

LINDA LINGLE GOVERNOR

JAMES R. AIONA, JR. LT. GOVERNOR STATE OF HAWAII OFFICE OF THE DIRECTOR DEPARTMENT OF COMMERCE AND CONSUMER AFFAIRS 335 MERCHANT STREET, ROOM 310 P.O. Box 541

HONOLULU, HAWAII 96809 Phone Number: 586-2850 Fax Number: 586-2856 www.hawaii.gov/dcca

RONALD BOYER ACTING DIRECTOR

RODNEY A. MAILE DEPUTY DIRECTOR

### PRESENTATION OF THE PROFESSIONAL AND VOCATIONAL LICENSING DIVISION

### TO THE HOUSE COMMITTEE ON CONSUMER PROTECTION AND COMMERCE

### TWENTY-FIFTH LEGISLATURE Regular Session of 2010

Wednesday, March 17, 2010 2:00 p.m.

## TESTIMONY ON SENATE BILL NO. 2600, S.D. 2, H. D. 1, RELATING TO HEALTHCARE.

### TO THE HONORABLE ROBERT N. HERKES, CHAIR, AND MEMBERS OF THE COMMITTEE:

My name is Celia Suzuki, Acting Licensing Administrator for the Professional and Vocational Licensing Division ("PVLD") of the Department of Commerce and Consumer Affairs ("DCCA"). PVLD appreciates the opportunity to testify on S.B. No. 2600, S.D. 2, H.D. 1, Relating to Healthcare.

For the Committee's information, much of the contents of this bill represents consensus between PVLD and the proponents for regulation. Our position, however is that if regulation is enacted, it should be in the form of a <u>certification</u> program and not licensure. We also advised that a licensure structure would entail higher costs as Testimony on S.B. No. 2600, S.D. 2, H.D. 1 March 17, 2010 Page 2

additional staff and general funds for start-up costs will be needed, whereas a certification structure would not.

Also, we do not support the requirement that to renew a license, a person must complete at least 18 credit hours of continuing education. <u>Before</u> continuing education is imposed as a condition to renew, there should be (1) a demonstrated need to impose such a requirement; (2) identification of the objective(s) that mandatory continuing education is meant to address; (3) a review of existing mechanisms or methods and a finding that mandatory continuing education is the best method to achieve the objective(s) identified in (3) above; (4) verification that continuing education courses meeting the objective(s) are readily available and accessible to the person; (5) evidence that the fiscal impact on the professional will not be adverse; and (6) confirmation that resources are available for the regulatory agency to implement the continuing education program. Until all of these issues are addressed, we cannot support continuing education as a requirement for the renewal of the license

Thank you for the opportunity to testify on Senate Bill No. 2600, S.D. 2, H.D. 1.



### Wednesday, March 17, 2010, 2:00 pm, Conference Room 325

- To: COMMITTEE ON CONSUMER PROTECTION & COMMERCE Pep. Robert N. Herkes, Chair Rep. Glenn Wakai, Vice Chair
- From: Hawaii Medical Association Gary A. Okamoto, MD, Legislative Co-Chair Linda Rasmussen, MD, Legislative Co-Chair April Donahue, Executive Director Lauren Zirbel, Government Affairs Dick Botti, Government Affairs

RE: <u>SB2600 Relating to Healthcare</u>

In Support

Chairs & Committee Members:

Hawaii Medical Association supports this measure as an important element in protecting patients from medical errors by providing assurance that educational requirements and qualifications are met for respiratory practitioners, who currently have no educational requirements by any Hawaii state government agency.

Forty-eight other states have oversight of respiratory care practitioners. This not only helps protect patients, but provides assurance to hospitals and medical professionals who contract with respiratory care practitioners. The hospitals and other medical professionals will know that there is some guarantee these respiratory care practitioners meet the educational requirements for their profession.

We also support the added exemptions for sleep technologists and other licensed healthcare professionals performing within their own scope of practice.

Thank you for the opportunity to provide this testimony.

OFFICERS

President - Robert Marvit, MD President-Elect – Morris Mitsunaga, MD Secretary - Thomas Kosasa, MD Immediate Past President – Gary Okamoto, MD Treasurer – Stephen Kemble, MD Executive Director – April Donahue



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To: House Committee on Consumer Protection and Commerce Rep. Robert N. Herkes, Chair Rep. Gienn Wakai, Vice Chair

Date: March 16, 2010

RE: SB2600,SD2,HD1 Relating to Healthcare Hearing scheduled for Wednesday, March 17, 2010 @ 2:00 PM, Conf Rm 325

**Chairs and Committee Members,** 

My name is Carol Agard and I am the manager of Respiratory Care Services and the Sleep Center at the Queen's Medical Center.

