



STATE OF HAWAII | KA MOKU'ĀINA 'O HAWAI'I
OFFICE OF THE DIRECTOR
DEPARTMENT OF COMMERCE AND CONSUMER AFFAIRS
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DEPUTY DIRECTOR | KA HOPE LUNA HO'OKELE

Testimony of the Department of Commerce and Consumer Affairs

**Before the
House Committee on Health
Friday, February 6, 2026
9:00 a.m.
State Capitol, Room 329 and via videoconference**

**On the following measure:
H.B. 1857, RELATING TO HEALTH CARE**

Chair Takayama, Vice Chair Keohokapu-Lee Loy, and Members of the Committee:

My name is Scott K. Saiki and I am the Insurance Commissioner of the Department of Commerce and Consumer Affairs' (Department) Insurance Division. The Department offers comments on this bill.

The purpose of this bill is to: (1) establish a broad definition of "qualified health care provider" in numerous areas of existing law; (2) clarify and standardize references to specific health care providers; (3) update outdated language to reflect correct terminology; (4) make numerous clarifying and conforming amendments to support these changes, including but not limited to chapters related to health, education, insurance, professions and vocations, the pain patient's bill of rights, the Uniform Probate Code, minors, the Child Protective Act, and the Penal Code; and (5) repeal the obsolete Hawai'i Health Corps.

We note that it is unclear whether the amendments in sections of this bill would be construed as "in addition to the essential health benefits" within the meaning of 45

Testimony of DCCA

H.B. 1857

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Code of Federal Regulations (CFR) § 155.170(a), or subject to defrayment provisions under 45 CFR § 155.170(b) which apply to benefits “in addition to the essential health benefits.” Generally, provider mandates that require reimbursement of specific health care professionals who render a covered service within their scope of practice are not considered to be State-required benefits for purposes of EHB coverage.

Thank you for the opportunity to testify.



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

February 6, 2026

To: The Honorable Gregg Takayama, Chair,
The Honorable Sue L. Keohokapu-Loy, Vice Chair, and
Members of the House Committee on Health

Date: Friday, February 6, 2026
Time: 9:00 a.m.
Place: Conference Room 329, State Capitol

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

Re: H.B. 1857 RELATING TO HEALTH CARE

I. OVERVIEW OF PROPOSED LEGISLATION

The **DLIR offers comments** on this measure and recommends an amendment. HB1857 establishes a broad definition of "qualified health care provider" in numerous areas of existing law, clarifies and standardizes references to specific health care providers, updates outdated terminology, and amends numerous statutory sections related to health, education, insurance, professions and vocations, the Pain Patient's Bill of Rights, the Uniform Probate Code, minors, the Child Protective Act, and the Penal Code to support these changes.

II. CURRENT LAW

§378-32(b), of the Employment Practices Law states:

"It shall be unlawful for an employer or a labor organization to bar or discharge from employment, withhold pay from, or demote an employee because the employee uses accrued and available sick leave; provided that:

- (1) After an employee uses three or more consecutive days of sick leave, an employer or labor organization may require the employee to provide written verification from a physician indicating that the employee was ill when the sick leave was used;
- (2) This subsection shall apply only to employers who:
 - (A) Have a collective bargaining agreement with their employees; and
 - (B) Employ one hundred or more employees; and
- (3) Nothing in this subsection shall be construed to supersede any provision of any collective bargaining agreement or employment benefits program or plan that provides greater employee benefits or rights."

III. COMMENTS ON THE HOUSE BILL

Section 46 (pages 45-46) of this measure amends §378-32(b) by replacing the term physician with qualified health care provider.

§378-32(b) was enacted by Act 118 (SLH 2011) to protect employees' use of sick leave when an employer has more than one hundred employees and a collective bargaining agreement.

However, in *Hawaii Pac. Health, et. al. v. Takamine*, No. 11-00706 SOM/KSC, 2013 WL 1858554 (D. Haw. 2013), the U. S. District Court concluded that §378-32(b) is preempted by the National Labor Relations Act and unconstitutional under the Equal Protection Clause.

On May 1, 2013, the U. S. District Court issued an order permanently enjoining the State from enforcing §378-32(b).

Because §378-32(b) is invalid and unenforceable, the Department respectfully recommends that Section 46 of this measure repeal §378-32(b) rather than amend it.

JOSH GREEN, M.D.
GOVERNOR
KE KIA'ĀINA



RYAN I. YAMANE
DIRECTOR
KA LUNA HO'OKELE

JOSEPH CAMPOS II
DEPUTY DIRECTOR
KA HOPE LUNA HO'OKELE

STATE OF HAWAII
KA MOKU'ĀINA O HAWAI'I
DEPARTMENT OF HUMAN SERVICES
KA 'OIHANA MĀLAMA LAWELAWE KANAKA
Office of the Director
P. O. Box 339
Honolulu, Hawaii 96809-0339

TRISTA SPEER
DEPUTY DIRECTOR
KA HOPE LUNA HO'OKELE

February 4, 2026

TO: The Honorable Representative Gregg Takayama, Chair
House Committee on Health

FROM: Ryan I. Yamane, Director

SUBJECT: **HB 1857 – RELATING TO HEALTH CARE.**

Hearing: February 6, 2026, 9:00 a.m.
Conference Room 329 & via Videoconference, State Capitol

DEPARTMENT'S POSITION: The Department of Human Services (DHS) appreciates the measure's intent and the task group's effort in drafting this bill, and offers comments. This bill amends numerous sections of the Hawaii Revised Statutes (HRS) to address inconsistencies in statutory terminology related to healthcare providers, eliminate restrictive language that limits licensed or certified providers from providing services within their scopes of practice, and standardize the definition of “qualified health care provider” to apply to future licensed or certified healthcare provider types.

However, given the number of changes mandated by the One Big Beautiful Bill Act (OBBBA), Public Law 119-21, signed July 4, 2025, to Medicaid and other public benefit programs, additional federal policy changes, and the existing complexity of the Medicaid State Plan, DHS will require additional time to consider and incorporate the proposed changes following passage of this bill.

The Medicaid State Plan is a complex document that has evolved to incorporate decades of legislation and references specific provider types throughout. As such, DHS anticipates that

incorporating the proposed changes may include expanding coverage for certain provider types and adding new provider types that can serve the Medicaid population. To implement the full set of necessary changes, DHS will need to seek approval from the Centers for Medicare & Medicaid Services (CMS).

Notably, expanded provider types may result in cost impacts that will require additional time to evaluate. DHS respectfully requests a delay in implementing changes to the Medicaid program to allow time for research and to submit the necessary State Plan Amendments and/or waiver authorities. Once the bill is passed, as part of its research, the DHS Med-QUEST Division will conduct the necessary financial analyses to ensure any attributable cost increases are brought to the legislature for its consideration.

Additionally, DHS requests that language be added to indicate that the bill, if passed, is contingent upon and enforceable upon the approval of necessary State Plan Amendments or waivers, as appropriate, by CMS, as well as the appropriation of necessary funding to support the provider scope expansions that will be necessary to achieve alignment.

Further, the proposed sections that affect programs administered by the Benefit, Employment & Support Services Division and the Social Services Division may require amendments to administrative rules and contract provisions.

Consequently, DHS requests an extended effective date to allow its programs time to review and incorporate relevant amendments, including time to amend or promulgate administrative rules, and revise contracts. DHS will continue to update its testimony as the bill progresses.

DHS respectfully requests that this program and any appropriation not conflict with, reduce, or replace priorities identified in the executive budget.

Thank you for the opportunity to provide comments on this measure.



**TESTIMONY OF
THE DEPARTMENT OF THE ATTORNEY GENERAL
KA 'OIHANA O KA LOIO KUHINA
THIRTY-THIRD LEGISLATURE, 2026**

ON THE FOLLOWING MEASURE:
H.B. NO. 1857, RELATING TO HEALTH CARE.

BEFORE THE:
HOUSE COMMITTEE ON HEALTH

DATE: Friday, February 6, 2026 **TIME:** 9:00 a.m.

LOCATION: State Capitol, Room 329

TESTIFIER(S): Anne E. Lopez, Attorney General, or
Blair Goto, Deputy Attorney General

Chair Takayama and Members of the Committee:

The Department of the Attorney General provides the following comments.

The purposes of the bill are to: (1) establish a broad definition of "qualified health care provider"; (2) clarify and standardize Hawaii Revised Statutes (HRS) references to specific health care providers; (3) make numerous clarifying and conforming amendments throughout the HRS; (4) repeal the Hawaii health corps; and (5) remove barriers to scope of practice and expand access to health care.

As currently worded, the definition of "qualified health care provider" may be too restrictive. Section 2 on pages 3-4 adds the definition to chapter 325, HRS, to read:

For purposes of this chapter, unless the context otherwise requires, "qualified health care provider" means any person with a current, active license or certification issued under title 19 or title 25 whose scope of practice, as defined by any applicable law and rules adopted thereunder, authorizes the person to provide the health care services described in this chapter.

(Emphases added). Among others, chapter 325, HRS, deals with the subjects of reporting of infectious and communicable diseases, quarantine, immunization, immunization registry, syphilis, tuberculosis, hepatitis, human immunodeficiency virus, and needle exchange. Limiting health care services to those "described in this chapter," would appear unduly to limit the scope of the health care services the qualified health care providers may render to the subjects of chapter 325, HRS. Accordingly, we recommend the following wording on page 4, lines 1-7:

"§325- Definitions. For the purposes of this chapter, unless the context otherwise requires, "qualified health care provider" means any person with a current, active license or certification issued under title 19 or title 25 whose scope of practice, as defined by any applicable law and rules adopted thereunder, authorizes the person to provide ~~[the]~~ health care services ~~[described in this chapter]."~~

If the bill is to pass, we respectfully ask the Committees to make the recommended amendments.



STATE OF HAWAII
DEPARTMENT OF EDUCATION
KA 'OIHANA HO'ONA'AUAO
P.O. BOX 2360
HONOLULU, HAWAII 96804

Date: 02/06/2026
Time: 09:00 AM
Location: 329 VIA VIDEOCONFERENCE
Committee: HLT

Department: Education

Person Testifying: Keith T. Hayashi, Superintendent of Education

Title of Bill: HB1857, RELATING TO HEALTH CARE.

Purpose of Bill: Establishes a broad definition of "qualified health care provider" in numerous areas of existing law. Clarifies and standardizes references to specific health care providers. Updates outdated language to reflect correct terminology. Makes numerous clarifying and conforming amendments to support these changes, including but not limited to chapters related to health, education, insurance, professions and vocations, the pain patient's bill of rights, the Uniform Probate Code, minors, the Child Protective Act, and the Penal Code. Repeals the obsolete Hawaii Health Corps.

Department's Position:

The Hawai'i State Department of Education (Department) supports HB1857. As a non-licensing agency, the Department relies on licensed health care professionals to meet statutory requirements related to student health, safety, and school participation. Establishing a consistent, standardized definition of "qualified health care provider" across Hawai'i Revised Statutes provides needed clarity and ensures health-related provisions align with each profession's legally authorized scope of practice.

HB1857 removes outdated and inconsistent statutory language that can unintentionally restrict which licensed providers may perform functions required for school participation, including physical examinations, immunization documentation, health certifications, and eligibility determinations. By adopting a uniform definition tied to licensure and certification under Titles 19 and 25, the bill ensures that appropriately licensed providers can act in accordance with their training and statutory authority without requiring repeated, profession-specific amendments to the law.

This measure reduces administrative burden and legal ambiguity when the Department implements health-related requirements under Chapter 302A and supports efficient school operations by allowing schools to rely on documentation from qualified providers consistent with existing licensure and scope-of-practice laws. The bill does not expand scopes of practice, alter licensure standards, or diminish professional oversight; instead, it modernizes statutory terminology and reinforces alignment with established practice acts.

Thank you for the opportunity to provide testimony on this measure.



‘ŌNAEHANA KULANUI O HAWAII

Legislative Testimony

Hō'ike Mana'o I Mua O Ka 'Aha'ōlelo

LATE

Testimony Presented Before the
House Committee on Health
Friday, February 6, 2026 at 9:00 a.m.

By

Bonnie Irwin, PhD

Chancellor

University of Hawai'i at Hilo

and

Rae Matsumoto, PhD

Daniel K. Inouye College of Pharmacy

University of Hawai'i at Hilo

HB 1857 – RELATING TO HEALTH CARE

Chair Takayama, Vice Chair Keohokapu-Lee Loy and Members of the Committee:

Thank you for the opportunity to submit testimony on HB 1857. The University of Hawai'i at Hilo (UH Hilo) strongly supports HB 1857, which works to establish a broad definition of "qualified health care provider" in numerous areas of existing law. The Daniel K. Inouye College of Pharmacy at UH Hilo contributed to this comprehensive housekeeping bill, spearheaded by the Hawai'i State Center for Nursing, in an effort to clarify, standardize and update references and terminology across 190 statutes.

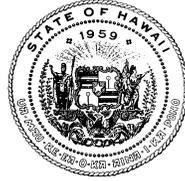
The updates encapsulated in this bill are urgently needed to keep pace with the rapidly evolving health care landscape. As Hawai'i strives to leverage the expertise of the wide range of available health care providers to improve access to quality health care for the people of the state, the updates in this bill will create efficiencies and promote accuracy that are aligned with intended changes as laws are updated and expanded to reflect contemporary health care practices.

It is important to note that this bill does not expand the scope of practice of any health care profession or allow providers to practice beyond what is codified by law. However, the housekeeping afforded through this bill will enable health care professionals in Hawai'i to perform the services which are allowed by their current licenses and scope of practice (but which they may be currently prohibited from doing due to restrictions in other statutes), and streamline the process for changes when expansions in scopes of practice are warranted.

The recommendations outlined in this bill represent the culmination of a multi-year review of hundreds of state laws by an interdisciplinary team of health professionals, along with legal and regulatory experts. These changes will have immediate impact by providing needed clarity to allow the existing health professions workforce in Hawai'i to provide the full scope of services that they are allowed by state law. It will also facilitate

the future ability of our state to enact regulatory changes that are essential for meeting the needs of our communities in a rapidly evolving health care landscape.

Thank you for the opportunity to testify in support of HB 1857.



JOSH GREEN, M.D.
GOVERNOR OF HAWAII
KE KIA'AINA O KA MOKU'AINA 'O HAWAII

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

STATE OF HAWAII
DEPARTMENT OF HEALTH
P. O. Box 3378
Honolulu, HI 96801-3378
doh.testimony@doh.hawaii.gov

**Testimony in SUPPORT of HB1857
RELATING TO HEALTH CARE.**

REP. GREGG TAKAYAMA, CHAIR
HOUSE COMMITTEE ON HEALTH

Hearing Date: February 6, 2026

Room Number: 329

1 **Department Testimony:** The Department of Health (DOH) supports HB1857, which is the
2 result of several years of work led by the Healthcare Provider Barriers to Practice Law Review
3 Task Group, involving the Hawaii State Center for Nursing, Hawaii Medical Association,
4 Hawaii Pharmacists Association, and several other healthcare professional organizations.
5 Enactment of this measure will enhance government efficiency and improve access to care.

6 DOH offers an amendment to clarify that public health practitioners and environmental health
7 practitioners are not in scope for this measure by striking the word "other."

8 Thank you for the opportunity to testify.

9 **Offered Amendments:**

10 SECTION 103. Section 328-112, page 135

11 **[\$328-112] Definitions.** As used in this part:

12 "'Wholesale distributor" means any person or entity engaged in
13 wholesale distribution of prescription drugs, including[-] but
14 not limited to[-] manufacturers; repackers; own-label
15 distributors; jobbers; private label distributors; brokers;

1 warehouses, including manufacturers' and distributors'
2 warehouses, chain drug warehouses, and wholesale drug
3 warehouses; independent wholesale drug traders; prescription
4 drug repackagers; physicians; dentists; veterinarians;
5 [~~other~~] practitioners; birth control and other clinics;
6 individuals; hospitals; nursing homes and their providers;
7 health maintenance organizations and other health care
8 providers; and retail and hospital pharmacies that conduct
9 wholesale distributions.

10 "Practitioner" means an individual licensed by the State or
11 authorized by the laws of the State to prescribe prescription
12 drugs within the scope of the person's practice."

13

Testimony of the Board of Naturopathic Medicine
Before the
House Committee on Health
and
House Committee on Human Services & Homelessness

LATE

Friday, February 6, 2026
9:00 a.m.
Conference Room 329 & Via Videoconference

On the following measure:
H.B. 1857, RELATING TO HEALTH CARE

Chair Takayama, Chair Marten, and Members of the Committees:

My name is Christopher Fernandez, and I am the Executive Officer of the Board of Naturopathic Medicine (Board). The Board offers comments on this bill.

The purpose of this bill is to establish a broad definition of "qualified health care provider" across numerous areas of existing law; clarify and standardize references to specific health care providers; update outdated terminology; and make related conforming amendments across multiple chapters, including those pertaining to health, education, insurance, professionals and violations, the Pain Patient's Bill of Rights, the Uniform Probate Code, minors, the Child Protective Act, and the Penal Code. The bill would also repeal the obsolete Hawaii Health Corps.

The Board will review this measure at its next scheduled public meeting. In the meantime, the Board's legislative liaison notes that the bill would include naturopathic physicians as eligible providers for Med-QUEST, which would allow them to: (1) register for HOKU system; (2) order laboratory tests for patients that may be covered by Med-Quest insurance; (3) pursue credentialing, or at least engage in discussions with, the insurance carriers that administer the Med-QUEST plans. We further note that this change would help vulnerable communities by potentially increasing the number of primary care providers who may accept Med-QUEST.

Thank you for the opportunity to testify on this bill.

Testimony of the Board of Pharmacy

**Before the
House Committee on Health
and
House Committee on Human Services & Homelessness**

**Friday, February 6, 2026
9:00 a.m.
Conference Room 329 & Via Videoconference**

**On the following measure:
H.B. 1857, RELATING TO HEALTH CARE**

Chair Takayama, Chair Marten, and Members of the Committees:

My name is Christopher Fernandez, and I am the Executive Officer of the Board of Pharmacy (Board). The Board offers comments on this bill.

The purpose of this bill is to establish a broad definition of "qualified health care provider" across numerous areas of existing law; clarify and standardize references to specific health care providers; update outdated terminology; and make related conforming amendments across multiple chapters, including those pertaining to health, education, insurance, professionals and violations, the Pain Patient's Bill of Rights, the Uniform Probate Code, minors, the Child Protective Act, and the Penal Code. The bill would also repeal the obsolete Hawaii Health Corps.

The Board will review this measure at its scheduled meeting on February 19, 2026. In the interim, the Board's legislative liaison notes that, with respect to provisions affecting pharmacists, the language appears consistent and does not limit the practice of pharmacy.

Thank you for the opportunity to testify on this bill.

Testimony of the Board of Psychology

**Before the
House Committee on Health
and
House Committee on Human Services & Homelessness**

**Friday, February 6, 2026
9:00 a.m.
Conference Room 329 & Via Videoconference**

**On the following measure:
H.B. 1857, RELATING TO HEALTH CARE**

Chair Takayama and Members of the Committee:

My name is Christopher Fernandez, and I am the Executive Officer of the Board of Psychology (Board). The Board offers comments on this bill.

The purpose of this bill is to establish a broad definition of "qualified health care provider" across numerous areas of existing law; clarify and standardize references to specific health care providers; update outdated terminology; and make related conforming amendments across multiple chapters, including those pertaining to health, education, insurance, professionals and violations, the Pain Patient's Bill of Rights, the Uniform Probate Code, minors, the Child Protective Act, and the Penal Code. The bill would also repeal the obsolete Hawaii Health Corps.

The Board will review this bill at its scheduled meeting on February 6, 2026. In the interim, the Board's legislative liaison notes that the bill language affecting the mental health provisions could create unintended scope-of-practice conflicts and could negatively affect public understanding regarding which providers are qualified to perform, or receive reimbursement for, services defined as the practice of psychology.

Thank you for the opportunity to testify on this bill.

LATE

Testimony of the Hawaii Medical Board
Before the
House Committee on Health
and
House Committee on Human Services & Homelessness
Friday, February 6, 2026
9:00 a.m.
Conference Room 329 and via Videoconference

On the following measure:
H.B. 1857 RELATING TO HEALTH CARE

Chair Takayama, Chair Marten, and Members of the Committee:

My name is Elizabeth Kor and I am an Executive Officer of the Hawaii Medical Board (Board). The Board has not had the opportunity to review this measure and will be discussing it at its next Board meeting next week on Thursday, February 12, 2026. The Board offers the following comments at this time.

The purpose of this bill is to (1) establish a new, broad definition of “qualified health care provider” and apply that definition into multiple existing statutes, including those relating to legal protections, duties owed to patients, and authority to deliver certain services; (2) make conforming amendments; and (3) Repeal the Hawaii Health Corps.

While the Board appreciates the intent to expand access to care, there are concerns that the proposed definition and application of “qualified health care provider” may be overly broad and could unintentionally expand the scope of practice for non-physicians into areas historically and legally reserved for physicians.

Mahalo for the opportunity to provide comments on this bill.

Testimony of the Board of Physical Therapy
Before the
House Committee on Health
and
House Committee on Human Resources & Homelessness

LATE

Friday, February 6, 2026
9:00 a.m.
Conference Room 329 & Via Videoconference

On the following measure:
H.B. 1857, RELATING TO HEALTH CARE

Chair Takayama, Chair Marten, and Members of the Committees:

My name is Adrian Stinardo, and I am the Executive Officer for the Department of Commerce and Consumer Affairs Board of Physical Therapy (Board). The Board appreciates the intent of this measure and offers the following comments.

The purpose of H.B.1857 is to standardize terminology by using the term “qualified health care provider” and to ensure that licensed health professionals are consistently recognized in state law when acting within their respective scopes of practice.

