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OFFICE OF THE DIRECTOR
DEPARTMENT OF COMMERCE AND CONSUMER AFFAIRS

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Testimony of the Department of Commerce and Consumer Affairs

**Before the
House Committee on Finance
Thursday, March 30, 2023
3:00 p.m.**

**On the following measure:
S.B. 674, S.D. 1, H.D. 1, RELATING TO THE INTERSTATE MEDICAL LICENSURE
COMPACT**

WRITTEN TESTIMONY ONLY

Chair Yamashita and Members of the Committee:

My name is Esther Brown, and I am the Complaints and Enforcement Officer of the Regulated Industries Complaints Office (RICO), which is an agency within the Department of Commerce and Consumer Affairs (Department). RICO **offers comments** on provisions of the measure that may impact RICO's enforcement authority, practice or daily operations.

The bill authorizes the Governor to enter into the pre-existing Interstate Medical Licensure Compact (Compact) on behalf of the State of Hawaii. The Compact allows the licensing boards of member states to review and make determinations on applications for an "expedited license" from qualifying physicians. The physicians deemed eligible for an "expedited license" by the board of a member state may then complete the Compact's

registration process which includes payment of applicable fees. See SB 674, S.D. 1, H.D.1 (“H.D.1”), Section 5, which begins on page 8, line 10.

RICO enforces the licensing laws of certain professional and trade industries in the state by investigating and prosecuting misbehaving licensees who fall within the purview of the Hawaii Medical Board (Board). RICO’s prosecutorial effort results in disciplinary recommendations that are presented to the Board for final action. The Board, therefore, sets industry policy and standards which are then applied to regulate the industry through the issuance, denial or discipline of licenses that grant physicians a privilege to practice in our state. As the Board’s investigator and prosecutor, therefore, RICO defers to and supports fully the Board’s position on the measure’s policy, administration and implementation.

1. Clarity. Save for a few miscellaneous issues identified at the end of this testimony, the language of the measure appears to be clear in its standards and expectations.

2. Notice by a licensee to the regulator. A key to prompt and effective enforcement is the ability to find and correctly identify licensees who may have committed acts of professional misconduct in our state. Notification to the regulator is even more important when a licensee is not domiciled in the state and has the ability to travel between different jurisdictions to practice medicine on a multi-state privilege. A regulatory body, therefore, must know about and be able to contact persons in or outside of the state who are or intend to practice medicine here. The measure meets this important consideration by requiring physicians interested in an “expedited license” to make application to the Board, as well as complete the Compact’s registration process. See H.D.1, at page 8, lines 15 – 16, and page 10, lines 1 – 5.

3. Fees. Sufficient resources are necessary to enforce a regulatory scheme, and the current regulatory scheme for physicians in Hawaii is funded almost exclusively through license fees that are paid initially and at renewal. The measure supports good enforcement by authorizing the imposition of license fees per sections (c) and (d), which begin on page 10, at line 1.

4. Definite period. To protect consumers, licenses are valid for a definite period of time only so that, at renewal, licensees can provide the regulatory authority with updated identification and contact information at a minimum. At renewal, licensees make affirmative assurances too of continued good behavior including self-disclosing misdeeds. The process also assures that physicians who are practicing in Hawaii are competent and current still through having completed continuing education courses. In addition, the renewal process results in prompt referrals by the Board, to RICO, of situations that may involve potential misconduct by a licensee. This measure meets this important consumer protection factor by limiting the expedited license to a definite period of time after which it will automatically expire unless affirmatively renewed. See H.D.1, paragraph (e) on page 10, lines 13 – 16, and section 7 of the measure which begins on page 11, line 10.

5. Respecting the privacy rights of practitioners under investigation and patient medical records. Unlike other healthcare interstate compact bills that have been introduced this Session, this measure is unique in that it does *not* appear to compel industry regulators to possibly ignore Hawaii law on the privacy of licensees under investigation for fitness to practice, or the confidentiality of patient treatment records.

Consistent with the current practice that is in place here in Hawaii, the measure requires the Board to only disclose public actions or complaints to the governing body per section (b) on page 13, lines 5 – 8; the measure makes discretionary the reporting of certain non-public matters per page 13, section (d), lines 12 – 14; and the measure gives local regulators the option to choose to enter into joint investigations with other states and whether to share investigative information with them, per section 9 of the measure on page 14 at line 9 (. . . a member board “may” participate . . .), and page 14, line 14 (. . . boards “may” share . . .). Read together, these provisions within the measure seem respectful of the significant privacy interest that physicians in Hawaii have when they are under investigation for fitness to have or maintain a license, and the confidentiality of patient treatment records.

6. Miscellaneous Issue – financing of governing body. Though we do not fully understand the implication of these, we note for the Committee that:

a.) The governing body under the Compact has the ability to “levy on and collect an annual assessment from each member state” to cover operations and activities, see page 23, section (a), line 13; and

b.) With a State’s permission, the governing body can also pledge the credit of any member state, see page 24, section (c), lines 4 - 6.

7. Miscellaneous Issue – ambiguity re indemnification of Hawaii’s regulatory employees. The measure protects the governing body and its hired or retained agents and employees through immunity, limitation of liability, defend/indemnify and “held harmless” provisions that run from page 25, line 6, to page 27, line 15, but on its face does not seem to cover the regulatory entities in Hawaii should a Hawaii employee attempt to comply with mandatory provisions or rules or bylaws of the Compact that could now, or in the future, conflict with provisions of state law.

Thank you for the opportunity to testify on this bill.

Testimony of the Hawaii Medical Board

**Before the
House Committee on Finance
Thursday, March 30, 2023
3:00 p.m.
Conference Room 308 and Videoconference**

**On the following measure:
S.B. 674, S.D. 1, H.D. 1, RELATING TO THE INTERSTATE MEDICAL LICENSURE
COMPACT**

Chair Yamashita and Members of the Committee:

My name is Ahlani Quiogue, and I am the Executive Officer of the Hawaii Medical (Board). The Board supports and offers comments on this bill.

The purposes of this bill are to: (1) adopt the Interstate Medical Licensure Compact (Compact); (2) permit the Department of Commerce and Consumer Affairs (DCCA) to adopt rules to implement and administer the Compact; (3) authorizes DCCA to conduct criminal history record checks on applications for licensure under the Compact; and (4) appropriate funds.