I support the intent of SB 2600, SD2,HD1 to regulate the practice of respiratory care in Hawaii for these reasons:

The practice of respiratory care has evolved over the years to include much more pharmacological interventions and invasive procedures with increased potential for harm to patients.

Respiratory services are no longer exclusive based in the hospital environment. Patients are being discharged much more quickly into other care sites such as nursing homes, hospices, clinics and the patient's own home still requiring respiratory services.

In the interest of patient safety and to assure that the patients are receiving appropriate and quality respiratory services, those providing this life sustaining therapy must be regulated.

As Physician's patient-loads are increasing, especially on the neighbor islands, they are relying on Respiratory Care Practitioners more than ever, to manage their most challenging patients, those with pulmonary diseases, including Asthma, COPD and respiratory pandemics such as SARS and H1 N1.

Federal Medicare laws for reimbursement are currently undergoing a significant change that affects reimbursement to all Medical Centers. Medicare is closely scrutinizing the current personnel requirements as it relates to reimbursement for the services provided to Medicare patients. Specifically, payment for services provided by unlicensed personnel are under review. When Medicare decides to amend its rules and not reimburse for services provided by unlicensed health care personnel, this would reduce the Federal dollars to our state as Medicare is reformed on this important point.

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### The proposed regulation has the potential to be budget neutral in the face of Hawaii's current economic challenges for the following reasons:

There are more than 300 Respiratory Care Practitioner in the state.

The proposed three year cycle for initial start up and licensing renewal supports efficiency and cost effectiveness for licensing over sight.

The existing National Board for Respiratory Care (NBRC) can serve as the credentialing body for licensing, eliminating the need for the state to set up testing, as is the case in 48 other states.

The NBRC also maintains a free data bank accessible to all state respiratory therapy licensure boards. This data bank tracks state disciplinary actions taken against all licensed respiratory therapists. The licensure boards use this data system to check to see if respiratory therapists applying for a license in that state has had their license revoked or action taken against them. This information then is used to determine if a state will issue a license to practice. This is yet another public safety reason to license respiratory therapists, it will protect the public from those who shouldn't be providing respiratory therapy to an unsuspecting public.

Eliminating the continuing education requirements outlined in the bill will free the state from establishing standards and tracking this information.

Thank you for the opportunity to present testimony,

Card. (Jand) Carol Agard RRT, FAARC

Manager Respiratory Care Services/Neurodiagnostiics The Queen's Medical Center



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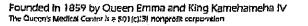
Chairs and Committee Members,

I strongly support the intent of SB2600SD2HD1 which creates licensing and regulatory standards for respiratory therapists.

- As Physician's patient-loads are increasing, especially on the neighbor islands, they are relying on Respiratory Care Practitioners more than ever, to manage their most challenging patients, those with pulmonary diseases, including Asthma, COPD and respiratory pandemics such as SARS and H1 N1.
- Federal Medicare laws for reimbursement are currently undergoing a significant change that affects reimbursement to all Medical Centers. Medicare is closely scrutinizing the current personnel requirements as it relates to reimbursement for the services provided to Medicare patients. Specifically, payments for services provided by unlicensed personnel are under review. When Medicare decides to amend its rules and not reimburse for services provided by unlicensed health care personnel, this would reduce the Federal dollars to our state as Medicare is reformed on this important point.

Thank you for your consideration on this important issue.

Cherifice Chang, MD, FACP Medical Director for the Neuroscience Institute And Neurocritical Care Director of Stoke Center The Queen's Medical Center







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Thank you)for your consideration on this important issue.

Malcolm Haruno, MD Cardiac Intensivist, Cardiac ICU Queen's Medical Center



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# $\mathcal{HSRC}$ Hawaii Society for Respiratory Care

Testimony in Support of SB 2600, SD2, HD1

To: House Committee on Consumer Protection, Robert Herkes Chair, Glenn Wakai, J Vice Chair

From: Ed Borza, RRT-NPS, CPFT, President HSRC

Committee Chair, Vice Chair and members of the committee,

I am testifying in support of SB 2600, SD2 to license and regulate respiratory therapists (RTs) in Hawaii. RTs are involved in the care of the most critical patients in Hawaii's healthcare system and also are critical in the continuum of care as homecare providers, patient educators and advocates for lung health. It is critical that the consumers and patients in Hawaii have the same protections afforded to consumers of 48 other states, the District of Columbia and Puerto Rico. Because we are among the last states (with Alaska) to recognize and regulate the profession, there is a possibility of unethical or incompetent RT's coming from other states and harming our patients. There is also the risk that an unscrupulous therapist could move from hospital to hospital within our state.

RTs are involved with the most critically ill patients in Emergency departments and Intensive care units, including pediatric and newborn intensive care. They are primarily responsible for operating life-support equipment and assisting with, and performing, invasive procedures such as arterial punctures and artificial airway placement. RT's also administer medications and medical gasses that have the potential to harm a patient if not correctly or safely administered.