The Board acknowledges the bill’s effort to standardize health care terminology across statute. Physical therapists are licensed under Title 25 and qualify as health care providers when acting within the scope of practice defined by Chapter 461J, of the Hawaii Revised Statutes. However, the Board notes that consistent interpretation of the term “qualified health care provider” will be important to avoid ambiguity in application across regulatory and practice contexts.

Chapter 461J, The Hawaii Physical Therapy Practice Act, should remain the controlling authority for determining the permissible practice of physical therapy in this State. Continued enforcement by individual licensing boards will be essential to ensure that standardized terminology does not result in practice beyond statutory authority.

The Board recognizes that certain provisions of the bill would allow qualified health care providers, including physical therapists acting within their scope of practice, to provide documentation or certifications that may previously have been limited to specific professions. While the Board understands the intent to increase flexibility and access, clear guidance regarding who is authorized to provide such documentation, and under what circumstances, will be important to promote consistent and appropriate application and to reduce the risk of inconsistent interpretation.

The Board supports collaborative care and effective communication among health care providers. To the extent the bill contemplates consultation when treatment conflicts arise, the Board emphasizes that such provisions should be implemented consistent with existing practice authority, established standards of care, and patient safety principles. Additional clarity regarding whether these provisions represent a change from current practice expectations or a clarification of existing professional responsibilities may be helpful.

Testimony of the Board of Physical Therapy

H.B. 1857

Page 2 of 2

Finally, the Board emphasizes the importance of clear implementation, interagency coordination, and ongoing board oversight to maintain statutory clarity, professional accountability, and public protection. As standardized terminology is applied across multiple statutes, coordination with licensing boards will be critical to ensure that regulatory intent aligns with existing practice acts.

Thank you for the opportunity to provide comments on this measure.

LATE

Testimony of the Board of Nursing
Before the
House Committee on Health
and
House Committee on Human Services & Homelessness

Friday, February 6, 2026
9:00 a.m.
Conference Room 329 & Via Videoconference

On the following measure:
H.B. 1857, RELATING TO HEALTH CARE

Chair Takayama, Vice Chair Keohokapu-Lee Loy, and Members of the Committees:

My name is Amy Chin, and I am the Executive Officer of the Board of Nursing (Board). The Board supports this bill.

HB1857 establishes a uniform definition of “qualified health care provider” across titles 19 and 25, updates outdated provider terminology, and makes conforming amendments in multiple chapters, including those on health, education, insurance, professions and vocations, the Pain Patient’s Bill of Rights, the Uniform Probate Code, minors, the Child Protective Act, and the Penal Code. This bill also repeals the obsolete Hawai’i Health Corps.

By tying the term “qualified health care provider” to existing practice acts and licensure, this measure recognizes current roles and scopes, including advanced practice registered nurses. It reduces unnecessary statutory barriers, improves access to care-particularly in underserved communities- and maintains appropriate patient safeguards. The bill also simplifies implementation for non-licensing agencies by reducing the need for repeated statutory updates as provider titles and categories evolve.

Thank you for the opportunity to testify on this bill.

HB-1857

Submitted on: 2/3/2026 3:01:31 PM

Testimony for HLT on 2/6/2026 9:00:00 AM

Submitted By	Organization	Testifier Position	Testify
Annette Manant	Hawaii Affiliate of the American College of Nurse Midwives	Support	Written Testimony Only

Comments:

The Hawaii Affiliate of the American College of Nurse Midwives (HAA) support HB1857.

Annette Manant, PhD, APRN, CNM, (Ret). President HAS

TO: Senate Health and Human Services Committee & Senate Commerce and Consumer Protection Committee

Chairs: Joy A. San Buenaventura and Jarrett Keohokalole

Vice Chairs: Angus McKelvey and Carol Fukunaga

FROM: Melissa Alsbergas, CRNA
Certified Registered Nurse Anesthetist
Owner, PRN Anesthesia LLC

RE: SB 2491

POSITION: Strong Support, If Amended

TESTIMONY

Honorable Chairs, Vice Chairs, and Members of the Committees:

Thank you for the opportunity to submit testimony on SB 2491.

I offer **strong support for this measure, provided that the recommended amendment to Section 156 is adopted.** I respectfully support language that accurately reflects the education, licensure, certification, and scope of practice of Certified Registered Nurse Anesthetists (CRNAs) practicing in Hawai‘i.

Clear statutory definitions are essential to ensure patient safety, regulatory clarity, and alignment with national credentialing standards for advanced practice registered nurses providing anesthesia services.

Recommended Amendment (Section 156, Page 220, lines 1–5):

“Anesthetist” means an advanced practice registered nurse licensed pursuant to chapter 457 who maintains national certification as a Certified Registered Nurse Anesthetist and who performs anesthesia services.

This amendment more accurately reflects current licensure law and ensures terminology remains consistent with Hawai‘i’s APRN framework.

Mahalo for your time, consideration, and continued commitment to safe, high-quality anesthesia care for the people of Hawai‘i.

Respectfully submitted,

Melissa Alsbergas, CRNA
Owner, PRN Anesthesia LLC



February 4th, 2026
Committee on Health
Committee on Human Services and Homelessness

Dear Chair Takayama, Chair Marten, Vice Chair Loy, Vice Chair Olds and all distinguished members of the Committees:

I appreciate the opportunity to comment on HB 1857, the cleanup of inconsistent language in the regulatory code. My name is Alicia Plemmons, PhD, and I am the Director of the Knee Regulatory Research Center at West Virginia University. This comment is not submitted on behalf of any party or interest group.

My team reads tens of thousands of pages of regulatory code every year to build comprehensive databases of the rules and regulations governing healthcare professionals. I commend Hawaii for this massive undertaking in cleaning up, streamlining, and allowing for future flexibility in provider designations.

Working with all 50 states, the most common reason a healthcare workforce bill does not meet its intended goals is due to misalignment with the definitions provided in the description of healthcare services, boards, or departments. Updates such as these are critical to ensure future legislative action can be implemented as intended by our elected officials.

This bill should not be considered contentious or partisan. It is good practice.

Best regards,

Dr. Alicia Plemmons, Assistant Professor of General Business
Directory, Knee Regulatory Research Center
West Virginia University, Alicia.Plemmons@mail.wvu.edu



**Testimony Presented Before the House Committees on
Health and Human Services & Homelessness
Friday, February 6, 2026 at 9:00 AM
Conference Room 329 and Videoconference
by
Laura Reichhardt, APRN, AGPCNP-BC
Director, Hawai'i State Center for Nursing
University of Hawai'i at Mānoa**

Testimony in STRONG SUPPORT with amendments of HB 1857

Chairs Takayama and Marten, Vice Chairs Keohokapu-Lee Loy and Olds, and Members of the Committees:

Thank you for hearing this measure, HB 1857, which aims to update over 190 statutes to align with the State Legislature's defined scopes of practice for qualified healthcare providers. The Hawai'i State Center for Nursing (HSCN) is in strong support of this measure. Further, HSCN has worked within an interprofessional team to identify additional amendments. Should the committees accept these requested amendments, they are provided on the page that follows.

This extensive housekeeping bill does not expand any one profession's scope of practice, nor would it enable providers to practice beyond their state enacted scopes of practice. Rather, the work here is to enable healthcare providers in Hawai'i to fulfill the healthcare duties for their patients that they may currently be prohibited from doing, despite their practice acts qualifying them to complete these duties and services. At a time when healthcare is exceedingly challenged, enabling the existing and available workforce to optimize the care they are able to provide to the people of Hawai'i, fully within their profession's scope of practice as defined in state law and rule, will improve access to care.

In 2021, the Legislature requested a holistic inquiry into the scope and services that interprofessional healthcare providers may offer. Further, there was an inquiry as to why advanced practice registered nurses (APRNs) had continued requests to legislatively address practice barriers despite nationally leading scope of practice laws. In 2022, the Hawai'i State Center for Nursing convened an interprofessional group, including APRNs, physician assistants, psychologists, pharmacists, and physicians to review the healthcare statutes beyond practice acts. After reading 526 laws, the group recommended individual actions for 237 of these statutes. Today, the statutes reflected in this bill underwent several rounds

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 well-prepared and well-distributed workforce, support healthy work environments, champion lifelong learning, and strategically plan for sound nursing workforce policy.



of requests for feedback to healthcare entities and associations, state agencies, and healthcare stakeholders. The reviewed statutes that are not included in this bill were determined to need additional information, further study, or are not suitable for change due to their alignment to uniform acts or federal law.

The Hawai'i State Center for Nursing thanks the Committees for entertaining this measure, and suggesting this large undertaking nearly 5 years ago, which has already led to an improvement in our interconnectedness, understanding, and capacity to work interprofessionally together. The Center respectfully requests your favorable consideration of this measure with amendments.

Recommended amendments in yellow highlight:

Section 156, Page 220, lines 1-5

""Anesthetist" means [~~a registered nurse anesthetist~~] advanced practice registered nurse licensed pursuant to chapter 457 who maintains national certification as a Certified Registered Nurse Anesthetist and who performs anesthesia services [~~under the supervision of a licensed physician~~]."

Section 182, Page 186, lines 3-7, and Page 287, lines 8 and 13-14

(b) A health intervention is medically necessary if it is recommended by the *physician, treating advanced practice registered nurse, treating physician assistant, or other* treating licensed health care provider, is approved by the health plan's medical director [~~or~~], *physician designee, advanced practice registered nurse designee, or physician assistant designee*, and is:

- (1) For the purpose of treating a medical condition;
- (2) The most appropriate delivery or level of service, considering potential benefits and harms to the patient;
- (3) Known to be effective in improving health outcomes; provided that:
 - (A) Effectiveness is determined first by scientific evidence;
 - (B) If no scientific evidence exists, then by professional standards of care; and
 - (C) If no professional standards of care exist or if they exist but are outdated or contradictory, then by expert opinion; and

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 well-prepared and well-distributed workforce, support healthy work environments, champion lifelong learning, and strategically plan for sound nursing workforce policy.

(4) Cost-effective for the medical condition being treated compared to alternative health interventions, including no intervention. For purposes of this paragraph, cost-effective shall not necessarily mean the lowest price.

(c) When the treating licensed health care provider and the health plan's medical director [~~or~~], *physician designee*, ***advanced practice registered nurse designee*** or *physician assistant designee* do not agree on whether a health intervention is medically necessary, a reviewing body, whether internal to the plan or external, shall give consideration to, but shall not be bound by, the recommendations of the treating licensed health care provider and the health plan's medical director [~~or~~], *physician designee* [~~or~~], ***advanced practice registered nurse designee*** or *physician assistant designee*.

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 well-prepared and well-distributed workforce, support healthy work environments, champion lifelong learning, and strategically plan for sound nursing workforce policy.



Hawai'i Psychological Association

For a Healthy Hawai'i

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Phone: (808) 521-8995

COMMITTEE ON HEALTH
Representative Gregg Takeyama, Chair
Representative Sue L. Keohokapu-Lee Loy, Vice Chair

Friday, February 6, 2026 - 9:00 AM - Conference Room 329 & Videoconference

**Strong Support for HB 1857
RELATING TO HEALTH CARE**

The Hawai'i Psychological Association (HPA) strongly supports HB 1857 which would increase access to mental health services by ensuring that mental health professionals are able to practice within their full scope of practice, for which they are trained and qualified.

Since 2022 I have represented HPA on an interdisciplinary panel that reviewed 526 health care laws. HB 1857 updates over 190 statutes, based on our committee's recommendations. I worked collaboratively with physicians, nurses, physician assistants and pharmacists, all of whom respected each discipline's scope of practice. This bill does not expand any discipline's scope of practice. It merely updates old statutes to keep up with changes in health care, often using provider neutral language to remove outdated barriers to receiving health care services. Essentially this is a housekeeping measure which seems uncontroversial. For example, in a recent HPA member survey, 96% of 111 respondents expressed support for this measure while no one was opposed.

Thanks you for your consideration of HB 1857.

Sincerely,

Alex Lichton, Ph.D.

Chair, HPA Legislative Action Committee

Testimony Presented Before the
House Committee on Health
Friday, February 6, 2026, at 09:00 a.m. in Conference Room 229
By James Maliszewskyj, President, Hawaii Association of Nurse Anesthesiology

Representative Gregg Takayama, Chair
Representative Sue Keohokapu-Lee Loy, Vice Chair

RE: HB 1857 – Relating to Health Care – Supports the Intent, Requests an Amendment

Aloha Chair Takayama, Vice Chair Keohokapu-Lee Loy, and members of the committee:

My name is James Maliszewskyj, CRNA, APRN, MHS, and I am the President of the Hawai'i Association of Nurse Anesthesiology (HANA). Thank you for the opportunity to submit testimony regarding proposed language that revises the definition of "anesthetist." While we fully support the intent of the bills, specific language in the proposed HRS revision in section 156, Page 220, lines 1-5 is of troubling.

Primary concern: inaccurate statutory description of nurse anesthetists

Our primary concern is that the revised definition incorrectly describes and weakens the established identity and title protection of nurse anesthetists in Hawai'i. Historically and in practice, "anesthetist" within Hawai'i's health care system has referred to Certified Registered Nurse Anesthetists (CRNAs)—advanced practice registered nurses educated, licensed, and regulated to provide anesthesia services. Replacing that clear understanding with broader, less precise language diminishes statutory clarity, creates confusion for patients and stakeholders, and undermines the Legislature's ability to maintain consistent professional standards across licensure, scope, and reimbursement.

Title clarity matters in health care. Patients deserve transparency about who is providing anesthesia care and what qualifications that provider holds. Statutory definitions should reflect the reality that CRNAs are anesthesia professionals with graduate-level anesthesia education, extensive supervised clinical training, and a defined regulatory framework for anesthesia practice and accountability.

Secondary concern: adding physician assistants to the definition

Our secondary concern is that the proposed definition would also include physician assistants as "anesthetists" or otherwise suggest eligibility to perform or bill for anesthesia services through definition changes—particularly if placed in insurance or reimbursement sections. Physician assistants are valued members of the health care team, but they are not educated, licensed, or regulated in Hawai'i under a framework designed for the full responsibilities of anesthesia practice. Including physician assistants in the "anesthetist" definition creates immediate ambiguity and may unintentionally open a pathway for scope

Hawaii Association of Nurse Anesthesiology Page 2

expansion through reimbursement recognition rather than through deliberate, patient-safety-focused licensure policy.

For these reasons, HANA supports the Center for Nursing's proposed amendment:

Section 156, Page 220, lines 1-5

""Anesthetist" means [~~a registered nurse anesthetist~~] advanced practice registered nurse licensed pursuant to chapter 457 who maintains national certification as a Certified Registered Nurse Anesthetist and who performs anesthesia services ~~under the supervision of a licensed physician.~~"

Thank you for your consideration and opportunity to assist with this important initiative.

**Testimony of Jennifer Bojanowski, MS, CGC, LCSW;
Lila Aiyar, MSc, CGC, CCGC; and Michelle Takemoto, MS, CGC**

**Presented Before the House Committee on Health
Friday, February 6, 2026, at 09:00 a.m. in Conference Room 229**

**RE: HB 1857 – Relating to Health Care –
Supports the Intent, Requests an Amendment**

Aloha, Honorable Chair Takayama, Vice Chair Keohokapu-Lee Loy, and Committee Members,

As Certified Genetic Counselors in Hawai'i, we thank-you for the opportunity to provide this commentary in support of the intent of HB 1857, with a specific proposed amendment to **OMIT the addition "or physician assistant" in the section below, relating to genetic counseling.**

SECTION 121. Section 451K-5, Hawaii Revised Statutes, is amended by amending subsection (c) to read as follows:

"(c) Nothing in this chapter shall be construed to prevent a physician or physician assistant licensed to practice medicine in this State or an intern, fellow, or resident from performing genetic counseling within the person's scope of practice as long as the person is not in any manner held out to the public as a "genetic counselor" or "licensed genetic counselor"."

While we only became aware this week of the work of the *Hawai'i State Center for Nursing's Healthcare Provider Barriers to Practice Law Review Task Force*, we commend the group's multi-year effort to modernize scope-of-practice laws and improve access to care and would have welcomed inclusion of a Certified Genetic Counselor on the Task Force. We additionally appreciate cross-discipline collaboration with and the contributions of physician assistants. We recognize their education is rigorous and well suited to its intended roles. However, physician assistants' education and training lacks sufficient specialized training in medical genetics and genetic counseling.

From a public safety perspective, there is well-documented evidence that genetic counseling services provided by clinicians *without specialized genetics training* can result in inappropriate test ordering, inaccurate interpretation of results, and insufficient counseling regarding limitations, follow-up medical management care, and familial implications (Farmer M. et al., 2019; Farmer M. et al., 2021; Bonadies, D. et al., 2014; Coleman, TF et al., 2024; Feldman J et al., 2023). These concerns are **especially relevant in Hawai'i's diverse population**, where genetic variation is underrepresented in reference databases and uncertain results are more common, increasing the risk of misinterpretation without expert involvement (Chen, E. et al., 2023). The concern is ensuring that patients throughout Hawai'i receive genetic counseling services from providers with appropriate oversight, training, and certification standards that reflect the specialized nature of this care.

In contrast to the *broader content* of physician assistants' master's degree and exam by the NCCPA (National Commission on Certification for Physician Assistants), Certified Genetic Counselors complete a two-year master's degree from a program accredited by ACGC

(Accreditation Council for Genetic Counseling) with competency-based clinical and didactic training in *medical genetics, psychosocial counseling, genetic risk assessment, test selection, and test interpretation*, followed by certification through the ABGC (American Board of Genetic Counseling) requiring a *national exam and clinical genetic counseling case supervision*. Every five years, ongoing ABGC certification requires 125 continuing education hours specific to genetics and genetic counseling. Pending completion of the rule-making process, we will soon have Hawai'i licensure of genetic counselors that requires ongoing ABGC certification to ensure continued competence in this rapidly evolving field.

We therefore respectfully ask for the amendment of HB 1857 as described above, prior to advancing the measure. This approach best aligns with the bills' intentions by supporting public safety and preserving high-quality, evidence-based genetic services for the people of Hawai'i.

Sincerely,

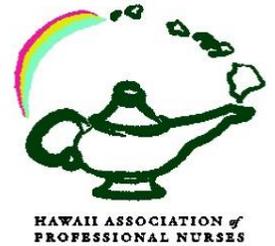
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Lila Aiyar, MSc, CGC, CCGC
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Michelle Takemoto, MS, CGC
Executive Director, Alliance for Genomic Justice
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Hawai'i Association of Professional Nurses (HAPN)



To: The Honorable Representative Gregg Takayama, Chair of the House Committee on Health

From: Hawai'i Association of Professional Nurses (HAPN)

RE: HB1857 — Relating to Health Care

Position: Strong Support with Amendments

Hearing: Friday, February 6, 2026, 9:00 AM (HST)

Aloha Chair and Members of the Committee,

On behalf of HAPN, we submit testimony in **strong support with amendments** for **HB1857**. This measure is a comprehensive, interprofessional “housekeeping” effort that updates and aligns statutes with the scopes of practice that the Legislature has already established for qualified health care providers. Importantly, **HB1857 does not expand any profession’s scope of practice** and should not be misconstrued as authorizing practice beyond what is already provided in state law and rule. Instead, it corrects outdated and inconsistent statutory language that can unintentionally block qualified providers—including APRNs—from carrying out duties that their practice acts already authorize.

HAPN also wants to explicitly note: **APRN scope of practice in Hawai'i is clear and long-standing**. When legacy terminology persists in scattered sections of the Hawai'i Revised Statutes, it can create “implementation barriers” in the real world—across agencies, payers, credentialing systems, and institutional policy—despite the underlying scope being settled. HB1857 is the kind of modernization work that reduces confusion and helps ensure our statutes reflect how care is delivered today.

A long-requested modernization effort—completed through collaboration

Several years ago, the Legislature raised the need for a full review of the Hawai'i Revised Statutes to bring health care laws into modern alignment. While those resolutions did not pass at the time, over the past three years the work was completed anyway—through sustained interprofessional collaboration and painstaking review well beyond the practice acts themselves.

HAPN strongly agrees with—and appreciates—the detailed context provided by Hawai'i State Center for Nursing and Laura Reichhardt: the bill reflects an extensive review process that examined hundreds of statutes outside practice acts, identified where outdated language was creating barriers, and then refined changes through multiple rounds of stakeholder feedback. This is exactly the kind of cross-profession, systems-level work Hawai'i needs to improve access without compromising patient safety or expanding scope beyond what the Legislature has already authorized.

Why this matters to APRNs: access, workforce stability, and fewer “paper barriers”

For HAPN, HB1857 is fundamentally about access and workforce function. When statutory language is inconsistent, providers can be forced into unnecessary workarounds, delayed approvals, duplicative signatures, or referrals that do not add value to patient care. In a state facing workforce shortages and significant neighbor island access challenges, we cannot afford to leave qualified clinicians underutilized because of outdated wording. Modernizing definitions

and aligning statutes with clearly defined scopes helps ensure patients can receive timely care from the clinicians who are already licensed and trained to provide it.

Recommended amendments in yellow highlight:

Section 156, Page 220, lines 1-5

""Anesthetist" means [a registered nurse anesthetist] advanced practice registered nurse licensed pursuant to chapter 457 **who maintains national certification as a Certified Registered Nurse Anesthetist** and who performs anesthesia services [**under the supervision of a licensed physician**]."

