JOSH GREEN, M.D. GOVERNOR OF HAWAI'I KE KIA'ĀINA O KA MOKU'ĀINA 'O HAWAI'I



KENNETH S. FINK, M.D., M.G.A., M.P.H. DIRECTOR OF HEALTH KA LUNA HO'OKELE

> WRITTEN **TESTIMONY ONLY**

STATE OF HAWAII **DEPARTMENT OF HEALTH**

P. O. Box 3378 Honolulu, HI 96801-3378 doh.testimony@doh.hawaii.gov

Testimony in SUPPORT of SB2529 SD1 RELATING TO PROVIDER ORDERS FOR LIFE SUSTAINING TREATMENT FORM.

REP. DELLA AU BELATTI, CHAIR HOUSE COMMITTEE ON HEALTH & HOMELESSNESS

Hearing Date: March 15, 2024 Room Number: 329

- **Fiscal Implications:** N/A. 1
- 2 **Department Testimony:** The Department of Health (DOH) supports this amendment that will
- remove barriers for patients when creating or updating Provider Orders for Life Sustaining 3
- Treatment (POLST). There may be circumstances when a patient either does not have a primary 4
- care or other specialist provider whom they see regularly, or when a sudden and unexpected 5
- change in their health requires urgent POLST documentation. 6
- Thank you for the opportunity to testify. 7

Submitted on: 3/13/2024 3:31:23 PM

Testimony for HLT on 3/15/2024 9:00:00 AM

Submitted By	Organization	Testifier Position	Testify
John C Jack Lewin MD	SHPDA	Support	Written Testimony Only

Comments:

House Committee on Health and Homelessness

Honorable Chair Della Au Belatti; and

Vice Chair Jenna Takenouchi, and

Honorable Members:

Testimony of John C (Jack) Lewin MD Administrator, SHPDA

Regarding SB 2529 SD1 Hearing March 15, 2024, 9 am, Room 329

Position: **Support**

Hawaii was one of the first states to enact law governing POLST and has a strong and widespread program across the State; but certain language in existing law impedes patients from obtaining POLST in a timely manner, thereby exposing the sickest and most vulnerable patients to the risk of receiving unwanted and unnecessary care. Existing law requires the patient's physician or a health care provider to explain to the patient the nature and content of the POLST form, including any medical intervention or procedures, and the difference between an advance health-care directive and the form, and prepare the POLST form based on the patient's preferences and medical indications. Across the State and in a variety of settings, POLST conversations with patients are started by various health care professionals, especially nurses and social workers. However, existing law requires POLST forms to be signed by the "patient's provider", defined as a licensed physician, advanced practice registered nurse, or physician assistant "who has examined the patient" that could be interpreted as requiring a face-to-face encounter with the patient. This should not be required.

SHPDA therefore strongly supports SB 2529 SD1 and urges its enactment.

Mahalo for the ability to testify.

Jack Lewin MD

Administrator, SHPDA



Testimony of Jonathan Ching Government Relations Director

Before:

House Committee on Health & Homelessness The Honorable Della Au Belatti, Chair The Honorable Jenna Takenouchi, Vice Chair

March 15, 2024 9:00 a.m. Conference Room 329 & Via Videoconference

Re: SB 2529, SD1 Relating to Provider Orders for Life Sustaining Treatment Form.

Chair Belatti, Vice Chair Takenouchi, and committee members, thank you for this opportunity to provide testimony on SB 2529, SD1 which amends the definition of "patient's provider" in state law governing Provider Orders for Life-Sustaining Treatment (POLST) by removing language that requires the provider to examine the patient during a face-to-face encounter.

Kaiser Permanente Hawai'i SUPPORTS SB 2529, SD1.

Kaiser Permanente is one of the nation's largest not-for-profit health plans, serving 12.6 million members nationwide, and more than 274,000 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 19 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.

POLST is a portable medical order that documents a patient's care plan outside the hospital. A POLST is intended for a person with a chronic debilitating illness or a life-limiting disease and is followed by healthcare providers, paramedics, and firefighters.

Hawai'i was one of the first states in the nation to enact a law governing POLST. Despite having a strong program statewide, HRS 327K-1 requires POLST forms to be signed by the "patient's provider", defined as a licensed physician, advanced practice registered nurse, or physician assistant "who has examined the patient." This examination requirement can cause delays for patients when their provider is out of the office or if they cannot get an immediate appointment. If the POLST form is time-sensitive, as it often is when patients are terminally ill, patients are left to find a provider who is available or take a chance and wait for an appointment with their own





doctor. The result of the signature requirement can be our members receiving unwanted life-prolonging care all for want of a signature. While video visits can suffice, many of our elderly homebound members or those on hospice care are unable to use telehealth modalities.