It has sometimes been suggested that hospitals police the profession sufficiently by requiring national credentials and doing "background" checks, but there is evidence that this system is not always able to screen adequately. In Hawaii, employers are not given access to licensing board decisions in many mainland jurisdictions because we don't have a state licensing authority. The lack of a license in Hawaii also means that Hawaii based RTs would not be eligible to apply for Federal disaster relief teams and may be restricted from providing certain Medicare services if regulations mandate services be provided by licensed professionals.

The Hawaii Society for Respiratory Care is not interested in restricting other qualified health professionals from doing their jobs. It is critical that a nurse not be worried that her license is at risk by administering oxygen to a patient or that a

sleep tech be restricted from providing CPAP to a patient with sleep apnea. We suggested to the Senate committees on Health and Consumer Protection that exemptions be added to the Bill. However, the House Health committee included a blanket exemption for sleep technologists that I'd like you to reconsider.

Sleep technicians administer modalities that sometimes overlap with those of respiratory therapists (such as Oxygen administration, CPAP and BiPAp). Respiratory Therapists have formal education requirements and nationally recognized credentialing exams, which the bill specifies are needed to acquire a license. The exemption in HD1 gives an exemption to everyone working in a sleep lab, but this gives too broad a loophole to non-credentialed "techs". The AAST's definition of a trainee in sleep means that they are on-the-job trainees with perhaps very little, if any, formal training in respiratory physiology and therapeutics. The HSRC doesn't want to adversely affect the sleep community, but the primary issue of this bill is patient and public safety; exempting unskilled and non-credentialed sleep technicians would seem to put some patients at risk. The HSRC would prefer that any exemption for sleep professionals require that licensed or credentialed health care workers provide CPAP, BiPAP and other positive pressure modalities to patients. This would mean that RPSGT's, nurses or respiratory therapists be present when these devices are used. This would not affect most hospital-based sleep labs and should be an attainable goal for any other sleep labs. The bottom line in this case is patient safety.

Thank you for the opportunity to testify.

Aloha, Ed Borza, RRT-NPS, CPFT



Date: March 16, 2010

RE: SB2600, SD2, HD1 Relating to Healthcare

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Thank you for your consideration on this important issue.

Dr. Robert Tolentino, M.D.

Kalser Permanente 3288 Moanalus Road Honolulu, Hawasi .96819 .... Phone: (808) 4 .2-0000

### March 16, 2010

Memorandum of Testimony

To: House Committee on Consumer Protection, Robert Herkes Chairperson Glenn Wakai, Vice Chair From: Stephen F. Wehrman CRT, RRT, CPFT, RPFT, AE-C Re: Hearing for March 17, 2010 SB 2600 SD2 (crossover) HD1 Licensure of Respiratory Therapists

I have been a Respiratory Therapist for 33 years. I took my training as an RN in Hilo in the early 1970's and went on to Respiratory school in the mainland since we did not have a program in Hawaii. I have taught Respiratory Care for 28 years and I've been the Director of the only program in this state for the last 20 years. I have seen a lot in my career and I've seen a lot of changes in society, in medicine, in healthcare and in education. One thing hasn't changed: Respiratory Therapists don't have a license to practice in Hawaii.

A license to practice defines what a health care professional does and how they are supposed to do it. When our profession was young, in the 60's and 70's, we didn't have licenses and what we did was more or less undefined. Our profession grew and licensure efforts began in the 1980's. I was licensed in California and later in Washington before I moved back to Hawaii. We don't have a license here and it has not been for lack of trying.

I think that a lot of people know the myths about licensure and not the truths. I came here today to tell you about the truth and to tell you why the truth is important.

Myth #1: Licensure is all about turf and protecting your profession. Fact: Paramedics, RN's, Physicians-all provide critical life-saving therapies for patients. All have overlapping areas of skill and responsibility. Respiratory Therapists are members of the lifesaving team. We have no need or desire to take away from others. We all work together sharing these vital responsibilities. Bottom Line: Our licensure will have no impact on other professions. They are our partners not our rivals.

Myth#2: Licensure increases the cost of healthcare and the cost to society. Fact: The cost of every respiratory care license in the United States is paid by the Respiratory Therapists. In California this costs \$500. In Washington it is \$100. Costs vary from state to state but the facts are simple: the people who want the license pay for it. A \$300 a year license would cost an RT less than 1\$ per day and less than most of us make in a day. Bottom Line: We are willing to make this sacrifice to protect our patients. Myth #3: The hospitals will protect the people of Hawaii, so we don't need licensure.

**Fact:** Hawaii's hospitals do try to protect people. They do drug testing and background checks using the State of Hawaii database. I have seen them catch people who had an outstanding parking ticket or never went to jury duty. I've never had a graduate rejected by a background check here in Hawaii, however, I have had graduates who could not obtain a license in another state!

