee,

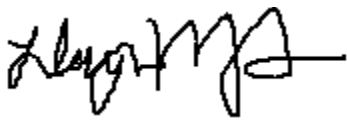
My name is Dayna Wong-Otis and I am a pharmacist on the Big Island of Hawaii. I appreciate the opportunity to submit testimony in strong support of SB1245, a bill to mandate reimbursement for pharmacist provided services that already exist within a pharmacist's scope of practice.

I currently practice in both the community pharmacy and primary care setting. Some examples of services that I currently provide without direct reimbursement include chronic disease state management, medication and device training, naloxone prescribing, and medication reconciliation. Additional services we would be able to provide with financial leverage created by this bill would be hormonal contraception prescribing, tobacco cessation counseling, and point of care testing and treatment.

SB1245 would provide financial compensation for licensed pharmacists under the medical benefit of both private and public health plans, enabling pharmacists to continue providing healthcare services in Hawai'i across all patients and health plans. I believe that ensuring providers already practicing within our communities are properly leveraged to utilize the fullest scope of their statutorily granted authority will only serve to increase both quality of and access to medical services throughout the State.

I respectfully and strongly urge the Committee to pass SB1245 and thank you for the opportunity to testify and advance the pharmacy profession.

Sincerely,

A handwritten signature in black ink, appearing to read 'Dayna Wong-Otis', with a stylized, flowing script.

Dayna Wong-Otis, PharmD, CDCES

**SB-1245-SD-1**

Submitted on: 2/21/2025 5:18:01 PM

Testimony for CPN on 2/25/2025 9:32:00 AM

| Submitted By  | Organization | Testifier Position | Testify                |
|---------------|--------------|--------------------|------------------------|
| Jarrett Chang | Individual   | Support            | Written Testimony Only |

## Comments:

TESTIMONY TO SUPPORT SB1245: Payment for Services Within a Pharmacist's Scope of Practice

Committee on Health and Human Services (HHS)

February 21, 2025

To the Honorable Chair San Buenaventura, Vice Chair Acquino, and Members of the Committee,

My name is Jarrett Chang, Pharmacist for an independent-chain pharmacy on the island of Oahu and I appreciate the opportunity to submit testimony in support of Senate Bill SB1245, A Bill to Mandate Reimbursement for Pharmacists' Services.

Hawai'i is facing a severe shortage of healthcare providers, especially in rural and medically underserved areas. While efforts are being made to attract and retain healthcare professionals, it is crucial that we fully utilize existing resources—especially pharmacists, who are among the most accessible healthcare providers in our communities.

SB 1245 would allow licensed pharmacists to receive reimbursement under the medical benefit of private and public health plans, ensuring that we can continue to provide critical healthcare services. Currently, my team and I offer essential services such as medication reconciliation, immunization screening and education, blood pressure and diabetes screenings, and point-of-care testing—often without direct reimbursement.

If SB 1245 is enacted, we would be able to expand our patient care offerings to include medication therapy management, chronic disease management, oral contraception prescribing and dispensing, naloxone prescribing, smoking cessation programs, behavioral counseling, and point-of-care testing and treatment.

Without a reimbursement mechanism, pharmacists cannot practice to the full extent of their training, limiting patient access to high-quality care. Providing a payment pathway for pharmacist services will help alleviate provider shortages and improve healthcare access, particularly for Hawai'i's rural and ethnic minority populations.

For these reasons, I respectfully urge the Committee to pass SB 1245. Thank you for your time and consideration.

Sincerely,

Jarrett Chang

Pharmacist

1772 South King St

TESTIMONY TO SUPPORT SB1245: Payment for Services Within a Pharmacist's Scope of Practice  
Committee on Health and Human Services (HHS)  
February 21, 2025

To the Honorable Chair San Buenaventura, Vice Chair Acquino, and Members of the Committee,

My name is Mia Tran-Cao, Pharm D., Clinical Pharmacy Manager for an independent pharmacy on the island of Oahu and I appreciate the opportunity to submit testimony in support of Senate Bill No. 693, A Bill to Mandate Reimbursement for Pharmacists' Services.

Hawai'i is facing a severe shortage of healthcare providers, especially in rural and medically underserved areas. While efforts are being made to attract and retain healthcare professionals, it is crucial that we fully utilize existing resources—especially pharmacists, who are among the most accessible healthcare providers in our communities.

SB 1245 would allow licensed pharmacists to receive reimbursement under the medical benefit of private and public health plans, ensuring that we can continue to provide critical healthcare services. Currently, my team and I offer essential services such as medication therapy reviews, immunization screening and education, blood pressure and diabetes education, and home visit vaccinations—often without direct reimbursement.

If SB 1245 is enacted, we would be able to expand our patient care offerings to include medication therapy management, chronic disease management, oral contraception prescribing and dispensing, naloxone prescribing, smoking cessation programs, behavioral counseling, and point-of-care testing and treatment.

Without a reimbursement mechanism, pharmacists cannot practice to the full extent of their training, limiting patient access to high-quality care. Providing a payment pathway for pharmacist services will help alleviate provider shortages and improve healthcare access, particularly for Hawai'i's rural and ethnic minority populations.

For these reasons, I respectfully urge the Committee to pass SB 1245. Thank you for your time and consideration.

Sincerely,

*Mia Tran-Cao*

**Mia Tran-Cao, Pharm. D.**  
Clinical Pharmacy Manager  
1620 North School Street  
Honolulu, HI 96817

**SB-1245-SD-1**

Submitted on: 2/21/2025 6:11:35 PM

Testimony for CPN on 2/25/2025 9:32:00 AM

| Submitted By | Organization | Testifier Position | Testify                |
|--------------|--------------|--------------------|------------------------|
| David Cao    | Individual   | Support            | Written Testimony Only |

Comments:

Dear Chair Keohokalole, Vice Chair Fukunaga, and members of the committee,

**I support SB1245.** Pharmacists play a key role in providing many services to help patients manage their chronic diseases and improve their health. These services include disease state consultations, medication therapy management (MTM), and immunizations. Research has shown that overall, these services help to significantly reduce health care costs by ensuring patients are adherent to their medications and are up to date with preventative health care.

Regardless of the setting, the clinical services provided by pharmacists have improved patient outcomes. I have seen patients who were hospitalized because they were not adherent to their medications, which resulted in them being in worse health and taking more medications. Patients who are better educated with medication and disease management tend to achieve their goals for their health and avoid these unnecessary costs.

By recognizing and compensating pharmacists for their contributions, Hawai‘i can enhance the quality of care for individuals with chronic diseases while achieving cost-effective healthcare delivery.

Thank you for considering this important legislation.

**SB-1245-SD-1**

Submitted on: 2/22/2025 9:48:20 AM

Testimony for CPN on 2/25/2025 9:32:00 AM

| Submitted By | Organization | Testifier Position | Testify                |
|--------------|--------------|--------------------|------------------------|
| Ryan Wilkin  | Individual   | Support            | Written Testimony Only |

## Comments:

SB 1245 would allow licensed pharmacists to receive reimbursement under the medical benefit of private and public health plans, ensuring that we can continue to provide critical healthcare services. Currently, my team and I offer essential services such as medication reconciliation, immunization screening and education, blood pressure and diabetes screenings, and point-of-care testing—often without direct reimbursement. If SB 1245 is enacted, we would be able to expand our patient care offerings to include medication therapy management, chronic disease management, oral contraception prescribing and dispensing, naloxone prescribing, smoking cessation programs, behavioral counseling, and point-of-care testing and treatment. Without a reimbursement mechanism, pharmacists cannot practice to the full extent of their training, limiting patient access to high-quality care. Providing a payment pathway for pharmacist services will help alleviate provider shortages and improve healthcare access, particularly for Hawai'i's rural and ethnic minority populations. For these reasons, I respectfully urge the Committee to pass SB 1245. Thank you for your time and consideration.

**SB-1245-SD-1**

Submitted on: 2/22/2025 10:07:55 AM

Testimony for CPN on 2/25/2025 9:32:00 AM

| Submitted By                       | Organization | Testifier Position | Testify                   |
|------------------------------------|--------------|--------------------|---------------------------|
| Ronald Taniguchi,<br>Pharm.D., MBA | Individual   | Support            | Written Testimony<br>Only |

Comments:

I fully support SB1245 SD1. Mahalo

**SB-1245-SD-1**

Submitted on: 2/22/2025 11:19:38 AM

Testimony for CPN on 2/25/2025 9:32:00 AM

| Submitted By | Organization | Testifier Position | Testify                |
|--------------|--------------|--------------------|------------------------|
| JESSICA      | Individual   | Support            | Written Testimony Only |

## Comments:

To the Honorable Chair San Buenaventura, Vice Chair Aquino, and Members of the Committee,

My name is Jessica, pharamcy techncian for an independent-chain pharmacy on the island of Oahu and I appreciate the opportunity to submit testimony in support of Senate Bill SB1245, A Bill to Mandate Reimbursement for Pharmacists' Services.

Hawai'i is facing a severe shortage of healthcare providers, especially in rural and medically underserved areas. While efforts are being made to attract and retain healthcare professionals, it is crucial that we fully utilize existing resources—especially pharmacists, who are among the most accessible healthcare providers in our communities.