Removing this language will align our POLST law with other states while continuing to prioritize patient safety by keeping in place current obligations for providers to evaluate and assess the patient's appropriateness for POLST and develop a care plan.

Mahalo for the opportunity to testify in support of this important measure.



March 15, 2024

The Honorable Della Au Belatti, Chair The Honorable Jenna Takenouchi, Vice Chair House Committee on Health & Homelessness

Re: SB 2529 SD1 – RELATING TO PROVIDER ORDERS FOR LIFE SUSTAINING TREATMENT FORM

Dear Chair Belatti, Vice Chair Takenouchi, and Members of the Committee:

Hawaii Medical Service Association (HMSA) appreciates the opportunity to testify in support of SB 2529 SD1, which amends the definition of "patient's provider" in state law governing Provider Orders for Life-Sustaining Treatment by removing language that requires the provider to examine the patient.

Every individual should have the opportunity to make their own decisions about their end-of-life care. HMSA has long been a supporter of Hawaii POLST and the POLST form can be a valuable tool to ensure their wishes for medical treatment are honored. HMSA believes that if adopted, the amendments included in SB 2529 SD1 would help patients, particularly those in hospice care, avoid unnecessary hospitalizes and procedures and ultimately ensure that they receive the care that they desire.

Thank you for the opportunity to testify on this measure.

Sincerely,

Dawn Kurisu

Assistant Vice President

Community and Government Relations

Thirty Years of Healthcare with Aloha

ALOHACARE

To: The Honorable Della Au Belatti, Chair

The Honorable Jenna Takenouchi, Vice Chair House Committee on Health & Homelessness

From: Paula Arcena, External Affairs Vice President

Mike Nguyen, Public Policy Manager

Hearing: Friday, March 15, 2024, 9:00 AM, Conference Room 329

RE: SB2529 SD1 Relating to Provider Orders for Life Sustaining

Treatment Form

AlohaCare appreciates the opportunity to provide testimony in **support** of **SB2529 SD1**. This measure amends the definition of "patient's provider" in state law governing Provider Orders for Life-Sustaining Treatment (POLST) by removing language that requires the provider to examine the patient.

Founded in 1994 by Hawai'i's community health centers, AlohaCare is a community-rooted, non-profit health plan serving over 84,000 Medicaid and dual-eligible health plan members on all islands. Approximately 40 percent of our members 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, whole-person care for all.

AlohaCare is committed to improving access to care for all people throughout their lives, including end-of-life care. The POLST is a portable medical order that documents a patient's choices for treatment near the end of life. This bill addresses an unnecessary barrier to completing a POLST form that is not required by Medicare or any other state. This bill does not change a provider's obligation to evaluate and care for a patient and decreases barriers to having hospice patients complete or update a POLST. AlohaCare supports this bill to empower patients to receive the care they want and avoid any care that goes against their wishes, particularly unwanted invasive treatments.

Mahalo for this opportunity to testify in **support** of **SB2529 SD1**.



March 15, 2024

To: Chair Belatti, Vice Chair Takenouchi, and Members of the House Committee on Health and Homelessness

From: The Hawaii Association of Health Plans Public Policy Committee
Date/Location: March 15, 2024; 9:00 a.m./Conference Room 329 & Videoconference

Re: Testimony in support of SB 2529 SD1 – Relating to Provider Orders for Life Sustaining Treatment Form

The Hawaii Association of Health Plans (HAHP) supports SB 2529 SD1. HAHP is a statewide partnership that unifies Hawaii's health plans to improve the health of Hawaii's communities together. A majority of Hawaii residents receive their health coverage through a plan associated with one of our organizations.

HAHP is a strong supporter of Hawaii POLST and we believe it's a tool that all Hawaii residents should have access to. We recently supported efforts to have the Hawaii POLST form translated into 11 additional languages to improve accessibility for our community. This collaborative effort is now allowing residents across the state, regardless of their native language, access to comprehensive and compassionate understanding about end-of-life choices.

We support the efforts of this legislature to help individuals specify the type of care they'd like to receive and provide them with the means to make that happen.

Thank you for the opportunity to testify in support of SB 2529 SD1.