Hawaii employers can check for credentials but they only require unofficial proof since no license is involved. What they can't do is check for previous license problems *because the National Disciplinary Database is only available to states with licensure.* 

Does this matter? Aside from the obvious big issues, hiring staff that you later terminate due to background issues costs money.

Bottom Line: Licensure is the only method of regulating health care workers that can ensure a hiring process that is safe and effective. Mainland respiratory therapists who lost their license or experienced disciplinary action try to come to Hawaii!

### Myth #4: Nothing bad has happened so what's the big deal?

**Fact:** Bad things have happened, on the mainland and right here in Hawaii. I'll give you three examples:

The Angel of Death

A respiratory therapist at Glendale Adventist Hospital in California. He euthanized elderly patients he felt were kept alive inappropriately. He was arrested and released for lack of evidence. **The licensure board revoked his license immediately.** It took 4 years to convict this man.

The Pediatric Therapist

He was good with children and volunteered to work with them at his community hospital. Until he was accused of molesting a young female patient. Threatened with termination, he fought back and demanded proof. The hospital administration told him he could resign and they would let him go. What happened? The HR department at the community hospital could not tell the new employer of their problem because of the risk of lawsuits and bad publicity. A licensure board would have suspended his license and investigated. This gentlemen now works at one of the three hospitals on Oahu that have large pediatric populations.

The Cocaine Fiend

I went to the Big Island to set up additional clinical experiences for my students. My goal was to get rural community health rotations where students could learn to care for patients outside the hospital and the urban setting of Oahu. I know the future of healthcare lies outside the hospital and I know how important it is to provide this care on the neighbor islands. I had just signed an agreement and come home to Kaneohe. My mother-in-law called from Waimea to ask me if I had seen the Tribune

Herald? She informed me that my 'friend' had just been arrested on Mamo St. in Hilo for buying cocaine. I immediately canceled the clinical rotation. The judge gave leniency for this man's role in society and his first-time offense. A license board would have revoked his license until rehabilitation was proved. It took years of repeated offenses for the system to remove this man from caring for patients in their homes.

I urge you to pass this bill. Actually, I'm begging you. We've tried for 25 years and we need your help. It's pretty important. We're not asking for ourselves, we're asking on behalf of the people we have sworn to care for and protect. The people of Hawaii are counting on us and we are counting on you.

When I get up in the morning I look in the mirror and I ask myself if I like the person I see. I'm usually pretty happy. I hope when you look in the mirror you look happy knowing that you did something to make life better for the 250,000 people in this state who suffer from lung diseases.

We took care of Brother Iz. We took care of Governor Cayetano. We took care of Patsy Mink. And we took care of June Jones, and Tadd Fujikawa and we took care of your loved ones. Who should be taking care of them? People who are trusted.

If you still don't think it is necessary to license my profession, I want you to ask yourself who takes care of your wife, your mother, or your daughter when they are sick. Is it someone trusted? Is it a licensed health care provide?

Finally, I want to share what happened when I volunteered to help with Hurricane Katrina. The United States of America said **NO.** They said I was not qualified. I was not licensed. If we had a public health disaster in Hawaii we would only be able to help at the hospital where we work. We would lose 300 highly trained critical care workers exactly when we need them most. The United States of America bought life-support ventilators to use during a disaster. We have them here in Hawaii. The paramedics are supposed to operate them. Who trained the paramedics? **Respiratory Therapists.** 

### TESTIMONY IN SUPPORT OF HB SB2600 SD2, HD1 Relating to Respiratory Care

Hearing Wednesday, March 17 2010

To: House Committee on Consumer Protection and Commerce Rep. Robert N. Herkes, Chair Rep. Glenn Wakai, Vice-chair

By: Mark Sappington RRT Manager Clinical Services - Cardiopulmonary Therapy and Diagnostics

Re: HB SB2600SD2 RELATING TO RESPIRATORY CARE

Honorable Chair and Committee Members:

I am in support of HB 2600SD2 HD1. This measure seeks to establish licensing and regulatory requirements for practice of respiratory care that would safeguard the care of the respiratory patients in our community.