SB 1245 would allow licensed pharmacists to receive reimbursement under the medical benefit of private and public health plans, ensuring that we can continue to provide critical healthcare services. Currently, my team and I offer essential services such as medication reconciliation, immunization screening and education, blood pressure and diabetes screenings, and point-of-care testing—often without direct reimbursement.

If SB 1245 is enacted, we would be able to expand our patient care offerings to include medication therapy management, chronic disease management, oral contraception prescribing and dispensing, naloxone prescribing, smoking cessation programs, behavioral counseling, and point-of-care testing and treatment.

Without a reimbursement mechanism, pharmacists cannot practice to the full extent of their training, limiting patient access to high-quality care. Providing a payment pathway for pharmacist services will help alleviate provider shortages and improve healthcare access, particularly for Hawai'i's rural and ethnic minority populations.

For these reasons, I respectfully urge the Committee to pass SB 1245. Thank you for your time and consideration.

Sincerely,

Jessica Lim



Pharmacy Technician

1173 21st Ave

Honolulu, HI 96816

**SB-1245-SD-1**

Submitted on: 2/22/2025 5:45:30 PM

Testimony for CPN on 2/25/2025 9:32:00 AM

| Submitted By | Organization | Testifier Position | Testify                |
|--------------|--------------|--------------------|------------------------|
| Aaron Lee    | Individual   | Support            | Written Testimony Only |

## Comments:

SB 1245 would allow licensed pharmacists to receive reimbursement under the medical benefit of private and public health plans, ensuring that we can continue to provide critical healthcare services. Currently, my team and I offer essential services such as medication reconciliation, immunization screening and education, blood pressure and diabetes screenings, and point-of-care testing—often without direct reimbursement. If SB 1245 is enacted, we would be able to expand our patient care offerings to include medication therapy management, chronic disease management, oral contraception prescribing and dispensing, naloxone prescribing, smoking cessation programs, behavioral counseling, and point-of-care testing and treatment. Without a reimbursement mechanism, pharmacists cannot practice to the full extent of their training, limiting patient access to high-quality care. Providing a payment pathway for pharmacist services will help alleviate provider shortages and improve healthcare access, particularly for Hawai'i's rural and ethnic minority populations. For these reasons, I respectfully urge the Committee to pass SB 1245. Thank you for your time and consideration.

**SB-1245-SD-1**

Submitted on: 2/23/2025 8:15:41 AM

Testimony for CPN on 2/25/2025 9:32:00 AM

| Submitted By  | Organization | Testifier Position | Testify                |
|---------------|--------------|--------------------|------------------------|
| Thaddeus Pham | Individual   | Support            | Written Testimony Only |

Comments:

Dear Chair Keohokalole, Vice Chair Fukunaga and members of the committee

As a public health professional, I **support SB1245 SD1**. Clinical Pharmacists play an important role in enhancing patient outcomes, particularly in the management of chronic diseases, and also reduce the overall healthcare costs.

Pharmacists at our health center have demonstrated effective management in multiple areas including Hepatitis C, anticoagulation, and medication adherence. Research has shown that for every one dollar invested in clinical pharmacy services, there can be an average return of four dollars in cost savings.

A similar bill was submitted in the 2023 legislative session. An assessment of financial impact was conducted and found to have no additional costs to the State of Hawai'i or Hawai'i healthcare plans.

By recognizing and compensating pharmacists for their contributions, Hawaii can enhance the quality of care for individuals with chronic diseases while achieving cost-effective healthcare delivery.

Mahalo,

Thaddeus Pham (he/him)

Makiki, HI

**SB-1245-SD-1**

Submitted on: 2/23/2025 8:21:13 AM

Testimony for CPN on 2/25/2025 9:32:00 AM

| Submitted By      | Organization | Testifier Position | Testify                |
|-------------------|--------------|--------------------|------------------------|
| Judy Strait-Jones | Individual   | Support            | Written Testimony Only |

Comments:

Chair Keohokaole and Vice Chair Fukunaga.

I strongly support pharmacists being recognized and compensated for their work through the passing of this bill.

Clinical pharmacists play an important role in patient outcomes. One of the most important is support of reducing chronic diseases such as hepatitis C.

Recognizing and compensating pharmacists for this work can improve patient quality of care.

I urge the passing of this bill.

Respectfully,

Judy Strait-Jones



**LATE**

February 23, 2025

**Testimony in SUPPORT for SB1245, SD1: Payment for Services Within a Pharmacist's Scope of Practice**

Dear Chair Keohokalole, Vice Chair Fukunaga, and Commerce and Consumer Protection Committee Members:

As a rural healthcare provider, access to comprehensive, high-quality healthcare services is our mission at Moloka'i Drugs. On behalf of our employees and patients, I am testifying in favor of SB1245, a bill to mandate reimbursement for our Moloka'i-based pharmacists who provide services within the current pharmacists' scope of practice.

We believe this measure will provide greater access to healthcare services, especially on the rural island of Molokai with 7,000 residents. Many of our people, especially our *kupuna*, have limited access to on-island healthcare, especially with only one airline and no ferry providing challenging transportation to O'ahu, Maui, and even the mainland for medical services and procedures.

Our staff pharmacists currently provide services that we do not garner extra payment from payers and/or insurance companies. Additional service we would be able to provide to more Moloka'i patients with financial leverage created by this bill would include delivering and counseling on durable medical equipment (electric beds, wheelchairs, commodes, canes, etc.); giving immunizations off-site; consulting homebound patients via phone calls; management of chronic disease states, including diabetes; helping patients put on and monitor their continuous glucose monitoring systems which are designed to help people with diabetes track blood glucose levels without "finger pricks."

**In late January 2025, two of our Honolulu-based medical providers (a podiatrist and an orthodontist) had their Mokulele Airlines' flights cancelled to Molokai.** Three weeks ago, we had no flights for five days. A month ago, I personally had to take an almost four-hour boat ride from Heeia Pier in Kaneohe to Molokai to get home. Because of these transportation challenges, more responsibility is put on our full-time medical providers—including pharmacists—on Molokai to take care of situations on-island since our off-island providers are not always able to fly in from Honolulu.

Our Moloka'i-based pharmacy providers live full-time on our island and know our people. Paying for their services will provide high-quality healthcare and healthier community members. Thank you for your consideration and for your vote for SB1245.

Sincerely,

/s/ Kimberly Mikami Svetin

Kimberly Mikami Svetin  
President  
Moloka'i Drugs, Inc.  
P.O. Box 558  
Kaunakakai, HI 96748  
Work 808-553-5790

February 24, 2025

[submitted electronically via: capitol.hawaii.gov]

The Honorable Jarrett Keohokalole  
Chair, Committee on Commerce and Consumer Protection  
Conference Room 229  
415 South Beretania Street  
Honolulu, HI 96813

Dear Chair Keohokalole, Vice Chair Fukunaga, and members of the Committee on Commerce and Consumer Protection:

The American Pharmacists Association (APhA) appreciates the opportunity to submit proponent testimony on [Senate Bill \(SB\) 1245](#) (Senator Buenaventura). SB 1245 will allow for the reimbursement of services provided by participating registered pharmacists practicing within their scope of practice by private and public health plans in the State beginning January 1, 2026. Realigning financial incentives in our health care system to allow for health plan reimbursement under the medical benefit of services provided by pharmacists ensures patients have more time with their most accessible health care professional, their pharmacist. It also correctly aligns the current role of the pharmacist with their extensive education and training to practice at the top of their license.

We also support the submitted testimony from the Hawai'i Pharmacists Association.

Substantial published literature documents the proven and significant improvement in patient outcomes<sup>1</sup> and reduced health care expenditures<sup>2</sup> when pharmacists are optimally leveraged as the medication experts on patient-care teams. The expansion of programs that increase patient access to health care services provided by their pharmacist in Hawai'i is aligned with the growing trend of similar programs in other states, such as California, Colorado, Idaho, Kentucky, Minnesota, Missouri, Nevada, New Mexico, North Carolina, Ohio, Oklahoma, Oregon, Tennessee, Texas, Virginia, Washington, West Virginia, Wisconsin, and others. In states where such programs have already been implemented, health plans recognize the value of

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<sup>1</sup> Giberson S, Yoder S, Lee MP. Improving Patient and Health System Outcomes through Advanced Pharmacy Practice. A Report to the U.S. Surgeon General. Office of the Chief Pharmacist. U.S. Public Health Service. Dec 2011. Available at: [https://www.accp.com/docs/positions/misc/improving\\_patient\\_and\\_health\\_system\\_outcomes.pdf](https://www.accp.com/docs/positions/misc/improving_patient_and_health_system_outcomes.pdf)

<sup>2</sup> Murphy EM, Rodis, JR, Mann HJ. Three ways to advocate for the economic value of the pharmacist in health care. Journal of the American Pharmacists Association. August 2020. Available at: <https://www.sciencedirect.com/science/article/abs/pii/S1544319120303927>

the pharmacist and invest in the services they provide to capitalize on the positive therapeutic and economic outcomes associated with pharmacist-provided care.<sup>3</sup>

Given the unique patient population and barriers to care due to the primary health care worker shortage<sup>4</sup> in Hawai'i, APhA firmly believes that considering a payment model that includes reimbursement for pharmacists' services is the missing piece to allow other professionals to utilize pharmacists under their training as the medication experts on patient care teams. As the most accessible health care professionals, with nearly 90% of the U.S. population living within five miles of a community pharmacy,<sup>5</sup> pharmacists are vital care providers, especially for those living in underserved and remote communities. Patient access to pharmacist-provided care can address health inequities while reducing hospital admissions, increasing medication adherence, and decreasing overall health care expenditures by recognizing and covering the valuable health care services pharmacists provide, similar to Hawai'i's recognition of many other health care providers.