Sincerely,

HAHP Public Policy Committee cc: HAHP Board Members



The state of

Friday, March 15, 2024 at 9:00 am Conference Room 329

Senate Committee on Health and Homelessness

To: Chair Della Au Belatti

Vice Chair Jenna Takenouchi

From: Paige Heckathorn Choy

AVP, Government Affairs

Healthcare Association of Hawaii

Re: Testimony in Support

SB 2529 SD 1, Relating to Providers Orders for Life Sustaining Treatment Form

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 testify **support** of this measure, which would amend Hawaii Revised Statute to remove the requirement that defines a patient's provider as a physician, physician assistant, or advanced practice registered nurse who has examined the patient. This requirement creates unnecessary barriers particularly for patients seeking hospice care, as Medicare does not require a face-to-face encounter within this same timeframe. We believe this simple change will help to honor the choices individuals make for end-of-life care in a more meaningful way.

Promoting end-of-life care planning, including the use of provider orders for life sustaining treatment, is a meaningful goal and we appreciate the legislature's support. Thank you for the opportunity to support this needed change.



March 13, 2024

Dear Chair Rep. Della Au Belatti, Vice-Chair Rep. Jenna Takenouchi and members of the House Committee on Health & Homelessness.

This testimony is in **strong support of SB2529 SD1** which will enable an administrative adjustment to the Provider Orders for Life Sustaining Treatment (POLST) legislation. Please pass the bill as is.

This non-substantive administrative change will help to bring our POLST law in line with other states and will not impact the quality of POLST. This change does not change a provider's obligation to evaluate and care for a patient and decreases barriers to having hospice patients complete or update a POLST. This change is supported by our hospice providers as well as other members of the healthcare community.

POLST is a widespread and well-functioning program in Hawaii and has been in effect since 2009. POLST, a portable medical order, ensures that patients with serious illness will have their treatment plans honored outside of a hospital.

Kōkua Mau serves as the administrative home for POLST in Hawaii and I currently serve on the National POLST organization as the Hawaii representative. The Kōkua Mau website is the hub to get information for providers and the public and download. We also provide training and guidance throughout our community on POLST. www.kokuamau.org/polst

Kōkua Mau is a statewide coalition that has worked since 1999 to improve care for those with serious illness. We work to help those who may be facing serious illness and their loved ones understand decisions they may need to make and to understand different care options. As such we encourage early completion of Advance Directives (availabe in 11 languages for free on our website) as well as information on POLST, palliative care, hospice care and grief and bereavement.

I am happy to answer any questions and will attend the hearing on Friday March 15, 2024.

Mahalo nui loa

Jeannette Koijane, MPH

Executive Director

Kōkua Mau, A Movement to Improve Care

jkoijane@kokuamau.org

Hawaii State Legislature House of Representatives

Committee on Health Representative Della Au Belatti, Chair Representative Jenna Takenouchi, Vice Chair

Hearing Date: Friday, March 15, 2024

Testimony IN SUPPORT of SB2529 SD1

Testimony of Kenneth Zeri, RN, MS President and CEO of Hospice Hawaii, Inc. *dba* Navian Hawaii

Aloha, Chair Belatti, Vice Chair Takenouchi, and members of the House Committee on Health.

I offer this testimony in SUPPORT of SB2529 SD1 relating to Providers Orders for Life Sustaining Treatment and encourage you all to pass this bill <u>as written</u>.

Background: I have been involved in the POLST legislation since its inception. Initially, a patient's "Provider" was a physician who had examined the patient. Over the years this law was amended to allow Advance Practice Nurses and then Physician Assistants to be included in the "Provider" definition.

During those initial years, only about 20% to 25% of all people (in Hawaii) who died per year were cared for by a hospice provider. Today, almost 50% of all deaths per year occur under the professional care of hospice providers. That is about 4000 people per year. Unfortunately, most people still only receive hospice for less than three weeks. According to Medicare data, the median stay on hospice is about 23 days.

As a result, for those patients who come into hospice without a POLST form, it becomes logistically impractical for a MD, APRN or PA to make a face-to-face clinical examination of the patient. Instead, the hospice RN, as a skilled and trained professional in discussing goals of care and the patient's decisions regarding life sustaining treatment, can assist the patient or their legal representative. The current law actually allows other professional staff to assist a patient and family in completing the document and preparing it for the MD, APRN, or PA signature.