- Respiratory Therapy has developed into a highly specific field of practice with the therapist utilizing advanced assessment and critical thinking to formulate the patient plan of care. They are the hospital experts in Respiratory Therapy. That is why hospitals and medical companies alike utilize the expertise of credentialed Respiratory Practitioners. They know what can happen when a critical life function is interrupted by a mistaken medical gas delivery or failure of an intensive care device. These are the worst of medical negligence. Many errors go unseen and unreported.
- The credential serves only a portion of our responsibility to patient care. As 48 other states have recognized, professional regulation assures that not only do we utilize credentialed personnel but we also employ medical practitioners who are morally, ethically, and criminally scrutinized before providing care to our patients and families. In Hawaii Respiratory Therapists can:
  - > Have their license revoked in another state and come here to practice.
  - Be fired for ethical issues and hired at another hospital as there is no agency to report to.
  - Test positive for drugs or alcohol and continue to work in the field without treatment or counseling.
  - > Can have criminal records that affect safe practice of Respiratory Care.
  - > Assume the role of a respiratory employee without a credential.
- As a profession we acknowledge there is a cost for licensing. We accept that burden but to control the cost recommend utilizing the NBRC credential as our test of

competency and creating a volunteer board of medical peers under the DCCA. I consider myself not only a healthcare provider, but also a patient advocate. The **safety and care** of my patients has always been first and foremost in my career. Having some years ago come from a state with legislative regulation I have seen and have been directly involved with cases of employees who are unfit, incompetent, or negligent in the delivery of respiratory care. I am asking this committee to strongly consider the protection of our state's medical patients by supporting HB SB2600 SD2. Thank you for your time,

Mark Sappington

oreen

To: House Committee on Consumer Protection and Commerce Rep. Robert N. Herkes, Chair Rep. Glenn Wakai, Vice Chair

By:

RN

Qree C

Date: March 16, 2010

RE: SB2600,SD2,HD1 Relating to Healthcare Hearing scheduled for Wednesday, March 17, 2010 @ 2:00 PM, Conf Rm 325

Chairs and Committee Members,

I strongly support the intent of SB2600SD2HD1 which creates licensing and regulatory standards for respiratory therapists. Enacting this legislation will:

- 1) Protect the health and safety of persons in need of respiratory care services by requiring that respiratory therapists be credentialed and licensed in order to practice in the State of Hawaii.
- 2) Hawaii will no longer be a safe haven for respiratory therapists who due to unscrupulous acts have lost their license and ability to work elsewhere.

Thank you for the opportunity to testify and reiterate my support of this legislation which I believe is long overdue.

Sincerely,

run Manin Pal Momi medica mp1 RN.

FAX:8084854392

- To: House Committee on Consumer Protection and Commerce Rep. Robert N. Herkes, Chair Rep. Glenn Wakai, Vice Chair
- By: <u>PERMER BAGANE</u>, <u>PER</u>, <u>MULLAN</u> name credentials city of residence

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- 3) Lastly, in an effort to meet budget constraints, we acknowledge that the cost for licensing will be borne by the licensees. We also agree to forgo the initial request for an independent board and instead place the administration of this new chapter under the auspices of the director of Commerce and Consumer Affairs who will appoint an advisory committee composed of practicing respiratory therapists to assist with its implementation.

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Sincerely,  $\mathbf{Q}$ 

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By:	Chanda	Basham	RRT	AICO	<b>.</b> .
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Sincerely, signature credentials workplace

- To: House Committee on Consumer Protection and Commerce Rep. Robert N. Herkes, Chair Rep. Glenn Wakai, Vice Chair
- By: Diane Brenessel, BS, RRT, D.Ed, AE-C Resident of Honolulu, District 26

Date: March 16, 2010

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Chairs and Committee Members,

I strongly support the intent of SB2600SD2HD1 which creates licensing and regulatory standards for respiratory therapists.

- As a Respiratory Therapist and an Educator, my role is to protect the citizens of Hawaii, including my family and friends, who when in need of excellent respiratory care services and at times life-saving medical attention, receive this care from competent, validated, licensed Respiratory Therapists. I have experienced first hand, the consequences of dangerous practices from Respiratory Therapist who have come to Hawaii to work as they had lost their license elsewhere.
- Hawaii's Respiratory Therapist's are committed to making this a budget neutral licensing program. To aid cost reduction, I recommend the removal of CEU (Continuing Education Units) requirements as outlined in this bill. This can be achieved as the National Board for Respiratory Care (NBRC) credentials Respiratory Therapists through a validated national exam. As in 48 other states, the NBRC is the only credentialing body required.

Mahalo for accepting my testimony.

Diane Brenesa

Diane Brenessel, BS, D.Ed., RRT, AE-C Clinical Educator for Respiratory Care Services Queen's Medical Center Honolulu, Hawaii 96813

Bv: city of residence credentials print name

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Laux-C

signature

<u>QT | NPS , Kapishuu Inca CTr.</u> credentials workplace Zor Wrowcu + Children

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Thank you for the opportunity to testify and reiterate my support of this legislation which I believe is long overdue.