As you may be aware, many of Hawai'i's neighborhood pharmacies,<sup>6,7</sup> especially those in rural communities,<sup>8</sup> are closing because the unsustainable reimbursement model in the drug supply chain is enhancing health care disparities. Without immediate changes, the current payment model is putting many independent pharmacies out of business and creating "pharmacy deserts" in minority and underserved communities, where the neighborhood pharmacy may be the only health care provider for miles.<sup>9</sup>

Creating programs that allow for the direct reimbursement of services provided by pharmacists through Med-Quest, Medicaid Managed Care Organizations, and private health plans opens additional revenue opportunities for these pharmacists to maintain their practice and provide valuable health care services necessary for many Hawai'i communities. It is also important to note that these programs are not expected to raise costs for health plans, as published literature has shown that pharmacist-provided care results in cost savings and healthier patients.<sup>10,11</sup> This strong return on investment supports why many other states have established comparable programs. For example, Oregon identified in its fiscal legislative analysis that creating a similar program that would permit pharmacists to engage in clinical pharmacy practice and

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<sup>3</sup> CareSource Launches Pharmacist Provider Status Pilot. Published August 4, 2020. Available at

<https://www.caresource.com/newsroom/press-releases/caresource-launches-pharmacist-provider-status-pilot/>

<sup>4</sup> Counties with the biggest primary health care worker shortages. NursingEducation. Published August 25, 2021. Available at

<https://nursingeducation.org/counties-with-the-biggest-primary-health-care-worker-shortages/>.

<sup>5</sup> Berenbrok LA, Tang S, Gabriel N, Guo J, Sharareh N, Patel N, Dickson S, Hernandez I, Access to Community Pharmacies: A Nation-Wide Geographic Information Systems Cross-sectional Analysis, Journal of the American Pharmacists Association (2022), doi: <https://doi.org/10.1016/j.japh.2022.07.003>.

<sup>6</sup> <https://www.khon2.com/local-news/longs-drugs-to-close-ewa-beach-location-ensures-continuity-of-pharmacy-services/>

<sup>7</sup> <https://www.hawaiinewsnow.com/2024/12/20/don-quijote-close-waipahu-store-after-18-years/>

<sup>8</sup> Hawryluk M. Large parts of rural America are becoming drugstore deserts. These small towns found an escape. *The Washington Post*. Published December 15, 2021. Available at <https://www.washingtonpost.com/business/2021/12/03/drugstore-desserts-rural-america/>

<sup>9</sup> Guadamuz, Jenny. Et. al. Fewer Pharmacies In Black And Hispanic/Latino Neighborhoods Compared With White Or Diverse Neighborhoods, 2007–15. Health Affairs. May 2021, available at: <https://www.healthaffairs.org/doi/abs/10.1377/hlthaff.2020.01699>

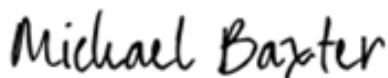
<sup>10</sup> Giberson S, Yoder S, Lee MP. Improving Patient and Health System Outcomes through Advanced Pharmacy Practice. A Report to the U.S. Surgeon General. Office of the Chief Pharmacist. U.S. Public Health Service. Dec 2011. Available at: [https://www.accp.com/docs/positions/misc/improving\\_patient\\_and\\_health\\_system\\_outcomes.pdf](https://www.accp.com/docs/positions/misc/improving_patient_and_health_system_outcomes.pdf)

<sup>11</sup> Murphy EM, Rodis, JR, Mann HJ. Three ways to advocate for the economic value of the pharmacist in health care. Journal of the American Pharmacists Association. August 2020. Available at: <https://www.sciencedirect.com/science/article/abs/pii/S1544319120303927>

provide patient care services to patients would have a “minimal expenditure impact on state or local government.”<sup>12</sup>

For these reasons, APhA strongly supports SB 1245 and respectfully requests your “AYE” vote. If you have any questions or require additional information, please do not hesitate to contact E. Michael Murphy, PharmD, MBA, APhA Senior Advisor for State Government Affairs, by email at [mmurphy@aphanet.org](mailto:mmurphy@aphanet.org).

Sincerely,

A handwritten signature in black ink that reads "Michael Baxter". The script is cursive and fluid.

Michael Baxter  
Vice President, Government Affairs  
American Pharmacists Association

cc: Senator Carol Fukunaga, Vice Chair  
Senator Angus L.K. McKelvey  
Senator Herbert M. "Tim" Richards, III  
Senator Brenton Awa

**About APhA:** APhA is the largest association of pharmacists in the United States advancing the entire pharmacy profession. APhA represents pharmacists in all practice settings, including community pharmacies, hospitals, long-term care facilities, specialty pharmacies, community health centers, physician offices, ambulatory clinics, managed care organizations, hospice settings, and government facilities. Our members strive to improve medication use, advance patient care and enhance public health. **In Hawai'i, with 900 licensed pharmacists and 1,470 pharmacy technicians, APhA represents the pharmacists and student pharmacists that practice in numerous settings and provide care to many of your constituents.** As the voice of pharmacy, APhA leads the profession and equips members for their role as the medication expert in team-based, patient-centered care. APhA inspires, innovates, and creates opportunities for members and pharmacists worldwide to optimize medication use and health for all.

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<sup>12</sup> FISCAL IMPACT OF PROPOSED LEGISLATION Measure: HB 2028 A. Seventy-Eighth Oregon Legislative Assembly – 2015 Regular Session. Available at <https://olis.oregonlegislature.gov/liz/2015R1/Downloads/MeasureAnalysisDocument/28866>.



Tuesday, February 25, 2025 at 9:32 AM  
Via Video Conference; Conference Room 229

**Senate Committee on Commerce and Consumer Protection**

To: Senator Jarrett Keohokalole, Chair  
Senator Carol Fukunaga, Vice Chair

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

Re: **SB 1245, SD1 – Testimony In Support  
Relating to Pharmacists**

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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.

HPH writes in SUPPORT of SB 1245, SD1 which mandates reimbursement for services provided by participating pharmacists practicing within their scope of practice by private and public health plans in the State. The mandate would become effective as of January 1, 2026.

Hawai'i continues to face a shortage of healthcare providers, particularly in rural areas and the neighbor islands. Each county within the State contains a region that is a medically underserved area. While stakeholders across the healthcare community are working together to attract and retain qualified providers in the state, there are other steps which can be taken to fully utilize existing resources. One such resource is the pharmacists already practicing in our local healthcare communities.

Pharmacists can help bridge the gaps created by the physician shortage. A pharmacist's skill set includes educating patients on how and when to check blood sugar, ways to avoid and manage hypoglycemia, how to take their medications correctly to avoid adverse effects, and various medication utilization techniques. Additionally, patients are three times more likely to stay out of the hospital when pharmacists provide clinical services after a hospital discharge.

Through the COVID-19 pandemic pharmacists have demonstrated how invaluable their services are. Pharmacists practicing at local pharmacies in every community are more accessible and provide a wide range of health care services. The practice of pharmacy

has evolved to encompass a greater focus on the provision of services. As such, pharmacists should be reimbursed for the patient care they provide.

Thank you for the opportunity to testify.

February 25, 2025

**LATE**

The Honorable Jarrett Keohokalole, Chair  
The Honorable Carol Fukunaga, Vice Chair  
Senate Committee on Commerce and Consumer Protection

Re: SB1245SD1 – RELATING TO PHARMACISTS

Dear Chair Keohokalole, Vice Chair Fukunaga, and Members of the Committee:

Hawaii Medical Service Association (HMSA) appreciates the opportunity to provide comments on SB1245 SD1, which mandates reimbursement for services provided by participating registered pharmacists practicing within their scope of practice by private and public health plans in the State.

HMSA values Hawaii's pharmacists and their critical role they play in caring for patients and members. We want to ensure that we support pharmacists to maximize their skillset and practice to the top of their license, however, we believe this bill could unintentionally create confusion, overlap, and prevent the ideal team-based care model (pharmacists working with physicians as part of a holistic care team), which could have unintended consequences. The current bill language also lacks any mechanism to strategically define how a pharmacist will work within a managed care team or to select what services pharmacists should be reimbursed for further adding to the potential confusion noted previously.

We note that we participated in and provided data for the State Auditor's sunrise analysis of proposed mandatory health insurance coverage for pharmacist service in 2023, Report No. 23-12. As some of the flexibility and waivers from the PHE are set to expire, as this bill impacts Hawaii's telehealth statute, we are still analyzing the potential broader impacts to telehealth laws in Hawaii.

Thank you for the opportunity to provide comments on SB1245 SD1.