The Board supports the Compact as it will increase access to health care – particularly for patients in underserved or rural areas. The Compact will increase the ability for physicians to practice across participating jurisdictions, but also ensure that the Board is still able to meet its legal responsibility to issue licenses to qualified, safe, and competent physicians only.

It is important to note that this Compact will also allow the Board to continue to impose fees, thereby allowing it and the Regulated Industries Complaints Office to maintain its current operations and additional requirements of this measure as provided in section 6. Further, the Compact allows the Board to maintain its current renewal requirements as outlined in section 7 of this bill.

The Board does recognize the huge undertaking of this measure and, thus, in consultation with the Professional and Vocational Licensing Division (Division), respectfully requests the following to ensure proper implementation:

1. General fund appropriation to allow the Division:

- (a) To establish, recruit, and hire an office assistant V (OA-V) to process Compact-related license applications expeditiously. The sum of \$67,876 or so much thereof may be necessary to fund this position.
 - (b) To establish, recruit, and hire a regulatory boards and commissions administrative assistant I (RBCAA I) position. The sum of \$99,896 or so much thereof may be necessary to fund this position.
 - (c) To establish, recruit, and hire a secretary II position. The sum of \$73,406 or so much thereof may be necessary to fund this position.
 - (d) To make the appropriate updates to its internal database. In consultation with the Division and its vendor, the required updates may take upwards of 500 support hours. The updates would require the creation of an API to allow the Board to share information with the Commission; create new license types specific to Compact licensure; and the development of the appropriate requirements if the Board is designated as the State of Principal License, and not just the issuing state of licensure. These hours would be added onto the already extensive daily work of the Division's developer, program analyst, and others outside of the division. Note that these updates would require additional support and maintenance outside of the budget request being made through Department of Commerce and Consumer Affairs' request. The sum of \$75,000 or so much thereof may be necessary to fund this request.
2. Minimally, a delayed implementation date of at least two (2) years to ensure that:
- (a) In line with the request above, the Division would need the appropriate time to establish, recruit, and hire an OA-V, RBCAA-I, and secretary II.
 - (b) The appropriate updates are made to the Division's database.
 - (c) The Board receives the proper authorization from the FBI to obtain fingerprint based criminal history record information. This will also

ensure that its current staff receive the proper training, certifications,
and approval to pull this information.

Thank you for the opportunity to testify on this bill.



**Testimony to the House Committee on Finance
Thursday, March 30, 2023; 3:00 p.m.
State Capitol; Conference Room 308
Via Videoconference**

RE: SENATE BILL NO. 0674, HOUSE DRAFT 1, RELATING TO THE INTERSTATE MEDICAL LICENSURE COMPACT.

Chair Yamashita, Vice Chair Kitagawa, and Members of the Committee:

The Hawaii Primary Care Association (HPCA) is a 501(c)(3) organization established to advocate for, expand access to, and sustain high quality care through the statewide network of Community Health Centers throughout the State of Hawaii. The HPCA **SUPPORTS** Senate Bill No. 0674, House Draft 1, RELATING TO THE INTERSTATE MEDICAL LICENSURE COMPACT.

By way of background, the HPCA represents Hawaii's Federally Qualified Health Centers (FQHCs). FQHCs provide desperately needed medical services at the frontlines to over 150,000 patients each year who live in rural and underserved communities. Long considered champions for creating a more sustainable, integrated, and wellness-oriented system of health, FQHCs provide a more efficient, more effective and more comprehensive system of healthcare.

This measure, as received by your Committee, would adopt the Interstate Medical Licensure Compact (Compact) to establish a comprehensive process that complements the existing licensing and regulator authority of state medical boards and provides a streamlined process to allow physicians to become licensed in multiple states, thereby enhancing the portability of a medical license while ensuring patient safety. Specifically, this bill would also:

- (1) Authorize the Department of Commerce and Consumer Affairs to adopt rules;
- (2) Appropriate an unspecified amount of general funds for fiscal years 2023-2024, and 2024-2025;
- (3) Clarify the extent of civil liability on the Interstate Commission's Executive Director and employees; and
- (4) Take effect on December 31, 2050.

The State of Hawaii is experiencing a severe shortage of health care professionals in the workforce, especially in rural areas. Recent studies note that the current shortage of physicians is at 20% of the total full-time equivalent positions throughout the State. The shortage is especially severe in the fields of primary care, infectious diseases, colorectal surgery, pathology, general surgery, pulmonology, neurology, neurosurgery, orthopedic surgery, family medicine, cardiothoracic surgery, rheumatology, cardiology, hematology/oncology, and pediatric subspecialties of endocrinology, cardiology, neurology, hematology/oncology, and gastroenterology.

This shortage became even more evident during the COVID-19 pandemic as health care facilities required staff to work consecutive double- and triple-shifts to meet the ever present demand. The situation became so pronounced that health care workers from other states had to be brought in to keep our health care facilities open.

To facilitate this influx of health workers, DCCA scrambled to permit these workers under Hawaii's professional licensure laws. In particular, the huge number of nurses brought in to Hawaii forced DCCA to shift employees from other Boards to assist the Board of Nursing to permit these nurses to work here. Yet despite these heroic efforts, it took much time and resources for these nurses to have their professional licenses verified through endorsement. So instead of treating patients, these nurses had to wait.

This bill seeks to streamline the process for physicians by adopting a standard that is utilized by multiple states in the United States. Once these qualifications are met in one state, that physician could immediately get to work in another state that adopts that standard should that physician relocate to the participating state. This will further allow our nation's limited physician stock to mobilize where there is the greatest need.

Accordingly, the HPCA urges your favorable consideration of this important measure.

Thank you for the opportunity to testify. Should you have any questions, please do not hesitate to contact Public Affairs and Policy Director Erik K. Abe at 536-8442, or eabe@hawaiiipca.net.



March 30, 2023

The Honorable Kyle T. Yamashita
Chair, Hawai'i House Committee on Finance
Hawai'i State Capitol
415 South Beretania Street
Honolulu, HI 96813

The Honorable Lisa Kitagawa
Vice Chair, Hawai'i House Committee on Finance
Hawai'i State Capitol
415 South Beretania Street
Honolulu, HI 96813

Dear Chair Yamashita and Vice Chair Kitagawa,

On behalf of the one-in-ten individuals in Hawai'i living with one of the over 7,000 known rare diseases, the National Organization for Rare Disorders (NORD) thanks you for your consideration of SB 674 during today's hearing. SB 674, if passed, would allow Hawai'i to join the Interstate Medical Licensure Compact (IMLC), an agreement between participating U.S. states to work together to significantly streamline the medical licensing process for physicians who want to practice in multiple states, therefore making it possible to improve patient access to medical specialists using telehealth. NORD urges you to support SB 674 and pass it favorably out of this Committee.