Sincerely;

credentials workplace

To:	House Committee on Consumer Protection and Commerce Rep. Robert N. Herkes, Chair			
	Rep. Glenn Wakai, Vice Chair		HONStali	
By:	LiDian Choy	RRT	Hawaii	
•	name	credentials	city of residence	

Date: March 16, 2010

RE: SB2600,SD2,HD1 Relating to Healthcare Hearing scheduled for Wednesday, March 17, 2010 @ 2:00 PM, Conf Rm 325

Chairs and Committee Members,

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Dravelle HENOLULU

By:	Lorna Coloma	RN	airea
·	print name	credentials	city of residence

Date: March 16, 2010

RE: SB2600,SD2,HD1 Relating to Healthcare Hearing scheduled for Wednesday, March 17, 2010 @ 2:00 PM, Conf Rm 325

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ILU (IIIIIa) (Sellice Line Managel Kapiolani Malchtat Pali Mumi credentials workplace

By:

Barbara Craft

city of residence

Date: March 16, 2010

RE: SB2600,SD2,HD1 Relating to Healthcare Hearing scheduled for Wednesday, March 17, 2010 @ 2:00 PM, Conf Rm 325

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Thank you for the opportunity to testify and reiterate my support of this legislation which I believe is long overdue.

RN, BSN, MBA, Rapielani, Medical Center credentials workplace for Women & Children

This is very important to protect our patients and support our Therapists!

phint name

10:	<ul> <li>House Committee on Consumer Pro</li> </ul>	tection and Com	merce	
	Rep. Robert N. Herkes, Chair			
	Rep. Glenn Wakaii, Vice Chair			
	Clariph Sat	NRA	Handy	

By:

INCOUN credentials

city of residence

Date: March 16, 2010

RE: SB2600,SD2,HD1 Relating to Healthcare Hearing scheduled for Wednesday, March 17, 2010 @ 2:00 PM, Conf Rm 325

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AMC-UEST E.O signature credentials workplace

To:					
	Rep. Robert N. Herkes, Chair				
Bv:	Rep. Glenn, Wakai, Vice Chair	RRT	Honolulu, HI		
- <b>,</b> -	name	credentials	city of residence		

Date: March 16, 2010

RE: SB2600,SD2,HD1 Relating to Healthcare Hearing scheduled for Wednesday, March 17, 2010 @ 2:00 PM, Conf Rm 325

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Sincerely KMCPM

By:	Constaule Gaornan	C P T	WAIPAHIA
-	print name	credentials	city of residence

Date: March 16, 2010

RE: SB2600,SD2,HD1 Relating to Healthcare Hearing scheduled for Wednesday, March 17, 2010 @ 2:00 PM, Conf Rm 325

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Sincerely,

CRT MC ~ 1345

signature

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WHR-16-2010 13:01 From:CARDICFULMUNHYY

By:	Edward Galuna	, RRT ,	WAIPAHU
•	print name	credentials	city of residence

Date: March 16, 2010

SB2600, SD2, HD1 Relating to Healthcare RE: Hearing scheduled for Wednesday, March 17, 2010 @ 2:00 PM, Conf Rm 325

Chairs and Committee Members,

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Sincerely,

signature

credentials

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NATIN GARDURUE, RCT, BS Hons lulu print name credentials city of residence Bv:

Date: March 16, 2010

RE: SB2600,SD2,HD1 Relating to Healthcare Hearing scheduled for Wednesday, March 17, 2010 @ 2:00 PM, Conf Rm 325

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Sincerely,

Lan

signature

MAR-16-2010 11:27AM FAX:8085377832

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ID:REP WAKAI

8084854392

To: House Committee on Consumer Protection and Commerce Rep. Robert N. Herkes, Chair Rep. Glenn Wakai, Vice Chair

By:	RANDU	GUEVARRA	RRT	HonoLulu
-		name	credentials	city of residence

Date: March 16, 2010

RE: SB2600,SD2,HD1 Relating to Healthcare Hearing scheduled for Wednesday, March 17, 2010 @ 2:00 PM, Conf Rm 325

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- To: House Committee on Consumer Protection and Commerce Rep. Robert N. Herkes, Chair Rep. Glenn Wakai, Vice Chair
- By: MARIE HERME RT, WAIPAHY print name credentials city of residence

Date: March 16, 2010

RE: SB2600,SD2,HD1 Relating to Healthcare Hearing scheduled for Wednesday, March 17, 2010 @ 2:00 PM, Conf Rm 325

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Mani RŤ HMCE signature credentials workplace

print name

By:

city of residence

Date: March 16, 2010

SB2600.SD2.HD1 Relating to Healthcare RE: Hearing scheduled for Wednesday, March 17, 2010 @ 2:00 PM, Conf Rm 325

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Kepiul

By: ANUM. city of residence onnt name credentials

Date: March 16, 2010

RE: SB2600,SD2,HD1 Relating to Healthcare Hearing scheduled for Wednesday, March 17, 2010 @ 2:00 PM, Conf Rm 325

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credentials workplad sighatu