Sincerely,



Dawn Kurisu  
Assistant Vice President  
Community and Government Relations

**LATE**

February 25, 2025

**To: Chair Keohokalole, Vice Chair Fukunaga and Members of the Senate Committee on Commerce and Consumer Protection (CPN)**

From: Hawaii Association of Health Plans Public Policy Committee

Date/Location: February 25, 2025; 9:32 a.m./Conference Room 229 & Videoconference

**Re: Testimony with COMMENTS on SB 1245 SD1 – Relating to Pharmacist Reimbursements**

The Hawaii Association of Health Plans (HAHP) appreciates the opportunity to offer comments on SB 1245 SD1. HAHP is a statewide partnership that unifies Hawaii's health plans to improve the health of Hawaii's communities together. A majority of Hawaii residents receive their health coverage through a plan associated with one of our organizations.

HAHP thanks the legislature for its efforts to increase access to health care services in Hawaii. While we support reimbursement of in-network pharmacists practicing within their scope, this bill as written lacks clarity on the specific scope of services that pharmacists would be reimbursed for.

Thank you for the opportunity to testify on SB 1245 SD1.

Sincerely,

HAHP Public Policy Committee

cc: HAHP Board Members



**LATE**

Testimony presented before the  
Senate Committee on Consumer Protection  
February 25, 2025

Dr. Corrie L. Sanders on behalf of  
The Hawai'i Pharmacists Association (HPhA)

Honorable Chair Keohokalole, Vice Chair Fukunaga, and Members of the Committee,

The Hawai'i Pharmacists Association (HPhA) is in **strong support with amendments** of SB1245 that mandates reimbursement for services provided by registered pharmacists practicing within their scope of practice under the medical benefit by both private and public health plans. The current lack of a payment pathway for our profession significantly hinders pharmacists from providing services outside of medication dispensing and vaccination, despite having years more training in pharmacotherapy and medication management than any other healthcare profession.

The University of Hawai'i Daniel K. Inouye School of Pharmacy was established to train and retain local talent, yet we have not created a model that reimburses for many services instilled in pharmacists during four years of doctoral-level training. By aligning financial incentives and reimbursing pharmacists for their services under the medical benefit, similar to any other healthcare provider, there will be greater access to the vital services pharmacists are trained to provide. Without such a pathway, other healthcare professionals will continue to serve in place of pharmacists as medication experts despite significant gaps in education and training.

Physicians in Hawai'i do not have the financial resources to cover their own practices, let alone consider expansion. The capitated reimbursement model is intended for 'many hands to make light work,' and yet, there remains only a single revenue stream. In order for 'many hands to make light work' there need to be additional revenue streams to reflect the value of the hands that are serving our patients with the highest quality care possible. The economic and administrative challenges that have been reported repeatedly by physicians year after year indicate that the financial structure of a single revenue source system restricts, rather than supports, access to care. We are detracting from what seems to be an innovative care model by financially handcuffing pharmacists while allowing only selective providers a means to leverage their expertise.

SB1245 was previously introduced in 2023 as SB693 and triggered a financial audit through SCR17 that concluded pharmacist-provided services would not add additional costs to the state. We remain strong in advocating for a payer-agnostic assessment that shows no favoritism towards one billing model over another. This uniformity across payment plans is instrumental so pharmacists in community settings can provide critical care to a diverse population of patients spanning all areas of need. There is no other provider in the state whose ability to bill is limited in this way. And as the most accessible healthcare professionals in the state, pharmacists should not be the exception.

We suggest the following amendments aligning with implementation pathways highlighted by other stakeholders in the state:

- Referral to the Hawai'i Pharmacy Practice Act to provide clarity on services within a pharmacist's scope of practice as already outlined in statute:  
"§431:10A- Services provided by participating registered pharmacists; coverage. (a) Each individual or group policy of accident and health or sickness insurance delivered or issued for delivery in this State after December 31, 2025, shall include coverage for care provided by a participating registered pharmacist practicing within the scope of their license pursuant to HRS §461-1 for purposes of health maintenance or treatment to the extent that the policy provides benefits for identical services rendered by another health care provider."
- Addition of the following article for clarity on billable clinical services in Section 3:  
"§432:1- (c) For reimbursement purposes, the term "patient care services" shall refer solely to these clinical interventions and explicitly excludes any activities associated with the routine dispensing of medications."
- Adding a new section to article 10A in §431:10A with consistency in §432:1:  

"§431:10A- Services provided by participating registered pharmacists; coverage. (a) Each individual or group policy of accident and health or sickness insurance delivered or issued for delivery in this State after December 31, 2025, shall:

  - (1) recognize pharmacists licensed pursuant to chapter 461 as participating providers; ~~and~~
  - (2) shall ~~include provide~~ coverage for a ~~care service~~ provided by a participating registered pharmacist practicing within the scope of their license for purposes of health maintenance or treatment to the extent that the policy ~~provides benefits coverage~~ for ~~identical~~ the same services rendered by another health care provider;
  - (3) shall pay or reimburse a pharmacist or pharmacy for the cost of a service performed by a pharmacist within the scope of their license.



"§432:1- Services provided by participating registered pharmacists; coverage. (a) Each individual and group hospital or medical service plan contract delivered or issued for delivery in this State after December 31, 2025, by a mutual benefit society shall:

(1) recognize pharmacists licensed pursuant to chapter 461 as participating providers; ~~and~~

(2) shall ~~include~~ ~~provide~~ coverage for a ~~care service~~ provided by a participating registered pharmacist practicing within the scope of their license for purposes of health maintenance or treatment to the extent that the policy ~~provides benefits coverage~~ for ~~identical the same services~~ rendered by another health care provider;

(3) shall pay or reimburse a pharmacist or pharmacy for the cost of a service performed by a pharmacist within the scope of their license.

The pharmacy profession has drastically evolved over the past twenty years, and it's time for Hawai'i statute to reflect this evolution in knowledge and skill. Payment for pharmacist clinical services under the medical benefit is the missing piece for pharmacists to contribute to a true team-based care model. Not only is SB1245 needed for pharmacists to be financially leveraged to utilize our training as medication experts, SB1245 is critical to ensure that our patients and ohana receive the level of care they deserve.

On behalf of The Hawai'i Pharmacists Association, mahalo for this opportunity to testify.

Very Respectfully,

A handwritten signature in black ink that reads "Corrie Sanders". The signature is written in a cursive, flowing style.

Corrie L. Sanders, PharmD., BCACP, CPGx  
President, Hawai'i Pharmacists Association

Feb 25, 2025 9:32 a.m.  
Hawaii State Capitol  
Conference Room 229 and Videoconference

**To: Senate Committee on Commerce and Consumer Protection**  
**Sen. Jarrett Keohokalole, Chair**  
**Sen. Carol Fukunaga, Vice-Chair**

**From: Grassroot Institute of Hawaii**  
**Ted Kefalas, Director of Strategic Campaigns**

**LATE**

**LATE**

COMMENTS IN SUPPORT OF SB1245 SD1 — RELATING TO PHARMACISTS

Aloha Chair Keohokalole, Vice Chair Fukunaga and other members of the Committee,

The Grassroot Institute of Hawaii would like to offer its **support** for [SB1245 SD1](#), which would mandate reimbursement by both public and private health plans for services provided by pharmacists acting within their scope of practice.

Enactment of this bill would be another step toward providing more healthcare options and access for Hawaii residents. Moreover, it would give lawmakers more flexibility to explore expanding pharmacist scope of practice in the future without creating confusion about reimbursement issues.

[Research](#) indicates that state scope-of-practice restrictions — such as restrictions on the ability of pharmacists to independently prescribe and adapt certain medications — can impede the delivery of optimal care.

In some cases, increasing the scope of practice for pharmacists would provide alternatives for patients seeking help with simple issues, such as quitting the use of tobacco, which in turn would reduce the burden on local doctors and lower the cost of care.

This could be especially beneficial in rural areas, where Hawaii's doctor shortage contributes to limited options and longer waits for care.



Providing a mechanism to encourage broader use of pharmacists would be a good way to help reduce healthcare costs in our state while improving overall care.

Thank you for the opportunity to testify.

Ted Kefalas  
Director of Strategic Campaigns  
Grassroot Institute of Hawaii

**LATE**

**SB-1245-SD-1**

Submitted on: 2/23/2025 10:50:38 AM

Testimony for CPN on 2/25/2025 9:32:00 AM

| Submitted By   | Organization | Testifier Position | Testify                |
|----------------|--------------|--------------------|------------------------|
| Kelli Kunihiro | Individual   | Support            | Written Testimony Only |

Comments:

Testimony to support SB1245 SD1: Payment for Services Within a Pharmacist's Scope of Practice Committee on Health and Human Services (HHS)

To the Honorable Chair San Buenaventura, Vice Chair Acquino, and Members of the Committee,

My name is Kelli Kunihiro, Pharmacist on the island of Oahu and I appreciate the opportunity to submit testimony in support of Senate Bill SB1245 SD1, A Bill to Mandate Reimbursement for Pharmacists' Services.

As a community pharmacy, we are easily accessible to the public for a wide range of healthcare services. The members of the community often come to us for advice and recommendations on medication, immunizations, healthcare devices, etc. We are often the first encounter a patient has for acute illnesses or symptoms, before seeing a physician or urgent care facility.

