



‘Ahahui o nā Kauka

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February 25, 2016

Committee on Ways and Means

Sen. Jill Tokuda, Chair

Sen. Donovan Dela Cruz, Vice Chair

Friday, February 26, 2016. 9:35 AM

Conference Room 211

State Capitol

415 South Beretania Street

Senate Bill 3017-Testimony in Support

The ‘Ahahui o nā Kauka, Association of Native Hawaiian Physicians, strongly supports SB3017. Native Hawaiians suffer from large health disparities.

Many live in rural communities where there is a huge shortage of primary care physicians. The UH Family Medicine Residency has trained a number of Native Hawaiian family physicians. Many of them have gone into practice in rural communities, especially on the neighbor islands. It is a well-known fact that physicians tend to stay and practice where they do their residencies. We need to not only support the family medicine residency but also encourage its expansion. Currently they are only training 6 new residents a year. If we are to tackle the shortage of primary care doctors in this state, we need to increase the number of primary care physicians trained here in Hawai‘i.

That means increasing funding support for training programs such as the UH Family Medicine Residency. Family medicine training is the perfect fit for our critical shortage areas, especially on the neighbors islands, because it provides comprehensive training in both pediatric and adult medicine. If we want residents to practice in rural areas, they need to have exposure to those areas and develop relationships with those communities before they graduate. We urge you to support SB3017 which will increase support for the UH Family Medicine Residency, allow for increased teaching Faculty and more training opportunities in rural communities.

Respectfully submitted,

Martina Kamaka, MD

President, ‘Ahahui o nā Kauka

THE SENATE COMMITTEE ON WAYS AND MEANS

Friday, February 26, 2016

9:35 a.m.

Room 211

TESTIMONY IN SUPPORT OF SB 3017

Chair Tokuda, Vice Chair Dela Cruz, and Members of the Committees:

My name is Celina Hayashi and I am a medical student at the University of Hawai'i John A. Burns School of Medicine. At John A. Burns School of Medicine, we are committed to improving the health and well-being of the people of Hawai'i as well as increasing the number of Hawai'i-born students who become doctors.

I am writing in **strong support** of SB 3017 which would provide funding for the graduate medical education (GME) program of the John A. Burns School of Medicine (JABSOM). This measure would help to alleviate the shortage of primary care physicians in Hawai'i and in particular in rural Oahu and on the neighbor islands.

I have personally experienced this physician shortage as I am from the island of Maui and I know first-hand that we need more doctors who are competent, culturally aware, and compassionate. It is my desire to continue my medical education and training in Hawai'i so that I may provide the best care for this unique population.

Hawaii already faces a shortage of physicians, especially primary care physicians. This number has been steadily rising over the years and is predicted to increase. However, it has been shown that 80% of doctors who receive their medical degree and their GME training in Hawaii stay in Hawaii to practice.

Through its GME program, together with Hawaii's teaching hospitals, JABSOM puts 240 doctors to work every year as physician trainees. As they train, these residents care for patients under the supervision of JABSOM's clinical staff. Funding the GME program would enable JABSOM to train more doctors, which ensures that Hawaii grows new doctors who will train and remain in practice in the state.

We urge you to pass SB 3017. Thank you for the opportunity to provide testimony.

THE SENATE COMMITTEE ON WAYS AND MEANS

Friday, February 26, 2016

9:35 a.m.

Room 211

TESTIMONY IN SUPPORT OF SB 3017

Chair Tokuda, Vice Chair Dela Cruz, and Members of the Committees:

My name is Emily Jones and I am a first-year medical student at the John A. Burns School of Medicine.

I am writing in **strong support** of SB 3017 which would provide funding for the graduate medical education (GME) program of the John A. Burns School of Medicine (JABSOM). This measure would help to alleviate the shortage of primary care physicians in Hawaii and in particular in rural Oahu and on the neighbor islands.

Hawaii faces a shortage of physicians, especially primary care physicians. This number has been steadily rising over the years and is predicted to increase. However, it has been shown that 80% of doctors who receive their medical degree and their GME training in Hawaii stay in Hawaii to practice.

I returned home to Hawai'i to attend medical school with the goal of becoming a primary care physician. The curriculum at JABSOM is designed to prepare its graduates to practice effectively in Hawai'i's unique multicultural environment, and I feel blessed for the opportunity to begin my training here. I support SB 3017 because it would allow more of my classmates to stay and continue post-graduate training here, thus ensuring that more of Hawai'i's healthcare force is adequately prepared to provide the highest-quality culturally competent care to the people of Hawai'i.