Section 282, Page 286, lines 3-7, and Page 287, lines 8 and 13-14

(b) A health intervention is medically necessary if it is recommended by the *physician, **treating advanced practice registered nurse**, treating physician assistant, or other treating licensed health care provider*, is approved by the health plan's medical director [*or, physician designee, **advanced practice registered nurse designee**, or physician assistant designee*], and is:

- (1) For the purpose of treating a medical condition;
- (2) The most appropriate delivery or level of service, considering potential benefits and harms to the patient;
- (3) Known to be effective in improving health outcomes; provided that:
 - (A) Effectiveness is determined first by scientific evidence;
 - (B) If no scientific evidence exists, then by professional standards of care;and
 - (C) If no professional standards of care exist or if they exist but are outdated or contradictory, then by expert opinion; and
- (4) Cost-effective for the medical condition being treated compared to alternative health interventions, including no intervention. For purposes of this paragraph, cost-effective shall not necessarily mean the lowest price.

(c) When the treating licensed health care provider and the health plan's medical director [*or, physician designee, **advanced practice registered nurse designee** or physician assistant designee*] do not agree on whether a health intervention is medically necessary, a reviewing body, whether internal to the plan or external, shall give consideration to, but shall not be bound by, the recommendations of the treating licensed health care provider and the health plan's medical director [*or, physician designee*], **advanced practice registered nurse designee** or physician assistant designee.

Conclusion

HB1857 is a carefully developed modernization measure that improves statutory consistency, reduces unintended barriers, and supports the ability of Hawai'i's existing workforce to provide care fully within the scopes of practice defined by the Legislature. HAPN respectfully requests your favorable consideration of **HB1857 in strong support with amendments**.

Mahalo for the opportunity to provide testimony.

Respectfully submitted,
Hawai'i Association of Professional Nurses (HAPN)



Hawaii Medical Association

1360 South Beretania Street, Suite 200 • Honolulu, Hawaii 96814
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HOUSE COMMITTEE ON HEALTH
Representative Gregg Takayama, Chair
Representative Sue Keohokapu-Lee Loy, Vice Chair

HOUSE COMMITTEE ON HUMAN SERVICES AND HOMELESSNESS
Representative Lisa Marten, Chair
Representative Ikaika Olds, Vice Chair

Date: February 6, 2026
From: Hawaii Medical Association (HMA)
Elizabeth Ann Ignacio MD - Chair, HMA Public Policy Committee

RE HB1857 RELATING TO HEALTHCARE: Health Care; Qualified Health Care Providers; Health Care Providers; Scope of Practice; Access to Health Care; Licensure; Certification; Education; Insurance; Professions and Vocations; Pain Patient's Bill of Rights; Uniform Probate Code; Children; Medical Care for Minors; Capacity Determinations; Child Protective Act; Penal Code

Position: Strong Support

This measure would establish a broad definition of "qualified health care provider" in numerous areas of existing law; clarify and standardize references to specific health care providers; update outdated language to reflect correct terminology. Makes numerous clarifying and conforming amendments to support these changes, including but not limited to chapters related to health, education, insurance, professions and vocations, the pain patient's bill of rights, the Uniform Probate Code, minors, the Child Protective Act, and the Penal Code; repeals the obsolete Hawai'i Health Corps.

HMA strongly supports this measure to provide a consistent definition of "qualified health care provider" that encompasses Hawaii licensed healthcare professionals. The conforming amendments to multiple chapters (health, licensure, insurance, pain patient rights, probate code, minors, child protective act, penal code, education, and professions/vocations) to correct outdated terminology will remove barriers that prevent licensed providers from practicing within their legally established scope. The defined scope of practice exists in the individual healthcare professional practice acts, ensuring that statutory references do not contradict professional practice authority. This alignment allows highly trained clinicians to safely deliver care they are competent to provide under existing Hawaii licensure standards.

Thank you for allowing the Hawaii Medical Association to testify in strong 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

Healthcare Provider Barriers to Practice Law Review: A Task Group of the Hawai'i State Center for Nursing. Hawai'i State Center for Nursing, Sept. 2024; rev. June 2025. PDF file, https://www.hawaii-center-for-nursing.org/wp-content/uploads/2025/06/Healthcare-Provider-Barriers-to-Practice-Law-Review-_rev2025-full.pdf

University of Hawai'i at Mānoa John A. Burns School of Medicine Area Health Education Center. Annual Report on Findings from the Hawai'i Physician Workforce Assessment Project. Dec. 2025. University of Hawai'i Government Relations. https://www.hawaii.edu/govrel/docs/reports/2026/act18-sslh2009_2026_physician-workforce_annual-report_508.pdf Accessed Jan 25 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



Testimony Presented Before the House Committee on Health

HEARING: Friday February 6, 9:00 A.M.

PLACE: Room 329 Hawai'i State Capitol and via videoconference

HB1857 – Relating to Health Care

Chair Takayama, Vice Chair Keohokapu-Lee Loy, and Members of the Committee, thank you for hearing this measure, HB1857, which aims to update over 190 statutes to align with the State Legislature's defined scopes of practice for qualified healthcare providers. **Hawai'i - American Nurses Association (Hawai'i-ANA) is in strong support of this measure. Hawai'i-ANA is also in agreement with the amendments that Hawai'i State Center for Nursing (HSCN) has identified for your consideration, in their testimony.**

Hawai'i-American Nurses Association (Hawai'i- ANA) is the professional association for over 17,000 registered nurses who live and work in Hawai'i. Our mission is to advocate for the improvement of the healthcare system in the communities where we live and work.

The objective here is to enable healthcare providers in Hawai'i to fulfill the healthcare duties for their patients that they may currently be prohibited from doing, despite their practice acts qualifying them to complete these duties and services. At a time when healthcare is exceedingly challenged, enabling the existing and available workforce to optimize the care they are able to provide to the people of Hawai'i, fully within their profession's scope of practice as defined in state law and rule, will improve access to care.

In 2022, the Hawai'i State Center for Nursing convened an interprofessional group, including APRNs, physician assistants, psychologists, pharmacists, and physicians to review the healthcare statutes beyond practice acts. After reading 526 laws, the group recommended individual actions for 237 of these statutes. Hawai'i-ANA has

monitored this painstakingly careful work over the past 3 years and is in full agreement with the recommendations included in this bill.

Hawai'i-ANA thanks the Committees for considering this measure, and for suggesting this large undertaking nearly 5 years ago. Hawai'i-ANA respectfully requests your favorable consideration of this measure, with the amendments suggested by HSCN.



Contact information for Hawai'i – American Nurses Association:

Chair of Advocacy Committee: Linda Beechinor, DNP, APRN, FNP-BC

President: Denise Cohen, PhD, APRN, FNP-BC

Executive Director: Elizabeth Kahakua, RN, BSN

phone (808) 779-3001 500 Lunalilo Home Road, #27-E, Honolulu HI 96825

February 5, 2026

Testimony of Thomas H Joslyn MS, APRN, CRNA]

RE: HB 1857 – Relating to Health Care – Supports the Intent, Requests an Amendment

Dear Chair Takayama, Vice Chair Keohokapu-Lee Loy, and members of the committee,

Thank you for the opportunity to submit testimony on this bill. I am a Certified Registered Nurse Anesthetist (CRNA) in the State of Hawaii. I have been a practicing anesthesia and providing care for 42 years; 30 of these years in our beautiful state. I am well aware of protecting our population as I was honored, and had the privilege to serve on the State of Hawaii Board of Nursing for 8 years (two 4 - year terms); one year as the Chair of this Board,

While I support the intent of the bill, I am very concerned about a section of this bill. I respectfully request that you amend the specific language on page 220, lines 1-5, that revises the definition of “Anesthetist.” My testimony is in agreement with separately submitted testimony from Laura Reichhardt, the Director of the Hawaii Center for Nursing, who led this initiative, I hope you will make these changes :

Section 156, Page 220, lines 1-5

""Anesthetist" means [~~a registered nurse anesthetist~~] advanced practice registered nurse licensed pursuant to chapter 457 who maintains national certification as a Certified Registered Nurse Anesthetist and who performs anesthesia services [under the supervision of a licensed physician]."

This wording follows the State of Hawaii HRS 457 & HAR 16-89-81 (2, A-L) and provides title clarity and clearly spells out our qualifications, standards, and scope of practice..

In addition: the wording on this Bill, (again on the same pages, under the definition of “Anesthetist”), includes...physician assistant licensed pursuant to chapter 453 who performs anesthesia services under the supervision of a licensed physician”. **This section needs to be completely eliminated.** HRS 453, THE LAW of HAWAII, provides **NO** language that allows physician assistants (PAs) to practice anesthesia. While PAs are a valuable and needed specialty; and this language may be intended to involve insurance billing for them...**PAs have NO rights and NO privileges to practice anesthesia in the State of Hawaii!** If you wish to have safe anesthesia care for our population, then PLEASE eliminate this section completely.

CRNAs provide evidence based, safe, competent and compassionate anesthesia care to all our patients; and have done so for well over a century, We are probably one of the best kept secret in Medicine. CRNAs provide care in 70 % in Urban, almost 100% in rural populations. The person at the head of the table is very likely a CRNA. Please make the changes I, and all CRNA’s in the State of Hawaii request.

Thank you for your attention and consideration.

Respectfully submitted,

Thomas H Joslyn, MS, APRN, CRNA

February 5, 2026

Testimony of Margaret Deus

Presented Before the House Committee on Health
Friday, February 6, 2026, at 09:00 a.m. in Conference Room 229

RE: HB 1857 – Relating to Health Care – Supports the Intent, Requests an Amendment

Aloha Chair Takayama, Vice Chair Keohokapu-Lee Loy, and members of the committee,

Thank you for the opportunity to submit testimony regarding proposed language that revises the definition of “anesthetist.” I am a Certified Registered Nurse Anesthetist practicing in the state of Hawaii. While I fully support the intent of HB 1857, I respectfully request amendment of specific language on page 220, lines 1-5, in agreement with separately submitted testimony from the Director of the Hawaii Center for Nursing, as follows:

Section 156, Page 220, lines 1-5

"Anesthetist" means [~~a registered nurse anesthetist~~] advanced practice registered nurse licensed pursuant to chapter 457 who maintains national certification as a Certified Registered Nurse Anesthetist and who performs anesthesia services [~~under the supervision of a licensed physician~~]."

My extensive anesthesia specific curriculum and doctorally prepared training reflects the verbiage I am proposing. This provides title clarity and ensures safe, high-quality anesthesia care for the people of Hawaii. Thank you for your time and consideration.

Respectfully,
Margaret Deus
Certified Registered Nurse Anesthetist

HB-1857

Submitted on: 2/5/2026 7:55:20 AM

Testimony for HLT on 2/6/2026 9:00:00 AM

Submitted By	Organization	Testifier Position	Testify
Robert Thomas Carlisle, MD, MPH	Hawaii Academy of Family Physicians (HAFP)	Support	Written Testimony Only

Comments:

HOUSE COMMITTEE ON HEALTH

Rep. Gregg Takayama, Chair

Rep. Sue L. Keohokapu-Lee Loy, Vice Chair

Date: 5 FEBRUARY 2026

From: Hawai'i Academy of Family Physicians Legislative Committee (HAFP)

RE: HB 1857; Qualified Health Care Provider [and companion bill SB 2491]

Position: Support

Thank you for allowing testimony on HB 1857.

Years of work have been invested to offer standardized language for the statutes defining, “qualified health care provider,” in 300 pages permitting regulating medical care activities in Hawai‘i. As these rules, regulations, and laws were created with varying language over many decades, challenges in interpretation have understandably been created.

By simplifying the language that defines qualified health care provider in statute, this bill removes possible confusion.

Hawai'i Academy of Family Physicians Legislative Committee (HAFP) supports this bill with the understanding that it does not redefine the scope of practice for health care professionals as defined in HRS 453-1 and HRS 453-2.

Thank you for allowing testimony on this bill.

Robert Thomas Carlisle, MD, MPH
Chair, Legislative Committee

Hawai'i Academy of Family Physicians

advocacy@hafp.info



Testimony presented before the
House Committee on Health
Friday, February 6, 2026

Corrie L. Sanders on behalf of
The Hawai'i Pharmacists Association

Honorable Chair Takayama, Vice Chair Keohokapu-Lee Loy, and Members of the Health Committee,

The Hawai'i Pharmacists Association (HPhA), representing pharmacists practicing across community, hospital, long-term care, and public health settings statewide, **strongly supports HB 1857**. This measure is a critical and timely housekeeping bill that improves the efficiency, clarity, and internal consistency of Hawai'i's health care statutes by aligning them with existing scope of practice laws. By establishing and applying a neutral definition of "qualified health care provider" where appropriate, HB 1857 ensures that statutes remain synchronized as scopes of practice evolve, without requiring repeated legislative intervention.

As outlined in the multi-year review conducted by an interdisciplinary task group of health professionals, including representation from our association, Hawai'i currently faces significant inefficiencies when health care laws lag behind scope of practice statutes. Each time a scope of practice is updated, hundreds of related laws must be reexamined to prevent conflicts that unintentionally restrict patient care. HB 1857 addresses this challenge proactively by modernizing outdated statutory language, reducing administrative burden on the Legislature, and preventing unnecessary delays that can limit the ability of qualified providers, including pharmacists, to deliver care they are already authorized to provide.

Importantly, HB 1857 does not expand or alter the scope of practice of any health profession. Rather, it ensures that pharmacists and other licensed health care professionals may fully and efficiently practice within the scope already granted to them under state law, without being impeded by inconsistent or obsolete statutory references. For patients, this means fewer delays, fewer referrals solely for statutory technicalities, and improved access to timely care, especially in rural and underserved communities where pharmacists are often among the most accessible health professionals.

For these reasons, HPhA respectfully urges your support for HB 1857. This measure represents forward-looking governance that strengthens Hawai'i's health care system by improving statutory efficiency while safeguarding patient safety and professional accountability.

Mahalo for the opportunity to testify. Very respectfully,

Corrie L. Sanders, PharmD., BCACP, CPGx
Executive Director, Hawai'i Pharmacists Association

LATE

HB-1857

Submitted on: 2/5/2026 10:11:06 AM

Testimony for HLT on 2/6/2026 9:00:00 AM

Submitted By	Organization	Testifier Position	Testify
Maddalynn Seseapasara	Kua'ana Project	Support	Written Testimony Only

Comments:

Chair Takayama, Vice Chair Keohokapu-Lee Loy, and Members of the Committee:

Thank you for hearing this measure, HB 1857, which aims to update over 190 statutes to align with the State Legislature’s defined scopes of practice for qualified healthcare providers. Maddalynn Seseapasara and the Kua’ana Project is strongly in support of this measure. Further, they have identified additional amendments. Should the committees accept these requested amendments, they are provided on the following page.

This extensive housekeeping bill does not expand any one profession’s scope of practice, nor would it enable providers to practice beyond their state-enacted scopes of practice. Rather, the work here is to enable healthcare providers in Hawai’i to fulfill the healthcare duties for their patients that they may currently be prohibited from performing, despite their practice acts qualifying them to provide these services. At a time when healthcare is exceedingly challenged, enabling the existing and available workforce to optimize the care they can provide to the people of Hawai’i, within their profession’s scope of practice as defined in state law and rule, will improve access to care.

In 2021, the Legislature requested a holistic inquiry into the scope and services that interprofessional healthcare providers may offer. Further, there was an inquiry into why advanced practice registered nurses (APRNs) continued to have requests to legislatively address practice barriers despite nationally leading scope-of-practice laws. In 2022, the Hawai’i State Center for Nursing convened an interprofessional group, including APRNs, physician assistants, psychologists, pharmacists, and physicians, to review the healthcare statutes beyond practice acts. After reviewing 526 laws, the group recommended individual actions for 237 of them. Today, the statutes reflected in this bill have undergone several rounds of feedback requests from healthcare entities and associations, state agencies, and healthcare stakeholders. The reviewed statutes not included in this bill were determined to require additional information or further study, or to be unsuitable for change due to their alignment with uniform acts or federal law.

Maddalynn Seseapasara and the Kua’ana Project thank the Committees for entertaining this measure and for suggesting this large undertaking nearly 5 years ago, which has already led to improvements in our interconnectedness, understanding, and capacity to work interprofessionally. Maddalynn Seseapasara and the Kua’ana Project respectfully request your favorable consideration of this measure with amendments.

Recommended amendments in yellow highlight:

Section 156, Page 220, lines 1-5

""Anesthetist" means [a registered nurse anesthetist] advanced practice registered nurse licensed pursuant to chapter 457 who maintains national certification as a Certified Registered Nurse Anesthetist and who performs anesthesia services [under the supervision of a licensed physician]."

Section 182, Page 186, lines 3-7, and Page 287, lines 8 and 13-14

(b) A health intervention is medically necessary if it is recommended by the physician, treating advanced practice registered nurse, treating physician assistant, or other treating licensed health care provider, is approved by the health plan's medical director [or], physician designee, advanced practice registered nurse designee, or physician assistant designee, and is:

- (1) For the purpose of treating a medical condition;
 - (2) The most appropriate delivery or level of service, considering potential benefits and harms to the patient;
 - (3) Known to be effective in improving health outcomes; provided that:
 - (A) Effectiveness is determined first by scientific evidence;
 - (B) If no scientific evidence exists, then by professional standards of care; and
 - (C) If no professional standards of care exist or if they exist but are outdated or contradictory, then by expert opinion; and
 - (4) Cost-effective for the medical condition being treated compared to alternative health interventions, including no intervention. For purposes of this paragraph, cost-effective shall not necessarily mean the lowest price.
- (c) When the treating licensed health care provider and the health plan's medical director [or], physician designee, advanced practice registered nurse designee or physician assistant designee do not agree on whether a health intervention is medically necessary, a reviewing body, whether internal to the plan or external, shall give consideration to, but shall not be bound by, the recommendations of the treating licensed health care provider and the health plan's medical director [or], physician designee[.], advanced practice registered nurse designee or physician assistant designee.

House Committee on Health
Conference Room 329
State Capitol
415 South Beretania Street
Honolulu, HI 96813

LATE

February 5, 2026
RE: Support for House Bill 1857

Dear Chairman Takayama and House Committee on Health,

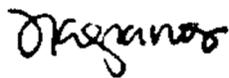
The American Association of Nurse Practitioners (AANP) is the largest professional membership association organization for nurse practitioners and represents the interests of our members in Hawaii and the more than 461,000 nurse practitioners (NPs) in the United States. AANP appreciates the opportunity to submit comment in support of House Bill 1857.

This legislation aims to improve the efficiency of the Hawaii health care system and better use the state's existing health care workforce. House Bill 1857 addresses outdated references to multiple healthcare providers across Hawaii's state law by adopting provider neutral and provider inclusive terminology to refer to health care providers. This bill would clarify and standardize references to specific health care providers across over 200 statutes.

Full Practice Authority is the authorization of nurse practitioners to evaluate patients, diagnose, order and interpret diagnostic tests and initiate and manage treatments — including prescribing medications — under the exclusive licensure authority of the state board of nursing. Hawaii adopted full practice authority legislation in 2009. We appreciate the legislature's continued efforts to align state law with the expertise that exists in Hawaii's health care workforce. AANP supports this effort to modernize Hawaii statute, so patients can continue to benefit from direct access to nurse practitioner care.

On behalf of our Hawaii members and the patients they serve, AANP supports House Bill 1857 as introduced and recommends that the committee move it forward.

Sincerely,



Tay Kopanos
Vice President AANP State Government Affairs



5 Feb 2026

TO: Chair Takayama and Vice Chair Koehokapu-Lee Loy
House Committee on Health

FROM: Leocadia Conlon, PhD, MPH, PA-C

Legislative Chair and President-Elect

Hawai'i Academy of Physician Assistants (HAPA)

RE: **Testimony in SUPPORT of HB 1857**

Hearing Date/time: Friday, February 6, 2026 at 9:00 AM

Conference Room 329 and Videoconference

Chair Takayama and Vice Chair Koehokapu-Lee Loy and Members of the Committee:

Thank you for hearing this measure, HB 1857, which aims to update over 190 statutes to align with the State Legislature's defined scopes of practice for qualified healthcare providers. **The Hawai'i Academy of Physician Assistants (HAPA) is in support of this measure.**

This extensive housekeeping bill does not expand any one profession's scope of practice, nor would it enable providers to practice beyond their state enacted scopes of practice. Rather, the work here is to enable healthcare providers in Hawai'i to fulfill the healthcare duties for their patients that they may currently be prohibited from doing, despite their practice acts qualifying them to complete these duties and services. At a time when healthcare is exceedingly challenged, enabling the existing and available workforce to optimize the care they are able to provide to the people of Hawai'i, fully within their profession's scope of practice as defined in state law and rule, will improve access to care.

Physician Assistants (PAs) are vital to the healthcare workforce, filling critical gaps in care. In Hawai'i, PAs are underrepresented compared to national levels and often excluded from areas where they could contribute significantly within their scope of practice.

In 2021, the Legislature requested a holistic inquiry into the scope and services that interprofessional healthcare providers may offer. HAPA representatives worked with the Hawai'i State Center for Nursing and an interprofessional group, including APRNs, physician assistants, psychologists, pharmacists, and physicians to review the healthcare statutes beyond practice acts. After reading 526 laws, the group recommended individual actions for 237 of these statutes. Today, the statutes reflected in this bill underwent several rounds of requests for feedback to healthcare entities and associations, state agencies, and healthcare stakeholders. The reviewed statutes that are not included in this bill were



determined to need additional information, further study, or are not suitable for change due to their alignment to uniform acts or federal law.

The revisions outlined in this bill are critically needed to align with the rapidly changing healthcare landscape. As Hawai'i works to harness the full expertise of its diverse healthcare workforce to enhance access to quality care for residents, these updates will improve operational clarity and consistency in ways that support contemporary healthcare delivery and best practices in collaborative, team-based care models.

Thank you for the opportunity to provide testimony on this important healthcare workforce issue.