Thus, we believe that the amendment to remove the requirement for an "examination" will facilitate a timely completion of a POLST form.

This is also consistent with Medicare's standard for allowing a hospice Medical Director to Certify Terminal Illness and admission to hospice care. Medicare allows the hospice

RN to conduct a nursing assessment, and along with medical records of other providers, permits the Medical Director to certify without requiring a clinical, face-to-face, examination. The same standard can be applied to the POLST document.

Changing this definition of a "Provider" allows for a more streamlined process, assuring that the thousands of patients who have a very brief care experience with hospice will still have a properly and legally executed POLST document should they need the support of EMS, other first responders, or other emergency care.

I urge you to pass this bill AS IS, unamended.

Respectfully,

Ken Zeri, RN, MS President and CEO Navian Hawaii



1011 Waianuenue Avenue Hilo, Hawaii 96720-2019 Phone: (808) 969-1733 Fax: (808) 961-7397

care@hawaiicarechoices.org www.hawaiicarechoices.org

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COMMITTEE ON HEALTH & HOMELESSNESS

Representative Della Au Belatti, Chair Representative Jenna Takenouchi, Vice Chair

TESTIMONY IN SUPPORT OF SB 2529 SD1 RE:

RELATING TO PROVIDER ORDERS FOR LIFE SUSTAINING

TREATMENT (POLST) FORM

Hearing: Friday, March 15, 2024 at 9:00 a.m.

Dear Chair Au Belatti, Vice Chair Takenouchi and Members of the Committee:

Thank you for the opportunity to provide testimony in SUPPORT of SB 2529 SD1 amending the definition of "patient's provider" in state law governing POLST by removing language that requires the provider to examine the patient.

In Hawaii, we strive to provide care with compassion and respect for all people and for all phases of life. One of the most important documents that seriously ill individuals should complete is a POLST, a portable medical order that documents a patient's care plan outside of the hospital, which is followed by health care providers, paramedics, and firefighters.

Passing the Bill in its current form removes language that impedes the sickest and most vulnerable patients from obtaining a POLST in a timely manner, thereby exposing them to the risk of receiving unwanted and unnecessary care. The proposed amendment will allow licensed physicians, advanced practice registered nurses, and physician assistants to sign POLST for their patients without a face-to-face encounter, thus, strengthening the ability of hospices and other healthcare providers to help their patients complete the POLST.

Hawai'i Care Choices is a nonprofit, tax-exempt charitable organization. Our Team of physicians, providers, nurses, social workers, certified nurse aides, spiritual counselors, grief counselors and volunteers provide a continuum of quality and specialized care for seniors or for patients facing a serious and/or life-limiting illness, and their loved ones who care for them. In addition, our organization is committed to providing the community-at-large with bereavement support and grief counseling.

Hawaii has a strong POLST program that is widely used across the state. The proposed amendment will streamline the process of establishing and updating the POLST form based on the patient's current health status and goals of care. We respectfully request passage of HB 2529 SD1.

Sincerely,

Brenda S. Ho, MS, RN Chief Executive Officer



March 13, 2024

Honorable Chair Au Bellati, Vice Chair Takenouchi, and Esteemed House Committee on Health and Homelessness Members,

I have practiced and taught full-time palliative medicine in Hawaii for 20 years, and I am writing, as an individual, **in strong support of SB 2529, SD1**. I have been involved with POLST in Hawaii from its beginning and most recently lead the efforts to update our POLST form to include Physician Assistants and bring other updates and improvements to the POLST form.

Provider Orders for Life-Sustaining Treatment (POLST) is the national standard by which individuals living with serious illness can direct their care in advance of a medical emergency. It is the best tool available to ensure patients receive all wanted care and avoid any unwanted care, particularly unwanted invasive treatments near the end of life.

SB 2529, SD1 will empower more people in Hawaii to have their choices honored and to control their end-of-life care. The proposed language change of SB 2529, SD1 will also bring Hawaii in line with the rest of the nation.

I thank the Committee for its attention and diligence in ensuring the people of Hawaii receive quality health care that is safe, timely, equitable, and personcentered.

Respectfully,

Daniel Fischberg, MD, PhD, FAAHPM

Kailua, HI

Submitted on: 3/13/2024 12:19:32 PM

Testimony for HLT on 3/15/2024 9:00:00 AM

Submitted By	Organization	Testifier Position	Testify
rachel porter	Individual	Support	Written Testimony Only

Comments:

This testimony is in strong support of SB 2529 SD1 which will enable an administrative adjustment to the Provider Orders for Life Sustaining Treatment (POLST) legislation. I ask for it to be passed AS IS.