Through its GME program, together with Hawaii's teaching hospitals, JABSOM puts 240 doctors to work every year as physician trainees. As they train, these residents care for patients under the supervision of JABSOM's clinical staff. Funding the GME program would enable JABSOM to train more doctors, which ensures that Hawaii grows new doctors who will train and remain in practice in the state.

We urge you to pass SB 3017. Thank you for the opportunity to provide testimony.

THE SENATE COMMITTEE ON WAYS AND MEANS

Friday, February 26, 2016

9:35 a.m.

Room 211

TESTIMONY IN SUPPORT OF SB 3017

Chair Tokuda, Vice Chair Dela Cruz, and Members of the Committees:

My name is Erin Roberts and I am a first year medical student at the John A. Burns School of Medicine (JABSOM).

JABSOM's curriculum is holistic and multifaceted, fostering not only scientific and clinical learning, but also teaching the intangible nuances of patient care. Through the Problem-Based Learning (PBL) curriculum, we are taught from the first day to view each patient as a unique individual, and to treat each individual with respect, empathy, and compassion. Our multilayered and well-rounded curriculum at JABSOM develops a unique and diverse learning experience that prepares us well to provide care for the rich, multicultural environment that is completely unique to Hawaii.

I am writing in **strong support** of SB 3017 which would provide funding for the graduate medical education (GME) program of the John A. Burns School of Medicine. This measure would help to alleviate the shortage of primary care physicians in Hawaii and in particular in rural Oahu and on the neighbor islands.

Hawaii already faces a shortage of physicians, especially primary care physicians. This number has been steadily rising over the years and is predicted to increase. However, it has been shown that 80% of doctors who receive their medical degree and their GME training in Hawaii stay in Hawaii to practice.

Through its GME program, together with Hawaii's teaching hospitals, JABSOM puts 240 doctors to work every year as physician trainees. As they train, these residents care for patients under the supervision of JABSOM's clinical staff. Funding the GME program would enable JABSOM to train more doctors, which ensures that Hawaii grows new doctors who will train and remain in practice in the state.

We urge you to pass SB 3017. Thank you for the opportunity to provide testimony.

Senator Jill N. Tokuda, Chair
Senator Donovan M. Dela Cruz, Vice Chair
Committee on Ways and Means

Kelli Kaneta

Thursday, February 25, 2016

Support for S.B. No. 3017, Relating to Health

As a medical student, I am testifying in support of S.B. No. 3017, Relating to Health, which would expand the University of Hawaii John A. Burns School of Medicine (UH JABSOM), Family Medicine Residency Program, and develop new accredited family health centers in association with teach hospitals in our state.

Hawaii is currently experiencing a physician shortage. Moreover, nearly 1/3 of our active physicians are over the age of 60 and are therefore soon exiting the workforce and further contributing to the physician shortage in our state. In addition to a physician supply problem, there also exists an increased demand for physicians. Driven by population growth, aging, and the prevalence of chronic diseases, Hawaii will require additional primary care providers to meet our state's rising demand for primary care specialties.

According to the 2012 Association of American Medical Colleges (AAMC), Hawaii ranked 5th in the percentage of physicians retained from undergraduate medical education. In fact, 52.8% of graduates from UH JABSOM stay in Hawaii to complete their residency training. Furthermore, the study found that 85.8% of physicians who both attended medical school and residency training in Hawaii, stayed to practice in Hawaii. Compared to the rest of the country, Hawaii had the number one highest retention rate in this metric. This suggests that if JABSOM students choose to continue in Hawaii for their residency training, they will end up joining Hawaii's workforce as physicians.

In expanding the Family Medicine residency program, we are investing in improved access to care for local patients, and overall, the health of our state. Financial support of this measure will enable the UH JABSOM Family Medicine Residency Program to increase its number of resident positions. And as research suggests, the vast majority of physicians graduating from this local residency program will continue to work in Hawaii as physicians, thereby addressing our state's physician shortage. I urge the committee to pass S.B. No. 3017. Thank you for this opportunity to testify.

