

JOSH GREEN, M.D.
GOVERNOR

SYLVIA LUKE
LIEUTENANT GOVERNOR



JADE T. BUTAY
DIRECTOR

WILLIAM G. KUNSTMAN
DEPUTY DIRECTOR

STATE OF HAWAII
KA MOKU'ĀINA O HAWAII
DEPARTMENT OF LABOR AND INDUSTRIAL RELATIONS
KA 'OIHANA PONO LIMAHANA

February 17, 2026

To: The Honorable Jackson D. Sayama, Chair,
The Honorable Mike Lee, Vice Chair, and
Members of the House Committee on Labor

Date: Tuesday, February 17, 2026
Time: 9:00 a.m.
Place: Conference Room 309, State Capitol

From: Jade T. Butay, Director
Department of Labor and Industrial Relations (DLIR)

Re: H.B. 1514 RELATING TO WORKERS' COMPENSATION

I. OVERVIEW OF PROPOSED LEGISLATION

The **DLIR supports the intent** of this measure and **respectfully requests amendments** to maintain consistency and strengthen the intent of the measure.

HB1514 proposes to amend HRS §386-25 by:

- Clarifying the process for selecting a certified employer of rehabilitation services.
- Requiring a provider to automatically approve an injured employee for vocational rehabilitation services if the provider determines that the injured employee will likely require vocational rehabilitation services to return to suitable gainful employment.
- Requiring providers to file an employee's vocational plan no later than ninety days after submitting an initial evaluation report, with certain exceptions.

II. CURRENT LAW

§386-25(a) provides that the purpose of vocational rehabilitation is:

- To restore an injured worker's earnings capacity as nearly as possible to the level that the worker was earning at the time of injury, and
- To return the injured worker to suitable gainful employment in the active labor force as quickly as possible in a cost-effective manner.

§386-25(d) specifies that a provider shall submit an initial evaluation report of the employee to the employer and the director within forty-five days of the date of referral

or selection. The evaluation shall determine whether the employee requires vocational rehabilitation services to return to suitable gainful employment, identify the necessary services, and state whether the provider can provide these services.

III. COMMENTS ON THE HOUSE BILL

The Department supports this measure and respectfully requests amendments to maintain consistency and strengthen the intent of the measure:

- Page 4, line 18, insert: “*or after the employee self-refers.*” This accommodates the employee’s current ability to self-refer.
- Page 5, lines 3 to 5, strike “*The injured employee shall have thirty days after the notice of selection is received to select a different certified provider of rehabilitation services.*”

The proposed amendments provide that if an employee fails to select a provider within 30 days, then the employer shall select a provider and inform the employee. Since the injured employee was already afforded an opportunity to select a provider within 30 days and failed to do so, allowing the injured employee to take an additional 30 days to select a different provider would prolong the start of the rehabilitation process. Moreover, the employer would also be required to continue temporary total disability benefit payments during this period.

Without the suggested deletion, the proposed language appears to work against the intent to streamline the process and help the employee return to work as quickly as possible and in a cost-effective manner pursuant to the purpose of §386-25.

- Page 7, line 11, insert at the end of line: “*and the initial evaluation finds the injured employee feasible to participate.*”
- The DLIR, through HB2323, is also recommending amendments to §386-25(g) to support the ongoing automation of the Disability Compensation Division. Accordingly, the Department suggests inserting the contents of HB2323 found on Page 3, lines 3 to 8 of that measure into the redesignated subsection (h) in this measure to read as follows:

“(h) The employer shall have ten calendar days from the receipt of the plan to submit in writing to the director any objections to the plan. A treatment plan shall be deemed received by an employer when the plan is transmitted with reasonable evidence showing that the plan was received.”

The Department supports this measure with the recommended amendments to help ensure an efficient and effective rehabilitation process that helps injured employees return to work as quickly as possible, reduces the risk of prolonged adverse effects on the employee, and minimizes costs for employers and insurers.

JOSH GREEN, M. D.
GOVERNOR
KE KIA'ĀINA

SYLVIA LUKE
LT. GOVERNOR
KA HOPE KIA'ĀINA



BRENN A H. HASHIMOTO
DIRECTOR
KA LUNA HO'OKELE

BRIAN K. FURUTO
DEPUTY DIRECTOR
KA HOPE LUNA HO'OKELE

STATE OF HAWAII | KA MOKU'ĀINA O HAWAII
DEPARTMENT OF HUMAN RESOURCES DEVELOPMENT
KA 'OIHANA HO'OMŌHALA LIMAHANA
235 S. BERETANIA STREET
HONOLULU, HAWAII 96813-2437

Statement of
BRENN A H. HASHIMOTO
Director, Department of Human Resources Development

Before the
HOUSE COMMITTEE ON LABOR
Tuesday, February 17, 2026
9:00AM
State Capitol, Conference Room 309

In consideration of
HB1514, RELATING TO WORKERS' COMPENSATION

Chair Sayama, Vice Chair Lee, and members of the committee:

The Department of Human Resources Development (HRD) is in **support** of HB1514.