Hawaii State Legislature State House of Representatives

Committee on Health and Homelessness Representative Della Au Belatti, Chair Representative Jenna Takenouchi, Vice Chair Hearing Date: Friday, March 15, 2024; 9 am; Room 329

Testimony IN STRONG SUPPORT of SB2529 SD1

Testimony of Keith R. Ridley, private citizen and retired Chief of the Department of Health, Office of Health Care Assurance (OHCA).

Aloha, Chair Belatti, Vice Chair Takenouchi, and members of the House Committee on Health and Homelessness.

I am IN STRONG SUPPORT of SB2529 SD1.

Thank you for hearing this bill. This bill simply amends the definition of "patient's provider" as currently defined in HRS 327K-1 and, as a result, will allow for the timely creation or updating of an individual's Provider Orders for Life Sustaining Treatment (POLST) form when circumstances do not readily permit a face-to-face encounter between a patient and his/her physician, advanced practice registered nurse (APRN), or physician assistant (PA). Circumstances include when patients enter hospice care and a new or updated POLST is urgently needed.

The POLST form is recognized by first responders and professional health care caregivers throughout the state and is used in many health care settings including hospitals, skilled nursing facilities (SNF), adult residential care homes (ARCH), expanded ARCH (E-ARCH), community care foster family homes (CCFFH), hospices, and other settings.

Please pass SB2529 SD1 AS IS. Thank you.



J. Mike Meyer, RN, ECC

March 13, 2024

Dear Chair Rep. Della Au Belatti, Co- Chair Rep. Jenna Takenouchi, and members of the House Committee on Health & Homelessness,

I am in strong support of SB2529 SD1.

I am an elder care attorney who represents elderly adults whose health conditions often merit having a Provider's Order for Life Sustaining Treatment or POLST. The administrative improvement addressed in this bill will ensure that my clients and all other kupuna in our community will have greater access to this important document.

The POLST document is a required part of the hospice admission process. It is also required by retirement communities, assisted living facilities, nursing homes and adult daycare programs. It is the gold standard in Hawaii for having medical orders honored in out-of-hospital environments.

The modification of the wording proposed by SB2529 SD1 will eliminate any barriers to the sickest and most vulnerable patients seeking hospice care from obtaining a POLST and risking receiving unwanted care. The obligation on providers to assess the patient's appropriateness for the POLST and the care plan would remain unchanged.

I ask that members of the committee pass SB2529 SD1 AS IS.

LAURIE T.S. ADAMSHICK

Janie J. Halays

Submitted on: 3/13/2024 9:09:49 PM

Testimony for HLT on 3/15/2024 9:00:00 AM

Submitted By	Organization	Testifier Position	Testify
Lawren Love	Individual	Support	Written Testimony Only

Comments:

To whom it may concern:

I am writing in support of this bill.

I am a hospice physician practicing in Hawaii. Patients admitted to hospice may have a delay in the ability to execute a legal POLST due to the verbiage requiring POLST to be signed by a provider who has examined the patient. The hospice nurse or SW sees the patient first and has a discussion with patient about their wishes surrounding life sustaining treatment. They may fill out a POLST with the patient and then notify me of the conversation they had. I need to be able to sign that POLST without waiting until I am able to make a visit to see the patient. Without a legal POLST, patients are at risk of receiving care that goes against their wishes. Sincerely,

Lawren Love, MD

Submitted on: 3/14/2024 7:38:58 AM

Testimony for HLT on 3/15/2024 9:00:00 AM

Submitted By	Organization	Testifier Position	Testify
J Emma Grote	Individual	Support	Written Testimony Only

Comments:

Dear Chair Rep Della Au Belatti, Co- Chair Rep. Jenna Takenouchi, and members of the House Committee on Health & Homelessness.