NORD is a unique federation of voluntary health organizations dedicated to helping people with rare diseases and assisting the organizations that serve them. NORD is committed to the identification, treatment, and cure of rare disorders through programs of education, advocacy, research, and patient services. We believe that all individuals with a rare disease should have access to quality and affordable health care that is best suited to meet their medical needs.

In the United States, a rare disease is defined as any disease, disorder, illness, or condition affecting fewer than 200,000 people.¹ Unfortunately, there are often very few specialists who have expertise in any given rare disease. As a result, patients frequently travel significant distances, often across state lines, to see a medical specialist qualified to provide appropriate treatment for their condition. In a survey of rare disease patients conducted by NORD in 2019, 40% of respondents reported traveling 60 miles or greater to see a medical specialist with expertise in their rare condition.²

While rare disease patients faced serious barriers to care even before the COVID-19 pandemic, these barriers increased significantly within the rare disease community as the pandemic shocked the U.S. and global health care systems. In a survey of rare disease patients and caregivers conducted by NORD in the summer of 2020, 79% of respondents reported experiencing a canceled medical appointment due to COVID-19.³ Fortunately, 88% of survey respondents reported being offered a telehealth appointment, and 92% who accepted the offer of a telehealth visit reported having a positive experience with telehealth.⁴ Looking ahead, many patients and providers have signaled that they appreciate and have



benefitted from the expanded use of telehealth and want to see its permanent integration into our health care system.

As mentioned previously, rare disease patients are often required to travel long distances, including across state lines, to access necessary and appropriate medical care. Currently, many state's licensure laws create barriers to care by limiting providers ability to see patients across state lines. This not only complicates access for patients, but also creates additional burdens for clinicians who want to see out-of-state patients who lack access to appropriate care closer to home. This is especially relevant for people with rare disorders living in Hawai'i, as many are forced to travel by plane to see providers based in other states. This barrier to care can prove insurmountable for some due to the significant costs associated with air travel and lodging, among other expenses.

SB 674 would make it easier for providers in other states to obtain licensure in Hawai'i, allowing those providers to see patients located in Hawai'i via telehealth. This would not only expand access to out-of-state medical specialists for individuals with diagnosed rare diseases living in Hawai'i, but also to diagnostics, potentially cutting down the often-extensive diagnostic odyssey patients go through to obtain an accurate diagnosis. In passing SB 674, Hawai'i would join 37 other U.S. states, the District of Columbia, and the Territory of Guam as participants in the Interstate Medical Licensure Compact.

Once again, on behalf of the Hawai'i rare disease community, we thank you for your consideration of SB 674 and urge its swift passage. For any questions, please feel free to contact Allison Herrity at aherrity@rarediseases.org.

Sincerely,

Allison Herrity
Policy Analyst
National Organization for Rare Disorders



February 10, 2023

Hawai'i Senate
ATTN: Committee on Health and Human Services
415 South Beretania Street
Honolulu, HI 96813

Re: SB 674: Relating to the Interstate Medical Licensure Compact

On behalf of the EveryLife Foundation for Rare Diseases, we are pleased to submit testimony in support of S.B. 674 *Relating to the Interstate Medical Licensure Compact*. The EveryLife Foundation is a nonprofit, nonpartisan organization dedicated to empowering the rare disease patient community to advocate for impactful, science-driven legislation and policy that advances the equitable development of and access to lifesaving diagnoses, treatments, and cures.

During the pandemic, a Hawai'i executive order permitted licensed physicians to meet with patients via telehealth without an in-person consultation or a prior existing physician-patient relationship. Though this executive order is no longer in effect, the Hawai'i legislature passed S.B. 970 in 2021 which authorized the establishment of a physician-patient relationship via telehealth if the physician is licensed to practice in Hawai'i. These executive and legislative actions granted patients greater access to care via telehealth.

By joining the Interstate Medical Licensure Compact, Hawai'i can complement its previous efforts to increase patient access to expert care via telemedicine by further streamlining the licensing process for physicians. The Interstate Medical Licensure Compact reduces duplicative paperwork for physicians to a single application while retaining states' rigorous medical licensing standards. This streamlined process provides an expedited pathway to licensure for qualified physicians and in turn increases patient access to out-of-state providers. This increased access would be extremely beneficial for patients with complex medical conditions who are unable to travel to receive care, especially specialty care that is often outside their state.

Expanding access and limiting the cost burden to reach expert care will help ensure patients with one or more of the estimated 10,000 rare diseases can receive the expert clinical care they need. A 2019 survey found that 39% of rare disease patients had to travel more than 60 minutes for care. In some instances, approximately 17% of survey respondents, rare disease families face the need to permanently relocate just to be closer to the few experts for their disease.¹

Additionally, limited access to specialty care and financial constraints to travel long distances commonly contribute to delayed diagnoses for rare disease patients. Unfortunately, the average time to receive a diagnosis from the first rare disease symptom is 6.3 years after visiting about 17 healthcare professionals,

¹ The National Organization for Rare Disorders. November 2020. [Barriers To Rare Disease Diagnosis Care And Treatment In The US: A 30-Year Comparative Analysis.](#)

according to the National Economic Burden of Rare Disease Study.² Reasons for this lengthy diagnostic period include limited access and difficulty traveling to expert providers often outside of a patient's insurance network and geographic region.

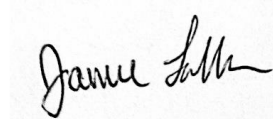
Lastly, patients and providers alike agree that telehealth across state lines is important for patient access and treatment.³

- 84 percent of health care practitioners support the option to provide telehealth across state lines, along with 72 percent of patients.
- One in five practitioners surveyed has provided health care services across state lines under a waiver since the pandemic began.
- Health care providers expect that state actions to end broad access to care across state lines have had a net negative impact on patient care.

Thank you for the opportunity to testify in support of S.B. 674 *Relating to the Interstate Medical Licensure Compact*. We are excited at the prospect of Hawai'i joining the other 37 states that have enacted similar legislation to retain continuity of care for all patients, including those with rare diseases. We strongly encourage you to support this bill and ensure that all Hawai'i residents with a rare disease can maintain access to care across state lines.