SB 1245 would allow licensed pharmacists to receive reimbursement under the medical benefit of private and public health plans, ensuring that we can continue to provide critical healthcare services. Currently, my team and I offer essential services such as medication reconciliation, immunization screening and education, blood pressure and diabetes screenings, and point-of-care testing—often without direct reimbursement. If SB 1245 is enacted, we would be able to expand our patient care offerings to include medication therapy management, chronic disease management, oral contraception prescribing and dispensing, naloxone prescribing, smoking cessation programs, behavioral counseling, and point-of-care testing and treatment. Without a reimbursement mechanism, pharmacists cannot practice to the full extent of their training, limiting patient access to high-quality care. Providing a payment pathway for pharmacist services will help alleviate provider shortages and improve healthcare access, particularly for Hawai'i's rural and ethnic minority populations. For these reasons, I respectfully urge the Committee to pass SB 1245. Thank you for your time and consideration.

Sincerely,

Kelli Kunihiro, Rph

Pharmacy Manager

Times Pharmacy Waipahu



50 EAST PUAINAKO STREET  
HILO, HAWAII 96720

PHONE: 808-959-4575

**LATE**

TESTIMONY TO SUPPORT SB1245: Payment for Services Within a Pharmacist's Scope of Practice  
Committee on Commerce and Consumer Protection (CPN)  
January 25, 2025

To the Honorable Chair Keohokalole, Vice Chair Fukunaga, and Members of the Committee,

My name is Megan Arbles, Pharm D., Director of Pharmacy Operations for an independent pharmacy on the Big Island and I appreciate the opportunity to submit testimony in support of Senate Bill No. 1245, A Bill to Mandate Reimbursement for Pharmacists' Services.

Hawai'i continues to face a shortage of healthcare providers, particularly in rural areas. Each county within the State contains a region that is a medically underserved area. While stakeholders across the healthcare community are working together to attract and retain qualified providers in the state, there are other steps which can be taken to fully utilize existing resources. One such resource is the pharmacists already practicing in our local healthcare communities.

SB 1245 would provide coverage for licensed pharmacists' services under the medical benefit of private and public health plans enabling pharmacists to continue providing healthcare services in Hawai'i. I believe that ensuring providers already practicing within our communities are properly leveraged to utilize the fullest scope of their statutorily granted authority will only serve to increase quality of and access to medical services throughout the State.

My team and I currently practice in the community, retail setting. Some examples of services that we currently provide without direct reimbursement are medication reconciliation, immunization screening and education, blood pressure screening and education, diabetes screening, and point-of-care testing. Additional services we would be able to provide with financial leverage created by this bill would be medication therapy management, chronic disease state management, oral contraception prescribing and dispensing, naloxone prescribing and dispensing, smoking cessation, behavioral counseling and interventions, and point-of-care testing and treatment.

Pharmacists are the most accessible healthcare providers, yet we are not able to provide care to our fullest potential due to the lack of reimbursement. Providing a payment pathway for pharmacists would improve the quality of and access to care. It is widely known that Hawaii's healthcare system is in need of more providers to provide healthcare services to ethnic minority and rural populations, which make up a vast majority of the State's demographic. SB 1245 would create a long overdue payment pathway under the medical benefit of private and public health plans for services provided by pharmacists within their scope of practice.

I respectfully and strongly urge the Committee to see fit to pass SB1245. Thank you for the opportunity to testify.

Sincerely,

Megan Arbles  
Director of Pharmacy Operations  
50 E. Puainako Street  
Hilo, HI 96720

**LATE**

Testimony to support SB1245: Payment for Services Within a Pharmacist's Scope of Practice  
Committee on Health and Human Services (HHS)  
February 25, 2025

**Testimony in SUPPORT of SB1245**

To the Honorable Chair Keohokalole, Vice Chair Fukunaga, and Members of the Committee,

My name is Camlyn Masuda and I am an Associate Specialist and Clinical Pharmacist with the University of Hawai'i at Hilo Daniel K Inouye College of Pharmacy. I appreciate the opportunity to submit testimony in support of SB1245, a bill to mandate reimbursement for pharmacist provided services that already exist within a pharmacist's scope of practice. I am testifying on behalf of myself and not for the University of Hawai'i at Hilo Daniel K Inouye College of Pharmacy.

I currently practice in a family medicine physician office setting. Some examples of services that I currently provide without direct reimbursement include medication reviews and counseling about how to decrease the risk of side effects from medications and teaching people on how to use medications that come in devices (insulin, Ozempic). Additional services we would be able to provide with financial leverage created by this bill would be consultation and management of chronic disease states and thorough medication reviews and finding lower costs for medications for patients. While our patients appreciate the extra services that we provide, which are within our scope of practice, in order to sustainably offer and expand access to these services, we need to be paid for them.

A story that I have about being embedded as a trusted member of the community and the services I would/can provide is a patient who had uncontrolled diabetes. The physician's I work with referred the patient to me to discuss medication options. Although the patient was not willing to start insulin at the first visit we discussed other options which he was willing to try and understood that they would not work as well as insulin. After a few months his sugar levels lowered but not to a healthy level, the patient finally was willing to start insulin and was able to lower his sugar level to a healthy level. If pharmacists are able to get reimbursed for providing this type of visit/care we would be able to help more patients in the State especially in areas where physicians are lacking or in most areas do not have enough time to spend with patients with chronic conditions providing detailed explanations about the benefits and possible side effects of different treatment options.

SB1245 would provide financial compensation for licensed pharmacists under the medical benefit of both private and public health plans, enabling pharmacists to continue providing healthcare services in Hawai'i across all patients and health plans. I believe that ensuring providers already practicing within our communities are properly leveraged to utilize the fullest scope of their statutorily granted authority will only serve to increase both quality of and access to medical services throughout the State.

I respectfully and strongly urge the Committee to pass SB1245 and thank you for the opportunity to testify and advance the pharmacy profession to help improve the health of the people of Hawai'i.

Sincerely,



Camlyn Masuda, PharmD, CDCES, BCACP

Associate Specialist, Dept. of Pharmacy Practice, Daniel K. Inouye College of Pharmacy, University of Hawai'i at Hilo

Assistant Clinical Professor Department of Family Medicine University of Hawai'i at Mānoa, John A. Burns School of Medicine

677 Ala Moana Blvd. Ste 1025A

Honolulu, HI 96813

Email: [camlynm@hawaii.edu](mailto:camlynm@hawaii.edu)

**LATE**

To the Honorable Chair Keohokalole, Vice Chair Fukunaga, and Members of the Committee,

My name is Dillon Solliday and I am a final-year student in the Doctor of Pharmacy program at the University of Hawai'i at Hilo. I appreciate the opportunity to submit testimony in strong support of SB1245, which would mandate reimbursement for pharmacist-provided services that already exist within a pharmacist's scope of practice.

Pharmacists are highly trained healthcare professionals who provide essential services, including medication therapy management, chronic disease management, immunizations, smoking cessation counseling, and point-of-care testing. These services have been proven to improve medication adherence, reduce hospitalizations, and lower overall healthcare costs. However, despite being authorized to provide these services under our scope of practice, pharmacists often face barriers to reimbursement, limiting patient access to these valuable interventions.

With the current shortage of healthcare workers in the state, it is of utmost importance to keep these services available to patients in Hawai'i from any healthcare professionals who are trained and qualified. As a student pharmacist preparing to enter the workforce, I am concerned that the lack of proper reimbursement will continue to underutilize my profession's potential to enhance healthcare in Hawai'i. In rural and underserved communities, pharmacists are often the most accessible healthcare providers, yet without fair compensation for our services, our ability to meet patient needs is constrained. Furthermore, if we do not address reimbursement for pharmacy services, we risk exacerbating issues of healthcare access as pharmacy graduates leave Hawai'i to find employment in other states where it is financially sustainable to continue providing these vital services.

SB1245 would provide financial compensation for licensed pharmacists under the medical benefit of both private and public health plans, enabling pharmacists to continue providing healthcare services in Hawai'i across all patients and health plans. I believe that ensuring providers already practicing within our communities are properly leveraged to utilize the fullest scope of their statutorily granted authority will only serve to increase both quality of and access to medical services throughout the State.

I respectfully and strongly urge the Committee to support SB1245 and thank you for the opportunity to testify on a bill that increases healthcare access to the peoples of Hawai'i.

Sincerely,

Dillon Solliday, MBA  
Doctor of Pharmacy Candidate  
University of Hawai'i at Hilo, Daniel K. Inouye College of Pharmacy

**SB-1245-SD-1**

Submitted on: 2/24/2025 10:24:39 AM

Testimony for CPN on 2/25/2025 9:32:00 AM

**LATE**

**LATE**

| Submitted By | Organization | Testifier Position | Testify                |
|--------------|--------------|--------------------|------------------------|
| Alysa Lavoie | Individual   | Support            | Written Testimony Only |

Comments:

**Chair Keohokalole, Vice Chair Fukunaga, and Members of the Committee,**

I am submitting testimony in strong support of **SB1245**, which recognizes the critical role of clinical pharmacists in improving patient outcomes and reducing overall healthcare costs.

At health centers, pharmacists have demonstrated **proven success in managing chronic conditions** such as **Hepatitis C, anticoagulation, and medication adherence**. Their expertise has led to **improved health outcomes and increased medication safety for patients**, particularly those with complex medical needs.

Research consistently shows the value of clinical pharmacy services. For every **\$1 invested**, there is an **average return of \$4 in healthcare cost savings**—a testament to their ability to **enhance patient care while reducing unnecessary medical expenses**.

By recognizing and reimbursing pharmacists for their essential contributions, **Hawai‘i can expand access to high-quality, cost-effective healthcare**, particularly for those with chronic diseases who benefit most from comprehensive medication management.