By: credentials name

Date: March 16, 2010

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To:	House Committee on Consumer Protection and Comme	rce
	Rep. Robert N. Herkes, Chair	
	Rep. Glenn Wakai, Vice Chair	**

By:	Stephen Kaya	<u>, RRT</u>	Pearl City
	print name		city of residence

Date: March 16, 2010

RE: SB2600,SD2,HD1 Relating to Healthcare Hearing scheduled for Wednesday, March 17, 2010 @ 2:00 PM, Conf Rm 325

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Queen Medical Central workplace credentials

By: Valerve Kido RN Kailun

Date: March 16, 2010

RE: SB2600,SD2,HD1 Relating to Healthcare Hearing scheduled for Wednesday, March 17, 2010 @ 2:00 PM, Conf Rm 325

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Pali Momi Hospital

٠.

To:	House Committee on Consumer Protect Rep. Robert N. Herkes, Chair Rep. Glenn Wakai, Vice Chair			
By: r	SHIRLEY A.B. KITAGAWA	PRT	EWA BEACH	
	print name	credentials	city of residence	
Date:	March 16, 2010			
RE:	SB2600,SD2,HD1 Relating to Healthcan Hearing scheduled for Wednesday, Man		2:00 PM, Conf Rm 325	
Chair	s and Committee Members,		<b>i</b>	
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HMCE signature credentials workplace

obil-Michael Kubo 77-T Bv:

Date: March 16, 2010

RE: SB2600,SD2,HD1 Relating to Healthcare Hearing scheduled for Wednesday, March 17, 2010 @ 2:00 PM, Conf Rm 325

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Sincerely. Kailla Kailla

By::	Dinah	M. Ku	bota	<u>prt</u>	Melani	<u>H</u> I.
•		print nam	6	credentials	city of residence	

Date: March 16, 2010

RE: SB2600,SD2,HD1 Relating to Healthcare Hearing scheduled for Wednesday, March 17, 2010 @ 2:00 PM, Conf Rm 325

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Sincerely,

M W. Kulant HMC

signature

credentials

workplace

By:	BRIAN	KUSANDO	eet,	Howkoun
	<del></del>	print name	credentials	city of residence

Date: March 16, 2010

RE: SB2600,SD2,HD1 Relating to Healthcare Hearing scheduled for Wednesday, March 17, 2010 @ 2:00 PM, Conf Rm 325

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Sincerely, BUEFN'S MEDICAL CENTER credentials workplace

- To: House Committee on Consumer Protection and Commerce Rep. Robert N. Herkes, Chair Rep. Glenn Wakai, Vice Chair
- By: <u>Andy Lee</u>, <u>MD</u>, <u>Ureq</u> print name credentials city of residence

RE: SB2600,SD2,HD1 Relating to Healthcare Hearing scheduled for Wednesday, March 17, 2010 @ 2:00 PM, Conf Rm 325

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16/2016 Palimoni meinel Pali- Marine Chair College & Prostor Prostor

By: print name credentials

Date: March 16, 2010

RE: SB2600,SD2,HD1 Relating to Healthcare Hearing scheduled for Wednesday, March 17, 2010 @ 2:00 PM, Conf Rm 325

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Sincerely.

credentials workplace

- To: House Committee on Consumer Protection and Commerce Rep. Robert N. Herkes, Chair Rep. Glenn Wakai, Vice Chair
- By: Joan Loke, RRT, 5090 Likini St. #1103E Honolulu HI 96818

RE: SB2600,SD2,HD1 Relating to Healthcare Hearing scheduled for Wednesday, March 17, 2010 @ 2:00 PM, Conf Rm 325

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Joan Loke RRT cell: 226-1904

ll O:	House Committee on Consumer Prote	ection and Comm	erce
	Rep. Robert N. Herkes, Chair		~
	Rep. Glenn Wakai, Vice Chair		ſ
Вy:	Michelle Lomibao	PRT	Waipahu
-	print name	credentials	city of residence

RE: SB2600, SD2, HD1 Relating to Healthcare Hearing scheduled for Wednesday, Mærch 17, 2010 @ 2:00 PM, Conf Rm 325

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Sincerely,

FMCW

workplace

signature

credentials

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To: House Committee on Consumer Protection and Commerce Rep. Robert N. Herkes, Chair Rep. Glenn Wakai, Vice Chair By: <u>Joan S.H. Ma</u>, <u>RRT</u>, <u>Honolulu</u>, <u>HI</u> name credentials city of residence

Date: March 16, 2010

RE: SB2600,SD2,HD1 Relating to Healthcare Hearing scheduled for Wednesday, March 17, 2010 @ 2:00 PM, Conf Rm 325

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Sincerely. КМСРМ

By:	KENNETH MACHADO	CRT.	Ewarseach
	print name	credentials	city of residence

Date: March 16, 2010

RE: SB2600,SD2,HD1 Relating to Healthcare Hearing scheduled for Wednesday, March 17, 2010 @ 2:00 PM, Conf Rm 325

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Thank you for the opportunity to testify and reiterate my support of this legislation which I believe is long overdue.