Emily Stauffer
State Policy Manager
EveryLife Foundation for Rare Diseases



Jamie Sullivan
Senior Director of Policy
EveryLife Foundation for Rare Diseases

CC:

Annie Kennedy, Chief of Policy, Advocacy and Patient Engagement, EveryLife Foundation for Rare Diseases

Julia Jenkins, Executive Director, EveryLife Foundation for Rare Diseases

Frank Sasinowski, Chair of the Board, EveryLife Foundation for Rare Diseases

² EveryLife Foundation for Rare Diseases. April 2022. [The National Economic Burden of Rare Disease in the United States in 2019](#).

³ Alliance for Connected Care. April 2022. [Patients and Practitioners Agree – Telehealth Is Important for Patient Access, Health Care Workforce](#).



March 30, 2023

3 p.m.

Conference Room 308 and Videoconference

To: House Committee on Finance

Rep. Kyle T. Yamashita, Chair

Rep. Lisa Kitagawa, Vice Chair

From: Grassroot Institute of Hawaii

Ted Kefalas, Director of Strategic Campaigns

RE: SB674 SD1 HD1 — RELATING TO THE INTERSTATE MEDICAL LICENSURE COMPACT

Comments Only

Dear Chair and Committee Members:

The Grassroot Institute of Hawaii would like to offer its comments on [SB674 SD1 HD1](#), which would enter Hawaii into the Interstate Medical Licensure Compact.

If this bill is enacted, the Legislature will take an important step toward addressing Hawaii's doctor shortage, a problem that has existed for years and has become a serious obstacle to healthcare access in our state.

It is well established that Hawaii is suffering from a physician shortage. According to the most recent report from the Hawaii Physician Workforce Assessment Project, the state is currently short by approximately 776 full-time-equivalent physicians.¹ While the greatest area of need is primary care physicians, the lack of specialists — especially in rural areas — is also severe.

Moreover, that shortage does not apply to only doctors. Across the state, and especially in rural areas, Hawaii is facing shortages of experienced health professionals, from primary care providers to nurses, specialists and staff.

¹ ["Annual Report on Findings from the Hawai'i Physician Workforce Assessment Project: Report to the 2023 Legislature,"](#) University of Hawaii, December 2022, p.1

Fixing the problem requires a multipronged strategy that will address everything from Hawaii's high cost of living to the state's regulatory scheme for healthcare facilities. Perhaps most important is the need to reform licensing regulations for healthcare professionals. One-fourth of all licensed workers in the U.S. work in healthcare.² Their licenses can be difficult to obtain, are expensive and carry geographic or "scope of practice" limitations.

As discussed in the Grassroot Institute of Hawaii's new policy brief on medical licensing, "[How changing Hawaii's licensing laws could improve healthcare access.](#)" the state's shortage of healthcare professionals makes its restrictions on healthcare workers who already hold licenses in other U.S. states seem redundant and self-defeating.³

As the Federal Trade Commission noted in a report on occupational licensing portability:

There is little justification for the burdensome, costly, and redundant licensing processes that many states impose on qualified, licensed, out-of-state applicants. Such requirements likely inhibit multistate practice and delay or even prevent licensees from working in their occupations upon relocation to a new state. Indeed, for occupations that have not implemented any form of license portability, the harm to competition from suppressed mobility may far outweigh any plausible consumer protection benefit from the failure to provide for license portability.⁴

In other words, though medical licensing is intended to protect the public, there is a point at which the level of regulation reduces the number of people in practice without an appreciable public benefit.

One study of licensing among medical professionals found that "licensing is associated with restricted labor supply, an increased wage of the licensed occupation, rents, increased output prices, and no measurable effect on output quality."⁵

This is where we can benefit from the lessons learned during the coronavirus situation. The governor's emergency modification to state licensing laws demonstrated a need to embrace

² Ryan Nunn, "[Improving Health Care Through Occupational Licensing Reform.](#)" RealClear Markets, Aug. 28, 2018

³ Malia Hill, "[How changing Hawaii's licensing laws could improve healthcare access.](#)" Grassroot Institute of Hawaii, February 2023, pp. 5-7.

⁴ Karen Goldman, "[Options to Enhance Occupational License Portability.](#)" U.S. Federal Trade Commission, September 2018, p. 25.

⁵ Sean Nicholson and Carol Propper, "[Chapter Fourteen — Medical Workforce.](#)" in "Handbook of Health Economics, Vol. 2," Elsevier, B.V., 2012, p. 885, cited also in the previously mentioned [FTC study](#), footnote #9, p3.

license portability, making it a simple matter for a doctor licensed in another state to practice in Hawaii.

The interstate compact approach outlined in this bill would streamline licensing for physicians, making it easier for doctors from participating states to practice in Hawaii without facing time-consuming, costly and redundant regulatory hurdles.

The state would retain its control over Hawaii licensure requirements, but would simultaneously increase the pool of doctors able to practice in Hawaii and shorten the time it would take for them to begin working here.

At present, the Interstate Medical Licensure Compact [includes](#) 37 states, the District of Columbia and Guam. Five additional states have introduced legislation to join as well. Years of successful implementation testify to the safety and effectiveness of this approach to license reciprocity.

According to the [IMLC](#), its purpose is to serve as “an administrative clearinghouse of licensing and disciplinary information among participating member states and territories. The Commission does not have regulatory control over physicians or the practice of medicine. It neither issues nor revokes licenses. Its only purpose is to facilitate interstate cooperation and the transfer of information between member states and territories.”

Joining the IMLC would be an important step toward attracting more doctors to our state, thereby addressing our physician shortage and improving healthcare access for all.

Thank you for the opportunity to submit our comments.

Sincerely,

Ted Kefalas
Director of Strategic Campaigns,
Grassroot Institute of Hawaii



March 30, 2023

To: Chair Yamashita, Vice Chair Kitagawa, and Members of the House Committee on Finance

From: Hawaii Association of Health Plans Public Policy Committee

Date/Location: March 30, 2023; 3:00 p.m., Conference Room 308/Videoconference

Re: Testimony in support of SB 674 SD1 HD1 – Relating to the interstate medical licensure compact

The Hawaii Association of Health Plans (HAHP) appreciates the opportunity to provide testimony in support of SB 674 SD1. HAHP is a statewide partnership of Hawaii’s health plans and affiliated organizations to improve the health of Hawaii’s communities together. The vast majority of Hawaii residents receive their health coverage through a health plan associated with one of our organizations.