The purpose of HB1514 is to:

- Clarify the process for selecting a certified provider of rehabilitation services.
- Requires providers to automatically approve vocational rehabilitation services for an injured employee if those services will likely be required for suitable gainful employment.
- Requires providers to file an employee's vocational plan no later than ninety days after submitting an initial evaluation report, with certain exceptions.

HRD has a fiduciary duty to administer the State Executive Branch's workers' compensation program. As a self-insured agency, HRD appreciates and is in support of the intent of the measure which focuses on returning injured workers to suitable gainful employment in a timely fashion by clarifying referral processes to vocational rehabilitation specialists while affirming responsibilities of the injured worker, the vocational rehabilitation specialist, and the employer.

Thank you for the opportunity to provide testimony. We are available to answer any questions or provide further information as needed.

TESTIMONY OF MILIA LEONG

COMMITTEE ON LABOR
Representative Jackson D. Sayama, Chair
Representative Mike Lee, Vice Chair

Tuesday, February 17, 2026
9:00 a.m.

HB 1514

Chair Sayama, Vice Chair Lee, and members of the Committee on Labor, my name is Milia Leong, Executive Claims Administrator for HEMIC Insurance Managers, Inc., and Chair of the Workers' Compensation Policy Committee for Hawaii Insurers Council. The Hawaii Insurers Council is a non-profit trade association of property and casualty insurance companies licensed to do business in Hawaii. Member companies underwrite approximately forty percent of all property and casualty insurance premiums in the state.

Hawaii Insurers Council **supports** this bill. As a part of a House Workers' Compensation Working Group comprised of stakeholders in the system including the Department, treating physicians, providers including vocational rehabilitation counselors, plaintiff and defense attorneys, other providers and insurers, this bill is a result of that collaboration. This bill will help to move the process of vocational rehabilitation so that injured workers may return to work as soon as possible.

However, there is a section in the bill that was not agreed to by the Working Group, and we ask that the bill be amended to restore the language on Page 7, lines 13-17 to its original form. This would eliminate the requirement for a provider to submit an initial evaluation report within 90 days.

We ask that this bill be amended and for it to move to the next committee. Thank you for the opportunity to testify.

**INTERNATIONAL ASSOCIATION OF REHABILITATION PROFESSIONALS (IARP),
HAWAII CHAPTER**

TO: **COMMITTEE OF LABOR**
 Rep. Jackson D. Sayama, Chair
 Rep. Mike Lee, Vice Chair

FROM: Andrew Alejandro, M.S., CRC
 President

DATE: FEBRUARY 15, 2026

RE: HB1514 - RELATING TO WORKERS' COMPENSATION HEARING
 Date: FEBRUARY 17, 2026
 TIME: 9:00AM
 State Capitol - Conference Room 309 & Videoconference

The International Association of Rehabilitation Professionals, Hawaii Chapter **opposes** the following revisions to HB 1514:

1. (4)(c) *Enrollment in a rehabilitation plan or program shall not be mandatory and the approval of a proposed rehabilitation plan or program by the injured employee shall be required. [The] If the injured employee elects to enroll in a rehabilitation plan or program, the injured employee [may] shall select a certified provider of rehabilitation services[.] no later than thirty days after the referral is made by the director. Both the certified provider and the injured employee, within a reasonable time after initiating rehabilitation services, shall give proper notice of selection to the employer. If the injured employee fails to select a certified provider within thirty days, the employer shall select the certified provider of rehabilitation services and give proper notice of selection to the employee. The injured employee shall have thirty days after the notice of selection is received to select a different certified provider of rehabilitation services.*

OPPOSITION RATIONAL:

IARP HAWAII CHAPTER opposes the following from section (4)(c), “*if the injured employee fails to select a certified provider within thirty days, the employer shall select the certified provider of rehabilitation services and give proper notice of selection to the employee”.* The basis for this opposition is that referral to a rehabilitation provider is submitted **by the director**, and **not the employer**.

In accordance with Administrative Rule §12-14-23, (c) “*...The employee shall have thirty calendar days from the date the employer provides the information to the employee to make a selection. If the employee fails to select, the employer may request a referral from the director.*” As stipulated in this already established administrative rule, the employer “*may request*” a referral to a provider through the director, and thus ***may not “select” the certified provider.***

This stipulation is further elaborated through form WCRP-39a (rev. 7/2025) “the Statement of Workers’ Rights and Responsibilities”, to which it indicates that the Injured Worker, “*may select services with any one certified rehabilitation provider from the department’s list of certified providers. If you [Injured Worker] do not select a provider within thirty calendar days from the date your employer provides the information to you, **the director may refer** you to a counselor from the department’s list of registered counselors upon request.*”

2. (5)(e) *A provider shall automatically approve vocational rehabilitation services for an injured employee; provided that the provider determines that the injured employee will likely require vocational rehabilitation services to return to suitable gainful employment.*

~~[-(-e-)-]~~ (f) *A provider shall file the employee’s plan with the approval of the employee [.] no later than 90 days after the provider submits an initial evaluation report, unless the employer, provider and injured worker are agreeable to an extension of that deadline to a specific date by which the vocational plan must be completed.*

OPPOSITION RATIONAL:

Assigning a specific timeline for plan submittal after an injured worker enrolls into private VR program is not practical, as adjustment to disability is individualized to the participant and must be addressed in a person-centered fashion. Factors such as comorbidity of injury, past trauma, and attainment of successful coping strategies may all affect the injured worker’s ability to move forward with seeking and obtaining suitable gainful employment.