From: mailinglist@capitol.hawaii.gov
To: [WAM Testimony](#)
Cc: kevin_kato@hotmail.com
Subject: Submitted testimony for SB3017 on Feb 26, 2016 09:35AM
Date: Thursday, February 25, 2016 7:36:51 PM

SB3017

Submitted on: 2/25/2016

Testimony for WAM on Feb 26, 2016 09:35AM in Conference Room 211

| Submitted By | Organization | Testifier Position | Present at Hearing |
|--------------|--------------|-----------------------|-----------------------|
| Kevin Kato | Individual | Support | No |

Comments: Currently we have critical shortage of physicians on Maui. Anything that may increase physician numbers would be helpful.

Please note that testimony submitted less than 24 hours prior to the hearing, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

Do not reply to this email. This inbox is not monitored. For assistance please email webmaster@capitol.hawaii.gov

Lee Buenconsejo-Lum, MD, FAAFP
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THE SENATE COMMITTEE ON WAYS AND MEANS

Friday, February 26, 2016
9:35 a.m.
Room 211

TESTIMONY IN SUPPORT OF SB 3017

Honorable Chair Tokuda, Vice Chair Dela Cruz, and Members of the Committee:

My name is Lee Buenconsejo-Lum. I am a local girl from Wahiawā, a proud graduate of Leilehua High School (public school) who went to California for college, was able to come back to JABSOM for Medical School in 1990 and chose to stay here for my Family Medicine Residency training in 1994 – the first year the UH program opened. Although I had opportunity to do both medical school and residency training at very established and highly regarded programs on the mainland, I chose to come back and stay home. I took a chance on a brand new residency program because I knew that training here would expose me to the colleagues, network and community that I would need to understand if I wanted to make the most difference. I chose to stay on as faculty with JABSOM in 1997 in hopes of training more excellent Family Physicians for Hawai'i and in particular, to serve the rural, underserved, HPSA and minority communities in Hawai'i. For more than 10 years, I served as the Residency Program director. However, I am offering this testimony as a private citizen, on behalf of many patients who don't have good health or health care. Fifteen years ago, I was also the founding President of the O'ahu Rural Health Association – which was unfortunately short-lived, but nonetheless highlighted significant barriers to primary and specialty health care for the populations in Wahiawā/North Shore, Ko'olau Loa, Wai'anae and most of geographic Ko'olau Poko). Today, that shortage is worse, with only one private practice taking new Medicaid, Medicare or uninsured patients. The rest of the private practices in Central O'ahu/North Shore are closed to new patients and/or no longer participate in Quest/Medicaid/Medicare programs. The community health centers have surpassed maximum capacity and/or these patients have inadequate means to get to the community health centers with space. And so they do not have a primary care physician, do not get preventive services or cancer screenings, do not have access to the proper medications and counseling that could prevent or ameliorate their chronic disease, obesity, heart and kidney disease and diabetes. These patients show up in the emergency rooms severely ill, have repeated hospitalizations and, in many cases end up on dialysis or prematurely dead.

I am therefore writing in **strong support** of SB 3017 which would provide funding for the graduate medical education (GME) program of the John A. Burns School of Medicine (JABSOM). This measure would help to alleviate the shortage of primary care physicians in Hawai'i and in particular in rural O'ahu and on the neighbor islands.

Hawai'i already had a maldistribution of primary care physicians when I was in training in the late 1990s. For the first six years of the UH Family Medicine Residency Program, we had a

mandatory rural rotation in Hilo. That was also when the neighbor island rotations for medical students (on their 3rd year Family Medicine clerkship) started. During those early years, many JABSOM students and family medicine residents were very excited to work and learn more about the community and practice on a neighbor island. From those early years, 1 graduate is still in Hilo and another works part-time in North Hawai'i Island (as well as Moloka'i). For a variety of reasons, there was a hiatus in the neighbor island rotations for about 7 years. For the past 7 years, we have again had mandatory rotations in Hilo, but also have grown the neighbor island electives to include Kaua'i and Maui. In the past 7 years, we have had 6 graduates go to the Big Island to practice (Hilo, Waimea, Puna) and 5 currently reside there. We also have 2 graduates on Kaua'i, 3 on Maui and 2 that were on Lana'i for several years. All of our graduates who live and work on a neighbor island did 2 or more of their rotations on those islands while they were in residency training. In our current trainees, we anticipate 1 and perhaps 2 to move to Hilo later this summer when they graduate. The following year, we anticipate at least 1 to work on Maui. Many of our graduates also work with underserved, uninsured or underinsured populations in their practices, which includes a substantial number in several of the FQHC / Community Health Centers throughout the State. 70% of our residency program graduates and many other JABSOM graduates open their practices to medical students in their 3rd year. Many of the JABSOM students from the neighbor islands request their 3rd year Family Medicine rotations to be on a neighbor island so that they can learn more, learn from community physicians they grew up with ... all in hopes of returning to practice there one day, in whatever specialty they choose.