HB-1857

Submitted on: 2/3/2026 3:28:42 PM

Testimony for HLT on 2/6/2026 9:00:00 AM

Submitted By	Organization	Testifier Position	Testify
Allen Novak	Individual	Support	Written Testimony Only

Comments:

To: The Honorable Representative Greg Takayama, Chair; Sue Keohokapu-Lee Loy, Vice Chair; and members of the House Committee on Health

From: Allen Novak, APRN in solo private practice serving chronic and severely mentally ill individuals in East Hawai'i Island.

I appreciate this opportunity to express support for HB1857, which seeks to recognize the current healthcare provider workforce scope of practice.

I am an Advanced Practice Registered Nurse providing psychotherapy and psychopharmaceuticals in East Hawai'i Island. On Hawai'i Island, there is a 40% shortage of physicians. We need to optimize the healthcare workforce to improve residents' access to care.

Healthcare has evolved to include multiple disciplines which have the competency to perform extensive healthcare procedures. Statutes need to be updated to allow qualified providers to practice at the level for which they have been educated and certified.

Thank you for this opportunity to testify in support of HB1857.

Aloha Chair, Vice Chair, and Members of the Committee,

Thank you for the opportunity to testify in strong support of HB1857 with amendments.

I am Miki Miura, a family nurse practitioner with 18 years of nursing experience, and I strongly support HB1857 with recommendations for amendments. As the healthcare landscape evolves to meet national and community needs, new healthcare professionals may appear to fill those needs. This bill will save time and resources by preventing the need to repeatedly review and amend the Hawaii Revised Statutes whenever a new healthcare profession is introduced or the scope of practice for healthcare professionals changes. Importantly, this does not alter the scope of practice for any healthcare professionals; instead, it modernizes these laws so our community can better utilize our already limited healthcare resources and avoid the cumbersome process of continuously revising the same laws.

I ask for your favorable consideration of this measure with amendments that were suggested by the Hawaii State Center for Nursing as below.

Recommended amendments in yellow highlight:

Section 156, Page 220, lines 1-5

""Anesthetist" means [~~a registered nurse anesthetist~~] advanced practice registered nurse licensed pursuant to chapter 457 who maintains national certification as a Certified Registered Nurse Anesthetist and who performs anesthesia services [~~under the supervision of a licensed physician~~]."

Thank you for this opportunity to testify.

Sincerely,
Miki Miura, DNP, APRN, FNP-C

HB-1857

Submitted on: 2/4/2026 1:52:13 PM

Testimony for HLT on 2/6/2026 9:00:00 AM

Submitted By	Organization	Testifier Position	Testify
michael santantonio	Individual	Comments	Written Testimony Only

Comments:

Aloha Chair Takayama, Vice Chair Keohokapu-Lee Loy and members of the committee.

Thank you for the opportunity to submit testimony regarding proposed language that revises the definition of "anesthetist." I am a Certified Registered Nurse Anesthetist who practiced in the state of Hawaii for over 36 years. While I fully support the intent of SB 2491. I respectfully request amendment of specific language on page 220, lines 1-5, in agreement with separately submitted testimony from the Director of the Hawaii Center for Nursing, as follows:

Section 156, page 220, lines 1-5

"Anesthetist" means [registered nurse anesthetist] advanced practice registered nurse licensed pursuant to chapter 457 who maintains national certification as a Certified Registered Nurse Anesthetist and who performs anesthesia services [under the supervision of a licensed physician].

This will provide title clarity and ensures safe, high-quality anesthesia care for the people of Hawaii. Thank you for your time and consideration.

Respectfully,

Michael Santantonio

Certified Registered Nurse Anesthetist

HB-1857

Submitted on: 2/4/2026 2:24:53 PM

Testimony for HLT on 2/6/2026 9:00:00 AM

Submitted By	Organization	Testifier Position	Testify
Matt Tom	Individual	Comments	Written Testimony Only

Comments:

Aloha Chair Takayama, Vice Chair Keohokapu-Lee Loy, and members of the committee,

Thank you for the opportunity to submit testimony regarding proposed language that revises the definition of “anesthetist.” I am a Certified Registered Nurse Anesthetist practicing in the state of Hawaii. While I fully support the intent of HB 1857, I respectfully request amendment of specific language on page 220, lines 1-5, in agreement with separately submitted testimony from the Director of the Hawaii Center for Nursing, as follows:

Section 156, Page 220, lines 1-5

""Anesthetist" means [a registered nurse anesthetist] advanced practice registered nurse licensed pursuant to chapter 457 who maintains national certification as a Certified Registered Nurse Anesthetist and who performs anesthesia services [under the supervision of a licensed physician]."

This provides title clarity and ensures safe, high-quality anesthesia care for the people of Hawaii. Thank you for your time and consideration.

Respectfully,

Matthew Tom, MSN, CRNA

Certified Registered Nurse Anesthetist

Testimony of Nate Apatov, DNP, CRNA, LTC (Ret.)

RE: HB 1857 – Relating to Health Care – Supports Intent, Requests Amendment

I am a Certified Registered Nurse Anesthetist practicing in Hawaii and a retired United States Army Lieutenant Colonel with 30 years of anesthesia practice using the title “anesthetist.”

I support the intent of HB 1857 but request an amendment to preserve clarity and patient safety by maintaining the definition of anesthetist as a CRNA.

Requested amendment: “Anesthetist means an advanced practice registered nurse licensed pursuant to chapter 457 who maintains national certification as a Certified Registered Nurse Anesthetist.”

February 5, 2026

Testimony of [INSERTYOURNAME]

Presented Before the House Committee on Health
Friday, February 6, 2026, at 09:00 a.m. in Conference Room 229

RE: HB 1857 – Relating to Health Care – Supports the Intent, Requests an Amendment

Aloha Chair Takayama, Vice Chair Keohokapu-Lee Loy, and members of the committee,

Thank you for the opportunity to submit testimony regarding proposed language that revises the definition of “anesthetist.” I am a Certified Registered Nurse Anesthetist practicing in the state of Hawaii. While I fully support the intent of SB 2491, I respectfully request amendment of specific language on page 220, lines 1-5, in agreement with separately submitted testimony from the Director of the Hawaii Center for Nursing, as follows:

Section 156, Page 220, lines 1-5

""Anesthetist" means [~~a registered nurse anesthetist~~] advanced practice registered nurse licensed pursuant to chapter 457 who maintains national certification as a Certified Registered Nurse Anesthetist and who performs anesthesia services [~~under the supervision of a licensed physician~~]."

This provides title clarity and ensures safe, high-quality anesthesia care for the people of Hawaii. Thank you for your time and consideration.

Respectfully,
[INSERTYOURNAME]
Certified Registered Nurse Anesthetist

February 5, 2026

Testimony of Eric Butler

Presented Before the House Committee on Health
Friday, February 6, 2026, at 09:00 a.m. in Conference Room 229

RE: HB 1857 – Relating to Health Care – Supports the Intent, Requests an Amendment

Aloha Chair Takayama, Vice Chair Keohokapu-Lee Loy, and members of the committee,

Thank you for the opportunity to submit testimony regarding proposed language that revises the definition of “anesthetist.” I am a Certified Registered Nurse Anesthetist practicing in the state of Hawaii. While I fully support the intent of SB 2491, I respectfully request amendment of specific language on page 220, lines 1-5, in agreement with separately submitted testimony from the Director of the Hawaii Center for Nursing, as follows:

Section 156, Page 220, lines 1-5

“Anesthetist” means ~~[a registered nurse anesthetist]~~ advanced practice registered nurse licensed pursuant to chapter 457 **who maintains national certification as a Certified Registered Nurse Anesthetist** and who performs anesthesia services ~~[under the supervision of a licensed physician].”~~

This provides title clarity and ensures safe, high-quality anesthesia care for the people of Hawaii. Thank you for your time and consideration.

Respectfully,

Eric Butler, DNP
Certified Registered Nurse Anesthetist
CPT, AN
Tripler Army Medical Center
1 Jarrett White Rd
Tripler AMC, Hawaii 96859-5000

February 5, 2026

Testimony of Geraldine Doronio, DNP, CRNA

Presented Before the House Committee on Health
Friday, February 6, 2026, at 09:00 a.m. in Conference Room 229

RE: HB 1857 – Relating to Health Care – Supports the Intent, Requests an Amendment

Aloha Chair Takayama, Vice Chair Keohokapu-Lee Loy, and members of the committee,

Thank you for the opportunity to give testimony on proposed language revising the definition of “anesthetist.” My name is Geraldine Doronio, and I am a Certified Registered Nurse Anesthetist (CRNA) practicing in the State of Hawaii. I have practiced as a CRNA in Hawaii for 17 years and have been a nurse for nearly 24 years. I am also a proud United States Army Reserve veteran. I currently provide anesthesia services at Kaiser Permanente Moanalua Medical Center and in the ambulatory surgery setting at the Mapunapuna Medical Office.

In both hospital and ambulatory settings, I provide anesthesia care for surgical patients, medically complex individuals, and birthing mothers needing labor epidurals or urgent/emergent cesarean anesthesia. In these high-stakes environments, clarity in statutory language is essential because it directly affects how anesthesia care is delivered and how supervision requirements are interpreted.

While I support the intent of HB 1857, the language in question could be interpreted in a way that unintentionally alters current anesthesia practice authority and creates barriers to prompt care. This could result in unnecessary delays, staffing disruptions, and reduced flexibility in safe operating room and ambulatory surgery coverage—ultimately impacting patient safety.

For these reasons, I respectfully request amendment of the specific language on page 220, lines 1-5, consistent with testimony submitted by the Director of the Hawaii Center for Nursing, as follows:

Section 156, Page 220, lines 1-5

""Anesthetist" means [~~a registered nurse anesthetist~~] advanced practice registered nurse licensed pursuant to chapter 457 who maintains national certification as a Certified Registered Nurse Anesthetist and who performs anesthesia services [~~under the supervision of a licensed physician~~]."

This amendment provides title clarity and reflects current standards for CRNA licensure and national certification, while supporting safe, timely, and high-quality anesthesia care for the people of Hawaii.

Thank you for your time and consideration.

Very respectfully,

A handwritten signature in black ink, consisting of several overlapping loops and a long horizontal tail extending to the right.

Geraldine Doronio, DNP, CRNA, APRN

HB-1857

Submitted on: 2/4/2026 3:27:48 PM

Testimony for HLT on 2/6/2026 9:00:00 AM

Submitted By	Organization	Testifier Position	Testify
lee austin	Individual	Comments	Written Testimony Only

Comments:

February 4, 2026

Testimony of Lee Austin, CRNA

Presented Before the House Committee on Health

Friday, February 5, 2026, at 09:00 a.m. in Conference Room 229

RE: HB 1857 – Relating to Health Care – Supports the Intent, Requests an Amendment

Aloha Chair Takayama, Vice Chair Keohokapu-Lee Loy, and members of the committee,

Thank you for the opportunity to submit testimony regarding proposed language that revises the definition of “anesthetist.” I am a Certified Registered Nurse Anesthetist practicing in the state of Hawaii. **While** I fully support the intent of SB 2491, I respectfully request amendment of specific language on page 220, lines 1-5, in agreement with separately submitted testimony from the Director of the Hawaii Center for Nursing, as follows:

Section 156, Page 220, lines 1-5

""Anesthetist" means [a registered nurse anesthetist] advanced practice registered nurse licensed pursuant to chapter 457 who maintains national certification as a Certified Registered Nurse Anesthetist and who performs anesthesia services [under the supervision of a licensed physician]."

This provides title clarity and ensures safe, high-quality anesthesia care for the people of Hawaii. Thank you for your time and consideration.

Respectfully,

Lee Austin

Certified Registered Nurse Anesthetist

February 5, 2026

Testimony of Madonna Sisson

Presented Before the House Committee on Health
Friday, February 6, 2026, at 09:00 a.m. in Conference Room 229

RE: HB 1857 – Relating to Health Care – Supports the Intent, Requests an Amendment

Aloha Chair Takayama, Vice Chair Keohokapu-Lee Loy, and members of the committee,

I am a Certified Registered Nurse Anesthetist practicing in the state of Hawaii. I have been a CRNA for 16 years, 12 of those years here on Oahu. Before entering anesthesia school, I obtained a Bachelor's degree in nursing and had 2 years of experience in the Intensive Care Unit. Upon obtaining my Master's of Science in Nurse Anesthesia from Texas Wesleyan University, I received 28 months of critical training in residency and became board-certified after graduation. I currently practice at Kaiser Moanalua and proud to specialize in providing anesthesia to our pediatric population.

Thank you for the opportunity to submit testimony regarding proposed language that revises the definition of "anesthetist." While I fully support the intent of HB 1857, I respectfully request amendment of specific language on page 220, lines 1-5, in agreement with separately submitted testimony from the Director of the Hawaii Center for Nursing, as follows:

Section 156, Page 220, lines 1-5

""Anesthetist" means [~~a registered nurse anesthetist~~] advanced practice registered nurse licensed pursuant to chapter 457 who maintains national certification as a Certified Registered Nurse Anesthetist and who performs anesthesia services [~~under the supervision of a licensed physician~~]."

This provides title clarity and ensures safe, high-quality anesthesia care for the people of Hawaii. Thank you for your time and consideration.

Respectfully,
Madonna Sisson
Certified Registered Nurse Anesthetist

February 5, 2026

Testimony of Madalina Felice

Presented Before the House Committee on Health
Friday, February 6, 2026, at 09:00 a.m. in Conference Room 229

RE: HB 1857 – Relating to Health Care – Supports the Intent, Requests an Amendment

Aloha Chair Takayama, Vice Chair Keohokapu-Loy, and members of the committee.

Thank you for the opportunity to submit testimony regarding proposed language that revises the definition of “anesthetist.”

My name is Madalina Felice and I am a Certified Registered Nurse Anesthetist (CRNA) currently practicing at Kaiser Permanente in the state of Hawai'i. CRNAs are uniquely qualified to provide anesthesia due to the depth, rigor, and specificity of their education and clinical training. Entry into a CRNA program requires several years of prior experience as a registered nurse in a high-acuity intensive care unit (ICU). I personally practiced as an ICU nurse for four years before beginning my anesthesia training. During that time, I developed critical skills in hemodynamic management, physiology, ventilator management, and rapid decision-making for unstable patients. All of which are foundational to the safe administration of anesthesia.

CRNA education consists of three years of full-time doctoral-level training dedicated exclusively to anesthesia practice. This training includes extensive didactic coursework in advanced pharmacology, pathophysiology, physics, and anesthesia principles, as well as supervised clinical training. During this time, CRNA students provide anesthesia to patients across a wide range of surgical and procedural settings, managing patients independently under the supervision of experienced CRNAs and anesthesiologists. Upon completion of training, CRNAs are required to pass a national certification examination and maintain ongoing continuing education specific to anesthesia throughout their careers.

In contrast, physician assistant (PA) education is designed to be broad and generalist in nature, preparing graduates to practice in many different medical specialties under physician supervision. PA programs do not require prior critical care experience, nor do they provide the depth of anesthesia-specific education, or the volume of hands-on anesthesia clinical training required of CRNAs. While PAs play a vital role in many areas of healthcare, their training is not equivalent to, nor intended to replace, the specialized preparation required to safely administer anesthesia independently.

Anesthesia is a complex and high-risk medical service. Even routine cases can become life-threatening within seconds, requiring immediate recognition and intervention. The CRNA education and training model exists specifically to prepare providers to manage these situations safely and effectively. Diluting the definition of “anesthetist” to include

providers without equivalent anesthesia-focused education and clinical preparation risks compromising patient safety.

While I fully support the intent of HB 1857, I respectfully request amendment of specific language on page 220, lines 1-5, in agreement with separately submitted testimony from the Director of the Hawaii Center for Nursing, as follows:

Section 156, Page 220, lines 1-5

""Anesthetist" means ~~[a registered nurse anesthetist]~~ advanced practice registered nurse licensed pursuant to chapter 457 who maintains national certification as a Certified Registered Nurse Anesthetist and who performs anesthesia services ~~[under the supervision of a licensed physician]."~~

This provides title clarity and ensures safe, high-quality anesthesia care for the people of Hawaii. Thank you for your time and consideration.

Respectfully,
Madalina Felice
Certified Registered Nurse Anesthetist

HB-1857

Submitted on: 2/4/2026 4:09:34 PM

Testimony for HLT on 2/6/2026 9:00:00 AM

Submitted By	Organization	Testifier Position	Testify
geebin mak	Individual	Comments	Written Testimony Only

Comments:

February 5, 2026

Testimony of Geebin Mak

Presented Before the House Committee on Health

Friday, February 6, 2026, at 09:00 a.m. in Conference Room 229

RE: HB 1857 – Relating to Health Care – Supports the Intent, Requests an Amendment

Aloha Chair Takayama, Vice Chair Keohokapu-Lee Loy, and members of the committee,

Thank you for the opportunity to submit testimony regarding proposed language that revises the definition of “anesthetist.” I am a Certified Registered Nurse Anesthetist practicing in the state of Hawaii. While I fully support the intent of HB 1857, I respectfully request amendment of specific language on page 220, lines 1-5, in agreement with separately submitted testimony from the Director of the Hawaii Center for Nursing, as follows:

Section 156, Page 220, lines 1-5

""Anesthetist" means [a registered nurse anesthetist] advanced practice registered nurse licensed pursuant to chapter 457 who maintains national certification as a Certified Registered Nurse Anesthetist and who performs anesthesia services [under the supervision of a licensed physician]."

This provides title clarity and ensures safe, high-quality anesthesia care for the people of Hawaii. Thank you for your time and consideration.

Respectfully,

Geebin Mak

Certified Registered Nurse Anesthetist

February 5, 2026

Testimony of [INSERTYOURNAME]

Presented Before the House Committee on Health
Friday, February 6, 2026, at 09:00 a.m. in Conference Room 229

RE: HB 1857 – Relating to Health Care – Supports the Intent, Requests an Amendment

Aloha Chair Takayama, Vice Chair Keohokapu-Lee Loy, and members of the committee,

Thank you for the opportunity to submit testimony regarding proposed language that revises the definition of “anesthetist.” I am a Certified Registered Nurse Anesthetist practicing in the state of Hawaii. While I fully support the intent of HB 1857, I respectfully request amendment of specific language on page 220, lines 1-5, in agreement with separately submitted testimony from the Director of the Hawaii Center for Nursing, as follows:

Section 156, Page 220, lines 1-5

""Anesthetist" means [~~a registered nurse anesthetist~~] advanced practice registered nurse licensed pursuant to chapter 457 who maintains national certification as a Certified Registered Nurse Anesthetist and who performs anesthesia services [~~under the supervision of a licensed physician~~]."

This provides title clarity and ensures safe, high-quality anesthesia care for the people of Hawaii. Thank you for your time and consideration.

Respectfully,
[INSERTYOURNAME]
Certified Registered Nurse Anesthetist

HB-1857

Submitted on: 2/4/2026 4:43:16 PM

Testimony for HLT on 2/6/2026 9:00:00 AM

Submitted By	Organization	Testifier Position	Testify
Pam Brasher	Individual	Comments	Written Testimony Only

Comments:

February 5, 2026

Testimony of Pamela Brasher, DNP, CRNA, APRN, FAANA

Presented Before the House Committee on Health

Friday, February 6, 2026, at 09:00 a.m. in Conference Room 229

RE: HB 1857 – Relating to Health Care – Supports the Intent, Requests an Amendment

Aloha Chair Takayama, Vice Chair Keohokapu-Lee Loy, and members of the committee.

Mahalo for the opportunity to submit written testimony regarding the proposed language that revises the definition of “anesthetist.” In August of 2020, the American Association of Nurse Anesthetists (AANA) voted to change its name to American Association of Nurse Anesthesiology and to recognize the descriptors “Nurse Anesthesiologist,” “Certified Registered Nurse Anesthetist,” and “CRNA” as synonymous with “Nurse Anesthetist” [AANA name change](#). When anesthesia is administered by a CRNA/Nurse Anesthesiologist, it is recognized as the practice of nursing. Nursing is the largest healthcare profession and one of the nation’s most

trusted. Nurse Anesthesiology is the first profession to own the responsibility of anesthesia delivery. Since its inception over 150 years ago, nurse-administered anesthesia has been essential to caring for patients safely, comfortably, and compassionately.

Nurse Anesthesiologists are part of that representation, and of the healthcare workforce the public and patients trust. Nurse Anesthesiology remains one of the safest and most innovative fields of health sciences today, with Nurse Anesthesiologists delivering the best overall patient experience. The use of the term Nurse Anesthesiology and the AANA's name change in 2021 clarifies the role of Nurse Anesthesiologists as Advanced Practice Registered Nurses who are experts in the science and art of anesthesiology. It clarifies to patients and the public the distinction between highly trained Nurse Anesthesiologists and differently trained non-provider Anesthesia Assistants, Physician Assistants, Registered Nurses administering sedation, and others who have begun using the term "Anesthetist."

I am a Certified Registered Nurse Anesthesiologist practicing in Hawai'i. **While** I fully support the intent of HB 1857, I respectfully request amendment of specific language on **page 220, lines 1-5**, in agreement with separately submitted testimony from the Director of the Hawai'i Center for Nursing, as follows:

Section 156, Page 220, lines 1-5

"Anesthetist" means [~~a registered nurse anesthetist~~] advanced practice registered nurse licensed pursuant to chapter 457 who maintains national certification as a Certified Registered Nurse Anesthetist and who performs anesthesia services [~~under the supervision of a licensed physician~~]."

My second request for consideration is to replace "anesthetist" with the currently recognized term, "anesthesiologist." This provides clarity of title and ensures safe, high-quality anesthesia care for the people of Hawai'i. Patients should not have to worry that the healthcare worker providing their anesthesia has completed the required training, holds the necessary license, and is practicing within their full scope of practice. Mahalo for your time and consideration.