To require an injured worker to be placed into plan within a 90-day period after initial evaluation is not only a disservice to the injured worker but is in direct conflict to the Code of Professional Ethics for Certified Rehabilitation Counselors; as CRCs are committed to recognizing diversity and embrace of culturally relevant and responsive approaches to support the worth, dignity, potential, and uniqueness of individuals with disabilities within their social and cultural context. It is irresponsible to assume that all injured workers will be “plan-ready” within a 90-day period after initial evaluation; as *uniqueness of disability* needs are not only quantified through recommended services, but also through the necessary time it will take for injured workers to mentally and physically reach their own personal “plan readiness.”

Further, the Code of Professional Ethics for Certified Rehabilitation Counselors requires all VR providers to operate under six principles of ethical behavior, one of which is Justice; to be fair in the treatment of all clients; to provide appropriate services to all. Should injured workers be forced to be placed into rehabilitation plan before they are physically and psychologically capable, the appropriateness of services outlined in the plan **cannot reasonably** be considered “appropriate”.

Per HRS 386-25 (e), A plan shall include a statement of the feasibility of the vocational goal, using the process of:

(1) First determining if the employee's usual and customary employment represents suitable gainful employment, and, should it not;

(2) Next determining if modified work or other work with the same employer represents suitable gainful employment, and, should it not;

(3) Next determining if modified or other employment with a different employer represents suitable gainful employment, and finally, should it not;

(4) Then providing training to obtain employment in another occupational field. When training to obtain employment in another occupational field is required, the first appropriate option among the following options shall be selected for the employee.

Prior to confirming a vocational goal to be pursued, statutes state that the VR provider and injured worker must first confirm the Employer's ability to either allow for the injured worker to return to their usual and customary duties or confirm modified work or other work with the same employer that represents suitable gainful employment. In the event that the Employer does not respond to the VR provider's inquiry for return-to-work options within the initial 90-day plan creation period, a VR plan would be unable to be submitted and still remain compliant with HRS 386-25 of confirming work accommodations with the Employer first.

As proposed in section (5)(e) of this bill, *“provider shall automatically approve vocational rehabilitation services...provided that the provider determines that the injured employee will likely require vocational rehabilitation services to return to suitable gainful employment.”* VR providers strongly advocate for early intervention of vocational rehabilitation services, even while employees are still receiving treatment. However, should the injured worker be receiving on-going medical treatment for their injury, and work clearance from their Treating Physician is yet to be received at the 90-day plan submittal due date, the injured worker would be physically unable to participate in a formalized rehabilitation plan until all medical treatments are addressed and work clearance received.

Lastly, vocational rehabilitation services offered through the Federal/State vocational rehabilitation agencies may typically allow for unlimited modifications or revisions of a vocational rehabilitation plan, after an initial plan is submitted. VR providers within Workers Compensation are not afforded the ability to submit multiple VR plan amendments. Should the 90-day plan submittal model be enacted for Workers Compensation, private VR providers ***should also*** be afforded the same opportunity to submit unlimited amount of plan amendments to ensure successful job placement of the injured worker.

CONCLUSION:

IARP HAWAII CHAPTER advocates that HRS 386-25 (4)(c) remains written as follows; *“Enrollment in a rehabilitation plan or program shall not be mandatory and*

the approval of a proposed rehabilitation plan or program by the injured employee shall be required. The injured employee may select a certified provider of rehabilitation services. Both the certified provider and the injured employee, within a reasonable time after initiating rehabilitation services, shall give proper notice of selection to the employer.”

IARP HAWAII CHAPTER also advocates that HRS 386-25 (e) remains written as follows; *“A provider shall file the employee's plan with the approval of the employee. Upon receipt of the plan from the provider, an employee shall have ten days to review and sign the plan. The plan shall be submitted to the employer and the employee and be filed with the director within two days from the date of the employee's signature...”*

I humbly request the Committee to consider this opposition statement. Thank you for the opportunity to provide testimony.

Sincerely,

A handwritten signature in black ink, appearing to read "Andrew Alejandro". The signature is fluid and cursive, with a large initial "A" and "A".

Andrew Alejandro, M.S., CRC
President, IARP HI Chapter



The House Committee on Labor
February 17, 2026
Room 309
9:00 AM

RE: **HB 1514, Relating to Workers' Compensation**

Attention: Chair Jackson D. Sayama, Vice Chair Mike Lee, Members of the
Committee

The University of Hawaii Professional Assembly (UHPA), the exclusive bargaining representative for all University of Hawai'i faculty members across Hawai'i's statewide 10-campus system, **supports HB 1514.**

We believe this measure is essential to updating the vocational rehabilitation process to ensure that injured faculty members can return to their careers as efficiently and safely as possible.