We appreciate the compact’s ability to relieve some of the burden on our existing health care workforce and to increase resources and access for rural communities. HAHP also recognizes that the pandemic highlighted gaps in our health care system. Workforce expansion is important to strengthening Hawaii’s health care network. We support the prioritization and inclusion of the interstate physician compact to expand Hawaii’s “toolkit” for providing necessary care for our members and our community.

We thank you for the opportunity to provide testimony in support of SB 674 SD1 HD1.

Sincerely,

HAHP Public Policy Committee

cc: HAHP Board Members

AlohaCare | HMAA | HMSA | Humana | HWMG | Kaiser Permanente | MDX Hawaii | Ohana Health Plan | UHA Health Insurance | UnitedHealthcare

hahp.org | 818 Keeaumoku Street, Honolulu, HI 96814 | info@hahp.org



March 30, 2023 at 3:00 p.m.
Conference Room 308

House Committee on Finance

To: Chair Kyle T. Yamashita
Vice Chair Lisa Kitagawa

From: Hilton Raethel
President and CEO
Healthcare Association of Hawaii

Re: **Testimony in Support**
SB 674 SD 1 HD 1, Relating to the Interstate Medical Licensure Compact

The Healthcare Association of Hawaii (HAH), established in 1939, serves as the leading voice of healthcare on behalf of 170 member organizations who represent almost every aspect of the healthcare continuum in Hawaii. Members include acute care hospitals, skilled nursing facilities, home health agencies, hospices, assisted living facilities and durable medical equipment suppliers. In addition to providing access to appropriate, affordable, high-quality care to all of Hawaii's residents, our members contribute significantly to Hawaii's economy by employing more than 30,000 people statewide.

Thank you for the opportunity to provide **support** on this measure, which would authorize the state to enter into the Interstate Medical Licensure Compact. Entering the compact will allow physicians to more easily practice in Hawaii, or treat patients in Hawaii through telehealth, while still meeting nationally-set standards for education and training. The compact, which is in effect in 37 states, the District of Columbia, and the Territory of Guam, allows states to continue to license physicians who meet eligibility criteria in a more streamlined fashion. This is especially important as we continue to see a shortage in physicians across the state, especially in rural areas.

The pandemic stressed an already fragile healthcare workforce shortage in the state—but it also provided opportunities for expanded telehealth and the recruitment of physicians and other clinical professionals to come in at a time of great need. Allowing the state to enter into the compact can help us to address some, if not all, of the physician recruitment and access issues Hawaii patients face, especially in rural and underserved areas. Further, entering into the compact will enable a more efficient, streamlined approach to licensing physicians in the state to begin critical work right away.

Thank you for the opportunity to provide our support for this measure.

Thursday, March 30, 2023 at 3:00 PM
Via Video Conference; Conference Room 308

House Committee on Finance

To: Representative Kyle Yamashita, Chair
Representative Lisa Kitagawa, Vice Chair

From: Les Chun, MD
CEO, Hawai'i Pacific Health Medical Group

Re: **Testimony in Support of SB 674, SD1, HD1
Relating to the Interstate Medical Licensure Compact**

My name is Les Chun, MD and I am the CEO of the Hawai'i Pacific Health Medical Group (HPHMG). The HPHMG is a non-profit subsidiary of Hawaii Pacific Health (HPH) and was formed to further our vision and mission: *To be the leader in health care transformation and to create a healthier Hawaii.* HPH 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 674, SD1, HD1 which creates a comprehensive process that complements the existing licensing and regulatory authority of state boards. The bill also establishes a streamlined process allowing physicians to become licensed in multiple states and enhances the portability of a medical license.

Participating in the compact will allow physicians to more easily practice in Hawai'i, or treat patients in Hawai'i through telehealth, while still meeting nationally-established standards for education and training. The compact, which is in effect in 37 states, the District of Columbia, and the Territory of Guam, allows states to license physicians who meet eligibility criteria in a more streamlined fashion. This is especially important as we continue to see a shortage in physicians across the state, especially in rural areas and on the Neighbor Islands.

The compact alone will not solve the issues we have with our healthcare workforce. Affordability, below-cost reimbursements from Medicare and Medicaid, and the realities of retaining physicians in rural communities are still issues that must be addressed in partnership with many other stakeholders and policy-makers. However, entering the compact can help to ease recruitment of physicians, especially for specialty care that may be hard to access otherwise.

Thank you for the opportunity to testify.



THE QUEEN'S HEALTH SYSTEM

To: The Honorable Kyle T. Yamashita, Chair
The Honorable Lisa Kitagawa, Vice Chair
Members, House Committee on Finance

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

Date: March 30, 2023

Re: Support for SB674 SD1, HD1: Medical Licensure Compact

The Queen's Health System (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 strongly **supports** SB674 SD1, HD1, relating to the interstate medical licensure compact. This measure would adopt the Interstate Medical Licensure Compact (IMLC) to create a process that complements the existing licensing and regulatory authority of state medical boards and provides a process that allows physicians to become licensed in multiple states, thereby enhancing the portability of a medical license while ensuring the safety of Hawai'i patients. We support earlier amendments to this measure and respectfully urge the Committee to include funding to ensure the Department of Commerce and Consumer Affairs will have the appropriate resources to operationalize and oversee Hawaii's membership in the compact.

The intent of the IMLC is one shared by Queen's—increased access to quality health care. The compact makes it possible to extend the reach of physicians, improve access to medical specialists and leverage the use of medical technologies, such as telemedicine. While making it easier for physicians to obtain licenses to practice in multiple states, the compact also has the added benefit of potentially enhancing the ability of partner states to share investigative and disciplinary information.

Recognizing that physicians will increasingly practice in multiple states as a result of increased use of telemedicine, medical boards in 2013 began actively discussing the idea of creating the IMLC in order to streamline traditional medical-license application processes. Introduced in 2014 with assistance from the Federation of State Medical Boards, the IMLC is a legal agreement between participating states to streamline the licensing process for providers that wish to practice across state lines. Currently more than half of the United States, the District of Columbia, and Guam belong to the IMLC.

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.

