

March 17, 2023

**LATE**

The Honorable Joy San Buenaventura, Chair  
The Honorable Henry Aquino, Vice Chair  
House Committee on Human Services

Re: SCR37 / SR31 – Urging the Department of Health to perform a feasibility study of the benefits of authorizing reimbursement for services provided through telehealth by way of Audio-Only telephonic communication

Dear Chair San Buenaventura, Vice Chair Aquino, and Members of the Committee:

Hawaii Medical Service Association (HMSA) appreciates the opportunity to provide testimony in support of SCR37/SR31, which is urging the Department of Health to perform a feasibility study of the benefits of authorizing reimbursement for services provided through telehealth by way of Audio-Only telephonic communication

As an early supporter of telehealth access for our state, we believe in increasing access to health care services in Hawaii, especially for kupuna who may have limited digital literacy and for those living in rural and underprivileged communities where broadband coverage is lacking. As the Public Health Emergency (PHE) related to COVID-19 comes to a close along with changes from Centers for Medicare & Medicaid Services (CMS), we think it's critical to better understand the role and effectiveness of Audio-Only telehealth.

Thank you for the opportunity to testify in support of SCR37 / SR31.

Sincerely,



Dawn Kurisu  
Assistant Vice President  
Community and Government Relations



# UNIVERSITY OF HAWAII SYSTEM

## ‘ŌNAEHANA KULANUI O HAWAII

### Legislative Testimony

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

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Testimony Presented Before the  
Senate Committee on Health and Human Services  
Friday, March 17, 2023 at 1:00 p.m.

By

Lee Buenconsejo-Lum, Interim Dean  
John A. Burns School of Medicine

And

Michael Bruno, Provost  
University of Hawai'i at Mānoa

#### SCR 37/SR 31– URGING THE DEPARTMENT OF HEALTH TO PERFORM A FEASIBILITY STUDY OF THE BENEFITS OF AUTHORIZING REIMBURSEMENT FOR SERVICES PROVIDED THROUGH TELEHEALTH BY WAY OF AUDIO-ONLY TELEPHONIC COMMUNICATION

Chair San Buenaventura, Vice Chair Aquino, and Members of the Committee:

Thank you for the opportunity to present testimony today. The John A. Burns School of Medicine (JABSOM) **supports SCR 37/SR 31** which urges the Department of Health to study the feasibility of authorizing reimbursement for telephonic telehealth sessions.

Since 1999, the use and expansion of telehealth services and technology in Hawai'i have been recognized as a way to increase access and reduce delays to health care, particularly in rural areas of the state. Many of the highest-risk patients reside in Medically Underserved Areas (MUA), are part of Medically Underserved Populations (MUP), or reside in federally-designated health professional shortage areas. Telehealth via telephonic communication benefits many in these communities. Elderly, as well as medically- and socially-complex patients often face transportation barriers and difficulty navigating our collective system of health care. Patients with behavioral health issues are especially vulnerable and frequently require immediate attention. The inability of behavioral health and other patients to access the internet or to navigate complicated video platforms presents an even greater barrier to much-needed health care.

We note that Medicare and Medicaid pay equally for telephonic and telehealth services, recognizing the importance of telephonic services. 42 CFR § 410.78 defines telehealth services provides as follows:

“(3) Interactive telecommunications system means, except as otherwise provided in this paragraph, multimedia communications equipment that includes, at a minimum, audio and video equipment permitting two-way, real-time interactive communication between the patient and distant site physician or practitioner. For

services furnished for purposes of diagnosis, evaluation, or treatment of a mental health disorder to a patient in their home, **interactive telecommunications may include two-way, real-time audio-only communication technology if the distant site physician or practitioner is technically capable to use an interactive telecommunications system as defined in the previous sentence, but the patient is not capable of, or does not consent to, the use of video technology**. A modifier designated by CMS must be appended to the claim for services described in this paragraph to verify that these conditions have been met.” Emphasis added.

One of the realities for Hawai'i is that many of those most in need of telephonic care (limited means to travel, poor or absent internet coverage or bandwidth, residence remote from care providers, infirm with limited cognition or digital literacy, immune compromise in the age of COVID, etc.) suffer the most from a lack of provider reimbursement for telephonic coverage. Without telephonic coverage, these at-risk individuals must travel from their residence to clinics and emergency departments at great personal expense or choose to do without care guidance altogether. This measure is a positive step toward ensuring that Hawai'i's most vulnerable patients are given equal access to the high-quality health care and health services they deserve.

Thank you for this opportunity to testify.



**Testimony to the Senate Committee on Health and Human Services  
Friday, March 17, 2023; 1:00 p.m.  
State Capitol, Conference Room 225  
Via Videoconference**

**RE: SENATE CONCURRENT RESOLUTION NO. 037/SENATE RESOLUTION NO. 031, URGING THE DEPARTMENT OF HEALTH TO PERFORM A FEASIBILITY STUDY OF THE BENEFITS OF AUTHORIZING REIMBURSEMENT FOR SERVICES PROVIDED THROUGH TELEHEALTH BY WAY OF AUDIO-ONLY TELEPHONIC COMMUNICATION.**

Chair San Buenaventura, Vice Chair Aquino, 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 offers **COMMENTS** on Senate Concurrent Resolution No. 037 and Senate Resolution No. 031, URGING THE DEPARTMENT OF HEALTH TO PERFORM A FEASIBILITY STUDY OF THE BENEFITS OF AUTHORIZING REIMBURSEMENT FOR SERVICES PROVIDED THROUGH TELEHEALTH BY WAY OF AUDIO-ONLY TELEPHONIC COMMUNICATION.

