



EXECUTIVE CHAMBERS
KE KE'ENA O KE KIA'ĀINA

JOSH GREEN, M.D.
GOVERNOR
KE KIA'ĀINA

Committee on Health

Wednesday, February 18, 2026

10:00 a.m.

State Capitol, Conference Room 329 and Videoconference

In Support

House Bill No. 2305, Relating to Physician Continuing Medical Education

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

The Office of the Governor supports H.B. No. 2305 Relating Physician Continuing Medical Education. This bill amends the physician, osteopathic physician, and surgeon continuing medical education requirements by adding that one hour of continuing medical education shall be on nutrition and metabolic health.

The Office of the Governor believes that this measure is important for strengthening Hawai'i's health care system by expanding physicians' knowledge in nutrition and metabolic health, enabling providers to offer high-quality recommendations and care to patients.

Mahalo for the opportunity to provide testimony on this measure.

Testimony of the Hawaii Medical Board

**Before the
House Committee on Health
Wednesday, February 18, 2026
10:00 a.m.**

Conference Room 329 & Via Videoconference

**On the following measure:
H.B. 2305, RELATING TO CONTINUING MEDICAL EDUCATION**

Chair Takayama and Members of the Committee:

My name is Elizabeth Kor, and I am an Executive Officer of the Hawaii Medical Board (Board). The Board appreciates the intent and respectfully opposes this measure.

The purpose of this bill is to require all physicians and osteopathic physicians in the State to earn at least one hour of continuing medical education (CME) on nutrition and metabolic health per biennial renewal cycle and directs the Board to verify compliance through random CME audits.

While the Board supports the intent of strengthening physician education in nutrition and metabolic health, codifying specific CME topics in statute is not the appropriate mechanism for addressing this need. In other states, including California, Texas, Florida, and New York, once a single topic-specific mandate is enacted, additional mandates often follow. Over time, this shifts CME from a flexible model guided by practitioners' needs to one shaped by an expanding list of statutory requirements. As such, these statutory mandates can supplant the specialty-specific CME that physicians rely on to maintain competence in their respective fields of practice.

The Board recognizes that physicians' educational needs vary significantly by specialty. Physicians whose practices do not focus on nutrition-related conditions have different educational priorities than primary care physicians. Hawaii's CME framework should remain intentionally flexible so that practitioners can select education that meets their distinct educational needs. This statutory, one-size-fits-all requirement undermines the ability for physicians to choose CME that aligns with their specialty, patient population, and professional development.

The Board further believes that topic-specific CME requirements must remain flexible rather than fixed in statute. CME curricula is traditionally determined by medical schools, residency programs, specialty boards, and accredited providers and is designed to address new evidence, emerging public-health issues, and advances in medical science. When a specific topic is mandated in law, it becomes difficult to update and may unintentionally restrict physicians' ability to meet the needs of their patients.

Finally, the Board notes that CME in nutrition and metabolic health is already widely available and frequently taken by physicians who find it relevant to their practice. Accordingly, while the Board supports recommending continuing medical education in nutrition and metabolic health, it cannot support H.B. 2305 for the reasons stated above.

Thank you for the opportunity to testify on this bill.



**STATE HEALTH PLANNING
AND DEVELOPMENT AGENCY**
DEPARTMENT OF HEALTH - KA 'OIHANA OLAKINO

JOSH GREEN, MD
GOVERNOR OF HAWAII
KE KIA'ĀINA O KA MOKU'ĀINA 'O HAWAII

KENNETH S. FINK, MD, MGA, MPH
DIRECTOR OF HEALTH
KA LUNA HO'OKELE

JOHN C. (JACK) LEWIN, MD
ADMINISTRATOR

February 17, 2026

TO: HOUSE COMMITTEE ON HEALTH
Representative Gregg Takayama, Chair
Representative Sue L. Keohokapu-Lee Loy, Vice Chair
Honorable Members

FROM: John C. (Jack) Lewin, MD, Administrator, SHPDA, and Sr. Advisor to
Governor Josh Green, MD on Healthcare Innovation

**RE: HB 2305 -- RELATING TO PHYSICIAN CONTINUING MEDICAL
EDUCATION**

HEARING: Wednesday, February 18, 2026 @ 10:00 am; Conference Room 329

POSITION: SUPPORT with COMMENTS

Testimony:

SHPDA strongly supports HB 2305, with comments.

This bill is intended to strengthen Hawai'i's physician continuing medical education requirements by ensuring doctors receive training in nutrition and metabolic health. By requiring at least one hour of CME in this area, the bill seeks to better equip physicians to provide informed counseling and recommendations that help prevent and manage chronic disease and support overall patient well-being.

This bill strengthens preventive care by improving physicians' practical knowledge of how nutrition and metabolic health affect overall well-being, which can translate into better patient counseling and support for chronic disease prevention and management. Over time, a standardized training requirement can help improve health outcomes, reduce avoidable complications, and generate cost savings for patients and the health care system.

SHPDA respectfully defers to Hawaii Medical Board on the costs and practical implications associated with this bill. Thank you for hearing HB 2305.

Mahalo for the opportunity to testify.