Dr J Emma Grote, Hospice Physician, Navian Hawaii. 808.358.4799

March 14, 2024

In Strong Support for SB2529 and HB2285 relating to improving access to POLST

I am a Hospice & Palliative Care Physician, working with Navian Hawaii the last 7 years. POLST is a medical document that allows a patient's autonomy and wishes around life prolonging treatment to be honored by EMS and first responders when called to a medical emergency. As a hospice agency, our admission nurses routinely evaluate goals of care as patients come onto hospice services. This involves comprehensive exploration of goals of care and education about the POLST by the Admission RN to the patient and family. Frequently, medical goals change as patients near end of life and an updated POLST must be completed. Our current legislation requires that the Patient Provider who signs off on the POLST "has examined the patient". We routinely have a patient's hospitalist or PCP (who has previously examined the patient) complete this documentation. However there are cases where a patient may not have a PCP or recent physician contact. In these cases it requires a visit by one of our APRN / physicians to examine the patient before the POLST can be signed. It is not unusual for patients on hospice to die within 7 days of admission and some will pass within hours - day. Scheduling physician / APRN visits to solely fulfill the requirement of current POLST when no symptom management / education is required can be difficult as they also work to address more pressing patient management issues. Because of this, it may take up to a week to have these visits done and thus patients are left without a valid POLST which reflects their current desires towards life sustaining treatment. Taking out the words "who has examined

the patient" will allow patients to have a valid POLST at time of admission ,preventing unwanted medical treatments in the case where EMS is activated. Taking out this wording does not change the obligation for signing providers to evaluate and assess the appropriateness of POLST and care plan. As a physician, we review medical records and take report from the Admission Nurse with each new patient allowing us to clarify any questions or concerns there may be as we review our plan of care. I strongly support SB2925 and HB2285 to ensure that a patient's desire around life sustaining therapy may be facilitated by timely completion of a POLST, thereby preventing potential unwanted medical treatment.

<u>SB-2529-SD-1</u> Submitted on: 3/14/2024 8:54:36 AM

Testimony for HLT on 3/15/2024 9:00:00 AM

Submitted By	Organization	Testifier Position	Testify
Elizabeth Nelson	Individual	Support	Written Testimony Only

Comments:

I strongly support this legislation and would request that you pass this as is. Thank you.

Liz Nelson

Submitted on: 3/14/2024 2:01:37 PM

Testimony for HLT on 3/15/2024 9:00:00 AM

Submitted By	Organization	Testifier Position	Testify
Craig Thomas	Individual	Support	Written Testimony Only

Comments:

Dear Chair Rep Della Au Belatti, Co- Chair Rep. Jenna Takenouchi, and members of the House Committee on Health & Homelessness.

This testimony is in strong support of SB 2529 SD1 which will enable an administrative adjustment to the Provider Orders for Life Sustaining Treatment (POLST) legislation. I/we ask for it to be passed AS IS.

Craig Thomas, MD

Submitted on: 3/14/2024 3:47:08 PM

Testimony for HLT on 3/15/2024 9:00:00 AM

Submitted By	Organization	Testifier Position	Testify
Hope Young	Individual	Support	Written Testimony Only

Comments:

Dear Chair Rep Della Au Belatti, Co- Chair Rep. Jenna Takenouchi, and members of the House Committee on Health & Homelessness.

This testimony is in strong support of SB 2529 SD1 which will enable an administrative adjustment to the Provider Orders for Life Sustaining Treatment (POLST) legislation. I/we ask for it to be passed AS IS.

Submitted on: 3/14/2024 2:40:12 PM

Testimony for HLT on 3/15/2024 9:00:00 AM

Submitted By	Organization	Testifier Position	Testify
Mary Smart	Individual	Oppose	Written Testimony Only

Comments:

I oppose this bill. I oppose the whole notion of POLST that doctors sometimes have you sign without full knowledge of what the document means. It is just given to you as another form to sign while visiting the doctor's office or hospital. While my father was in the hospital, a POLST form was nearly forced on me as his medical power of attorney. I was appointed to make medical decisions for him, not some unknown "provider" (according to current definitions is a licensed physician, advanced practice registered nurse, or physician assistant "who has examined the patient - which should definitely mean that they have had a face-to face encounter with the patient").

First the POLST form was the "Physician orders for Life-Sustaining Treatment", and then you passed legislation that it would change to "Provider" which lowers standards of care for anyone who signs one of those forms. Now, you want to degrade patient protections and say a "provider" doesn't even have to any "face to face" time with the person whose life will be put in their hands. This is totally unacceptable.

The question in my mind is: Why is Hawaii's legislature trying to make it easier and easier to kill (when you "assist in dying" you are killing the patient) the residents of this state? This is not acceptable!

Do not pass SB2339 SD1. We don't want it. Day after day I have to submit testimony against measures that take away rights and reduce standards of care. Work on ways to improve care and help us live a better life instead of working to expedite our death.