Respectfully,

Pamela Brasher, DNP, CRNA, APRN, FAANA

Certified Registered Nurse Anesthesiologist

Honolulu, Hawai'i 96822

pambrashererna@gmail.com

917.453.8742

HB-1857

Submitted on: 2/4/2026 4:51:08 PM

Testimony for HLT on 2/6/2026 9:00:00 AM

Submitted By	Organization	Testifier Position	Testify
Wailua Brandman	Individual	Support	Written Testimony Only

Comments:

This bill has been needed for many years. It is important for consistency in enforcing the laws of the state. Please pass out of committee as written. Mahalo, Wailua Brandman APRN FAANP

HB-1857

Submitted on: 2/4/2026 4:51:39 PM

Testimony for HLT on 2/6/2026 9:00:00 AM

Submitted By	Organization	Testifier Position	Testify
Melissa Hernandez	Individual	Comments	Written Testimony Only

Comments:

Testimony of Melissa Hernandez

Presented Before the House Committee on Health

Friday, February 6, 2026, at 09:00 a.m. in Conference Room 229

RE: HB 1857 – Relating to Health Care – Supports the Intent, Requests an Amendment

Aloha Chair Takayama, Vice Chair Keohokapu-Lee Loy, and members of the committee,

Thank you for the opportunity to submit testimony regarding proposed language that revises the definition of “anesthetist.” I am a Certified Registered Nurse Anesthetist practicing in the state of Hawaii. While I fully support the intent of HB 1857, I respectfully request amendment of specific language on page 220, lines 1-5, in agreement with separately submitted testimony from the Director of the Hawaii Center for Nursing, as follows:

Section 156, Page 220, lines 1-5

"Anesthetist" means [~~a registered nurse anesthetist~~] advanced practice registered nurse licensed pursuant to chapter 457 who maintains national certification as a Certified Registered Nurse Anesthetist and who performs anesthesia services. [~~under the supervision of a licensed physician~~]

This provides title clarity and ensures safe, high-quality anesthesia care for the people of Hawaii. Thank you for your time and consideration.

Respectfully,

Melissa Hernandez

Certified Registered Nurse Anesthetist

HB-1857

Submitted on: 2/4/2026 4:58:33 PM

Testimony for HLT on 2/6/2026 9:00:00 AM

Submitted By	Organization	Testifier Position	Testify
Chi Ming Au Yeung	Individual	Comments	Written Testimony Only

Comments:

February 5, 2026

Testimony of Chi Ming Au Yeung

Presented Before the House Committee on Health

Friday, February 6, 2026, at 09:00 a.m. in Conference Room 229

RE: HB 1857 – Relating to Health Care – Supports the Intent, Requests an Amendment

Aloha Chair Takayama, Vice Chair Keohokapu-Lee Loy, and members of the committee,

Thank you for the opportunity to submit testimony regarding proposed language that revises the definition of “anesthetist.” I am a Certified Registered Nurse Anesthetist practicing in the state of Hawaii. While I fully support the intent of SB 2491, I respectfully request amendment of specific language on page 220, lines 1-5, in agreement with separately submitted testimony from the Director of the Hawaii Center for Nursing, as follows:

Section 156, Page 220, lines 1-5

""Anesthetist" means [a registered nurse anesthetist] advanced practice registered nurse licensed pursuant to chapter 457 who maintains national certification as a Certified Registered Nurse Anesthetist and who performs anesthesia services [under the supervision of a licensed physician]."

This provides title clarity and ensures safe, high-quality anesthesia care for the people of Hawaii. Thank you for your time and consideration.

Respectfully,

Chi Ming Au Yeung

Certified Registered Nurse Anesthetist

HB-1857

Submitted on: 2/4/2026 5:03:34 PM

Testimony for HLT on 2/6/2026 9:00:00 AM

Submitted By	Organization	Testifier Position	Testify
Scott Dandurand	Individual	Comments	Written Testimony Only

Comments:

February 5, 2026

Testimony of Scott Dandurand

Presented Before the House Committee on Health

Friday, February 6, 2026, at 09:00 a.m. in Conference Room 229

RE: HB 1857 – Relating to Health Care – Supports the Intent, Requests an Amendment

Aloha Chair Takayama, Vice Chair Keohokapu-Lee Loy, and members of the committee,

Thank you for the opportunity to submit testimony regarding proposed language that revises the definition of “anesthetist.” I am a Certified Registered Nurse Anesthetist practicing in the state of Hawaii. While I fully support the intent of SB 2491, I respectfully request amendment of specific language on page 220, lines 1-5, in agreement with separately submitted testimony from the Director of the Hawaii Center for Nursing, as follows:

Section 156, Page 220, lines 1-5

""Anesthetist" means [a registered nurse anesthetist] advanced practice registered nurse licensed pursuant to chapter 457 who maintains national certification as a Certified Registered Nurse Anesthetist and who performs anesthesia services [under the supervision of a licensed physician]."

This provides title clarity and ensures safe, high-quality anesthesia care for the people of Hawaii. Thank you for your time and consideration.

Respectfully,

Scott Dandurand

Certified Registered Nurse Anesthetist

February 5, 2026

Testimony of Jessica Deery, CRNA

Presented Before the Committees of
Health and Human Services and Commerce and Consumer Protection
Friday, February 6, 2026, at 09:00 a.m. in Conference Room 229

RE: SB 2491 – Relating to Health Care – Supports the Intent, Requests an Amendment

Aloha, Honorable Chair San Buenaventura and Chair Keohokalole, and Vice Chairs McKelvey and Fukunaga,

Thank you for the opportunity to submit testimony regarding proposed language that revises the definition of “anesthetist.” I am a Certified Registered Nurse Anesthetist practicing in the state of Hawaii. While I fully support the intent of SB 2491, I respectfully request amendment of specific language on page 220, lines 1-5, in agreement with separately submitted testimony from the Director of the Hawaii Center for Nursing, as follows:

Section 156, Page 220, lines 1-5

""Anesthetist" means [~~a registered nurse anesthetist~~] advanced practice registered nurse licensed pursuant to chapter 457 who maintains national certification as a Certified Registered Nurse Anesthetist and who performs anesthesia services [~~under the supervision of a licensed physician~~]."

This provides title clarity and ensures safe, high-quality anesthesia care for the people of Hawaii. Thank you for your time and consideration.

Respectfully,
Jessica Deery
Certified Registered Nurse Anesthetist

HB-1857

Submitted on: 2/4/2026 5:08:48 PM

Testimony for HLT on 2/6/2026 9:00:00 AM

Submitted By	Organization	Testifier Position	Testify
Rita Lin	Individual	Comments	Written Testimony Only

Comments:

February 5, 2026

Testimony of Rita Lin

Presented Before the House Committee on Health

Friday, February 6, 2026, at 09:00 a.m. in Conference Room 229

RE: HB 1857 – Relating to Health Care – Supports the Intent, Requests an Amendment

Aloha Chair Takayama, Vice Chair Keohokapu-Lee Loy, and members of the committee,

Thank you for the opportunity to submit testimony regarding proposed language that revises the definition of “anesthetist.” I am a Certified Registered Nurse Anesthetist practicing in the state of Hawaii. While I fully support the intent of SB 2491, I respectfully request amendment of specific language on page 220, lines 1-5, in agreement with separately submitted testimony from the Director of the Hawaii Center for Nursing, as follows:

Section 156, Page 220, lines 1-5

""Anesthetist" means [a registered nurse anesthetist] advanced practice registered nurse licensed pursuant to chapter 457 who maintains national certification as a Certified Registered Nurse Anesthetist and who performs anesthesia services [under the supervision of a licensed physician]."

This provides title clarity and ensures safe, high-quality anesthesia care for the people of Hawaii. Thank you for your time and consideration.

Respectfully,

Rita Lin

Certified Registered Nurse Anesthetist

HB-1857

Submitted on: 2/4/2026 5:18:50 PM

Testimony for HLT on 2/6/2026 9:00:00 AM

Submitted By	Organization	Testifier Position	Testify
Joseph Zimmerman	Individual	Comments	Written Testimony Only

Comments:

February 5, 2026

Testimony of Joseph Zimmerman, CRNA at Queens medical center

Presented Before the House Committee on Health

Friday, February 6, 2026, at 09:00 a.m. in Conference Room 229

RE: HB 1857 – Relating to Health Care – Supports the Intent, Requests an Amendment

Aloha Chair Takayama, Vice Chair Keohokapu-Lee Loy, and members of the committee,

Thank you for the opportunity to submit testimony regarding proposed language that revises the definition of “anesthetist.” I am a Certified Registered Nurse Anesthetist practicing in the state of Hawaii. While I fully support the intent of SB 2491, I respectfully request amendment of specific language on page 220, lines 1-5, in agreement with separately submitted testimony from the Director of the Hawaii Center for Nursing, as follows:

Section 156, Page 220, lines 1-5

""Anesthetist" means [~~a registered nurse anesthetist~~] advanced practice registered nurse licensed pursuant to chapter 457 who maintains national certification as a Certified Registered Nurse Anesthetist and who performs anesthesia services [~~under the supervision of a licensed physician~~]."

This provides title clarity and ensures safe, high-quality anesthesia care for the people of Hawaii. Thank you for your time and consideration.

Respectfully,

Joseph Zimmerman

Certified Registered Nurse Anesthetist

HB-1857

Submitted on: 2/4/2026 5:42:25 PM

Testimony for HLT on 2/6/2026 9:00:00 AM

Submitted By	Organization	Testifier Position	Testify
Guy T Price	Individual	Support	Written Testimony Only

Comments:

February 5, 2026

Testimony of Guy T Price

Presented Before the House Committee on Health

Friday, February 6, 2026, at 09:00 a.m. in Conference Room 229

RE: HB 1857 – Relating to Health Care – Supports the Intent, Requests an Amendment

Aloha Chair Takayama, Vice Chair Keohokapu-Lee Loy, and members of the committee,

Thank you for the opportunity to submit testimony regarding proposed language that revises the definition of “anesthetist.” I am a Certified Registered Nurse Anesthetist (CRNA) practicing in the state of Hawai‘i with 14 years of experience. I am currently employed at Kaiser Permanente Moanalua. I have had the privilege of providing anesthesia services for patients at The Queens Medical Center and Straub Benihoff Medical Center Hospital. The safest way to administer any anesthesia is by a Board Certified CRNA or a Board Certified Anesthesiologist. While I fully support the intent of SB 2491, I respectfully request amendment of specific language on page

220, lines 1-5, in agreement with separately submitted testimony from the Director of the Hawai'i Center for Nursing, as follows:

Section 156, Page 220, lines 1-5

""Anesthetist" means [a registered nurse anesthetist] advanced practice registered nurse licensed pursuant to chapter 457 who maintains national certification as a Certified Registered Nurse Anesthetist and who performs anesthesia services [under the supervision of a licensed physician]."

This provides title clarity and ensures safe, high-quality anesthesia care for the people of Hawai'i. Thank you for your time and consideration.

Respectfully,

Guy T Price

Certified Registered Nurse Anesthetist

HB-1857

Submitted on: 2/4/2026 5:44:08 PM

Testimony for HLT on 2/6/2026 9:00:00 AM

Submitted By	Organization	Testifier Position	Testify
Alison Kaneshiro	Individual	Support	Written Testimony Only

Comments:

Testimony Presented Before the House

Committee on Health

Friday, February 6, 2026 at 9:00 AM

Conference Room 329 and Videoconference

by

Alison G. Kaneshiro, DNP, APRN-Rx, FNP-BC]

Testimony in STRONG SUPPORT with amendments of HB 1857

Chair Takayama, Vice Chair Keohokapu-Lee Loy, and Members of the Committee:

Thank you for hearing this measure, HB 1857, which aims to update over 190 statutes to align with the State Legislature’s defined scopes of practice for qualified healthcare providers. I am in strong support of this bill. Further, **Hawai’i State Center for Nursing** has identified additional amendments. Should the committees accept these requested amendments, they are provided on the page that follows.

This extensive housekeeping bill does not expand any one profession’s scope of practice, nor would it enable providers to practice beyond their state enacted scopes of practice. Rather, the work here is to enable healthcare providers in Hawai’i to fulfill the healthcare duties for their patients that they may currently be prohibited from doing, despite their practice acts qualifying them to complete these duties and services. At a time when healthcare is exceedingly challenged, enabling the existing and available workforce to optimize the care they can provide to the people of Hawai’i, fully within their profession’s scope of practice as defined in state law and rule, will improve access to care.

In 2021, the Legislature requested a holistic inquiry into the scope and services that interprofessional healthcare providers may offer. Further, there was an inquiry as to why advanced practice registered nurses (APRNs) had continued requests to legislatively address practice barriers despite nationally leading scope of practice laws. In 2022, the Hawai'i State Center for Nursing convened an interprofessional group, including APRNs, physician assistants, psychologists, pharmacists, and physicians to review the healthcare statutes beyond practice acts. After reading 526 laws, the group recommended individual actions for 237 of these statutes. Today, the statutes reflected in this bill underwent several rounds of requests for feedback to healthcare entities and associations, state agencies, and healthcare stakeholders. The reviewed statutes that are not included in this bill were determined to need additional information, further study, or are not suitable for change due to their alignment to uniform acts or federal law.

I, Alison G. Kaneshiro, DNP, APRN-Rx, FNP-BC thank the Committee for entertaining this measure, and suggesting this large undertaking nearly 5 years ago, which has already led to an improvement in our interconnectedness, understanding, and capacity to work interprofessionally together. I respectfully request your favorable consideration of this measure with amendments.

Recommended amendments:

Section 156, Page 220, lines 1-5

""Anesthetist" means [~~a registered nurse anesthetist~~] advanced practice registered nurse licensed pursuant to chapter 457 who maintains national certification as a Certified Registered Nurse Anesthetist and who performs anesthesia services [~~under the supervision of a licensed physician~~]."

Section 182, Page 186, lines 3-7, and Page 287, lines 8 and 13-14

(b) A health intervention is medically necessary if it is recommended by the *physician, treating advanced practice registered nurse, treating physician assistant, or other* treating licensed health care provider, is approved by the health plan's medical director [~~or~~], *physician designee, advanced practice registered nurse designee, or physician assistant designee*, and is:

- (1) For the purpose of treating a medical condition;
- (2) The most appropriate delivery or level of service, considering potential benefits and harms to the patient;
- (3) Known to be effective in improving health outcomes; provided that:

(A) Effectiveness is determined first by scientific evidence;

(B) If no scientific evidence exists, then by professional standards of care; and

(C) If no professional standards of care exist or if they exist but are outdated or contradictory, then by expert opinion; and

(4) Cost-effective for the medical condition being treated compared to alternative health interventions, including no intervention. For purposes of this paragraph, cost-effective shall not necessarily mean the lowest price.

(c) When the treating licensed health care provider and the health plan's medical director [~~or~~], *physician designee, advanced practice registered nurse designee or physician assistant designee* do not agree on whether a health intervention is medically necessary, a reviewing body, whether internal to the plan or external, shall give consideration to, but shall not be bound by, the recommendations of the treating licensed health care provider and the health plan's medical director [~~or~~], *physician designee[.], advanced practice registered nurse designee or physician assistant designee.*

HB-1857

Submitted on: 2/4/2026 5:52:00 PM

Testimony for HLT on 2/6/2026 9:00:00 AM

Submitted By	Organization	Testifier Position	Testify
Lila Aiyar	Individual	Comments	Written Testimony Only

Comments:

Testimony of Jennifer Bojanowski, MS, CGC, LCSW;

Lila Aiyar, MSc, CGC, CCGC; and Michelle Takemoto, MS, CGC

Presented Before the House Committee on Health

Friday, February 6, 2026, at 09:00 a.m. in Conference Room 229

RE: HB 1857 – Relating to Health Care –

Supports the Intent, Requests an Amendment

Aloha, Honorable Chair Takayama, Vice Chair Keohakapu-Lee Joy and and Committee Members,

As Certified Genetic Counselors in Hawai‘i, we thank-you for the opportunity to provide this commentary in support of the intent of HB 1857, with a specific proposed amendment to **OMIT the addition “or physician assistant” in the section below, relating to genetic counseling.**

SECTION 121. Section 451K-5, Hawaii Revised Statutes, is amended by amending subsection (c) to read as follows:

"(c) Nothing in this chapter shall be construed to prevent a physician or physician assistant licensed to practice medicine in this State or an intern, fellow, or resident from performing genetic counseling within the person's scope of practice as long as the person is not in any manner held out to the public as a "genetic counselor" or "licensed genetic counselor"."

While we only became aware this week of the work of the *Hawai‘i State Center for Nursing’s Healthcare Provider Barriers to Practice Law Review Task Force*, we commend the group’s multi-year effort to modernize scope-of-practice laws and improve access to care and would have welcomed inclusion of a Certified Genetic Counselor on the Task Force. We additionally appreciate cross-discipline collaboration with and the contributions of physician assistants. We recognize their education is rigorous and well suited to its intended roles. However, physician assistants’ education and training lacks sufficient specialized training in medical genetics and genetic counseling.

From a public safety perspective, there is well-documented evidence that genetic counseling services provided by clinicians *without specialized genetics training* can result in inappropriate test ordering, inaccurate interpretation of results, and insufficient counseling regarding limitations, follow-up medical management care, and familial implications (Farmer M. et al., 2019; Farmer M. et al., 2021; Bonadies, D. et al., 2014; Coleman, TF et al., 2024; Feldman J et al., 2023). These concerns are **especially relevant in Hawai‘i’s diverse population**, where genetic variation is underrepresented in reference databases and uncertain results are more common, increasing the risk of misinterpretation without expert involvement (Chen, E. et al., 2023). The concern is ensuring that patients throughout Hawai‘i receive genetic counseling services from providers with appropriate oversight, training, and certification standards that reflect the specialized nature of this care.

In contrast to the *broader content* of physician assistants’ master’s degree and exam by the NCCPA (National Commission on Certification for Physician Assistants), Certified Genetic Counselors complete a two-year master’s degree from a program accredited by ACGC (Accreditation Council for Genetic Counseling) with competency-based clinical and didactic training in *medical genetics, psychosocial counseling, genetic risk assessment, test selection, and test interpretation*, followed by certification through the ABGC (American Board of Genetic Counseling) requiring a *national exam and clinical genetic counseling case supervision*. Every five years, ongoing ABGC certification requires 125 continuing education hours specific to genetics and genetic counseling. Pending completion of the rule-making process, we will soon have Hawai‘i licensure of genetic counselors that requires ongoing ABGC certification to ensure continued competence in this rapidly evolving field.

We therefore respectfully ask for the amendment of HB 1857 as described above prior to advancing the measure. This approach best aligns with the bills’ intentions by supporting public safety and preserving high-quality, evidence-based genetic services for the people of Hawai‘i.

Sincerely,

Lila Aiyar, MSc, CGC, CCGC

Director-at-Large, Alliance for Genomic Justice

Honolulu, HI, 96815

Jennifer Bojanowski, LCSW, MS, CGC

Owner/Manager/Clinician, Kaiona Counseling, LLC

47-321 Mawaena Street, Kaneohe, HI 96744

Michelle Takemoto, MS, CGC

Executive Director, Alliance for Genomic Justice

Honolulu, HI, 96821

Farmer, MB, Bonadies, DC.....Matloff, E. Errors in Genetic Testing: The Fourth Case Series. *The Cancer Journal* 25(4):p 231-236, 7/8 2019. | DOI: 10.1097/PPO.0000000000000391

Farmer, MB, Bonadies, DC.....Matloff, E.: Challenges and Errors in Genetic Testing: The Fifth Case Series. *The Cancer Journal* 27(6):p 417-422, 11/12 2021. | DOI: 10.1097/PPO.0000000000000553

Bonadies, DC, Brierly, KL... Matloff, E. Adverse Events in Cancer Genetic Testing: The Third Case Series. *The Cancer Journal* 20(4):p 246-253, July/August 2014. | DOI: 10.1097/PPO.0000000000000057

Chen, E., Facio, F. M.... Aradhya, S. (2023). Rates and Classification of Variants of Uncertain Significance in Hereditary Disease Genetic Testing. *JAMA Network Open*, 6(10), e2339571. doi:10.1001/jamanetworkopen.2023.39571

Coleman TF, Pugh J, Kelley WV, East KM, Greve V, Finnila CR, Henson A, Korf BR, Barsh GS, Cooper GM, Cochran ME. Errors in genome sequencing result disclosures: A randomized controlled trial comparing neonatology non-genetics healthcare professionals and genetic counselors. *Genet Med*. 2024 Sep;26(9):101198. doi: 10.1016/j.gim.2024.101198. Epub 2024 Jun 25. PMID: 38943479.

Feldman J, Bhimarao Nagaraj C, Collins K, Wakefield E, He H, Myers M, Wusik K. Comparison of genetic testing documentation between genetic counselors and non-genetic counselors. *J Genet Couns*. 2023 Jun;32(3):635-645. doi: 10.1002/jgc4.1669. Epub 2023 Jan 19. PMID: 36660806.

HB-1857

Submitted on: 2/4/2026 6:20:07 PM

Testimony for HLT on 2/6/2026 9:00:00 AM

Submitted By	Organization	Testifier Position	Testify
steven bazan	Individual	Comments	Written Testimony Only

Comments:

February 5, 2026

Testimony of Steven Bazan MSN CRNA

Presented Before the House Committee on Health

Friday, February 6, 2026, at 09:00 a.m. in Conference Room 229

RE: HB 1857 – Relating to Health Care – Supports the Intent, Requests an Amendment

Aloha Chair Takayama, Vice Chair Keohokapu-Lee Loy, and members of the committee,

Thank you for the opportunity to submit testimony regarding the proposed language revising the definition of “anesthetist.” I am a Certified Registered Nurse Anesthetist (CRNA) practicing in the state of Hawai‘i and have worked for Kaiser Permanente for the past ten years.