The COVID-19 pandemic in particular has demonstrated the importance of flexibility, preparedness, and the supply of medical professionals during a health crisis. Staffing shortages have become one of the major issues for healthcare systems globally and locally as the COVID-19 pandemic continues to evolve. Having the ability to more easily and safely work across state lines to employ necessary and lifesaving help during times of a pandemic is an important safeguard for Hawai'i to have in place - this is even more imperative for our neighbor island communities where existing medical personnel shortages pose greater challenges.

Looking beyond the public health emergency, one important way lawmakers and health care regulators can permanently facilitate access to care is by allowing providers and patients to connect with each other regardless of their physical location. States are moving quickly to give healthcare providers the freedom to practice across state lines, opening the door to broader and more flexible telehealth networks and improved access to care.

Upon licensure via the IMLC, a physician will be under the jurisdiction of the medical board in the state where the patient is located. Thus, the Hawai'i Medical Board preserves its authority since physicians will still have to be vetted and licensed to practice in Hawai'i in accordance with Hawai'i's standards. The IMLC also strengthens public protection by enhancing the ability of states to share investigative and disciplinary information. The IMLC provides that any disciplinary action that is taken by a member state's medical licensing board against a physician licensed through the compact is deemed unprofessional conduct that may be subject to discipline by other member boards, in addition to any violation of the medical practice act or laws in that state.

Queen's appreciates the Committee hearing this measure and respectfully requests your support of SB674, SD1, HD1.



To: The Honorable Kyle T. Yamashita, Chair
The Honorable Lisa Kitagawa, Vice Chair
House Committee on Finance

From: Paula Arcena, External Affairs Vice President
Mike Nguyen, Public Policy Manager

Hearing: Thursday, March 30, 2023, 3:00 p.m., Conference Room 308

RE: **SB674 SD1 HD1 Relating to Interstate Medical Licensure Compact**

AlohaCare appreciates the opportunity to provide testimony in **support of SB674 SD1 HD1**. This measure will provide the Governor the statutory authority to enter into an Interstate Medical Licensure Compact on behalf of the State of Hawai`i to significantly streamline the licensing process for physicians who want to practice in multiple states while retaining each state's rigorous practice of medicine standards.

Founded in 1994 by Hawai`i's community health centers, AlohaCare is a community-rooted, non-profit, safety net health plan serving over 80,000 Medicaid and dual-eligible health plan members on all islands. Approximately half of our membership are keiki. We are Hawai`i's only health plan exclusively dedicated to serving Medicaid and Medicaid-Medicare dually-eligible beneficiaries. Our mission is to serve individuals and communities in the true spirit of aloha by ensuring and advocating for access to quality health care for all. We believe that health is about supporting whole-person health needs.

AlohaCare is committed to improving access to care and strengthening the Medicaid program. As you know, Medicaid enrollment in our State has grown by over 40% from 330,000 enrollees in March 2020 to 460,000 in January 2023. This tremendous growth has put a further strain on our already challenged provider capacity in the State, especially in rural areas. We support this measure as one way to expand physician capacity, relieving some of the burden faced by our existing physician workforce, and improve access to care for the residents of Hawai`i, especially our rural communities.

Mahalo for this opportunity to testify in **support of SB674 SD1 HD1**.

Testimony of
Jonathan Ching
Government Relations Director

Before:
House Committee on Finance
The Honorable Kyle T. Yamashita, Chair
The Honorable Lisa Kitagawa, Vice Chair

March 30, 2023
3:00 p.m.
Conference Room 308 & Via Videoconference

Re: SB 674, SD1, HD1, Relating to the Interstate Medical Licensure Compact.

Chair Yamashita, Vice Chair Kitagawa, and committee members, thank you for this opportunity to provide testimony on SB 599, SD1, HD1, which adopts the Interstate Medical Licensure Compact (“Compact”).

Kaiser Permanente Hawai‘i SUPPORTS SB 674, SD1, HD1.

Kaiser Permanente Hawai‘i is one of the nation’s largest not-for-profit health plans, serving 12.6 million members nationwide, and more than 269,000 members in Hawai‘i. In Hawai‘i, more than 4,200 dedicated employees and more than 650 Hawai‘i Permanente Medical Group physicians and advance practice providers work in our integrated health system to provide our members coordinated care and coverage. Kaiser Permanente Hawai‘i has more than 20+ medical facilities, including our award-winning Moanalua Medical Center. We continue to provide high-quality coordinated care for our members and deliver on our commitment to improve the health of our members and the 1.4 million people living in the communities we serve.

The Compact streamlines the licensing process for physicians who want to practice in multiple states, while maintaining quality and safety. By making it easier for physicians to obtain licenses in multiple states, the Compact increases access to health care – particularly for patients in underserved or rural areas.

It allows us to extend the reach of our Permanente physicians, improving access to medical specialists, and leveraging telehealth services. Furthermore, it relieves our physicians who need licensing in multiple states from certain administrative delays and burdens.

The Compact has been adopted by 37 states. This includes multiple states in KP’s footprint: Colorado, Georgia, Maryland, Virginia, and Washington, as well as Washington DC. We have



Government Relations

consistently supported its adoption and believe it strengthens our delivery system and improves patient care.

Mahalo for the opportunity to testify on this important measure.

AMVETS HAWAII SERVICE FOUNDATION CORP
AMVETS DEPARTMENT OF HAWAII
P.O. Box 2865
Ewa Beach, Hawaii 96706
Phone: 808-888-0410
Website: <https://amvets-hawaii.org>



29 March 2023

**HOUSE OF REPRESENTATIVES THE THIRTY-SECOND LEGISLATURE REGULAR SESSION
OF 2023 COMMITTEE ON FINANCE**

Rep. Kyle T. Yamashita, Chair

Rep. Micah P.K. Aiu
Rep. Andrew Takuya Garrett
Rep. Bertrand Kobayashi
Rep. Scott Y. Nishimoto
Rep. David Alcos III

Rep. Lisa Kitagawa, Vice Chair

Rep. Cory M. Chun
Rep. Kirstin Kahaloha
Rep. Rachele F. Lamosao
Rep. Mahina Poepoe
Rep. Gene Ward
Rep. Elle Cochran
Rep. Darius K. Kila
Rep. Dee Morikawa
Rep. Jenna Takenouchi

Dear Finance Committee Chair:

As the State Commander, President & CEO of American Veterans (AMVETS) Hawaii and on behalf of our members, I am writing to express my support of the passage of SB647.