■ -- Jack Lewin, MD, Administrator, SHPDA



Hawaii Medical Association

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HOUSE COMMITTEE ON HEALTH
Representative Gregg Takayama, Chair
Representative Sue Keohokapu-Lee Loy, Vice Chair

Date: February 18, 2026
From: Hawaii Medical Association (HMA)
Elizabeth Ann Ignacio MD, Chair HMA Public Policy Committee
Christina Marzo MD and Robert Carlisle MD - HMA Public Policy Committee

RE HB 2305 RELATING TO PHYSICIAN CONTINUING MEDICAL EDUCATION. Hawai'i Medical Board; Physician; Nutrition; Continuing Medical Education Requirement

Position: Comments

This measure would require nutrition and metabolic education as part of the physician's continuing medical education requirements.

Continuing Medical Education (CME) consists of educational activities that help physicians maintain medical knowledge, skills, and professional performance after medical school and residency. Physicians licensed in Hawaii must complete 40 hours of AMA PRA Category 1 CME every two-year licensure cycle, and many hospitals and health systems impose additional CME requirements as part of credentialing and privileging.

While nutrition and dietary principles are important to health, prevention, and disease management, HMA has concerns with mandating a specific CME topic. Nutrition is already embedded throughout medical education and clinical training, integrated across primary care, specialty care, surgical disciplines, and preventive medicine.

HMA and the American Medical Association emphasize that CME should be relevant to practice, evidence-based, and focused on improving patient outcomes. Although HMA supports strengthening nutrition education across the continuum of training, we defer to the Hawai'i Medical Board and national professional standards to determine appropriate requirements. Furthermore, focusing on a single mandated topic may also divert attention from other pressing educational priorities, including rapidly evolving treatments, health information technology, quality and safety, and population health.

HMA supports physician flexibility to prioritize CME most applicable to their practice and patient population and encourages responsible discretion in selecting education that strengthens clinical competence and meets the evolving needs of our communities.

Thank you for allowing HMA the opportunity to submit comments on 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

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Laeton Pang, MD, Treasurer • Thomas Kosasa, MD, Secretary • Marc Alexander, Executive Director

REFERENCES AND QUICK LINKS

American Medical Association. “CME Report 1-A-25: Supporting Physician Lifelong Learning and Maintenance of Licensure.” AMA Council Reports, June 2025, https://councilreports.ama-assn.org/councilreports/downloadreport?uri=/councilreports/cme_1_a_25.pdf

Federation of State Medical Boards. “FSMB Public Policy Compendium: Continuing Medical Education (120.x).” FSMB, Apr. 2018 (and prior policies), <https://www.fsmb.org/siteassets/advocacy/policies/public-policy-compendium.pdf>

Accreditation Council for Continuing Medical Education. “CME Content: Definition and Examples.” ACCME, <https://accme.org/rule/cme-content-definition-and-examples/>

Gausche-Hill, M., et al. “Emergency Physicians’ Perspectives on State-Mandated, Topic-Specific Continuing Medical Education Requirements.” *JOURNAL OF THE AMERICAN COLLEGE OF EMERGENCY PHYSICIANS OPEN*, Wiley, 6 Oct. 2024, <https://pmc.ncbi.nlm.nih.gov/articles/PMC11462927/>

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2024 Hawaii Medical Association Public Policy Coordination Team

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

LATE

HB-2305

Submitted on: 2/18/2026 8:46:00 AM

Testimony for HLT on 2/18/2026 10:00:00 AM

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

Comments:

HOUSE COMMITTEE ON HEALTH

Representative Gregg Takayama, Chair

Representative Sue Keohokapu-Lee Loy, Vice Chair

Date: February 18, 2026

From: Hawaii Academy of Family Physicians Legislative Committee (HAFP)

Robert Carlisle, MD, MPH, Chair

RE HB 2305 RELATING TO PHYSICIAN CONTINUING MEDICAL EDUCATION. Hawai'i Medical Board; Physician; Nutrition; Continuing Medical Education Requirement

Position: Comments

This measure would require nutrition and metabolic education as part of physician continuing medical education requirements.

Continuing Medical Education (CME) consists of activities to help physicians maintain knowledge, skills, and attitudes after medical school and residency.

Already, physicians licensed in Hawaii must complete 40 hours of CME every two-years. And, many hospitals, health systems, and specialty boards impose additional CME requirements.

While nutrition and dietary principles are incredibly important, this effort replicates efforts embedded throughout medical education and integrated into primary and specialty care to degrees appropriate for the nature of the practices.

CME should be relevant to practice, evidence-based, and focused on improving patient outcomes. Focusing on a single mandated topic may divert attention from topics more immediate to each specialty. HAFP supports flexibility to prioritize CME as most applicable to each specialty. Tasking a state agency to track, audit, and enforce this proposal may be overly burdensome.

Thank you for allowing the opportunity for testimony on this measure.

Robert Thomas Carlisle, MD, MPH
Chair, Legislative Committee

Hawai'i Academy of Family Physicians

advocacy@hafp.info

HB-2305

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

Testimony for HLT on 2/18/2026 10:00:00 AM

Submitted By	Organization	Testifier Position	Testify
Laura Jennings	Individual	Support	Written Testimony Only

Comments:

I strongly support the addition of nutrition and metabolism to continuing medical education curricula. As a retired physician, I can confirm that I received minimal education in these crucial areas. It is obvious that knowledge of nutrition and metabolism have become increasingly important in both Adult and Pediatric Medicine.

HB-2305

Submitted on: 2/16/2026 8:30:20 AM

Testimony for HLT on 2/18/2026 10:00:00 AM

Submitted By	Organization	Testifier Position	Testify
Glen Kagamida	Individual	Support	Written Testimony Only

Comments:

SUPPORT. VERY IMPORTANT.