

**HCR-81**

Submitted on: 4/11/2024 8:36:29 AM

Testimony for LBT on 4/16/2024 10:20:00 AM

Submitted By	Organization	Testifier Position	Testify
Kathleen Plack	Testifying for Dr. Carol A Orr MD LLC and Brenda Orcutt APRN	Support	Written Testimony Only

Comments:

Thank you for accepting my testimony on HCR81, the absolute need to amend HAR 12-15. My name is Kathleen Plack and I'm the medical biller for Dr. Carol Orr and Brenda Orcutt APRN. Dr. Orr hired Brenda Orcutt into her practice in August of 2023, and we have been so excited to be able to double our ability to see the many Workers Comp patients we were previously having to turn away. We were surely surprised to find after a couple of months that many of the insurance companies were trying to pay her only 85% of the fee schedule for her services. Since that time, we've been playing cat and mouse with each company and with the Dept of Labor and Industrial Relations. Aric Fujii at DLIR has been fantastic at helping us through the process, and right away told me that the law had changed to accommodate Hawaii's need for more providers by allowing APRN's to be paid at 100% the fee schedule and that Chapter 386-1 supercedes HAR Chapter 12, Title 15 and to get the insurance companies to see this information, I would have to write up to 3 bill disputes to the DLIR. The first Bill Dispute is then followed up with a letter from DLIR to the insurance company and us to state that we have 31 days to negotiate, which the insurance companies do not wish to negotiate as they simply return with it is stated in HAR 12-15-36 (b) that fees for services provided RN's pursuant to chapter 457 shall be 85% of the fee schedule. Then, as the biller, I need to remember to write on a calendar that on the 31st day, I can send my 2nd Bill Dispute stating that we have not negotiated and what the remaining balance owed us is and how we are asking DLIR to get involved again, at which point DLIR writes a second letter to the insurance and us that under a penalty of \$500 fine for not sending a 3rd letter within 14 days with our Position Statement on the money owed us (or the insurance companies position that they will keep their stance), that then the DLIR will issue a DECISION to us on whether the insurance should pay us in full or not. Currently I have over 100 letters in all 3 stages out to the DLIR. It is such a process that is taking much time and space in my office. It makes me worry we will be fined \$500 for not getting back to the DLIR in time for that 3rd letter as my office is in another state than the business currently and I usually only need to FedEx out my work billing package once every 2 weeks. I've made it a point to tell the office staff that I need those letters specially scanned and sent to me, but things get hectic in a busy office like the Orr's with 4 providers under roof, and things can get easily missed. All of this should have changed clearly when the law was changed, but instead there's extra monkey work for the DLIR, the insurance adjusters, the doctor's staff and for myself.

Please amend HAR 12-15 to clearly state that APRN's are to receive 100% of the fee schedule and please make sure it is backdated to 2017 when SB 984 HD1 CD1 was passed, so that we all can quit chasing payment around through the DLIR.

Thank you,

Kathleen Plack 808-557-1380

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Submitted on: 4/11/2024 2:38:03 PM

Testimony for LBT on 4/16/2024 10:20:00 AM

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Testify</b>
Annette Manant	Testifying for Hawai'i Affiliate of the American College of Nurse- Midwives	Support	Written Testimony Only

Comments:

Chair Matayoshi, Vice Chair Garrett, and members of the Committee, thank you for the opportunity to testify on HCR 81 and HR 66.

This resolution requests that the Director of the Department of Labor and Industrial Relations clarify that APRNs are distinct from RNs. Recognizing this, the resolution further requests that Director of Labor and Industrial Relations is requested to amend title 12, chapter 15, Hawai'i Administrative Rules, to clarify that compensation for advanced practice registered nurses under the State's Workers' Compensation Law is distinct from compensation for registered nurses and shall be one hundred percent of the fees authorized under the Medicare Fee Schedule. Nursing organizations in Hawaii recognize the longstanding and supportive relationship between DLIR and APRNs, including collaborative efforts to amend state law to improve access to care for worker's compensation provided by APRNs. APRNs are historically reimbursed at a lower rate than physicians based on Medicare policies. These lower reimbursement rates have posed a challenge to maintaining open and accessible healthcare, particularly in this high cost of living state. We recognize and welcome dialogue pertaining to equitable and appropriate reimbursement for services as a means to ensuring access to health care. Thank you for the opportunity to testify on this resolution. Your advocacy on behalf of nurses' and patient access to healthcare is greatly appreciated.

Annette Manant, PhD, APRN, CNM President Hawaii Affiliate of the American College of Nurse-Midwives.



**Written Testimony Presented Before the  
Senate Committee on Labor and Technology  
and  
Senate Committee on Health and Human Services  
April 16, 2024, at 10:20 A.M.  
Conference Room 225 and via Videoconference  
by  
Laura Reichhardt, APRN, AGPCNP-BC, FAAN  
Director, Hawai'i State Center for Nursing  
University of Hawai'i at Mānoa**

**Comments on HCR 81 / HR 66**

Chairs Aquino and San Buenaventura, Vice Chairs Moriwaki and Aquino, and members of the Committees, thank you for the opportunity to testify on HCR 81 and HR 66. The Hawai'i State Center for Nursing (HSCN) provides comments.