UHPA specifically supports the bill's emphasis on early intervention, the streamlining of approval processes, and the establishment of clear accountability timelines. By requiring providers to automatically approve necessary services when specific criteria are met, this legislation removes bureaucratic hurdles that often leave injured workers in limbo. Furthermore, requiring providers to file a comprehensive vocational plan within ninety days of their initial evaluation report ensures that rehabilitation does not stall indefinitely. These deadlines are critical for preventing administrative delays that impede a faculty member's recovery and return to work.

UHPA supports the passage of HB 1514.

Respectfully submitted,

Christian L. Fern
Executive Director
University of Hawaii Professional Assembly



HAWAII REHABILITATION COUNSELING ASSOCIATION
120 Pauahi Street, Room 206B
Hilo, HI 96720

TO: COMMITTEE ON LABOR
Rep. Jackson D. Sayama, Chair
Rep. Mike Lee, Vice Chair

FROM: Lanelle Yamane, MS, CRC, LMHC
President

DATE: 2/16/26

RE: HB1514 - RELATING TO WORKERS' COMPENSATION
Date: FEBRUARY 17, 2026
TIME: 9:00AM State Capitol - Conference Room 309 & Videoconference

The Hawaii Rehabilitation Counseling Association **opposes** the following revision to HB 1514:

HRS 386-25 1.(4)(c)*If the injured employee fails to select a certified provider within thirty days, the employer shall select the certified provider of rehabilitation services and give proper notice of selection to the employee.....*

RATIONAL FOR OPPOSITION:

Impartiality is preserved if the director and not the employer selects the certified provider of rehabilitation.

The Hawaii Rehabilitation Counseling Association **opposes** the following revision to HB 1514:

[-(-e)-] (f) A provider shall file the employee’s plan with the approval of the employee no later than 90 days after the provider submits an initial evaluation report, unless the employer, provider, and injured worker are agreeable to an extension of that deadline to a specific date by which the vocational plan must be completed.

RATIONAL FOR OPPOSITION:

Injured workers are going through the adjustment to disability change process and typically enroll in a vocational rehabilitation program while in the denial phase (dealing with anger, grief, and depression) and counseling is needed to help them accept and adjust to their disability before a feasible vocational goal can be identified to submit a rehabilitation plan. Injured workers are not ready to develop a rehabilitation plan until they accept the reality of having permanent impairment and work limitations. Acceptance of change is not a quick process nor can it be forced upon a person within a pre-determined time frame without harm to the individual.

A change of career or occupation is difficult at any age and an injured worker needs time and guidance to explore their vocational options with their vocational rehabilitation counselor to make an informed decision.

An injured worker needs time to benefit from vocational rehabilitation services prior to rehabilitation plan development. These services include: adjustment to disability counseling, vocational exploration, transferrable skills analysis, job search skills improvement, understanding the labor market and the vocational choices available, vocational evaluation services, and thorough rehabilitation plan development. The aforementioned services cannot be accomplished within only ninety days.

Injured workers are also referred and enrolled in vocational rehabilitation while they are going through medical treatment and they may not be medically stable and physically/psychologically ready to formulate a rehabilitation plan within ninety days.

Additionally, the Federal/State vocational rehabilitation system allows for uncapped modifications or revisions of a vocational rehabilitation plan whereas the Worker's Compensation vocational rehabilitation system allows for only one revision to a rehabilitation plan. If the Federal/State vocational rehabilitation system was used as a model for this proposed legislative change, then uncapped modifications or revisions of a vocational rehabilitation plan should also be considered.

We recommend HRS 386-25 remain as currently written.

We respectfully ask this Committee to consider the above. Thank you for the opportunity to testify.



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 LABOR
Representative Jackson D. Sayama, Chair
Representative Mike Lee, Vice Chair

Date: February 17, 2026
From: Hawaii Medical Association (HMA)
Elizabeth Ann Ignacio MD - Chair, HMA Public Policy Committee
Christina Marzo MD and Robert Carlisle MD, Vice Chairs, HMA Public Policy Committee

RE HB1514 RELATING TO WORKERS' COMPENSATION. Workers' Compensation; Vocational Rehabilitation Services; Certified Providers; Automatic Approval
Position: Support

This measure would clarify the process for selecting a certified provider of rehabilitation services, require providers to automatically approve vocational rehabilitation (VR) services for an injured employee if those services will likely be required for suitable gainful employment, require providers to file an employee's vocational plan no later than ninety days after submitting an initial evaluation report, with certain exceptions.

Patients with work-related injury or illness need prompt evaluation, diagnosis and treatment. Timely access to a VR program, typically provided by an Occupational Therapist as part of a public or private VR agency, is necessary to support the patient's recovery and safe return to gainful employment to the best of their abilities. HMA supports this measure that clarifies the process for VR services following Initial Evaluation, allowing automatic approval for these needed, time-sensitive services that support Hawaii patients with work related illness or injury.

Thank you for allowing the Hawaii Medical Association to testify in support of this measure.