The delivery of high-quality anesthesia care requires extensive education, time, and clinical experience. My preparation included three years of graduate education and residency training with more than 2,000 anesthesia cases, in addition to many years of open-heart ICU nursing experience required for eligibility to sit for national anesthesia board certification. The proposed bill language minimizes this rigorous training and preparation by granting the title and professional recognition of “anesthetist” to Physician Assistants, whose education and scope of practice are not equivalent in this highly specialized field. This is both inaccurate and, frankly, disrespectful to the profession.

As currently written, the proposed language risks decreasing the quality and safety of anesthesia care across Hawai'i. While the measure may appear to increase access to care, it does so at the expense of patient safety and clinical standards. History has shown that anesthesia administered by inadequately trained providers—such as in certain dental practices and settings with insufficient surgical oversight—has resulted in preventable patient harm and fatalities.

Although Physician Assistants play an important role in improving access to healthcare, their training does not overlap with the specialized education, certification, and clinical competencies required for anesthesia practice.

While I fully support the intent of HB1857, I respectfully request amendment of specific language on page 220, lines 1-5, in agreement with separately submitted testimony from the Director of the Hawaii Center for Nursing, as follows:

Section 156, Page 220, lines 1-5

""Anesthetist" means ~~[a registered nurse anesthetist]~~ advanced practice registered nurse licensed pursuant to chapter 457 who maintains national certification as a Certified Registered Nurse Anesthetist and who performs anesthesia services ~~[under the supervision of a licensed physician].~~"

This provides title clarity and ensures safe, high-quality anesthesia care for the people of Hawaii. Thank you for your time and consideration.

Respectfully,

Steven Bazan MSN CRNA

Certified Registered Nurse Anesthetist

HB-1857

Submitted on: 2/4/2026 6:32:48 PM

Testimony for HLT on 2/6/2026 9:00:00 AM

Submitted By	Organization	Testifier Position	Testify
Sterling Yee	Individual	Comments	Written Testimony Only

Comments:

Testimony of Sterling Yee, MS, CGC

RE: HB1857 – Relating to Health Care – Supports the Intent, Requests an Amendment

Presented Before the Senate Committees on

Commerce and Consumer Protection and Health and Human Services

Friday, February 6, 2026, at 09:00 a.m. in Conference Room 229

Aloha Chair Takayama, Vice Chair Keohokapu-Lee Loy, and members of the committee,

Thank you for the opportunity to submit testimony regarding HB1857.

I am a Certified Genetic Counselor practicing in the state of Hawai‘i. While I fully support the intent of HB1857, I respectfully request omission of the proposed amendment to section 451K-5(c), Hawai‘i Revised Statutes in section 121, which would explicitly permit physician assistants to perform genetic counseling within their scope of practice.

My support is in agreement with the testimony submitted regarding HB1857 by Jennifer Bojanowski, LCSW, MS, CGC, Lila Aiyar, MSc, CGC, CCGC, and Michelle Takemoto, MS, CGC. As a Certified Genetic Counselor in this state, my support for this request is based on public safety. Genetic counseling is a distinct clinical specialty requiring completion of an accredited graduate degree program, professional certification, and ongoing genetics-specific continuing education. There are well-documented risks to patient health and outcomes when genetic services are provided by clinicians without specialized genetics training, and this risk is heightened in Hawai‘i’s diverse population.

I respectfully urge the Legislature to advance HB1857 while omitting this amendment, consistent with the testimony of Jennifer Bojanowski, Lila Aiyar and Michelle Takemoto.

Thank you for your time and consideration.

Sterling Yee, MS, CGC

HB-1857

Submitted on: 2/4/2026 6:34:55 PM

Testimony for HLT on 2/6/2026 9:00:00 AM

Submitted By	Organization	Testifier Position	Testify
Lisa Mar	Individual	Comments	Written Testimony Only

Comments:

RE: HB1857 – Relating to Health Care – Supports the Intent, Requests an Amendment

Presented Before the Senate Committees on Commerce and Consumer Protection and Health and Human Services

Friday, February 6, 2026, at 09:00 a.m. in Conference Room 229

Aloha Chair Takayama, Vice Chair Keohokapu-Lee Loy, and members of the committee,

Thank you for the opportunity to submit testimony regarding HB1857.

I am a Certified Genetic Counselor in the state of Hawai'i. While I fully support the intent of HB1857, I respectfully request omission of the proposed amendment to section 451K-5(c), Hawai'i Revised Statutes in section 121, which would explicitly permit physician assistants to perform genetic counseling within their scope of practice.

My support is in agreement with the testimony submitted regarding HB1857 by Jennifer Bojanowski, LCSW, MS, CGC, Lila Aiyar, MSc, CGC, CCGC, and Michelle Takemoto, MS, CGC. As a Certified Genetic Counselor in the state, my support for this request is based on public safety. Genetic counseling is a distinct clinical specialty requiring completion of an accredited graduate degree program, professional certification, and ongoing genetics-specific continuing education. There are well-documented risks to patient health and outcomes when genetic services are provided by clinicians without specialized genetics training, and this risk is heightened in Hawai'i's diverse population.

I respectfully urge the Legislature to advance HB1857 while omitting this amendment, consistent with the testimony of Jennifer Bojanowski, Lila Aiyar and Michelle Takemoto.

Thank you for your time and consideration.

Lisa Mar, MS, CGC

HB-1857

Submitted on: 2/4/2026 7:26:33 PM

Testimony for HLT on 2/6/2026 9:00:00 AM

Submitted By	Organization	Testifier Position	Testify
Allison Wong	Individual	Comments	Written Testimony Only

Comments:

Testimony of Allison Wong, MS, CGC

RE: HB1857 – Relating to Health Care – Supports the Intent, Requests an Amendment

Presented Before the Senate Committees on

Commerce and Consumer Protection and Health and Human Services

Friday, February 6, 2026, at 09:00 a.m. in Conference Room 229

Aloha Chair Takayama, Vice Chair Keohokapu-Lee Loy, and members of the committee,

Thank you for the opportunity to submit testimony regarding HB1857.

I am a Certified Genetic Counselor practicing in the state of Hawai‘i. While I fully support the intent of HB1857, I respectfully request omission of the proposed amendment to section 451K-5(c), Hawai‘i Revised Statutes in section 121, which would explicitly permit physician assistants to perform genetic counseling within their scope of practice.

My support is in agreement with the testimony submitted regarding HB1857 by Jennifer Bojanowski, LCSW, MS, CGC, Lila Aiyar, MSc, CGC, CCGC, and Michelle Takemoto, MS, CGC. As a Certified Genetic Counselor in this state, my support for this request is based on public safety. Genetic counseling is a distinct clinical specialty requiring completion of an accredited graduate degree program, professional certification, and ongoing genetics-specific continuing education. There are well-documented risks to patient health and outcomes when genetic services are provided by clinicians without specialized genetics training, and this risk is heightened in Hawai‘i’s diverse population.

I respectfully urge the Legislature to advance HB1857 while omitting this amendment, consistent with the testimony of Jennifer Bojanowski, Lila Aiyar and Michelle Takemoto.

Thank you for your time and consideration.

Allison Wong, MS, CGC

February 4, 2026

Testimony of Courtney Lin, CRNA
Presented Before the House Committee on Health
Friday, February 6, 2026, at 09:00 a.m. in Conference Room 229

RE: HB 1857 – Relating to Health Care – Supports the Intent, Requests an Amendment

Aloha Chair Takayama, Vice Chair Keohokapu-Lee Loy, and members of the committee,

Thank you for the opportunity to submit testimony regarding proposed language that revises the definition of “anesthetist.” I am a Certified Registered Nurse Anesthetist practicing in the state of Hawaii. While I fully support the intent of SB 2491, I respectfully request amendment of specific language on page 220, lines 1-5, in agreement with separately submitted testimony from the Director of the Hawaii Center for Nursing, as follows:

Section 156, Page 220, lines 1-5

""Anesthetist" means [~~a registered nurse anesthetist~~] advanced practice registered nurse licensed pursuant to chapter 457 **who maintains national certification as a Certified Registered Nurse Anesthetist** and who performs anesthesia services [~~under the supervision of a licensed physician~~].”

For context, I have been a practicing CRNA for almost 20 years. Becoming and remaining a CRNA required years of graduate-level education, thousands of supervised clinical hours, national certification, and ongoing continuing education. Anesthesia is not a “learn-on-the-job” profession. We manage patients’ breathing, heart function, and level of consciousness, often in high-acuity, time-sensitive situations where errors can have immediate and catastrophic consequences. We are trained in caring for the entire body systems and how patient’s preexisting health conditions influence the anesthetic.

From a layperson’s perspective, most patients would never want someone without the proper education, training, and certification responsible for their anesthesia—or that of their loved ones. They expect, and deserve, a highly trained professional who has demonstrated competence before administering powerful medications or managing a patient’s airway. Clear statutory language recognizing this is essential to protecting public safety and maintaining trust in our healthcare system.

This language matters because ambiguous or overly broad definitions in this section could allow unqualified practitioners to deliver anesthesia care, ultimately putting patients at risk in our state. Thank you for your time and consideration.

Respectfully,
Courtney Lin
Certified Registered Nurse Anesthetist

HB-1857

Submitted on: 2/4/2026 7:47:27 PM

Testimony for HLT on 2/6/2026 9:00:00 AM

Submitted By	Organization	Testifier Position	Testify
Sarah Carpenter	Individual	Comments	In Person

Comments:

Testimony of Sarah Carpenter

RE: HB1857 – Relating to Health Care – Supports the Intent, Requests an Amendment

Presented Before the Senate Committees on

Commerce and Consumer Protection and Health and Human Services

Friday, February 6, 2026, at 09:00 a.m. in Conference Room 229

Aloha Chair Takayama, Vice Chair Keohokapu-Lee Loy, and members of the committee,

Thank you for the opportunity to submit testimony regarding HB1857.

I am a Certified Genetic Counselor practicing in the state of Hawai‘i. While I fully support the intent of HB1857, I respectfully **request omission of the proposed amendment to section 451K-5(c), Hawai‘i Revised Statutes in section 121**, which would explicitly permit physician assistants to perform genetic counseling within their scope of practice.

My support is in agreement with the testimony submitted regarding HB1857 by Jennifer Bojanowski, LCSW, MS, CGC, Lila Aiyar, MSc, CGC, CCGC, and Michelle Takemoto, MS, CGC. As a Certified Genetic Counselor in this state, my support for this request is based on public safety. Genetic counseling is a distinct clinical specialty requiring completion of an accredited graduate degree program, professional certification, and ongoing genetics-specific continuing education. There are well-documented risks to patient health and outcomes when genetic services are provided by clinicians without specialized genetics training, and this risk is heightened in Hawai‘i’s diverse population.

I respectfully urge the Legislature to advance HB1857 while omitting this amendment, consistent with the testimony of Jennifer Bojanowski, Lila Aiyar, and Michelle Takemoto.

Thank you for your time and consideration.

Sarah Carpenter, MS, CGC
Honolulu, HI 96822

HB-1857

Submitted on: 2/4/2026 8:10:05 PM

Testimony for HLT on 2/6/2026 9:00:00 AM

Submitted By	Organization	Testifier Position	Testify
Joan Marie Forester	Individual	Comments	Written Testimony Only

Comments:

Aloha,

Thank you for the opportunity to submit testimony regarding the proposed language that revises the definition of 'anesthetist'. I am a Certified Registered Nurse Anesthetist practicing in the state of Hawaii since 1999. While I fully support the intent of HB 1857, I respectfully request an amendment of the specific language on page 220, lines 1-5, in agreement with submitted testimony from the Director of the Hawaii Center for Nursing, as follows:

Section 156, Page 220, line 1-5 ammended to:

"anesthetist" means an advanced practice registered nurse anesthetist pursuant to chapter 457 who maintains national board certification as a Certified Registered Nurse Anesthetist and who performs anesthesia services.

This provides clarity and ensures safe, high-quality anesthesia care for the people of Hawaii. Thank you for your time and consideration.

Respectfully,
Joan Forester CRNA

Testimony Presented Before the
House Committee on Health
Friday, February 6, 2026, at 09:00 a.m. in Conference Room 329
By Kit Ng, DNP, CRNA, APRN

Representative Gregg Takayama, Chair
Representative Sue Keohokapu-Lee Loy, Vice Chair

RE: HB 1857 – Relating to Health Care – Supports the Intent, Requests an Amendment

Aloha respectable Chair Takayama, Vice Chair Keohokapu-Lee Loy , and members of the committees:

My name is Kit Ng, DNP, CRNA, APRN. Thank you for the opportunity to submit this testimony regarding proposed language that revises the definition of “anesthetist.” While I fully support the intent of the bills, specific language in the proposed HRS revision in section 156, page 220, lines 1-5 is of concerning.

Primary concern: Inaccurate statutory description of nurse anesthetists

My primary concern is that the revised definition incorrectly describes and weakens the established identity and title protection of Certified Registered Nurse Anesthetists (CRNAs) in Hawai'i. Historically and in practice, “anesthetist” within Hawai'i's health care system has referred to CRNAs, who are advanced practice registered nurses (APRNs) educated, licensed, and regulated to provide anesthesia services. Replacing that clear understanding with broader, less precise language diminishes statutory clarity, creates confusion for patients and stakeholders, and undermines the Legislature's ability to maintain consistent professional standards across licensure, scope, and reimbursement.

Title clarity matters in health care. Patients deserve transparency about who is providing anesthesia care and what qualifications that provider holds. Statutory definitions should reflect the reality that CRNAs are anesthesia professionals with graduate-level anesthesia education, extensive supervised clinical training, and a defined regulatory framework for anesthesia practice and accountability.

Secondary concern: Adding Physician Assistants to the definition

Our secondary concern is that the proposed definition would also include physician assistants (PAs) as “anesthetists” or otherwise suggest eligibility to perform or bill for anesthesia services through definition changes – particularly if placed in insurance or reimbursement sections. PAs are valued members of the health care team, but they are not educated, licensed, or regulated in Hawai'i under a framework designed for the full responsibilities of anesthesia practice. Including PAs in the “anesthetist” definition creates immediate ambiguity and may unintentionally open a pathway for scope

expansion through reimbursement recognition rather than through deliberate, patient safety-focused licensure policy.

For these reasons, I support the Center for Nursing's proposed amendment:

Section 156, Page 220, lines 1-5

""Anesthetist" means [~~a registered nurse anesthetist~~] advanced practice registered nurse licensed pursuant to chapter 457 who maintains national certification as a Certified Registered Nurse Anesthetist and who performs anesthesia services ~~under the supervision of a licensed physician.~~"

Mahalo for your consideration and opportunity to assist with this important initiative.

Respectfully,

Kit Ng

February 5, 2026

Testimony of Lawrence Soto

Presented Before the House Committee on Health
Friday, February 6, 2026, at 09:00 a.m. in Conference Room 229

RE: HB 1857 – Relating to Health Care – Supports the Intent, Requests an Amendment

Aloha Chair Takayama, Vice Chair Keohokapu-Lee Loy, and members of the committee,

Thank you for the opportunity to submit testimony regarding proposed language that revises the definition of “anesthetist.” My name is Lawrence Soto, and I am a Certified Registered Nurse Anesthetist practicing in the State of Hawai‘i. I was born and raised on the island of O‘ahu and feel a deep responsibility to give back to the people and communities that shaped me. As a Native Hawaiian who has dedicated my career to serving patients in our local hospitals, including The Queen’s Medical Center and Kaiser Medical Center in Honolulu, I am strongly committed to ensuring safe, accessible, and high-quality anesthesia care across our state.

While I fully support the intent of HB 1857 and the broader effort to modernize and clarify statutory language, I respectfully request amendment of specific language on page 220, lines 1–5, in agreement with separately submitted testimony from the Director of the Hawai‘i Center for Nursing, as follows:

Section 156, Page 220, lines 1-5

"Anesthetist" means ~~a registered nurse anesthetist~~ advanced practice registered nurse licensed pursuant to chapter 457 who maintains national certification as a Certified Registered Nurse Anesthetist and who performs anesthesia services ~~under the supervision of a licensed physician.~~

Clear and accurate statutory language is essential to protecting patient safety. CRNAs are highly trained advanced practice registered nurses who complete rigorous graduate-level education, thousands of hours of clinical training, and maintain national certification. Language that inaccurately suggests supervision requirements—when they are no longer applicable—can create confusion within healthcare systems, delay care, and introduce unnecessary administrative barriers that may limit timely access to anesthesia services.

In hospital settings where rapid decision-making is critical, clarity in provider roles allows anesthesia professionals to practice to the full extent of their education and training. This helps ensure that patients receive efficient, evidence-based care without avoidable delays. For many communities in Hawai'i, maintaining a strong and clearly defined anesthesia workforce is vital to preserving access to surgical, obstetric, and emergency services.

This amendment provides important title clarity and supports the continued delivery of safe, high-quality anesthesia care for the people of Hawai'i. I respectfully urge the committee to adopt this targeted amendment while advancing the bill's overall intent.

Thank you for your time, consideration, and commitment to the health of our communities.

Respectfully,

Lawrence Soto, DNP, CRNA
Certified Registered Nurse Anesthetist

HB-1857

Submitted on: 2/4/2026 8:48:19 PM

Testimony for HLT on 2/6/2026 9:00:00 AM

Submitted By	Organization	Testifier Position	Testify
Kurt Fujitani	Individual	Comments	Written Testimony Only

Comments:

February 5, 2026

Testimony of Kurt Fujitani

Presented Before the House Committee on Health

Friday, February 6, 2026, at 09:00 a.m. in Conference Room 229

RE: HB 1857 – Relating to Health Care – Supports the Intent, Requests an Amendment

Aloha Chair Takayama, Vice Chair Keohokapu-Lee Loy, and members of the committee,

Thank you for the opportunity to submit testimony regarding proposed language that revises the definition of “anesthetist.” I am a Certified Registered Nurse Anesthetist practicing in the state of Hawaii. While I fully support the intent of SB 2491, I respectfully request amendment of specific language on page 220, lines 1-5, in agreement with separately submitted testimony from the Director of the Hawaii Center for Nursing, as follows:

Section 156, Page 220, lines 1-5

""Anesthetist" means [~~a registered nurse anesthetist~~] advanced practice registered nurse licensed pursuant to chapter 457 who maintains national certification as a Certified Registered Nurse

| Anesthetist and who performs anesthesia services [~~under the supervision of a licensed physician~~]."

This provides title clarity and ensures safe, high-quality anesthesia care for the people of Hawaii.
Thank you for your time and consideration.

Respectfully,

Kurt Fujitani

Certified Registered Nurse Anesthetist

February 5, 2026

Testimony of Sharon Sagasay

Presented Before the House Committee on Health
Friday, February 6, 2026, at 09:00 a.m. in Conference Room 229

RE: HB 1857 – Relating to Health Care – Supports the Intent, Requests an Amendment

Aloha Chair Takayama, Vice Chair Keohokapu-Lee Loy, and members of the committee,

Thank you for the opportunity to submit testimony regarding proposed language that revises the definition of “anesthetist.” I am a Certified Registered Nurse Anesthetist practicing in the state of Hawaii at Kaiser Permanente Moanalua Medical Center. While I fully support the intent of HB 1857, I respectfully request amendment of specific language on page 220, lines 1-5, in agreement with separately submitted testimony from the Director of the Hawaii Center for Nursing, as follows:

Section 156, Page 220, lines 1-5

""Anesthetist" means [~~a registered nurse anesthetist~~] advanced practice registered nurse licensed pursuant to chapter 457 who maintains national certification as a Certified Registered Nurse Anesthetist and who performs anesthesia services [~~under the supervision of a licensed physician~~]."

This provides title clarity and ensures safe, high-quality anesthesia care for the people of Hawaii. Thank you for your time and consideration.

Respectfully,

HB-1857

Submitted on: 2/4/2026 9:44:20 PM

Testimony for HLT on 2/6/2026 9:00:00 AM

Submitted By	Organization	Testifier Position	Testify
Lauren James	Individual	Comments	Written Testimony Only

Comments:

February 5, 2026

Testimony of [INSERTYOURNAME]

Presented Before the House Committee on Health

Friday, February 6, 2026, at 09:00 a.m. in Conference Room 229

RE: HB 1857 – Relating to Health Care – Supports the Intent, Requests an Amendment

Aloha Chair Takayama, Vice Chair Keohokapu-Lee Loy, and members of the committee,

Thank you for the opportunity to submit testimony regarding proposed language that revises the definition of “anesthetist.” I am a Certified Registered Nurse Anesthetist practicing in the state of Hawaii. While I fully support the intent of HB 1857, I respectfully request amendment of specific language on page 220, lines 1-5, in agreement with separately submitted testimony from the Director of the Hawaii Center for Nursing, as follows:

Section 156, Page 220, lines 1-5

""Anesthetist" means ~~[a registered nurse anesthetist]~~ advanced practice registered nurse licensed pursuant to chapter 457 who maintains national certification as a Certified Registered Nurse Anesthetist and who performs anesthesia services ~~[under the supervision of a licensed physician]."~~

Nurse Anesthetist have gone through thousands of hours of rigorous training and supervised cases with other nurse anesthetist ensuring safety and high quality care. Our education is extensive including completion of a bachelor's nursing program, many years of ICU training and further education in either a, completion of master prepared program or doctoral program. By no means should physician assistants be deemed Anesthetist. Their education in the matter of anesthesia is lacking depth in all programs. While on the job training is a patient safety issue and can not suffice to be deemed an anesthetist. Applying this amendment provides title clarity and ensures safe, high-quality anesthesia care for the people of Hawaii. Thank you for your time and consideration.