This resolution requests that the Director of the Department of Labor and Industrial Relations clarify that APRNs are distinct from RNs. Recognizing this, the resolution further requests that Director of Labor and Industrial Relations is requested to amend title 12, chapter 15, Hawai'i Administrative Rules, to clarify that compensation for advanced practice registered nurses under the State's Workers' Compensation Law is distinct from compensation for registered nurses and shall be one hundred percent of the fees authorized under the Medicare Fee Schedule.

HSCN recognizes the longstanding and supportive relationship between DLIR and APRNs, including collaborative efforts to amend state law to improve access to care for worker's compensation provided by APRNs. These efforts include:

- 2009 Hawai'i Act 169, SLH 2009 –Recognize APRNs with Global signature authority. This recognition authorized APRNs to sign documents pertaining to worker's compensation, department of education and human services verification and assessment forms, and all relevant documentation within APRN scope of practice.
- 2016 Hawai'i Act 183, SLH 2016 – Amends and updates HRS statutes to clarify the role of APRNs with regards to their authority and participation in the health care system, including HRS 386-1, definition of "health care provider" in workers' compensation law to include APRNs.
- 2017 Hawai'i Act 153, SLH 2017 – Amends the HRS 386-1 definition of "physician" in workers' compensation law to include APRNs.

*The mission of the Hawai'i State Center for Nursing is to engage in nursing workforce research, promote best practices and disseminate knowledge, cultivate a diverse and well-prepared workforce, support healthy work environments, champion lifelong learning, and strategically plan for sound nursing workforce policy.*

HSCN also recognizes that APRNs are historically reimbursed at a lower rate than physicians based on Medicare policies<sup>1</sup>. These lower reimbursement rates have posed a challenge to maintaining open and accessible healthcare, particularly in this high cost of living state. While HSCN does not have specific data relative to the reimbursement rates for APRNs as compared to RNs, we recognize and welcome dialogue pertaining to equitable and appropriate reimbursement for services as a means to ensuring access to health care.

Thank you for the opportunity to testify on this resolution. Your advocacy on behalf of nurses' and patient access to healthcare is greatly appreciated.

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<sup>1</sup> <https://www.cms.gov/medicare/payment/fee-schedules/physician-fee-schedule/advanced-practice-nonphysician-practitioners/advanced-practice-registered-nurses-aprns>

**HCR-81**

Submitted on: 4/9/2024 3:07:33 PM

Testimony for LBT on 4/16/2024 10:20:00 AM

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Testify</b>
Cathy Wilson	Individual	Support	Written Testimony Only

Comments:

This resolution clarifying that APRN's are to be reimbursed 100% of WC Fee Schedule is important because many mainland carriers do not pay 100%. Thank you!!

**HCR-81**

Submitted on: 4/12/2024 10:54:14 AM

Testimony for LBT on 4/16/2024 10:20:00 AM

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Testify</b>
FRANKLIN Ichiro IZUTA	Individual	Support	Written Testimony Only

Comments:

Advanced Practice Registered Nurses have recently assumed an increasing role as Primary Care Providers for Workers' Compensation Claims. Previously, Physician Assistants assisted physicians at all levels of care of an injured employee.

Hawaii Administrative Rule 12-15-36 clearly states that a licensed Physician Assistant or Registered Nurses shall be compensated at 85% of the fee schedule.

Part 1 of Hawaii Work Comp Law under General Provisions includes Advanced Practice Registered Nurses with other "Physicians" including MDs, DOs, Dentists, Chiropractors, Optometrists, Podiatrists, Naturopaths and Psychologists.

Chapter 457 delineates the additional training and licensure that differentiates an APRN from and RN.

We have tried to educate the Insurers about the differences between an APRN and an RN and pointed out the APRNs are listed with the other physicians who are compenstated at 100%. Many of the Insurers have responded positively and corrected the error in payment. But some, particularly the Mainland Companies are adamant that an APRN is an RN and will only pay 85%. Unfortunately, the State of Hawaii also pays APRNs 85% of the fee schedule.

I don't believe any changes are necessary to the law, but it needs to be clearly stated that APRNs are considered physicians under Workers Compensation Law. I truly believe APRNs can serve as PCPs to injured workers and fill the void created by MDs and DOs reluctant to accept Workers' Compensation claims.

**HCR-81**

Submitted on: 4/14/2024 10:33:39 PM

Testimony for LBT on 4/16/2024 10:20:00 AM

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Testify</b>
Carol Ann Orr MD	Individual	Support	Written Testimony Only

Comments:

I support HCR 81 re clarifying compensation is 100% of Fee Schedule for APRN.

I am a Worker's Compensation provider and clinic owner in Hilo Hawaii. Having an APRN assist me in providing care to Worker's Compensation patients has greatly improved my capacity to accommodate the volume of patients needing care. Having an APRN assist me increases overhead costs, including salary for the APRN, additional clinic support staff, and other additional clinic resources. Currently, additional time and resources are being spent by my biller Kathy Plack, please see her testimony, in collecting for the APRN office visits, and clarification of APRN compensation will greatly improve her efficiency as well as reduce the time spent by DLIR Responding to our requests to address payment.

Thankyou, Carol A Orr MD