2026 Hawaii Medical Association Public Policy Coordination Team

Elizabeth A Ignacio, MD, Chair • Robert Carlisle, MD, Vice Chair • Christina Marzo, MD, Vice Chair
Linda Rosehill, JD, Government Relations • Marc Alexander, Executive Director

2026 Hawaii Medical Association Officers

Nadine Tenn-Salle, MD, President • Jerald Garcia, MD, President Elect • Elizabeth Ann Ignacio, MD, • Immediate Past President
Laeton Pang, MD, Treasurer • Thomas Kosasa, MD, Secretary • Marc Alexander, Executive Director

REFERENCES AND QUICK LINKS

State of Hawaii. [Disability Compensation Division](#). About Workers' Compensation (WC). Accessed February 4, 2026.

Yorton S. Lawmaker Posts Rare Win For Injured Workers — And Pushes For More. [Honolulu Civil Beat. July 31 2024](#). Accessed February 4, 2026.

Matayoshi CC. How to get worker's comp for work-related injury, illness. KHON.com. Apr 8 2024. Accessed February 4, 2026.

U.S. Department of Interior. Office of the Secretary. Return to work (limited light duty, alternative work assignments and modified permanent job offers) handbook. April 18 2023. Accessed February 4, 2026.

2024 Hawaii Medical Association Officers

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

2024 Hawaii Medical Association Public Policy Coordination Team

Beth England, MD, Chair
Linda Rosehill, JD, Government Relations • Marc Alexander, Executive Director

HB-1514

Submitted on: 2/16/2026 3:38:38 PM

Testimony for LAB on 2/17/2026 9:00:00 AM

Submitted By	Organization	Testifier Position	Testify
Workers' Comp Physicians	WIMAH - Work Injury Medical Assoc. of Hawaii	Comments	Written Testimony Only

Comments:

We strongly support the intent of HB 1514 which authorizes an attending physician to request a functional capacity exam and refer an injured employee for the exam without first obtaining permission from the employee's employer. It also allows licensed occupational and physical therapists to be deemed qualified to perform functional capacity exams. This bill is one of the three workers' comp bills that were originated by the 2024 Workers' Comp Working Group Chaired by Rep. Scot Matayoshi. Our group felt this change in law would improve upon the current workers' compensation process for functional capacity exams.

Thank you,

Gary Okamura, MD

President of WIMAH - Work Injury Medical Assoc of Hawaii



To: The Honorable Jackson D. Sayama, Chair
The Honorable Mike Lee, Vice Chair
House Committee on Labor

From: Mark Sektnan, Vice President

Re: **HB 1514 – Relating to Workers' Compensation**
APCIA Position: SUPPORT with Requested Amendment

Date: Tuesday, February 17, 2026
9:00 a.m., Room 309

Aloha Chair Sayama, Vice Chair Lee and Members of the Committee:

The American Property Casualty Insurance Association (APCIA) is pleased to **support HB 1514** which makes important improvements to Hawai‘i’s workers’ compensation system.

The American Property Casualty Insurance Association (APCIA) is the primary national trade association for home, auto, and business insurers. APCIA promotes and protects the viability of private competition for the benefit of consumers and insurers, with a legacy dating back 150 years. APCIA members represent all sizes, structures, and regions—protecting families, communities, and businesses in the U.S. and across the globe.

HB 1514 is part of package of bills put forward by a working group looking to improve the workers’ compensation system. HB 1514 makes important improvements to Hawai‘i’s workers’ compensation system—specifically the delivery and timeliness of vocational rehabilitation services. HB 1514 clarifies the process for selecting certified vocational rehabilitation providers and requires automatic approval of services when they are likely needed to help an injured worker return to suitable gainful employment.

This bill addresses several long-recognized challenges within the vocational rehabilitation process. The Legislature’s findings note the critical role of early intervention and the need to minimize delays so injured workers can return to work as quickly and safely as possible. Adequate rehabilitation access is increasingly important as many current providers retire or exit the field, raising concerns about future statewide capacity. HB 1514’s provisions help ensure timely plan development and consistent provider availability, improving outcomes for employees while also managing long-term costs for employers and insurers.

APCIA supports the intent of the bill but believes the 90-day requirement for the submission of a plan is impractical and should be deleted from the bill. This provision was not agreed to by the working group and would place a burden on vocational rehabilitation counselors.

For these reasons, APCIA asks the committee to **amend** the bill with the aforementioned request.

HB-1514

Submitted on: 2/13/2026 7:19:01 PM

Testimony for LAB on 2/17/2026 9:00:00 AM

Submitted By	Organization	Testifier Position	Testify
Faith Lebb	Individual	Oppose	Written Testimony Only

Comments:

I am a practicing Certified Vocational Rehabilitation Counselor who has practiced in the State for more than 40+ years.

My professional organization, International Asso of Rehabilitation Professionals already submitted detailed testimony. I am in agreement with this testimony and ask the Committe to deny this bill.

I thank you.