Hawaii's islands have some of the worst physician shortages in America. Former Governor Ige proclaimed that the shortage of nurses in our state was an immediate peril to public health. Making it easier for healthcare professionals in other states to practice in Hawaii is a worthy goal. Unfortunately however, Hawaii has just been ranked as the worst state in the U.S. to practice medicine in. The State Legislature and Finance Committee must take immediate steps this session to make Hawaii more competitive and fiscally viable for providers to attract health professionals from out of state.

We, American Veterans are asking the committees to pass this critical bill. The quality of our life and continuing healthcare in Hawaii depends upon it.

We appreciate the committee's leadership in passing this important bill and ensuring that we do our part to help fulfill our nation's commitment to our Nation's Defenders.

Our mission is to serve veterans and the active military in procuring their earned entitlements; to assist and advocates for severely wounded, ill or injured Soldiers, Veterans, and their Families; to promote Americanism and preserve the freedoms secured by America's Armed Forces and to provide community services that enhance the quality of life for all Americans.

If I can be of any assistance, please feel free to contact me at 808-382-6835 or donovan@amvets-hawaii.org.

In Service to All Veterans,

DONOVAN A. LAZARUS !
Commander, President & CEO

**SERVING
WITH
PRIDE**



**A M V E T S
HAWAII
SERVICE
FOUNDATION**

P.O. Box 2865
Ewa Beach, HI 96706
808-888-0410
admin@amvets-hawaii.org



Hawaii Medical Association

1360 South Beretania Street, Suite 200 • Honolulu, Hawaii 96814
Phone: 808.536.7702 • Fax: 808.528.2376 • hawaiimedicalassociation.org

HOUSE COMMITTEE ON FINANCE
Representative Kyle T Yamashita, Chair
Representative Lisa Kitagawa, Vice Chair

Date: March 30, 2022
From: Hawaii Medical Association
Bernard Robinson, MD, HMA Public Policy Committee

Re: SB674 SD1 HD1, Relating to the Interstate Medical Licensure Compact

Position: Support

This measure adopts the Interstate Medical Licensure Compact (IMLC) and creates an expedited pathway for currently licensed physicians to become licensed in multiple states.

This compact will promote uniformity in state licensure requirements and strengthen public protection by facilitating sharing of investigative and disciplinary information between state medical boards. Of note, the IMLC will NOT affect the State's ability to pursue malpractice suites, approve, or revoke licensing in Hawaii.

HMA supports this measure as it will improve access to care by encouraging physicians to practice in Hawaii, both in person and through telehealth services. Thank you for allowing the Hawaii Medical Association to testify in support of this measure.

References and Quick Links:

Marschall S. Smith; The Interstate Medical Licensure Compact Commission: Growth, Success, and the Future. *Journal of Medical Regulation* 1 October 2020; 106 (3): 22–26. doi:<https://doi.org/10.30770/2572-1852-106.3.22MOC>

Provisions of Interstate Medical Licensure Compact. American Medical Association. D-275.955.2015.FSMB Annual Report. Federation of State Medical Boards. Apr 2022

2023 Hawaii Medical Association Officers

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

2023 Hawaii Medical Association Public Policy Coordination Team

Elizabeth Ann Ignacio, MD, Chair • Beth England, MD, Co-Chair
Linda Rosehill, JD, Government Relations • Marc Alexander, Executive Director

March 30, 2023

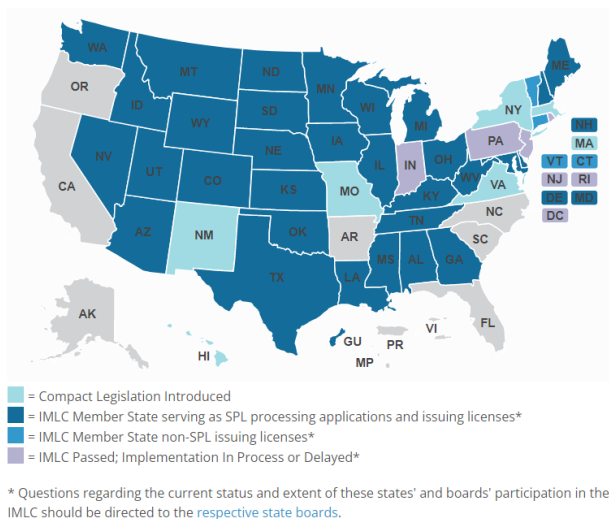
The Honorable Kyle T. Yamashita, Chair
The Honorable Lisa Kitagawa, Vice Chair
House Committee on Finance

Re: SB674 SD1 HD1 – Relating to Interstate Medical Licensure Compact

Dear Chair Yamashita, Vice Chair Kitagawa, and Members of the Committee:

Hawaii Medical Service Association (HMSA) appreciates the opportunity to testify in support of SB674 SD1 HD1, which adopts the Interstate Medical Licensure Compact to create a comprehensive process that compliments the existing licensing and regulatory authority of state medical boards and provides a streamlined process that allows physicians to become licensed in multiple states, thereby enhancing the portability of a medical license and ensuring the safety of patients.

HMSA strongly believes in strengthening access to quality health care services in the state of Hawaii. Participation in the physician compact can help, particularly in rural and underserved communities where the need is greatest. The Interstate Medical Licensure Compact was established in 2017 and currently includes 37 states, the District of Columbia, and the Territory of Guam (see map)¹. In these jurisdictions, physicians are licensed in 50 different medical and osteopathic boards.



While we recognize that becoming part of an interstate compact is not a silver bullet, it can be one tool in our tool belt to address the needs of our community. Physician licensure by endorsement in Hawaii can typically take anywhere from 45 to 120 days once an application is filed with the Hawaii Medical Board. By contrast, the IMLC says the process of issuing licenses in its member states usually takes only a few days. By providing an opportunity for providers who are already licensed in other states to practice in Hawaii, we can expand and support our current health care workforce while making it easier for

Hawaii residents to access health care in the place they're located at the time when they need it.

¹ <https://www.imlcc.org/>



For Hawaii to join the IMLC, legislation must be introduced to enact a bill authorizing the state to join. NOTE: The language² of this bill cannot be altered in any way and must be consistent between each participating state. We support the legislature's intent to address the shortage of physicians in the state while ensuring the safety of our residents.

Thank you for the opportunity to testify in support of SB674 SD1 HD1.