I urge the committee to pass **SB1245** to support a more efficient and effective healthcare system for our state.

Kind Regards,

Alysa Lavoie, MSW



**LATE****LATE****SB-1245-SD-1**

Submitted on: 2/24/2025 2:15:40 PM

Testimony for CPN on 2/25/2025 9:32:00 AM

| Submitted By | Organization | Testifier Position | Testify                |
|--------------|--------------|--------------------|------------------------|
| Hiromi Saito | Individual   | Support            | Written Testimony Only |

## Comments:

Testimony to support SB1245: Payment for Services Within a Pharmacist's Scope of Practice

Committee on Commerce and Consumer Protection (CPN)

February 25, 2025

Testimony in SUPPORT of SB1245

To the Honorable Chair Keohokalole, Vice Chair Fukunaga, and Members of the Committee,

My name is Hiromi Saito, I am a clinical pharmacist in Waikiki Health, and I appreciate the opportunity to submit testimony in strong support of SB1245, a bill to mandate reimbursement for pharmacist provided services that already exist within a pharmacist's scope of practice.

My team and I currently practice in the Federally Qualified Health Center setting. Some examples of services that I currently provide without direct reimbursement include Diabetes Care Management, Medication Therapy Management, Hepatitis Treatment and Management, and assists medication access to the people who need the expensive medications and treatments. Additional services we would be able to provide with financial leverage created by this bill would be [hormonal contraception prescribing, consultation and management of chronic disease states, partnerships with providers, Insulin pump therapy, Fibroscan for people with liver diseases, education for continuous glucose monitoring, and screening of acute and chronic conditions, such as HIV, diabetes, Hepatitis, acute respiratory infections, such as flu, COVID, strep throat, etc.]

A story that I have about being embedded as a trusted member of the community and the services I would/can provided is I have been working with people with liver diseases, diabetes, high blood pressure, high cholesterol, and people who were discharged from the hospitals with heart attack or stroke, however, those people cannot obtain medications due to high cost. Pharmacists are there to help manage, help providing access to the medications, and office visit with the providers without sending to the ER or hospitals if patients can be managed in outpatient settings, as well as screening to prevent liver cancer by providing imaging test called Fibroscan, and educating the disease management and prevention and promoting healthy lifestyle modifications.

There are additional services that I can provide in our practice settings, however, a lack of reimbursement for pharmacist services prevents the opportunities to do so. While our patients appreciate the extra services that we provide, which are within our scope of practice, in order to sustainably offer and expand access to these services, we need to be paid for them.

SB1245 would provide financial compensation for licensed pharmacists under the medical benefit of both private and public health plans, enabling pharmacists to continue providing healthcare services in Hawai'i across all patients and health plans. I believe that ensuring providers already practicing within our communities are properly leveraged to utilize the fullest scope of their statutorily granted authority will only serve to increase both quality of and access to medical services throughout the State.

I respectfully and strongly urge the Committee to pass SB1245 and thank you for the opportunity to testify and advance the pharmacy profession.

Sincerely Yours,

Hiromi Saito, RPh, BCACP, CDCES, AAHIVP

**LATE**

**LATE**

February 23, 2025

To the Honorable Chair Keohokalole, Vice Chair Fukunaga, and Members of the Committee,

In SUPPORT of SB1245 - My name is Jodi Nishida, PharmD, MHP and I'm the owner/operator of The Keto Prescription Clinic in Kailua, HI. Two years ago, I went through a very unfortunate event that I'd like to share with you. I have a very effective and valuable practice to the people of Hawaii. I teach patients how to do low carb CORRECTLY and am an *accredited* Metabolic Health Practitioner with the Society of Metabolic Health Practitioners ([www.smhp.org](http://www.smhp.org)). Because of the way Hawaii state law is written, I have to operate within the parameters of what's called a collaborative practice agreement with an MD. It's the only way I can legally bill insurance for my services. I see a patient, the MD signs off on my chart note, we send it to the insurance companies for reimbursement, my reimbursement gets deposited into the MD's bank account, he/she then cuts me a check for the amount.

Jodi sees patient → Supervising MD signs off on chart note → Note is submitted to insurance for reimbursement → Jodi's reimbursement is deposited into MD's bank account → MD cuts Jodi a check

The physician who I was with prior, a gastroenterologist, decided not to cut me a check one day. We had agreed to monthly payouts and from November 2020 – June 2021, Dr. Russell Yang withheld my income. At first he claimed it was due to spreadsheet reconciliation issues with the billers. Later, it turned into him avoiding me in the office completely. I hired an attorney and went to the police. I was told that because the dollar amount was just shy of \$100,000, I was unable to file criminal theft charges. My attorney advised against pressing charges after we sent several letters to him only to get a reply from the top law firm in the continental US. It was clear that he had no intention of giving me the money earned for my services. In 2021, I almost lost my house. Additionally, patients continued to receive copay bills from him for services rendered by me, not him. It was devastating on multiple fronts.

The reason I'm sharing this with you is not to rehash the pain of the past, but to show you what can happen when we are at the mercy financially of a crooked MD. I never would've guessed that this particular doctor would end up doing this to me. We had a great professional relationship and were doing great things for patients. Losing the ability to perform colonoscopies during COVID affected his income significantly, which is why I believe he stole from me in late 2020, early 2021.

It's vital that this Bill is passed. Pharmacists possess valuable skill sets that improve patient care especially for conditions like diabetes, asthma, cardiovascular disease, avoiding and managing drug interactions and side effects. We are truly the medication experts in healthcare. I am humbly including data from my clinic and testimonials from some of my patients including one in Hilo. We see patients on all islands.

Thank you for your time and attention,

Jodi Nishida, PharmD, MHP

[www.theketoprescription.com](http://www.theketoprescription.com)

# The Keto Prescription Clinic

We are a pharmacist owned and operated practice specializing in low carbohydrate education and de-prescribing medications. Jodi Nishida, PharmD, MHP works in collaboration with Maria Markarian, DO who is an interventional cardiologist. Together they focus on improving and reversing metabolic syndrome, preempting heart attacks and strokes, and improving all disease states related to metabolic health. Here is our data from June-December 2022.

## Disease States Impacted Positively

| GENERAL  | METABOLIC SYNDROME   |
|--|--|
| Autoimmune Conditions: Rheumatoid Arthritis, Psoriatic Arthritis, Lupus, Fibromyalgia, Sjogren's Syndrome  | Hypertension   |
| Neurological Conditions: Migraine Headaches, Alzheimer's Disease, Previous Stroke, TIA, Multiple Sclerosis, Restless Legs Syndrome   | Type 2 Diabetes and Gestational Diabetes: Including chronic kidney disease and nephropathy, neuropathy, retinopathy, frequent symptomatic hypoglycemia |
| GI Conditions: Acid Reflux, Bloating, Gas, Heartburn, Gastritis, IBS, Crohn's Disease, Chronic Constipation, Dumping Syndrome, Chronic Diarrhea, Diverticulitis, Fatty Liver | High Cholesterol   |
| Psychiatric Conditions: ADHD, Anxiety, Depression, Bipolar Disorder  | Cardiovascular Disease: Including history of heart attack, stent placement, stroke, TIA, calcification of arteries                                     |
| Hormonal Imbalances: Thyroid, Low Testosterone, PCOS, Infertility, Perimenopause, Severe PMS   | Obesity  |

## Hemoglobin A1c Reductions in Diabetes

| WE FOLLOWED 160 DIABETES PATIENTS  |
|--|
| 23 patients saw a reversal of their diabetes measured by an A1c <5.7% & fasting insulin level <10. |
| 50 patients saw an improvement in their A1c and are still being followed in our program.           |
| 87 patients are pending and due for an A1c with their primary care physician in early 2023.        |

## Medications Decreased or Discontinued

| Generic Name of Medication + Annual Cost Savings |                                     | Disease States  |
|--|-------------------------------------|---|
| Semaglutide Injection (Ozempic) - \$12636        | Glipizide ER - \$182                | <b>Diabetes</b><br><b>Obesity</b>   |
| Empagliflozin/Metformin - \$8100                 | Empagliflozin - \$8136              |   |
| Insulin Degludec Injection - \$3592              | Metformin 500mg - \$240             |   |
| Insulin Lispro Injection - \$4212                | Insulin Glargine Injection - \$2797 |   |
| Liraglutide Injection - \$15384                  | Semaglutide Tablets - \$13248       |   |
| Insulin Isophane Injection - \$1144              | Semaglutide (Wegovy) - \$19524      |   |
| Amlodipine - \$506                               | Valsartan - \$847                   | <b>Hypertension</b><br><b>Heart Failure</b><br><b>Arrhythmias</b>   |
| Irbesartan/HCTZ - \$528                          | Hydrochlorothiazide - \$107         |   |
| Lisinopril/HCTZ - \$208                          | Lisinopril - \$95                   |   |
| Carvedilol - \$258                               | Losartan - \$618                    |   |
| Nifedipine - \$344                               | Irbesartan - \$1878                 |   |
| Atorvastatin - \$1524                            | Rosuvastatin - \$4080               | <b>High Cholesterol</b><br><b>Hypertriglyceridemia</b>  |
| Icosapent Ethyl - \$2616                         |                                     |   |
| Methotrexate - \$607                             | Trifluoperazine - \$385             | <b>Rheumatoid Arthritis</b><br><b>Breast Cancer</b><br><b>Depression/Anxiety</b><br><b>Acid Reflux</b><br><b>Asthma</b><br><b>Low Testosterone</b><br><b>Endometrial Cancer</b> |
| Megestrol - \$232                                | Tamoxifen - \$917                   |   |
| Bupropion - \$1416                               | Omeprazole - \$768                  |   |
| Esomeprazole - \$304                             | Sertraline - \$229                  |   |
| Albuterol HFA - \$1080                           | Testosterone Cypionate - \$360      |   |
| Hydroxychloroquine - \$583                       | Pantoprazole - \$1044               |   |

### Summary

- ◆ In our clinic, the pharmacist spends 30-45min with each patient during appointments. She is responsible for all nutritional counseling, medication evaluation, diabetes monitoring, and follow up on lab results. Over 90% of our patients experience significant weight loss, lose significant inches off their body, and see improvement in all metrics including lab results. Our data shows improvement in disease states and health as opposed to the traditional model of adding medications at each appointment.
- ◆ From June - December 2022, our estimated cost savings to the healthcare system was \$132,774.28. This represents prescription medication costs only and does not include costs saved on diabetic testing supplies, routine labs, office visits, or urgent care/ED/hospitalizations for side effects or uncontrolled disease state sequelae.