Respectfully,

Lauren James CRNA

Certified Registered Nurse Anesthetist

HB-1857

Submitted on: 2/4/2026 9:47:00 PM

Testimony for HLT on 2/6/2026 9:00:00 AM

Submitted By	Organization	Testifier Position	Testify
Madison Miura	Individual	Comments	Written Testimony Only

Comments:

RE: HB1857 – Relating to Health Care – Supports the Intent, Requests an Amendment

Presented Before the Senate Committees on

Commerce and Consumer Protection and Health and Human Services

Friday, February 6, 2026, at 09:00 a.m. in Conference Room 229

Aloha Chair Takayama, Vice Chair Keohokapu-Lee Loy, and members of the committee,

Thank you for the opportunity to submit testimony regarding HB1857.

I am a Certified Genetic Counselor, born and raised in Hawai‘i, currently practicing in the state of California with the intent to move home in the future. While I fully support the intent of HB1857, I respectfully request omission of the proposed amendment to section 451K-5(c), Hawai‘i Revised Statutes in section 121, which would explicitly permit physician assistants to perform genetic counseling within their scope of practice.

My support is in agreement with the testimony submitted regarding HB1857 by Jennifer Bojanowski, LCSW, MS, CGC, Lila Aiyar, MSc, CGC, CCGC, and Michelle Takemoto, MS, CGC. As a Certified Genetic Counselor, my support for this request is based on public safety. Genetic counseling is a distinct clinical specialty requiring completion of an accredited graduate degree program, professional certification, and ongoing genetics-specific continuing education. There are well-documented risks to patient health and outcomes when genetic services are provided by clinicians without specialized genetics training, and this risk is heightened in Hawai‘i’s diverse population.

I respectfully urge the Legislature to advance HB1857 while omitting this amendment, consistent with the testimony of Jennifer Bojanowski, Lila Aiyar and Michelle Takemoto.

Thank you for your time and consideration.

Madison Miura, MS, CGC

Certified Genetic Counselor

HB-1857

Submitted on: 2/4/2026 10:08:30 PM

Testimony for HLT on 2/6/2026 9:00:00 AM

Submitted By	Organization	Testifier Position	Testify
Jasmine Tyson	Individual	Comments	Written Testimony Only

Comments:

RE: HB1857 – Relating to Health Care – Supports the Intent, Requests an Amendment

Presented Before the Senate Committees on

Commerce and Consumer Protection and Health and Human Services

Friday, February 6, 2026, at 09:00 a.m. in Conference Room 229

Aloha Chair Takayama, Vice Chair Keohokapu-Lee Loy, and members of the committee,

Thank you for the opportunity to submit testimony regarding HB1857.

I am a Certified Genetic Counselor practicing in the state of Hawai‘i. While I fully support the intent of HB1857, I respectfully request omission of the proposed amendment to section 451K-5(c), Hawai‘i Revised Statutes in section 121, which would explicitly permit physician assistants to perform genetic counseling within their scope of practice.

My support is in agreement with the testimony submitted regarding HB1857 by Jennifer Bojanowski, LCSW, MS, CGC, Lila Aiyar, MSc, CGC, CCGC, and Michelle Takemoto, MS, CGC. As a Certified Genetic Counselor in this state, my support for this request is based on public safety. Genetic counseling is a distinct clinical specialty requiring completion of an accredited graduate degree program, professional certification, and ongoing genetics-specific continuing education. There are well-documented risks to patient health and outcomes when genetic services are provided by clinicians without specialized genetics training, and this risk is heightened in Hawai‘i’s diverse population.

I respectfully urge the Legislature to advance HB1857 while omitting this amendment, consistent with the testimony of Jennifer Bojanowski, Lila Aiyar and Michelle Takemoto.

Thank you for your time and consideration.

Jasmine Tyson, MS, CGC

HB-1857

Submitted on: 2/4/2026 10:21:28 PM

Testimony for HLT on 2/6/2026 9:00:00 AM

Submitted By	Organization	Testifier Position	Testify
Christina Seelaus, MS, MA, CGC	Individual	Comments	Written Testimony Only

Comments:

Testimony of Christina Seelaus, MS, MA, CGC

RE: HB1857 – Relating to Health Care – Supports the Intent, Requests an Amendment

Presented Before the Senate Committees on

Commerce and Consumer Protection and Health and Human Services

Friday, February 6, 2026, at 09:00 a.m. in Conference Room 229

Aloha Chair Takayama, Vice Chair Keohokapu-Lee Loy, and members of the committee,

Thank you for the opportunity to submit testimony regarding HB1857.

I am a Certified Genetic Counselor in the state of Hawai‘i and have been practicing as a Genetic Counselor for 18 years. While I fully support the intent of HB1857, I respectfully request omission of the proposed amendment to section 451K-5(c), Hawai‘i Revised Statutes in section 121, which would explicitly permit physician assistants to perform genetic counseling within their scope of practice.

My support is in strong agreement with the testimony submitted regarding HB1857 by Jennifer Bojanowski, LCSW, MS, CGC, Lila Aiyar, MSc, CGC, CCGC, and Michelle Takemoto, MS, CGC. As a Certified Genetic Counselor in this state, my support for this request is based on public safety. Genetic counseling is a distinct clinical specialty requiring completion of an accredited graduate degree program, professional certification, and ongoing genetics-specific continuing education. There are well-documented risks to patient health and outcomes when genetic services are provided by clinicians without specialized genetics training, and this risk is heightened in Hawai‘i’s diverse population.

I respectfully urge the Legislature to advance HB1857 while omitting this amendment, consistent with the testimony of Jennifer Bojanowski, Lila Aiyar and Michelle Takemoto.

Thank you for your time and consideration.

Christina Seelaus, MS, MA, CGC

HB-1857

Submitted on: 2/4/2026 10:45:09 PM

Testimony for HLT on 2/6/2026 9:00:00 AM

Submitted By	Organization	Testifier Position	Testify
Christopher Lee	Individual	Comments	Written Testimony Only

Comments:

February 4, 2026

Testimony of Christopher Lee, CRNA

Presented Before the House Committee on Health

Friday, February 6, 2026, at 09:00 a.m. in Conference Room 229

RE: HB 1857 – Relating to Health Care – Supports the Intent, Requests an Amendment

Aloha Chair Takayama, Vice Chair Keohokapu-Lee Loy, and members of the committee,

Thank you for the opportunity to submit testimony regarding proposed language that revises the definition of “anesthetist.” I am a Certified Registered Nurse Anesthetist practicing in the state of Hawai‘i. **I currently provide anesthesia at both Castle Medical Center and Excel Surgery Center in Honolulu.** While I fully support the intent of HB 1857, I respectfully request amendment of specific language on page 220, lines 1-5, in agreement with separately submitted testimony from the Director of the Hawai‘i Center for Nursing, as follows:

Section 156, Page 220, lines 1-5

""Anesthetist" means [~~a registered nurse anesthetist~~] advanced practice registered nurse licensed pursuant to chapter 457 who maintains national certification as a Certified Registered Nurse Anesthetist and who performs anesthesia services [~~under the supervision of a licensed physician~~]."

This provides title clarity and ensures safe, high-quality anesthesia care for the people of Hawai'i. Thank you for your time and consideration.

Respectfully,

Christopher Lee

Certified Registered Nurse Anesthetist

February 5, 2026

TO: House Committee on Health.

Chair Takayama and Vice Chair Koehokapu-Lee Loy and Members of the Committee.

FROM: Hideru Inoue MSN, APRN, CRNA.

RE: HB 1857

POSITION: Comment only

TESTIMONY:

Chair Takayama and Vice Chair Koehokapu-Lee Loy and Members of the Committee

Thank you for the opportunity to submit testimony on this measure. My name is Hideru Inoue. I am a Certified Registered Nurse Anesthetist serving metropolitan Honolulu, Hilo and Kona. I submit this testimony in **support of HB1857, provided that the recommended amendment to Section 156 is adopted** in accordance with the amendments proposed by Hawai'i State Center for Nursing and outlined below.

In the current version of HB 1857, anesthetists are defined as Advance Practice Register Nurses but also **improperly** include physician assistant (PA) under the supervision of a licensed physician. PAs are not trained in anesthesiology¹ nor are they recognized as anesthesia providers by Medicare². Finally, there is currently no proven record of safety or efficacy of PAs providing anesthesia services.

Recommended amendments in yellow highlight:

Section 156, Page 220, lines 1-5

""Anesthetist" means [~~a registered nurse anesthetist~~] advanced practice registered nurse licensed pursuant to chapter 457 **who maintains national certification as a Certified Registered Nurse Anesthetist** and who performs anesthesia services [~~under the supervision of a licensed physician~~]."

Thank you for your time, consideration, and commitment to safe, high-quality anesthesia care for the people of Hawaii. It would be a privilege to serve as a resource to the committee regarding any topics relating to anesthesiology or topics relating to Certified Registered Nurse Anesthetist.

Respectfully,

Hideru Inoue MSN, APRN, CRNA

1. The Accreditation Review Commission on Education for the Physician Assistant (ARC-PA), the certifying body for PAs educational programs, does not mention anesthesia education or training as part of their educational standards for [entry level programs](#), [post-professional graduate programs](#), and [post-professional PA doctoral programs](#). The PAs' certifying body, the National Commission on Certification of Physician Assistants (NCCPA) does not list anesthesia as a core competency for PAs. See <https://www.nccpa.net/wp-content/uploads/2021/05/PACompetencies.pdf?r=1769799974>
2. [42 CFR §414.46](#)

HB-1857

Submitted on: 2/4/2026 11:01:02 PM

Testimony for HLT on 2/6/2026 9:00:00 AM

Submitted By	Organization	Testifier Position	Testify
Mariana E. Winston	Individual	Comments	Written Testimony Only

Comments:

Testimony of Mariana Winston DNP, APRN, CRNA

Presented Before the House Committee on Health

Friday, February 6, 2026, at 09:00 a.m. in Conference Room 229

RE: HB 1857 – Relating to Health Care – Supports the Intent, Requests an Amendment

Aloha Chair Takayama, Vice Chair Keohokapu-Lee Loy, and members of the committee,

I am writing in support of the intent and overall goals of HB 1857 with a revised amendment, which is supported by the Hawai‘i Association of Nurse Anesthesiology (HANA). This amendment aims to clarify, statutory language across health professions in Hawai‘i. I fully recognize the importance of thoughtful statutory cleanup and appreciate the House’s efforts to improve clarity and consistency within the Hawai‘i Revised Statutes.

However, I write to express serious concern with one specific provision contained within the bill: SECTION 156, page 220, lines 1-5, Hawaii Revised Statutes, amending the definition of “anesthetist” to read as follows: " "Anesthetist" means [~~a registered nurse anesthetist~~] *advanced practice registered nurse licensed pursuant to chapter 457 who maintains national certification as a Certified Registered Nurse Anesthetist and who performs anesthesia services* [~~under the supervision of a licensed physician~~]."

The redefinition of the term “anesthetist” to include physician assistants authorized to perform anesthesia services under physician supervision may appear administrative in nature, but it

represents a substantive and consequential expansion of scope of practice for physician assistants that warrant careful reconsideration.

Anesthesia is not a task, technique, or isolated medical service. It is a distinct, high-risk clinical specialty centered on the continuous management of a patient's physiology during periods when consciousness, protective reflexes, and normal cardiorespiratory responses are intentionally suppressed. The safe delivery of anesthesia requires specialized education in airway management, advanced pharmacology, cardiopulmonary physiology, invasive monitoring, neuraxial and regional techniques, and immediate recognition and management of life-threatening complications. These risks are inherent to every anesthetic and exist regardless of supervision.

Certified Registered Nurse Anesthetists (CRNA) are uniquely educated, trained, and regulated for this role. Admission to CRNA programs requires years of prior critical care experience where we learn to manage complex cardiac, pulmonary, and neurological instability. I, for example, worked full time in level 1 trauma critical care units for 11 years prior to admission to my CRNA program. CRNAs complete graduate-level nurse anesthesia programs that are singularly focused on anesthesia education and clinical training. These programs include extensive didactic coursework specific to anesthesia and require thousands of hours of supervised clinical anesthesia experience across all patient populations and practice settings. CRNAs are nationally board certified in anesthesia and subject to ongoing anesthesia-specific regulatory oversight.

Physician assistant (PA) education is fundamentally different by design. PA programs are structured to produce broadly trained generalist medical clinicians with exposure to multiple specialties through relatively brief clinical rotations. Anesthesia is not a core discipline within PA education, nor is there a standardized, accredited pathway for Physician Assistants to obtain comprehensive anesthesia training. There is no nationally recognized PA anesthesia curriculum, no anesthesia-specific certification or board examination, and no defined minimum anesthesia case requirements.

The suggestion that PAs could be trained "on the job" to provide anesthesia services should give the House pause. No anesthesia provider in the United States enters practice through informal or site-specific training alone. Both CRNAs and physician anesthesiologists are required to complete formal, accredited anesthesia educational programs with standardized competencies and case requirements. Creating a pathway to anesthesia practice without defined educational standards, certification requirements, or regulatory oversight would represent a significant departure from established patient safety norms.

Equally concerning is the placement of this scope expansion within the insurance code. By redefining "anesthetist," the bill would effectively authorize physician assistants to bill for and receive reimbursement for anesthesia services, thereby creating a new class of anesthesia provider without corresponding licensure standards or professional regulation specific to anesthesia. This approach circumvents the traditional scope-of-practice review process and introduces ambiguity into Hawai'i's anesthesia care framework.

Hawai'i already has a safe, effective, and well-regulated anesthesia care model. Anesthesia services are provided by physician anesthesiologists and CRNAs, both of whom are specifically educated, licensed, and accountable for anesthesia practice. CRNAs, in particular, play a critical role in ensuring access to anesthesia care across rural, neighbor island, and underserved settings. Expanding and fully utilizing the existing CRNA workforce addresses access concerns without compromising educational standards or patient safety.

For these reasons, I support the broader objectives of HB 1857, but I respectfully oppose the inclusion of the aforementioned language that permits physician assistants to perform or bill for anesthesia services. I urge the House to remove or amend this provision and to preserve Hawai'i's longstanding, evidence-based approach to anesthesia regulation, and patient safety.

As a full-time practicing CRNA at Kaiser Permanente Moanalua for 8+ years, wife, mother of 2 young children, and daughter to aging parents who have received excellent anesthesia care here in Hawai'i, I am committed to high-quality, safe health care for all people of Hawai'i. Mahalo Nui Loa for your time, consideration, and dedication to improving the lives of the people we serve.

Respectfully,

Mariana E. Winston, DNP, APRN, CRNA

HB-1857

Submitted on: 2/4/2026 11:03:17 PM

Testimony for HLT on 2/6/2026 9:00:00 AM

Submitted By	Organization	Testifier Position	Testify
Caitlin Yatogo	Individual	Comments	Written Testimony Only

Comments:

Testimony of Caitlin Yatogo

RE: HB1857 – Relating to Health Care – Supports the Intent, Requests an Amendment

Presented Before the Senate Committees on

Commerce and Consumer Protection and Health and Human Services

Friday, February 6, 2026, at 09:00 a.m. in Conference Room 229

Aloha Chair Takayama, Vice Chair Keohokapu-Lee Loy, and members of the committee,

Thank you for the opportunity to submit testimony regarding HB1857.

I am a Certified Genetic Counselor practicing in the state of Hawai‘i. While I fully support the intent of HB1857, I respectfully request omission of the proposed amendment to section 451K-5(c), Hawai‘i Revised Statutes in section 121, which would explicitly permit physician assistants to perform genetic counseling within their scope of practice.

My support is in agreement with the testimony submitted regarding HB1857 by Jennifer Bojanowski, LCSW, MS, CGC, Lila Aiyar, MSc, CGC, CCGC, and Michelle Takemoto, MS, CGC. As a Certified Genetic Counselor in this state, my support for this request is based on public safety. Genetic counseling is a distinct clinical specialty requiring completion of an accredited graduate degree program, professional certification, and ongoing genetics-specific continuing education. There are well-documented risks to patient health and outcomes when genetic services are provided by clinicians without specialized genetics training, and this risk is heightened in Hawai‘i’s diverse population.

I respectfully urge the Legislature to advance HB1857 while omitting this amendment, consistent with the testimony of Jennifer Bojanowski, Lila Aiyar and Michelle Takemoto.

Thank you for your time and consideration.

Caitlin Yatogo, MS, CGC

February 5, 2026

Testimony of Karen Atis

Presented Before the House Committee on Health
Friday, February 6, 2026, at 09:00 a.m. in Conference Room 229

RE: HB 1857 – Relating to Health Care – Supports the Intent, Requests an Amendment

Aloha Chair Takayama, Vice Chair Keohokapu-Lee Loy, and members of the committee,

Thank you for the opportunity to submit testimony regarding proposed language that revises the definition of “anesthetist.” I am a Certified Registered Nurse Anesthetist practicing in the state of Hawaii. While I fully support the intent of **HB 1857**, I respectfully request amendment of specific language on page 220, lines 1-5, in agreement with separately submitted testimony from the Director of the Hawaii Center for Nursing, as follows:

Section 156, Page 220, lines 1-5

"Anesthetist" means [~~a registered nurse anesthetist~~] advanced practice registered nurse licensed pursuant to chapter 457 who maintains national certification as a Certified Registered Nurse Anesthetist and who performs anesthesia services [~~under the supervision of a licensed physician~~]."

This provides title clarity and ensures safe, high-quality anesthesia care for the people of Hawaii. Thank you for your time and consideration.

Respectfully,
Karen Atis, CRNA (Certified Registered Nurse Anesthetist)

February 5, 2026

Testimony of Shemnon Miyamoto

Presented Before the House Committee on Health
Friday, February 6, 2026, at 09:00 a.m. in Conference Room 229

RE: HB 1857 – Relating to Health Care – Supports the Intent, Requests an Amendment

Aloha Chair Takayama, Vice Chair Keohokapu-Lee Loy, and members of the committee,

Thank you for the opportunity to submit testimony regarding proposed language that revises the definition of “anesthetist.” I am a Certified Registered Nurse Anesthetist practicing in the state of Hawaii. While I fully support the intent of SB 2491, I respectfully request amendment of specific language on page 220, lines 1-5, in agreement with separately submitted testimony from the Director of the Hawaii Center for Nursing, as follows:

Section 156, Page 220, lines 1-5

""Anesthetist" means [~~a registered nurse anesthetist~~] advanced practice registered nurse licensed pursuant to chapter 457 who maintains national certification as a Certified Registered Nurse Anesthetist and who performs anesthesia services [~~under the supervision of a licensed physician~~]."

This provides title clarity and ensures safe, high-quality anesthesia care for the people of Hawaii. Thank you for your time and consideration.

Respectfully,
Shemnon Miyamoto
Certified Registered Nurse Anesthetist

HB-1857

Submitted on: 2/5/2026 1:56:55 AM

Testimony for HLT on 2/6/2026 9:00:00 AM

Submitted By	Organization	Testifier Position	Testify
Stephanie Gandomi	Individual	Comments	Written Testimony Only

Comments:

On Behalf of Genetic Counselors in Hawai‘i

RE: HB1857 – Relating to Health Care – Supports the Intent, Requests an Amendment

Presented Before the Senate Committees on

Commerce and Consumer Protection and Health and Human Services

Friday, February 6, 2026, at 09:00 a.m. • Conference Room 229

Aloha Chair Takayama, Vice Chair Keohokapu-Lee Loy, and members of the committee,

Thank you for the opportunity to submit testimony regarding HB1857.

My name is **Stephanie Gandomi**, and I am a board-certified genetic counselor with experience across clinical practice, medical policy, and genetics education. I am submitting testimony **in strong support of the intent of HB1857**, and I respectfully request the removal of the proposed amendment to **HRS §451K-5(c)** in Section 121, which would explicitly permit Physician Assistants (PAs) to perform genetic counseling.

Genetic counseling is a highly specialized healthcare discipline that requires:

- Completion of an **accredited master’s degree program in genetic counseling**,
- Successful passage of the **American Board of Genetic Counseling (ABGC) national certification exam**, and
- Ongoing, genetics-specific continuing education to maintain expertise.

While PAs are exceptionally skilled medical professionals, their training does not include the depth of genomics, variant interpretation, clinical genetics, psychosocial assessment, or risk-communication principles necessary to independently provide genetic counseling services.

Protecting the integrity of the genetic counseling scope of practice safeguards:

- **Patient safety**,
- **Accuracy of high-stakes risk assessment**,
- **Quality of care in rapidly evolving areas** such as hereditary cancer, prenatal genetics, and genomic medicine, and
- **Culturally informed care**, which is especially crucial in Hawai‘i’s diverse population with unique genetic considerations.

Collaboration—rather than scope expansion—is what best serves patients. Certified genetic counselors and PAs work together effectively when each profession practices within its specialized training.

I also wish to express support for the testimony submitted by my colleagues **Jennifer Bojanowski, LCSW, MS, CGC; Lila Aiyar, MSc, CGC, CCGC; and Michelle Takemoto, MS, CGC.**

For these reasons, I respectfully request that the Legislature advance HB1857 **without** the amendment expanding the PA scope of practice to include genetic counseling.

Mahalo for your time and thoughtful consideration.

On Behalf of Genetic Counselors in Hawai‘i
RE: SB2491 – Relating to Health Care – Supports the Intent, Requests an Amendment
Presented Before the Senate Committees on
Commerce and Consumer Protection and Health and Human Services
Friday, February 6, 2026, at 09:00 a.m. • Conference Room 229

Aloha Honorable Chair Keohokalole, Chair San Buenaventura, Vice Chairs McKelvey and Fukunaga, and members of the committees,

Thank you for the opportunity to offer testimony on SB2491.

My name is **Stephanie Gandomi**, and I am a board-certified genetic counselor. I strongly support the intent of SB2491 to improve access to high-quality genetics services. However, I respectfully request the removal of the proposed amendment to **HRS §451K-5(c)** that would explicitly permit PAs to provide genetic counseling within their scope of practice.