Sincerely,

A handwritten signature in black ink, appearing to read 'Dawn Kurisu', with a long horizontal flourish extending to the right.

Dawn Kurisu
Assistant Vice President
Community and Government Relations

² Interstate Medical Licensure Compact bill language. <https://www.imlcc.org/wp-content/uploads/2021/02/IMLC-Compact-Law.pdf>



Rep. Kyle Yamashita, Chair
Rep. Lisa Kitagawa, Vice-Chair
House Committee on Finance
Hawaii State Capitol, Room 308
March 30, 2023

Re: SB 674 SD1 HD1, Relating to Interstate Medical Licensure Compact

Chair Yamashita, Vice-Chair Kitagawa, and members of the Committee:

The Hawaii'i Psychiatric Medical Association (HPMA) is a professional, non-profit corporation serving psychiatrists in Hawaii'i. It is organized for the purpose of supporting professionalism in the practice of psychiatry and promoting top quality mental health care. HPMA fulfills a dual role, serving as a state association which focuses on local issues and as a district branch of the American Psychiatric Association (APA) linking HPMA members with developments in mental health care taking place regionally and nationally. We represent nearly 200 Psychiatrists, 30 of whom are Resident Physicians (Psychiatrists in Training).

HPMA is in support of SB 674 SD1 HD1, Relating to Interstate Medical Licensure Compact. This bill adopts the Interstate Medical Licensure Compact to create a comprehensive process that complements the existing licensing and regulatory authority of state medical boards and provides a streamlined process that allows physicians to become licensed in multiple states, thereby enhancing the portability of a medical license and ensuring the safety of patients.

HPMA supports this concept as a safe way to access psychiatric medical care and prescribers. We understand that there are concerns by the legislature about accessing psychiatry care, especially in rural areas. This interstate medical licensure compact would help alleviate that problem, providing a safe, comprehensive process that allows for physicians to be licensed in multiple states. This, in conjunction with telehealth services, will allow for greater, safer access to medical care for Hawaii's residents.

Thank you for the opportunity to share our support of SB 674 SD1 HD1.

Mahalo,

Jennifer Lyman, MD Resident Physician
Hawaii Psychiatric Medical Association Legislative Co-Chair

Sarah Gabriel, MD Resident Physician
Hawaii Psychiatric Medical Association Legislative Co-Chair

SB-674-HD-1

Submitted on: 3/28/2023 9:11:11 PM

Testimony for FIN on 3/30/2023 3:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Jessica Penner	Individual	Support	Written Testimony Only

Comments:

This bill streamlines the licensing for out of state physicians coming to Hawaii to practice. We have such a severe doctor shortage, seems like we should remove roadblocks that mace access to care harder to get.

SB-674-HD-1

Submitted on: 3/29/2023 8:36:43 AM

Testimony for FIN on 3/30/2023 3:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Esther Smith	Individual	Support	In Person

Comments:

Licensing is one minor obstacle in provider recruitment to Hawaii.

Subject: Testimony for SB674

To the Finance Committee and
Chair Kyle Yamashita

The points made by Commander Donovan Lazarus of Amvets Hawaii are completely on point.

We have a horrific physician shortage.

Yes, we need to make it easier for healthcare professions from other states to practice in Hawaii so I am in complete support of SB 674.

However that's putting the cart before the horse, as without passing bills SB 1035 the excise tax exemption for Physicians and SB 297 for Medicare reimbursements, it's just an idle dream to think that physicians will come here.

Medicaid at this point does not even allow doctors to breakeven financially on caring for those patients. That's why physicians here are reluctant to take those patients.

And as a business model for doctors looking at Hawaii it's a place to practice it makes no sense for them to come here.

Because of the poor insurance reimbursements, and needing to pay excise tax on, which no other state requires, it is impossible for physicians to run a viable business.

And this mass exodus of physicians will continue.

And the medical needs of our population will go unanswered, and the unnecessary suffering of our population will accelerate.

I am sure that the Finance Committee, and Chairman Kyle Yamashita, have a deep sense of wanting to help veterans, and all of those on Medicare and Medicaid find decent health care here in the islands.

So far we have failed them in that mission.

We need to be very practical in these last days of the legislature convening

Yes, let's pass SB 674, but I beseech you to also have a hearing ASAP for SB 1035 excise tax exemption for physicians and SB 297 revamping subsistence Medicaid reimbursements for physicians, so that we can achieve the goal of SB 674, and attract physicians from the mainland that we need desperately.

I know that the Finance Committee is a group of impassioned leaders who want to serve the people of Hawaii.

If these three bills are not passed in their entirety as soon as possible before this legislative session ends, it will be a medical catastrophe for our beloved Hawaii and her people.

Robin Rohr

Honorary member of Amvets Hawaii

and a concerned Citizen for the underserved populations that I see suffering because of lack of medical care and physician shortage

Hawaii's islands have some of the worst physician shortages in America. Recently Governor Ige proclaimed that the shortage of nurses in our state was an immediate peril to public health. Making it easier for healthcare professionals in other states to practice in Hawai'i is a worthy goal. Unfortunately however, Hawai'i has just been ranked as the worst state in the U.S. to practice medicine in. The State Legislature and Finance Committee must take immediate steps this session to make Hawai'i more competitive and fiscally viable for providers to attract health professionals from out of state.

[SB 674, SD1, HD1](#)
[\(HSCR1527\)](#)
[Status](#)

RELATING TO THE INTERSTATE MEDICAL LICENSURE
COMPACT.

HLT, CPC, FIN

Adopts the interstate medical licensure compact. Permits the department of commerce and consumer affairs to adopt rules to implement and administer the compact. Authorizes the department of commerce and consumer affairs to conduct criminal history record checks on applicants for licensure under the compact. Appropriates funds. Effective 12/31/2050. (HD1)

SB-674-HD-1

Submitted on: 3/30/2023 9:32:21 AM

Testimony for FIN on 3/30/2023 3:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Dave Watase	Individual	Support	Written Testimony Only

Comments:

Aloha House Finance Committee members,

Please support SB674 which will make it easier and less costly for licensed physicians in other States to practice in Hawaii. We have a severe shortage of physicians and it's getting worse as many retire or move to the mainland for better work environments and better pay. Hawaii sends away our best and brightest many who become physicians but they don't return home. We need to do whatever we can to make it easier and make it attractive for physicians to move to Hawaii.

Please support SB674.

Dave Watase