January 27, 2023

To Whom It May Concern:

My Name is Ivania "Kanoelani" Paulino, I am a patient of Dr. Jodi Nishida, I will be one (1) year with her come April this 2023. I receive absolute dedication and honesty with her and I truly believe that she is a priceless asset to me, she has and still is teaching me to take care of myself in the most healthiest way possible. I appreciate her honesty and never buttering things up.

Dr. Nishida is currently helping and educating me with how to live life to its fullest with healthy eating, exercise, self-care, and being accountable for all I do. We are working on getting off my diabetes, cholesterol, and high blood pressure medication. Since I've been in her care through the Keto Prescription I am so happy to have gotten my A1c down to a 6.5 vs I believe almost a 10.

The quality of services she provides with one on one telehealth calls, I'm not just an appointment time, she genuinely makes the time and cares about my health and well-being, Dr. Jodi, Dr. Markarian and their staff are there when I have questions and answering or guiding me in a timely manner, providing great information with foods, medication, her videos on FB are really great information. She goes above and beyond sometimes she provides more information than my other doctors (this is not to say they aren't doing their job) it's just the amount of information she provides and the facts to back everything up is just amazing. When I'm feeling distracted due to life, work, or just the everyday rat race, she reassures me and makes sure I'm ok.

As for my medications, it will slowly disappear. I am currently awaiting approval for a major procedure coming up and keeping up on my diabetes medication just for now will be vital I believe. When my next lab work comes up and it's keeping steady, I'm sure that the medications will be going away along with my high blood pressure, and cholesterol. My blood pressure has been low for quite sometime but I am feeling good and not light headed. My cholesterol level has been great as well.

I'm still on my journey with so much more to learn from her, like I mentioned earlier, my A1c is just amazing! I haven't had my A1c this low in over 22 years. My lifestyle both in eating the right types of foods and putting exercise in has been something I never thought I'd accomplished.

I am learning that this journey is about me and the difference I am making for my personal goals, as long as I keep that focus and know what the end result is Dr. Jodi is my gold medal and I would highly recommend her and her staff to anyone in a heartbeat! You have to want it in order to succeed in anything you put your mine to and I am grateful that a friend of mine recommended her, I wish I knew about her earlier.

I thank you for taking time to read my testimonial.

Respectfully,



Ivania Kanoelani Paulino

01/27/2023

Dear Senators and State Representatives,

Shouldn't healthcare be something at the forefront and be pre-approved without any restrictions or problems? With so many health issues and possible underlying health conditions due to family health history, I've always wanted to have my personal healthcare and insurance taken care of and operating with little to no issues so that I could make better health a priority. This took years to happen until I was able to meet and be taken as a patient of Dr. Jodi Nishida. My wife and I wanted to start controlling and taking charge of our health in a sustainable and successful way. As a patient of Dr. Nishida's on a proper Medical Ketogenic Diet, I was received and treated with Aloha. I actually was not treated or judged in any way because of health issues. I was treated as myself that wanted to get better and be able to sustain what I was learning and embrace all the consistent support.

I came to Dr. Nishida with a goal in mind to get healthy and try to reduce my body weight and keep it off. When being under Dr. Nishida's care I knew of health issues like Sleep Apnea and Gout. What I didn't know was that my liver was inflamed and that I had Stage 3 liver disease and prediabetes. Medication and dietary changes should have been prescribed way before seeing Dr. Nishida. Dr. Nishida uses great tactile visuals in her teaching of proper Keto along with great teaching strategies that makes all of the patients under her care confident in implementing what we are taught and able to self-sustain our Keto journey. With Dr. Nishida and her entire staff I was never treated as a number. I was treated as myself and encouraged to disclose and share personal celebrations and small setbacks and taught how can I move forward and be okay with falling off the "Keto Train" now and then.

To give a grade to the quality of care that I receive from Dr. Nishida is an A+. She has always exceeded all standards and expectations for every appointment, she's never rushed or cut any appointment short because of time. My big takeaway during appointments was feeling relieved and confident just with appointments alone that I have found a Doctor who "treats me like a human being who needs help and support." I am not being treated for a health condition, I am being treated Holistically so that further treatment will be operate full steam ahead and with focus. Handouts, tips, digital resources and names of stores and locations to find approved keto items are provided. I was absolutely mind blown hearing from a doctor that medication is not needed to target your health conditions so that it can turn back to normal but my conditions can be treated with food! Treatment from other doctors always felt impersonal and I felt like a number and a price tag. It was like they just wanted to prescribe drugs all the time and that was the only answer for treatment. If this initially didn't work they just continued with more and more medications. This was never the case with Dr. Nishida, she never turned to prescribed medications right away. Dr. Nishida's style of treatment has benefitted me on many levels; Apnea machine not needed, gout pills no longer needed, prediabetes cured with foods, and size of liver normalized with normal enzyme levels. I am self-improving but still need a lot of work. I am confident and look forward to more health goals all because of the treatment style of Dr. Nishida. As an Educator for the DOE, I hope this bill will fix the current process to reimburse pharmacists for their valuable services. Oahu's pharmacists should be reimbursed directly for patient care and not be forced to go through a second or third party where they can be stolen from. The State Of Hawaii needs more Doctors like Jodi Nishida who care more about people's health instead of just a price tag, and treat and serve the people of Oahu so that they can be self-sufficient and sustaining.

Best Regards, Ikaikaokalani D. Bicoy

January 25, 2023

Dear Representatives and Senators,

Of the many doctors I've seen for the various health concerns I live with, Dr Jodi Nishida is recognized by her success in reversing disease and I have always learned more about what I must do to improve my health.

She spent a full hour getting my medical and lifestyle history as well as teaching me what the food I eat does in my body and the history of ketosis and why it works to improve blood sugar and decrease fat storage and cholesterol for those who eat a clean keto diet properly.

Dr Jodi Nishida has educated and empowered me through office visits, very clear handouts to support clean keto specifically for me and online private Facebook interactive posts on clean keto and there I also learn from questions other patients have and answers Dr Jodi Nishida provides.

There is no other doctor I know of who spends so much time and resources supporting patient care. What I've learned from being a patient of Dr Jodi's is that the food I'm eating and how I am exercising is the way I control my health state. I had been diagnosed with Congestive Heart Failure, Fatty Liver Disease, Mitral Valve Prolapse, Metabolic Syndrome, Major Depression, Multiple Sclerosis, Fibromyalgia, Osteopenia, Macular Degeneration, Obesity and Chronic Migraines. After becoming a patient of Dr Jodi Nishida's, I have been healed of Congestive Heart Failure, Fatty Liver Disease and Metabolic Syndrome. She has done more to bring health and healing to me than nearly 60 years of seeing other physicians.

I finally understand how to provide my body with the best nutrition and have learned that food that is good for me actually tastes delicious!

Very Truly Yours,

Turning 60 in May of 2023



January 27, 2023

Dear Senators and Representatives,

I am writing today to urge you to support the proposed bill that reimburses pharmacists directly for their patient care services. It is essential that you pass the bill to fix the current process to prevent further loss for pharmacists.

Obesity, borderline high blood pressure, joint pain and stress have directly affected the quality of my life and I have been in search of someone to help guide me to improve myself. Dr. Jodi Nishida has provided valuable and accurate information to help introduce me to a clean keto lifestyle.

Multiple appointments were conducted to analyze my diet, activity level, stress levels, and just life itself. We spent many hours discussing the things that were working and brainstorming how we can improve things that weren't. In addition, she has provided valuable food lists that she developed, tactile visuals of the conversion of sugar into my body, online support, and online group support to help me get to my goals. There were a lot of tears and laughter at each appointment which is extremely rare compared to my regular primary care physician. The quality of care that I receive from Dr. Jodi Nishida is beyond belief. She is very genuine and compassionate and it shows in her welcoming spirit.