HMC - WEST credentials workplace signature

WALKE MATTHEWS, MID, HONOLULU print name credentials city of residence By:

Date: March 16, 2010

RE: SB2600, SD2, HD1 Relating to Healthcare Hearing scheduled for Wednesday, March 17, 2010 @ 2:00 PM, Conf Rm 325

Chairs and Committee Members,

I strongly support the intent of SB2600SD2HD1 which creates licensing and regulatory standards for respiratory therapists. Enacting this legislation will:

- 1) Protect the health and safety of persons in need of respiratory care services by requiring that respiratory therapists be credentialed and licensed in order to practice in the State of Hawaii.
- Hawaii will no longer be a safe haven for respiratory therapists who due to unscrupulous acts have lost their license and ability to work elsewhere.
- Lastly, in an effort to meet budget constraints, we acknowledge that the cost for licensing will be borne by the licensees. We also agree to forgo the initial request for an independent board and instead place the administration of this new chapter under the auspices of the director of Commerce and Consumer Affairs who will appoint an advisory committee composed of practicing respiratory therapists to assist with its implementation...

Thank you for the opportunity to testify and reiterate my support of this legislation which I believe is long overdue.

Sincerely.

<u>allace</u> Matth<u>an</u> M-N KAN MED signature credentials workplace CENTER CESTER AND CHILDLEN

WENEED THIS - IT IS AROUTTIME!

By:

Brigitte McKabe RN Qira

Date: March 16, 2010

SB2600.SD2.HD1 Relating to Healthcare RE: Hearing scheduled for Wednesday, March 17, 2010 @ 2:00 PM, Conf Rm 325

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Brigitte Hillele Brigitte Hillele Unver Nuise Executive Rapidlami Mcdixal Cauter at Pale House

- To: House Committee on Consumer Protection and Commerce Rep. Robert N. Herkes, Chair Rep. Glenn Wakai, Vice Chair
- By: <u>Amay 0H5UKa</u>, <u>RET- NPS</u>, <u>Hondulu</u> print name credentials city of residence

RE: SB2600,SD2,HD1 Relating to Healthcare Hearing scheduled for Wednesday, March 17, 2010 @ 2:00 PM, Conf Rm 325

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Sincerely,

<u>RRT-NPS</u> credentials

piulani MCWC workplace

Grace Quidilla, RN, MSN, CCRN (Alea, HI) By:

- Date: March 16, 2010
- RE: SB2600,SD2,HD1 Relating to Healthcare Hearing scheduled for Wednesday, March 17, 2010 @ 2:00 PM, Conf Rm 325

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Opudilla, Nurse Educator, Kaptolani Medical Genter at Pali Momi

To:	House Committee on Consumer Protection and Commerce
	Rep. Robert N. Herkes, Chair Rep. Glenn Wakai, Vice Chair
	Licht Aletti Aletter Alee Alette

By: city of residence credentiais

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Sincerely, signature credentials workplace

m. Saito RRT Bv: credentials

Date: March 16, 2010

RE: SB2600,SD2,HD1 Relating to Hiealthcare Hearing scheduled for Wednesday, March 17, 2010 @ 2:00 PM, Conf Rm 325

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RRI

signature

credentials

workplace

P,2/11

Scotka, <u>RET-NPS.</u> Kailua Jackie Bv:

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workplace @ Pale Mani the Scotta F-WPS credentials signature

FAX: 8084854392 MAR-16-2010 07:27AM

To: House Committee on Consumer Protection and Commerce Rep. Robert N. Herkes, Chair Rep. Glenn Wakai, Vice Chair By: HENNEH ENN , Con HApola, HI name credentials city of residence

Date: March 16, 2010

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TANE F. TANSIONGCO MILILIANI, HI MT(ASCP) By:

Date: March 16, 2010

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me 7. Janiz MTCHSCP) MILILANI, HI

By: city of res credentials

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FAX: 8085377832

ID:REP WAKAI

Hawaii Honolulu Wan-peckham Bv: credentials

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Sincerely. signature credentials

Jamandra <u>, L.F.T.</u>, Honolulu credentials city of residence By:

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credentials

KAPIOLANI WOMONECHILL. Workplace

KONES 1/2 By: TECHER: city of residence credentials print name

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signature credentials workplace

F-222

To: House Committee on Consumer Protection and Commerce Rep. Robert N. Herkes, Chair Rep. Glenn Wakai, Vice Chair

By:

<u>Уім. Јоусе</u> ptint name

credentials city of residence

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Workplace For Women + chu ature credentials