Genetic counseling requires advanced, specialized training that is not encompassed within PA education or certification. Certified Genetic Counselors complete:

- Rigorous, genetics-focused graduate programs,
- National board certification ensuring competency in genomics and variant interpretation, and
- Extensive training in complex risk communication and psychosocial counseling.

For patient safety, accuracy, and high-quality care—particularly in specialties such as hereditary cancer, prenatal genetics, pediatrics, and complex genomic testing—genetic counseling should remain within the profession specifically trained for this work. Maintaining distinct, complementary scopes of practice ensures patients in Hawai‘i receive the level of care they deserve.

I also align with and support the testimony submitted by **Jennifer Bojanowski, LCSW, MS, CGC; Lila Aiyar, MSc, CGC, CCGC; and Michelle Takemoto, MS, CGC.**

For these reasons, I respectfully request that SB2491 move forward **without** the proposed amendment to expand PA scope to include genetic counseling.

Mahalo for your time and thoughtful consideration.

HB-1857

Submitted on: 2/5/2026 2:51:43 AM

Testimony for HLT on 2/6/2026 9:00:00 AM

Submitted By	Organization	Testifier Position	Testify
Matt Bishop	Individual	Support	Written Testimony Only

Comments:

February 5, 2026

Testimony of [INSERTYOURNAME]

Presented Before the House Committee on Health

Friday, February 6, 2026, at 09:00 a.m. in Conference Room 229

RE: HB 1857 – Relating to Health Care – Supports the Intent, Requests an Amendment

Aloha Chair Takayama, Vice Chair Keohokapu-Lee Loy, and members of the committee,

Thank you for the opportunity to submit testimony regarding proposed language that revises the definition of “anesthetist.” I am a Certified Registered Nurse Anesthetist practicing and teaching in the state of Hawaii. While I fully support the intent of HB 1857, I respectfully request amendment of specific language on page 220, lines 1-5, in agreement with separately submitted testimony from the Director of the Hawaii Center for Nursing, as follows:

Section 156, Page 220, lines 1-5

""Anesthetist" means [a registered nurse anesthetist] advanced practice registered nurse licensed pursuant to chapter 457 who maintains national certification as a Certified Registered Nurse Anesthetist and who performs anesthesia services [under the supervision of a licensed physician]."

This provides title clarity and ensures safe, high-quality anesthesia care for the people of Hawaii. Thank you for your time and consideration.

Respectfully,

Matt Bishop DNP, CRNA

February 5, 2026

Testimony of Shelley Ikeda

Presented Before the House Committee on Health
Friday, February 6, 2026, at 09:00 a.m. in Conference Room 229

RE: HB 1857 – Relating to Health Care – Supports the Intent, Requests an Amendment

Aloha Chair Takayama, Vice Chair Keohokapu-Lee Loy, and members of the committee,

Thank you for the opportunity to submit testimony regarding proposed language that revises the definition of “anesthetist.” I am a Certified Registered Nurse Anesthetist practicing in the state of Hawaii. While I fully support the intent of SB 2491, I respectfully request amendment of specific language on page 220, lines 1-5, in agreement with separately submitted testimony from the Director of the Hawaii Center for Nursing, as follows:

Section 156, Page 220, lines 1-5

""Anesthetist" means [~~a registered nurse anesthetist~~] advanced practice registered nurse licensed pursuant to chapter 457 who maintains national certification as a Certified Registered Nurse Anesthetist and who performs anesthesia services [~~under the supervision of a licensed physician~~]."

This provides title clarity and ensures safe, high-quality anesthesia care for the people of Hawaii. Thank you for your time and consideration.

Respectfully,
Shelley Ikeda
Certified Registered Nurse Anesthetist

HB-1857

Submitted on: 2/5/2026 6:54:43 AM

Testimony for HLT on 2/6/2026 9:00:00 AM

Submitted By	Organization	Testifier Position	Testify
Jenna Moliga	Individual	Comments	Written Testimony Only

Comments:

February 5, 2026

Testimony of Jenna Moliga, DNP, CRNA, APRN

Presented Before the Committees of

Health and Human Services and Commerce and Consumer Protection

Friday, February 6, 2026, at 09:00 a.m. in Conference Room 229

RE: SB 2491 – Relating to Health Care – Supports the Intent, Requests an Amendment

Aloha, Honorable Chair San Buenaventura and Chair Keohokalole, and Vice Chairs McKelvey and Fukunaga,

Thank you for the opportunity to submit testimony regarding proposed language that revises the definition of “anesthetist.” I am a Certified Registered Nurse Anesthetist practicing in the state of

Hawaii and have been here since 2019 providing anesthesia services. While I fully support the intent of SB 2491, I respectfully request amendment of specific language on page 220, lines 1-5, in agreement with separately submitted testimony from the Director of the Hawaii Center for Nursing, as follows:

Section 156, Page 220, lines 1-5

""Anesthetist" means [~~a registered nurse anesthetist~~] advanced practice registered nurse licensed pursuant to chapter 457 who maintains national certification as a Certified Registered Nurse Anesthetist and who performs anesthesia services [~~under the supervision of a licensed physician~~]."

This provides title clarity and ensures safe, high-quality anesthesia care for the people of Hawaii and prevents untrained personnel from putting our ohana at risk. Thank you for your time and consideration.

Respectfully,

JENNA MOLIGA

Certified Registered Nurse Anesthetist

February 5, 2026

Testimony of Ju Lee

Presented Before the House Committee on Health
Friday, February 6, 2026, at 09:00 a.m. in Conference Room 229

RE: HB 1857 – Relating to Health Care – Supports the Intent, Requests an Amendment

Aloha Chair Takayama, Vice Chair Keohokapu-Lee Loy, and members of the committee,

Thank you for the opportunity to submit testimony regarding proposed language that revises the definition of “anesthetist.” I am a Certified Registered Nurse Anesthetist practicing in the state of Hawaii. While I fully support the intent of SB 2491, I respectfully request amendment of specific language on page 220, lines 1-5, in agreement with separately submitted testimony from the Director of the Hawaii Center for Nursing, as follows:

Section 156, Page 220, lines 1-5

""Anesthetist" means [~~a registered nurse anesthetist~~] advanced practice registered nurse licensed pursuant to chapter 457 who maintains national certification as a Certified Registered Nurse Anesthetist and who performs anesthesia services [~~under the supervision of a licensed physician~~]."

This provides title clarity and ensures safe, high-quality anesthesia care for the people of Hawaii. Thank you for your time and consideration.

Respectfully,
Ju Lee
Certified Registered Nurse Anesthetist

HB-1857

Submitted on: 2/5/2026 8:33:26 AM

Testimony for HLT on 2/6/2026 9:00:00 AM

Submitted By	Organization	Testifier Position	Testify
Sheri Teves	Individual	Support	Written Testimony Only

Comments:

HB1587

Aloha Chair Takayama, Vice Chair Keohokapu-Lee Loy, and members of the committee,

I am a CRNA. I have been actively practicing for 22 years in the state of Hawaii. While I fully support the intent of HB1857, I respectfully request amendment of specific language on page 220, lines 1-5, in agreement with separately submitted testimony from the director of the Hawaii Center for nursing, as follows:

SECTION 156, Page 220, lines 1-5

"Anesthetist" means a registered Nurse Anesthetist, An advanced practice registered Nurse Liscensed pursuant to chapter 457 who maintains national certification as Certified Regestered Nurse Anesthetist and who performs anesthesia services (under the supervision of a liscensed physician.)

This provides title clarity and ensures safe, high quality anesthesia care for the people of Hawaii. Thank you for your time and consideration.

Thank you

Sheri Teves

CRNA

February 5, 2026

Testimony of Umida Yergasheva
Presented Before the House Committee on Health
Friday, February 6, 2026, at 09:00 a.m. in Conference Room 229

RE: HB 1857 – Relating to Health Care – Supports the Intent, Requests an Amendment

Aloha Chair Takayama, Vice Chair Keohokapu-Lee Loy, and members of the committee,

Thank you for the opportunity to submit testimony regarding proposed language that revises the definition of “anesthetist.” I am a Certified Registered Nurse Anesthetist practicing in the state of Hawaii for the past three years. While I fully support the intent of SB 2491, I respectfully request amendment of specific language on page 220, lines 1-5, in agreement with separately submitted testimony from the Director of the Hawaii Center for Nursing, as follows:

Section 156, Page 220, lines 1-5

"Anesthetist" means ~~[a registered nurse anesthetist]~~ advanced practice registered nurse licensed pursuant to chapter 457 who maintains national certification as a Certified Registered Nurse Anesthetist and who performs anesthesia services ~~[under the supervision of a licensed physician]."~~

I am asking for this amendment because I am concerned that the current language of this bill defines anesthetists as both Certified Registered Nurse Anesthetists and physician assistants, despite significant differences in education, scope-specific training, and clinical preparation in anesthesia care.

CRNAs undergo advanced, graduate-level education that is exclusively focused on the science and practice of anesthesia. My training consisted of approximately 27 months of rigorous anesthesia-specific education, including extensive didactic coursework in physiology, pharmacology, pathophysiology, and anesthesia principles, as well as thousands of hours of supervised clinical training. Prior to being eligible to sit for the national certification examination, I was required to complete a minimum of 600 anesthesia cases across a wide variety of patient populations, surgical specialties, and acuity levels. This training is standardized nationally and designed specifically to prepare CRNAs to deliver safe, independent anesthesia care.

This depth and focus of training is not equivalent to general physician assistant education or on-the-job training. While physician assistants play a vital and respected role in healthcare, their educational pathways are broad and not dedicated exclusively to anesthesia. Without formal, comprehensive anesthesia education and clinical immersion comparable to that of CRNAs, patient safety may be compromised when anesthesia services are delivered by individuals without equivalent preparation.

Anesthesia is a high-risk, high-acuity specialty that requires advanced clinical judgment, rapid decision-making, and a deep understanding of physiology and pharmacology. Ensuring that anesthesia providers have comparable, specialty-specific education and training is essential to maintaining patient safety and high standards of care in Hawai'i.

For these reasons, I respectfully urge the committee to amend this bill to clearly and accurately define anesthesia providers based on their formal education, clinical training, and certification requirements. Doing so will protect patients, uphold professional standards, and ensure transparency in the delivery of anesthesia services across our state.

Thank you for the opportunity to provide testimony and for your commitment to the health and safety of the people of Hawai'i.

This provides title clarity and ensures safe, high-quality anesthesia care for the people of Hawaii. Thank you for your time and consideration.

Respectfully,

Umida Yergasheva
Certified Registered Nurse Anesthetist

HB-1857

Submitted on: 2/5/2026 8:39:03 AM

Testimony for HLT on 2/6/2026 9:00:00 AM

Submitted By	Organization	Testifier Position	Testify
Peter Kachur	Individual	Comments	Written Testimony Only

Comments:

Aloha Chair Takayama, Vice Chair Keohokapu-Lee Loy, and members of the committee:

My name is Peter Kachur, MS, CRNA, APRN, and I am the President Elect of the Hawai‘i Association of Nurse Anesthesiology (HANA). Thank you for the opportunity to submit testimony regarding proposed language that revises the definition of “anesthetist.” While we fully support the intent of the bills, specific language in the proposed HRS revision in section 156, Page 220, lines 1-5 are inaccurate.

Primary concern: inaccurate statutory description of nurse anesthetists

Our primary concern is that the revised definition incorrectly describes the established identity and title protection of nurse anesthetists in Hawai‘i. Historically and in practice, “anesthetist” within Hawai‘i’s health care system has referred to Certified Registered Nurse Anesthetists (CRNAs)—advanced practice registered nurses educated, licensed, and regulated to provide anesthesia services. Replacing that clear understanding with broader, less precise language diminishes statutory clarity, creates confusion for patients and stakeholders, and undermines the Legislature’s ability to maintain consistent professional standards across licensure, scope, and reimbursement.

Title clarity matters in health care. Patients deserve transparency about who is providing anesthesia care and what qualifications that provider maintains. Statutory definitions should reflect the reality that CRNAs are anesthesia professionals with graduate-level anesthesia education, extensive clinical training, and a defined regulatory framework for anesthesia practice and accountability.

Secondary concern: adding physician assistants to the definition

Our secondary concern is that the proposed definition would also include physician assistants as “anesthetists” or otherwise suggest eligibility to perform or bill for anesthesia services through definition changes—particularly if placed in insurance or reimbursement sections. Physician assistants are valued members of the health care team, but they are not educated, licensed, or regulated in Hawai‘i under a framework designed for the full responsibilities of anesthesia practice. Including physician assistants in the “anesthetist” definition creates immediate ambiguity and may unintentionally open a pathway for scope expansion through reimbursement recognition rather than through deliberate, patient-safety-focused licensure policy.

For these reasons, HANA supports the Center for Nursing's proposed amendment :

Section 156, Page 220, lines 1-5

""Anesthetist" means ~~[a registered nurse anesthetist]~~ advanced practice registered nurse licensed pursuant to chapter 457 who maintains national certification as a Certified Registered Nurse Anesthetist and who performs anesthesia services ~~under the supervision of a licensed physician.~~"

Thank you for your consideration and opportunity to assist with this important initiative.

HB-1857

Submitted on: 2/5/2026 8:53:49 AM

Testimony for HLT on 2/6/2026 9:00:00 AM

Submitted By	Organization	Testifier Position	Testify
Nicole Choy	Individual	Comments	Written Testimony Only

Comments:

RE: HB1857 – Relating to Health Care – Supports the Intent, Requests an Amendment

Presented Before the Senate Committees on

Commerce and Consumer Protection and Health and Human Services

Friday, February 6, 2026, at 09:00 a.m. in Conference Room 229

Aloha Chair Takayama, Vice Chair Keohokapu-Lee Loy, and members of the committee,

Thank you for the opportunity to submit testimony regarding HB1857.

I am a Certified Genetic Counselor born and raised in the state of Hawai‘i, temporarily practicing in the state of California. While I fully support the intent of HB1857, I respectfully request omission of the proposed amendment to section 451K-5(c), Hawai‘i Revised Statutes in section 121, which would explicitly permit physician assistants to perform genetic counseling within their scope of practice.

My support is in agreement with the testimony submitted regarding HB1857 by Jennifer Bojanowski, LCSW, MS, CGC, Lila Aiyar, MSc, CGC, CCGC, and Michelle Takemoto, MS, CGC. As a Certified Genetic Counselor in this state, my support for this request is based on public safety. Genetic counseling is a distinct clinical specialty requiring completion of an accredited graduate degree program, professional certification, and ongoing genetics-specific continuing education. There are well-documented risks to patient health and outcomes when genetic services are provided by clinicians without specialized genetics training, and this risk is heightened in Hawai‘i’s diverse population.

I respectfully urge the Legislature to advance HB1857 while omitting this amendment, consistent with the testimony of Jennifer Bojanowski, Lila Aiyar and Michelle Takemoto.

Thank you for your time and consideration.

Nicole Choy, MS, CGC

LATE

HB-1857

Submitted on: 2/5/2026 9:19:14 AM

Testimony for HLT on 2/6/2026 9:00:00 AM

Submitted By	Organization	Testifier Position	Testify
Rick Ramirez	Individual	Support	Written Testimony Only

Comments:

Good morning and thank you to the Committee Chair, Vice-Chair and committee members.

Thank you for taking time to hear this very important bill that has been introduced. APRN's have had full practice authority in Hawaii since 1995, yet continue to be left out of the language concerning healthcare reforms, unlike our physician or physician assistant colleagues. APRN's deliver primary, urgent, specialty, and emergency healthcare services across the state of Hawaii, however by not including our title in legislation- this severely inhibits the care that APRN's can and are able to provide by law. By changing terminology to be all inclusive of all healthcare disciplines who are qualified according to licensure and state law should be unnecessary, however this law will ensure that all are included instead of being forced to look at each law as it affects the healthcare system. We would appreciate full support and passage of this bill to ensure that all Hawaii residents have equal access to healthcare.

Mahalo nui for your time

Rick Ramirez, DNP, APRN AGACNP-BC, FNP-BC, ENP-C

LATE

HB-1857

Submitted on: 2/5/2026 9:29:21 AM
Testimony for HLT on 2/6/2026 9:00:00 AM

Submitted By	Organization	Testifier Position	Testify
Vanessa Murthy	Individual	Support	Written Testimony Only

Comments:

I'm in support of this to provide wider access of care to patients.

LATE

HB-1857

Submitted on: 2/5/2026 10:54:12 AM

Testimony for HLT on 2/6/2026 9:00:00 AM

Submitted By	Organization	Testifier Position	Testify
Jason Celestino	Individual	Comments	Written Testimony Only

Comments:

Aloha, Honorable Chair San Buenaventura and Chair Keohokalole, and Vice Chairs McKelvey and Fukunaga,

Thank you for the opportunity to submit testimony regarding proposed language that revises the definition of “anesthetist.” I am a Certified Registered Nurse Anesthetist practicing in the state of Hawaii. While I fully support the intent of SB 2491, I respectfully request amendment of specific language on page 220, lines 1-5, in agreement with separately submitted testimony from the Director of the Hawaii Center for Nursing, as follows:

Section 156, Page 220, lines 1-5

""Anesthetist" means ~~[a registered nurse anesthetist]~~ advanced practice registered nurse licensed pursuant to chapter 457 who maintains national certification as a Certified Registered Nurse Anesthetist and who performs anesthesia services ~~[under the supervision of a licensed physician]~~."

This provides title clarity and ensures safe, high-quality anesthesia care for the people of Hawaii. Thank you for your time and consideration.

Respectfully,
MAJ Jason Celestino
Certified Registered Nurse Anesthetist

LATE

HB-1857

Submitted on: 2/5/2026 10:59:40 AM

Testimony for HLT on 2/6/2026 9:00:00 AM

Submitted By	Organization	Testifier Position	Testify
Aaron Ruddick	Individual	Support	Written Testimony Only

Comments:

I strongly supooort HB1857

HB-1857

Submitted on: 2/5/2026 1:27:41 PM

Testimony for HLT on 2/6/2026 9:00:00 AM

Submitted By	Organization	Testifier Position	Testify
Joanne Yeung	Individual	Comments	Written Testimony Only

Comments:

Testimony of Joanne Yeung

RE: SB2491 – Relating to Health Care – Supports the Intent, Requests an Amendment

Presented Before the Senate Committees on

Commerce and Consumer Protection and Health and Human Services

Friday, February 6, 2026, at 09:00 a.m. in Conference Room 229

Aloha, Honorable Chair Keohokalole and Chair San Buenaventura, Vice Chairs McKelvey and Fukunaga, and Committee Members,

Thank you for the opportunity to submit testimony regarding SB2491.

I am a Genetic Counselor candidate hoping to practice in the state of Hawai‘i. While I fully support the intent of SB2491, I respectfully request omission of the proposed amendment to section 451K-5(c), Hawai‘i Revised Statutes in section 121, which would explicitly permit physician assistants to perform genetic counseling within their scope of practice.

My support is in agreement with the testimony submitted regarding SB2491 by Jennifer Bojanowski, LCSW, MS, CGC, Lila Aiyar, MSc, CGC, CCGC, and Michelle Takemoto, MS, CGC. As a Genetic Counselor candidate in this state, my support for this request is based on public safety. Genetic counseling is a distinct clinical specialty requiring completion of an accredited graduate degree program, professional certification, and ongoing genetics-specific continuing education. There are well-documented risks to patient health and outcomes when genetic services are provided by clinicians without specialized genetics training, and this risk is heightened in Hawai‘i’s diverse population.

I respectfully urge the Legislature to advance SB2491 while omitting this amendment, consistent with the testimony of Jennifer Bojanowski, Lila Aiyar, and Michelle Takemoto.

Thank you for your time and consideration.

Joanne Yeung, Genetic Counselor Candidate c/o 2026

HB-1857

Submitted on: 2/5/2026 1:38:42 PM

Testimony for HLT on 2/6/2026 9:00:00 AM

Submitted By	Organization	Testifier Position	Testify
Nicole young	Individual	Support	Written Testimony Only

Comments:

Testimony in **SUPPORT** of HB1857 presented before the House of Representatives Committee on Health and Committee on Human Services & Homelessness

To the honorable Chairs Takayama and Marten, Vice Chairs Keohokapu-Lee Loy and Olds, and members of the Committees:

I would like to express my *support* for HB1857 and the proposed changes to establish a broad definition of "qualified health care provider," as well as to edit the wording in the bill to standardize this terminology across statutes.

This will help to improve access to health care across the state, which is much needed, by allowing health care providers to practice fully within their license. This does *not* expand the scope of practice, but it eliminates restrictive wording that would otherwise not allow one to practice within their license.

Thank you,

Nicole Young, PharmD

February 5, 2026

Testimony of Natalie Welch

LATE

Presented Before the House Committee on Health
Friday, February 6, 2026, at 09:00 a.m. in Conference Room 229

RE: HB 1857 – Relating to Health Care – Supports the Intent, Requests an Amendment

Aloha Chair Takayama, Vice Chair Keohokapu-Lee Loy, and members of the committee,

Thank you for the opportunity to submit testimony regarding proposed language that revises the definition of “anesthetist.” I am a Student Registered Nurse Anesthetist and intend to practice as a Certified Registered Nurse Anesthetist in the state of Hawaii upon graduation. While I fully support the intent of SB 2491, I respectfully request amendment of specific language on page 220, lines 1-5, in agreement with separately submitted testimony from the Director of the Hawaii Center for Nursing, as follows:

Section 156, Page 220, lines 1-5

""Anesthetist" means [~~a registered nurse anesthetist~~] advanced practice registered nurse licensed pursuant to chapter 457 who maintains national certification as a Certified Registered Nurse Anesthetist and who performs anesthesia services [~~under the supervision of a licensed physician~~]."

This provides title clarity and ensures safe, high-quality anesthesia care for the people of Hawaii. Thank you for your time and consideration.

Respectfully,
Natalie Welch
Student Registered Nurse Anesthetist