JABSOM works hard to recruit the brightest 'local' kids to JABSOM. Particular outreach is made to the Native Hawaiian, Filipino and neighbor island students because the national and local data have proven that the best and only effective way to recruit and retain physicians in rural areas are to (1) select them from that rural community and (2) train them (in medical school and especially in residency) in that rural community. As JABSOM increases the proportion of students hailing from neighbor islands or rural/underserved/disadvantaged communities on O'ahu, we need more space in our residency program to train them. For the past 15 years, we have not had enough residency positions to match the JABSOM students choosing Family Medicine as a specialty who wanted to stay in Hawai'i to train. For this year's recruiting season, we had more than 11 JABSOM and mainland medical school Hawai'i students who really want to train with us. We have only 6 slots. When our Hawaii students train on the mainland, we run the risk of their not returning home ... or not for many years.

Mahalo for seriously considering SB 3017. The return on the State's investment in graduate medical education in Family Medicine is hard to enumerate precisely ... but these physicians will stay in Hawaii to practice and serve the people. They, in turn, will inspire the next generation of rural local kids to pursue college, health professions or other science-related fields. This in turn will help slow the brain drain – Hawai'i students who go to college on the mainland and stay on the mainland to live and work. Thank you for the opportunity to provide testimony.

THE SENATE COMMITTEE ON WAYS AND MEANS

Friday, February 26, 2016

9:35 a.m.

Room 211

TESTIMONY IN SUPPORT OF SB 3017

Chair Tokuda, Vice Chair Dela Cruz, and Members of the Committees:

My name is Nicole Mahealani Lum, and I am a 2nd Year UH Family Medicine Resident. I am writing in **strong support** of SB 3017, which would provide funding for the graduate medical education (GME) program of the John A. Burns School of Medicine (JABSOM).

I graduated from Andrew Taylor Still University School of Osteopathic Medicine in Arizona, and while my experience there was invaluable, I was very fortunate to be able to return home to Hawaii to continue my medical training as a resident in the Family Medicine program. When comparing my education in Arizona with my current training in Hawaii, I realize that it is much more relevant and meaningful both for myself and my patients that I am able to work within the community that I ultimately wish to serve in the future; by training here I am fulfilling my personal mission to serve other disadvantaged and Native Hawaiian families like mine. Unfortunately for some physicians who have a similar personal mission, there are only 6 open positions per year in the UH Family Medicine program. In the end, many physicians end up practicing wherever they ended up training, such as on the mainland, and they may not always come back to practice in Hawaii, thus widening the physician shortage. SB 3017 could help alleviate the shortage of primary care physicians in Hawaii by expanding the Family Medicine program.

SB 3017 would particularly alleviate the shortage in rural Oahu and on the neighbor islands. In the 2nd and 3rd years of the Family Medicine program, we are sent to one of the neighbor islands for a one-month rural rotation. I recently returned from my rotation in Kauai, and because of this experience I am now strongly considering practicing primary care in the Native Hawaiian Health System at Ho'ola Lahui. I am originally from Aiea, but because of the UH Family Medicine program, my scope of understanding of underserved Hawaii has broadened, and I now wish to take my passion and skills to one of our neighbor islands. I have heard similar testimonies from my co-residents who had the opportunity to rotate in Hilo and Maui.

Hawaii already faces a shortage of physicians, especially primary care physicians. This number has been steadily rising over the years and is predicted to increase. However, it has been shown that 80% of doctors who receive their medical degree and their GME training in Hawaii stay in Hawaii to practice. Through its GME program, together with Hawaii's teaching hospitals, JABSOM puts 240 doctors to work every year as physician trainees. As they train, these residents care for patients under the supervision of JABSOM's clinical staff. Funding the GME program would enable JABSOM to train more doctors, which ensures that Hawaii grows new doctors who will train and remain in practice in the state.

We urge you to pass SB 3017. Thank you for the opportunity to provide testimony.