Change is very difficult. I didn't expect to hear that the dietary guidelines that I was taught throughout my life are completely wrong. Also, losing inches is ideal and sought after than losing pounds. With the guidance, dedication, and encouragement from Dr. Jodi Nishida, I have lost more than 40 pounds and 62 inches off of my body. My lab values and blood pressures have been normal, I no longer have insulin resistance, my joints are not as painful when doing physical activity, I have more energy and mental clarity, and I am slowly weaning off of my thyroid medication. Please show your support and I urge you to vote yes for this bill. I would greatly appreciate your response on this legislation.

Sincerely,

Arlene U. P. Bicoy

January 27, 2023

To Our Representatives and Senators:

In December 2020, I was diagnosed with sleep apnea and was prescribed a CPAP machine to use while sleeping. I was overweight with high blood pressure, a fatty liver and high cholesterol. I was on medicine for acid reflux, high blood pressure and high cholesterol. I've tried hypnosis to lose weight, which worked for a month or so but didn't last. I felt like my primary care physician would only prescribe medicine instead of trying to help me understand the causes of my issues or other ways to remedy the issues without taking medicine.

One day, I was scrolling through social media and saw an ad for the Keto Prescription and was surprised that it was a local doctor on Oahu. I was a little skeptical about the ad but just gave it a try. I filled out the paperwork and was scheduled for my first appointment with Dr. Markarian, who cleared me for my first appointment with Dr. Jodi.

Dr. Jodi was dumbfounded at how many issues I had being only 39 years of age. She was surprised that I wasn't prediabetic due to my latest lab tests. She explained to me what my fatty liver meant, and I told her that I didn't realize that it was that bad because my PCP made it seem like it wasn't anything to worry about. Dr. Jodi and I spent time going over my bowel movements, my daily activities, diet, etc. We came up with a plan and scheduled bi-weekly then monthly appointments thereafter. My first appointment scared me, which was the kick in the butt I needed to start living healthier and making better choices for me and my family.

My husband and I embarked on this journey together with Dr. Jodi. After learning about the foods that we normally consumed and how we could change our diets to healthier choices, we have both lost a significant amount of weight. I lost 30 lbs. over the last five months and my husband lost 39 lbs. during the same time frame. Although we may consume not approved keto food occasionally, we are educated enough now to be able to get back on track with our healthy choices.

By following Dr. Jodi's plan, I was able to reverse my fatty liver. My lab tests are all back to normal and I feel happier and have more energy throughout the day. I don't rely on caffeine or energy drinks and just feel healthier overall. I get extremely excited when people notice how much thinner I look after starting my keto prescription.

Dr. Jodi and other pharmacists who put their efforts into educating the people of Hawai'i into living a healthier lifestyle should be able to be reimbursed directly for their patient care services. They should not have to rely on other doctors.

Sincerely,

Alisha K. Medeiros

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GREGORY E. HUNGERFORD, D.C.

66-560 Kamehameha, Hwy. Ste. 5, Haleiwa, HI 96712

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Aloha,

I have been a patient of Dr. Jodi Nishida since 2021. I was referred by my PCP Dr. Yarawamai from Straub for weight loss, high blood pressure, and an autoimmune disease caused by pneumonia. Dr. Nishida is very knowledgeable and conveys information clearly and concisely. I was presented with charts and handouts detailing healthy foods and which ones to avoid. Through her care, I was able to achieve a healthy weight as well as discontinue my high blood pressure medication. Throughout my life, I have had multiple severe injuries including, football, soccer, wrestling, surfing, and 11 motor vehicle accidents which have improved symptomatically and functionally because of her care. She takes the time to make sure the information is understood and welcomes questions. I have seen many doctors over my lifetime and Dr. Nishida is top-notch. She is passionate and motivated, and it shows in her work ethic. As a chiropractor, I see patients in all manner of health conditions. Some of these patients suffer from obesity, rheumatoid arthritis, high cholesterol, diabetes, and general bad health from poor dietary habits. I have and will continue referring patients to her for her expertise even though my office is on the other side of the island. She is worth the drive.

Mahalo,

Gregory E Hungerford, DC

January 27, 2023

To Whom It May Concern:

My Name is Ivania "Kanoelani" Paulino, I am a patient of Dr. Jodi Nishida, I will be one (1) year with her come April this 2023. I receive absolute dedication and honesty with her and I truly believe that she is a priceless asset to me, she has and still is teaching me to take care of myself in the most healthiest way possible. I appreciate her honesty and never buttering things up.

Dr. Nishida is currently helping and educating me with how to live life to its fullest with healthy eating, exercise, self-care, and being accountable for all I do. We are working on getting off my diabetes, cholesterol, and high blood pressure medication. Since I've been in her care through the Keto Prescription I am so happy to have gotten my A1c down to a 6.5 vs I believe almost a 10.

The quality of services she provides with one on one telehealth calls, I'm not just an appointment time, she genuinely makes the time and cares about my health and well-being, Dr. Jodi, Dr. Markarian and their staff are there when I have questions and answering or guiding me in a timely manner, providing great information with foods, medication, her videos on FB are really great information. She goes above and beyond sometimes she provides more information than my other doctors (this is not to say they aren't doing their job) it's just the amount of information she provides and the facts to back everything up is just amazing. When I'm feeling distracted due to life, work, or just the everyday rat race, she reassures me and makes sure I'm ok.

As for my medications, it will slowly disappear. I am currently awaiting approval for a major procedure coming up and keeping up on my diabetes medication just for now will be vital I believe. When my next lab work comes up and it's keeping steady, I'm sure that the medications will be going away along with my high blood pressure, and cholesterol. My blood pressure has been low for quite sometime but I am feeling good and not light headed. My cholesterol level has been great as well.

I'm still on my journey with so much more to learn from her, like I mentioned earlier, my A1c is just amazing! I haven't had my A1c this low in over 22 years. My lifestyle both in eating the right types of foods and putting exercise in has been something I never thought I'd accomplished.

I am learning that this journey is about me and the difference I am making for my personal goals, as long as I keep that focus and know what the end result is Dr. Jodi is my gold medal and I would highly recommend her and her staff to anyone in a heartbeat! You have to want it in order to succeed in anything you put your mine to and I am grateful that a friend of mine recommended her, I wish I knew about her earlier.

I thank you for taking time to read my testimonial.

Respectfully,



Ivania Kanoelani Paulino

February 5, 2023

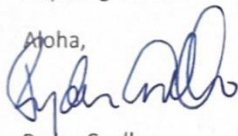
Dearest Dr. Jodi,

I am grateful to you and would like to share my experience in support of your efforts to make us healthier.

1. In July of 2022, I first met with you to discuss my desire to "get off my meds" which I have been on for over 20 years! Pills seemed to be the only way to deal with my chronic illnesses of high blood pressure, gout, type 2 diabetes and high cholesterol. Since I have medical insurance, copays are minimal and its pretty easy to get a prescription for a higher dosage or new meds. After my initial visit with you, I did the cardiogram and began my journey to get healthy and get off all my meds!
2. During my follow-up appointments, your expressed genuine concern and sharing of information has been sincere and useful to keep me on track. Every visit sets a new set of goals to work towards the ultimate goal of a healthy lifestyle. Your Facebook Group and latest meal prep program are awesome support for all of us to turn to when we need it. Besides the informational handouts about the right foods to eat and proportions/ratios, the "approved" shopping list off the FB group is the most useful resource to me. As I and I'm sure everyone carries around their phone everywhere nowadays, a few clicks and I have access to the information as I am grocery shopping.
3. Since starting I have lost 30 pounds and have reduced a few of my meds. I feel better and the my keto-lifestyle, inspired by you, has influenced my immediate family as well as those I work with, as eating and sharing meals is such an integral part of our local culture;

Thank you for all that you do for those that want to truly live healthy and let me know if there is anything more that I can do to support you.

Aloha,



Ryder Coelho

February 9, 2023

Aloha, my name is Raelene Shimokawa, and I am a patient of Dr. Jodi Nishida from December 18, 2020. I sought her help after my primary care physician (PCP) advised me to go on medication to lower my high cholesterol. I am 5'1" & was 130 lbs. Knowing the negative side effects of these drugs I began my health journey with Dr. Jodi.

Dr. Jodi educated, listened, & guided me into better health. Each visit, she spent roughly 30 minutes listening & teaching me what foods to eat, how much, why we should eat, & the consequences of unhealthy choices. I didn't feel overwhelmed or rushed during my visits. I saw Dr. Jodi about once a month until July 2021 & my most recent October 2022.

At each of my once a month visits she would give me handouts that taught me what kinds of foods were the better choice, how to eat these foods the healthy way with healthy fats, & educated me on how to read food ingredients labels. Not knowing what are unhealthy ingredients (fats, carcinogenic, inflammatory, etc.) we can easily be fooled by deceptive marketing strategies. Such as: foods labeled as "healthy", "keto", "low/no fats" ~ the ingredients used are very unhealthy.

This was the first time in my life (almost 50 yrs old), that I'd lost 20 pounds. I felt better, had more energy, & my cholesterol numbers had gone down. No need for medication! This was the main reason why I sought Dr. Jodi - I wanted to do things naturally & control what I can.

Her knowledge & guidance is invaluable. It's very sad what society has been taught about food ~ what is healthy & unhealthy. Medication isn't the answer. We need to educate & guide people into better health. We shouldn't be making money off of sick people & masking the problems.

I am very grateful for Dr. Jodi & for her love & passion that she has in trying to help others. We need more people like her to step up & speak up for truth.