HB-1514

Submitted on: 2/13/2026 10:05:27 PM

Testimony for LAB on 2/17/2026 9:00:00 AM

Submitted By	Organization	Testifier Position	Testify
D.B.	Individual	Support	Written Testimony Only

Comments:

I support HB1514 because it strengthens and improves Hawai'i's vocational rehabilitation system in ways that directly benefit injured workers and help them return to suitable, meaningful employment. The bill recognizes that early intervention is essential and ensures that vocational rehabilitation providers automatically approve services when an injury is likely to prevent an employee from returning to their usual job, preventing unnecessary delays that can worsen long-term outcomes. HB1514 also requires timely evaluations, clear deadlines, and standardized procedures that reduce confusion, improve communication, and ensure that rehabilitation plans are developed quickly and efficiently. These changes help injured workers access appropriate training or retraining without getting lost in administrative delays, while still balancing employer and insurer interests. Overall, HB1514 moves Hawai'i toward a fairer, more responsive workers' compensation system that supports recovery, rehabilitation, and long-term stability for injured employees.

HB-1514

Submitted on: 2/14/2026 1:13:39 PM

Testimony for LAB on 2/17/2026 9:00:00 AM

Submitted By	Organization	Testifier Position	Testify
Nancy Monden	Individual	Oppose	Remotely Via Zoom

Comments:

I am oppose to HB1514.

I suffered a serious work-related stress claim and was referred to vocational rehabilitation within a year of my injury. At the time, I was severely depressed and suicidal. My primary treating provider, a psychologist, referred me to vocational rehabilitation because she believed it would help me focus on my future and begin rebuilding my life.

When I first met with the vocational rehabilitation counselor, I was scared and anxious and did not know what to expect. It took me longer than three months to build trust and feel safe in the process. As trust gradually developed, it still took many additional months to complete testing, explore my interests, and determine realistic vocational options. This process took far longer than 90 days. My depression significantly slowed my mental processing and decision-making, and I struggled to think clearly about my future.

My entire identity was built around my career as a registered nurse case manager. Losing that ability was devastating. My employer believed I was easily employable because I was an RN, but I had physical restrictions that limited my options. I could not return to floor nursing, and many alternative nursing positions required experience in specialized areas that I did not have. Through the job search and vocational counseling process, we eventually determined where my true interests and realistic work abilities aligned, and we developed a plan.

Placing strict time restrictions on vocational rehabilitation planning can work against injured workers, especially those experiencing psychological injuries or loss of physical function. Many injured workers are dealing with grief, fear, anxiety, and depression. At the same time, insurance carriers may be reluctant to authorize psychological counseling because it may increase liability exposure, leaving workers without adequate emotional support during the vocational process.

The injured worker, the primary treating provider, and the vocational rehabilitation counselor are the most appropriate parties to determine when the worker is ready to develop a vocational plan. Having a neutral vocational counselor to assist in the development of a plan is essential.

In addition, if my employer had been allowed to choose my vocational counselor, I would not have trusted that person. I would have felt that the counselor was selected to serve the employer's interests rather than my own future. Trust is critical in vocational rehabilitation, and without trust, the process is less effective and can delay recovery.

For these reasons, I urge you to consider the importance of flexibility, neutrality, and individualized decision-making in vocational rehabilitation planning.

Thank you for the opportunity to provide this testimony.

HB-1514

Submitted on: 2/15/2026 5:31:24 PM

Testimony for LAB on 2/17/2026 9:00:00 AM

Submitted By	Organization	Testifier Position	Testify
Jason Zeidner-McCoy	Individual	Oppose	Written Testimony Only

Comments:

Aloha Chair and Members of the Committee,

My name is Jason Zeidner-McCoy. I am an injured worker whose workers' compensation case has been open and active since 2022. I respectfully submit testimony regarding HB1514.

I understand the intent behind this bill appears to be improving efficiency and preventing unnecessary delays in the vocational rehabilitation process. I support efforts that protect injured workers from prolonged inaction or procedural stalling.

However, based on my personal experience, I do not believe that a strict 90-day deadline to finalize a vocational rehabilitation plan reflects the realities of long-term injury recovery.

Recovery is not linear. Medical stabilization can take months or years. Functional capacity can change over time. Treatment outcomes evolve. Educational and retraining decisions must align with both physical ability and long-term sustainability. In complex cases like mine, it would not have been realistic—or responsible—to finalize a comprehensive vocational plan within a fixed 90-day window.

While structure and accountability are important, rehabilitation must also allow flexibility to ensure that decisions are accurate and durable. A rushed plan risks placing injured workers into unsuitable employment paths or premature determinations that do not reflect their long-term capabilities.

In my case, extended evaluation and continued adjustment were necessary due to the nature of my injury and recovery process. I do not believe a rigid timeline would have improved my outcome. Instead, it may have forced an incomplete or inappropriate plan.

I respectfully urge the Committee to carefully consider whether a mandatory 90-day filing requirement serves the best interests of injured workers with complex or evolving medical circumstances. Any reform should balance timely movement with case-specific flexibility.

Mahalo for the opportunity to provide testimony.