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.

At the outset, the HPCA thanks the introducer of these measures for facilitating continued discussion on this important issue. As noted in our testimony to this Committee on House Bill No. 0907, House Draft 2, dated March 15, 2023, an agreement has been reached between a Hui consisting of the Hawaii Psychological Association, the National Association of Social Workers, the Hawaii Island Association of Marriage and Family Therapists, the Hawaii Substance Abuse Coalition, the HPCA, AARP, the American Cancer Society Action Center, the Hawaii Parkinson's Association, the Epilepsy Foundation of Hawaii, and the Alzheimer's Association, among other organizations, and the Hawaii Medical Service Association, that would ensure patient access to audio-only mental health services while establishing reasonable restrictions on loss costs. This agreement is reflected in Senate Bill No. 1038, Senate Draft 2, which was approved by this Senate on Third Reading on March 7, 2023.

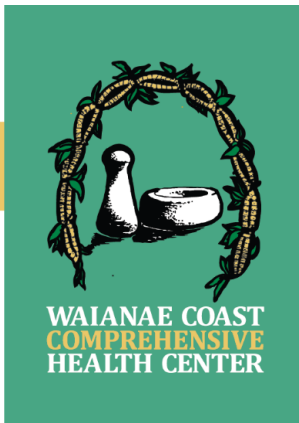
**Testimony on Senate Concurrent Resolution No. 037/Senate Resolution No. 031**

**Friday, March 17, 2023; 1:00 p.m.**

**Page 2**

It is the HPCA's hope that legislation codifying this agreement will be enacted this year. Accordingly, the HPCA does not believe these resolutions are necessary and recommends that they be FILED.

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](mailto:eabe@hawaiiipca.net).



HEALING · LEARNING · INNOVATION

**Testimony to the Senate Committee on Health and Human Services  
Friday, March 17, 2023; 1:00 p.m.  
State Capitol, Conference Room 225  
Via Videoconference**

**RE: SENATE CONCURRENT RESOLUTION NO. 037/SENATE RESOLUTION NO. 031**

Dear Chair San Buenaventura, Vice Chair Aquino, and Members of the Committee:

The Waianae Coast Comprehensive Health Center is a federally qualified health center serving the healthcare needs of the Waiʻanae Coast and the surrounding West Oahu communities. Since 1972, the Waianae Coast Comprehensive Health Center has served about 35,000 patients per year, of which 73% identify as Native Hawaiian, Pacific Islander, and Asian, 71% at or below 100% of the federal poverty level, and 75% receive coverage under the Med-QUEST/Medicaid & Medicare program.

The Waianae Coast Comprehensive Health Center offers comments on Senate Concurrent Resolution No. 037 and Senate Resolution No. 031, **URGING THE DEPARTMENT OF HEALTH TO PERFORM A FEASIBILITY STUDY OF THE BENEFITS OF AUTHORIZING REIMBURSEMENT FOR SERVICES PROVIDED THROUGH TELEHEALTH BY WAY OF AUDIO-ONLY TELEPHONIC COMMUNICATION.**

For the past three years, telehealth has been a health lifeline for many of our most vulnerable patients. In a geographically isolated community like the Waianae Coast, our patients rely on telehealth, particularly telephonic communication, to communicate with their healthcare provider. Our health center has been carefully tracking the reasons a televideo encounter is not possible. Of our patients attempting to access a televideo encounter, the reasons and percentage of patients unable to have a successful encounter include the following:

- Patient has poor internet connectivity (42%)
- Patient does not have a camera-enabled device (16%)
- Patient does not know how to use video app (7%)
- Patient has no internet access (7%)

We found our Kupuna rely greatly on telephonic communication to consult with their health care providers due to their lack of computers and smart phones, digital literacy, and internet connectivity.

**Testimony on Senate Concurrent Resolution No. 037/Senate Resolution No. 031**

**Friday, March 17, 2023; 1:00 p.m.**

**Page 2**

We also have found that about 20% of our behavioral health appointments are telephonic. Our behavioral health patients are very comfortable with telephonic communication and remain compliant in keeping their appointments. The opportunity to use this modality prevented numerous unnecessary Emergency Department visits and, even more importantly, hospitalizations for avoidable reasons.

Waianae Coast Comprehensive Health Center strongly believes in continuing telephonic services and hopes that legislation codifying this agreement will be enacted this year. We do not believe these resolutions are necessary and recommend that they be FILED.

Thank you for the opportunity to testify. Should you have any questions, please do not hesitate to contact Nicholas Hughey, Executive Vice President, at 697-3457 or [nhughey@wcchc.com](mailto:nhughey@wcchc.com).

**SCR-37**

Submitted on: 3/14/2023 2:34:10 PM

Testimony for HHS on 3/17/2023 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Leimomi Khan	Individual	Support	Written Testimony Only

Comments:

Urge support of SCR37 for all of the reasons stated in the resolution.