Respectfully,

Jason Zeidner-McCoy

TO: COMMITTEE ON LABOR
Rep. Jackson D. Sayama, Chair
Rep. Mike Lee, Vice Chair

FROM: Narita San T. Meana, M.S., CRC, CVE, NCC, LMHC
Rehabilitation Specialist

DATE: February 15, 2026

RE: HB1514 - RELATING TO WORKERS' COMPENSATION HEARING
Date: Tuesday, February 17, 2026
Time: 9:00 a.m.
Place: VIA VIDEO CONFERENCE
Conference Room 309, State Capitol, 415 South Beretania Street

I, Narita San T. Meana, M.S., CRC, CVE, NCC, LMHC, a Registered Rehabilitation Specialist to the State of Hawaii's Workers' Compensation Vocational Rehabilitation Program am **in opposition of H.B. 1514** with respect to the portions of this measure, to include: (1) the specifications to the Vocational Rehabilitation enrollment process; and (2) the requirement to file a vocational rehabilitation plan no later than 90-days after submitting an Initial Evaluation Report.

I understand the intent of this bill to improve efficiency and reduce unnecessary delay in workers' compensation cases. Timely movement is important, and Injured Workers should not be left waiting indefinitely for services or decisions. However, in my professional experience, this measure restricts true Client choice and can undermine the quality of vocational rehabilitation services. As Certified Rehabilitation Providers, we have an ethical duty and principle to advocate equitable and appropriate provision of services to our Clients, and the enrollment, exploratory, and specifically the **planning phase** is the most critical phase to appropriately identify a vocational goal that will fit within their physical and functional limitations and employment handicaps; finding a job that is comparable to the job which they were injured, in pay, benefits, employment status, level of responsibility, and education. We act and advocate to alleviate personal distress and disruption that follow a life-changing injury--effects that unfold over time and touch the Injured Worker, their family system, and their overall livelihood. These processes cannot be rushed.

The proposed measures prioritize administrative timelines over informed, autonomous decision-making. Many Injured Workers need time to understand their rights, review provider options, and consult with medical and legal supports before committing to a Counselor. Compressing that process within a 30-day window from Employer notification increases the risk of poor fit, reduced trust, and lower engagement in rehabilitation. Although the measure technically allows a later change of provider, the short initial deadlines and default Employer selection can create pressure and confusion, especially for workers who are still recovering, overwhelmed, or unfamiliar with what Vocational Rehabilitation is and how Providers can effectively support their long-term return-to-work goals. A more balanced approach can promote movement in straightforward cases, while still protecting Injured Workers with complex and changing medical circumstances from being forced into ill-timed vocational decisions or Counselor relationships that they did not freely choose.

Recovery from an industrial injury is rarely linear. Medical stabilization often occurs over many months, and in our experience, years without appropriate medical treatment and care. Functional capacities may change as treatment progresses, surgeries occur, or complications arise. Vocational planning requires careful coordination with medical providers, therapists, and sometimes educators and training institutions to craft a plan that is both feasible and sustainable over the long term. For many complex cases, it is simply not realistic or responsible to commit to a comprehensive vocational plan within an inflexible 90-day window.

Equally important, vocational rehabilitation is a collaborative process that depends on the Injured Worker's participation and trust. Injured Workers should have a meaningful opportunity to understand their rights, consider their options, and exercise autonomy in selecting their Vocational Rehabilitation Counselor. When timelines are compressed, workers may feel pressured to accept the first Counselor presented, without sufficient time to review qualifications, or seek a Counselor with whom they feel comfortable communicating. This can undermine the therapeutic relationship and reduce the effectiveness of the rehabilitation services.

In practice, rigid deadlines can pressure Counselors and Injured Workers to make premature vocational decisions--such as pursuing retraining or employment options that may later prove incompatible with the Injured Worker's evolving medical condition or functional abilities. This can lead to failed rehabilitation attempts and the need for costly revisions later in the process.

The vocational planning model introduced in HB1514 is modeled after Federal/State Vocational Rehabilitation Programs--amendments, modifications or revisions of the plan are uncapped unlike, the Worker's Compensation VR Program, per §12-14-7, *Revision or modification to an approved vocational rehabilitation plan. A revision or modification to an approved plan shall be filed with the director for approval pursuant to sections 12-14-5 and 12-14-10. A revision to a plan can be made no more than once.* Should the 90-day model be enacted, Workers' Compensation Private VR Providers should also be afforded the same administrative allowance to submit unlimited amendments, modifications or revisions.

While timely progress and accountability are vital, **vocational rehabilitation must remain individualized and responsive to the unique circumstances of each Injured Worker.** Flexibility is not a lack of discipline--it is a professional necessity to ensure safe, durable, and sustainable return-to-work outcomes.

I respectfully urge the Committee to ensure that any deadlines established within this bill allow vocational discretion and case-specific planning and decision-making. Rehabilitation success depends not just on timeliness but on the appropriateness and integrity of the planning process.

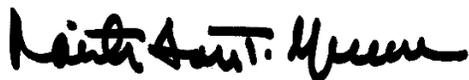
Henceforth,

I advocate that that HRS 386-25, (4)(c) remain the same/no changes from current. "Enrollment in a rehabilitation plan or program shall not be mandatory and the approval of a proposed rehabilitation plan or program by the injured employee shall be required. The injured employee may select a certified provider of rehabilitation services. Both the certified provider and the injured employee, within a reasonable time after initiating rehabilitation services, shall give proper notice of selection to the employer."

I advocate that HRS 386-25 (e) remains written as follows; "A provider shall file the employee's plan with the approval of the employee. Upon receipt of the plan from the provider, an employee shall have ten days to review and sign the plan. The plan shall be submitted to the employer and the employee and be filed with the director within two days from the date of the employee's signature..."

I respectfully request this Committee to consider this opposition statement. Thank you for the opportunity to testify.

Sincerely,



Narita San T. Meana, M.S., CRC, CVE, NCC, LMHC
Rehabilitation Specialist

HB-1514

Submitted on: 2/16/2026 3:14:16 PM

Testimony for LAB on 2/17/2026 9:00:00 AM

Submitted By	Organization	Testifier Position	Testify
Cathy Wilson	Individual	Support	Written Testimony Only

Comments:

I strongly support the intent of HB 1514, which authorizes an attending physician to request a functional capacity exam and refer an injured employee for the exam without first obtaining permission from the employee's employer. It also allows licensed occupational and physical therapists to be deemed qualified to perform functional capacity exams.

This bill is one of the three workers' comp bills that were originated by the 2024 Workers' Comp Working Group Chaired by Rep. Scot Matayoshi. Our group felt this change in law would improve upon the current workers' compensation process for functional capacity exams.

Thank you for your consideration.

Cathy Wilson

HB-1514

Submitted on: 2/16/2026 8:31:51 PM

Testimony for LAB on 2/17/2026 9:00:00 AM

Submitted By	Organization	Testifier Position	Testify
Ida Goff	Individual	Oppose	Written Testimony Only

Comments:

I am opposed to HB 1514. 90 days to complete the task of submitting a plan after Initial Evaluation is too short. In my experience, the evaluation and planning phase was a critical phase in my job goal. If you become unfortunately injured on the job and are forced to reconsider your career, you understand how important it is to have ample time to thoughtfully consider a new career together with your Vocational Counselor.

Haste makes waste. Please do not take away the precious opportunity for injured workers of Hawaii to get rehabilitated and find a new fulfilling career.

Thank you for your kind consideration.

Ida G

Kirsten H. Yonamine, M.Ed, CRC, LMHC
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February 16, 2026

To: The Honorable Representative Jackson D. Sayama, Chair
The Honorable Representative Mike Lee, Vice Chair and
Members of the House Committee on Labor

Date: Tuesday, February 17, 2026

Time: 9:00 a.m.

Place: Conference Room 309, State Capital

RE: H.B. 1514 – Relating to Worker’s Compensation

Dear Chair Jackson D. Sayama and Vice Chair Mike Lee:

I am in **strong opposition** to the proposed changes in H.B. 1514 for the following reasons:

The Director already has an established process to ensure the fair and impartial assignment of a certified vocational rehabilitation provider to an injured employee for services. This assures the injured worker that they are being given the best possible opportunity to be assigned to a provider who is not selected by the employer and who has no connection to, or conflict with, the employer’s interests.

I also oppose any changes to the current timeline for plan submission. As a provider of vocational rehabilitation services for 33 years, I have experienced firsthand the significant impact that workplace injuries have had on my clients. The initial phases of the rehabilitation process are often focused on adjustment to disability counseling. I see clients struggling with the reality of permanent limitations, pain, anxiety, depression, loss of employment, and significant financial strain.

Assisting clients with accepting their limitations and living with their disabilities takes time and is not something that can be rushed. Imposing a “one-size-fits-all” 90-day timeframe for plan submission fails to recognize the individualized nature of recovery and rehabilitation and the adjustment to a “new normal.”

Additionally, the client’s readiness to progress toward return to work depends greatly on the specific circumstances of their case, including the severity of the injury, the availability of a support system, and timely access to necessary medical and psychological services. For these reasons, flexibility in the plan development timeline is essential to ensure an effective rehabilitation outcomes.

As a result, I am **OPPOSED** to the proposed revisions to H.B. 1514 and am recommending that HRS 386-25 remain as currently written.

Thank you for this opportunity to submit testimony and your consideration of the above.

Very truly yours,

A handwritten signature in black ink, appearing to read 'K. Yonamine', written in a cursive style.

Kirsten H. Yonamine, M.Ed., CRC, LMHC
Rehabilitation Specialist

cc: File

HB-1514

Submitted on: 2/17/2026 6:56:48 AM

Testimony for LAB on 2/17/2026 9:00:00 AM

Submitted By	Organization	Testifier Position	Testify
marcia berkowitz	Individual	Oppose	Written Testimony Only

Comments:

Oppose HB 1514. Only Director should determine referral for Vocational Rehabilitation Services. This was established years ago to prevent any conflict of interest.

Additionally oppose 90 day placement into plan. Claimant's Return to Work Status could change pending medical condition in this timeframe.

Marcia A. Berkowitz CRC, LMHC