HAWAII MEDICAL BOARD

Professional and Vocational Licensing Division Department of Commerce and Consumer Affairs State of Hawaii

MINUTES OF MEETING

	The agenda for this meeting was filed with the Office of the Lieutenant Governor, as required by §92-7(b), Hawaii Revised Statutes ("HRS").
Date:	Thursday, February 08, 2018
<u>Time:</u>	1:00 p.m.
<u>Place:</u>	King Kalakaua Conference Room King Kalakaua Building 335 Merchant Street, 1 st Floor Honolulu, HI 96813
<u>Present:</u>	Jone Geimer-Flanders, D.O., Chairperson, Oahu Osteopathic Member Peter Halford, M.D., Vice-Chairperson, Oahu Member Gerard K. Akaka, M.D., Oahu Member Sharon "Shay" Bintliff, M.D., Hawaii Member Maria Chun, Ph.D., Public Member Franklin V.H. Dao, M.D., Oahu Member Palasi Puletasi, Public Member Karen E. Sept, D.O., Oahu Osteopathic Member Geri Young, M.D., Kauai Member Shari J. Wong, Deputy Attorney General Ahlani K. Quiogue, Executive Officer Olga Reppun, Secretary
Excused:	Darren K. Egami, M.D., Maui Member Peter Holt, M.D., Oahu Member
<u>Guests:</u>	Leslie Iczkovitz, Law Offices of Leslie Iczkovitz Baki Thomas, friend of Mr. Iczkovitz Sara Davidson, friend of Mr. Iczkovitz Patrick Brent, friend of Mr. Iczkovitz Katya Blissard, Drug Enforcement Agency ("DEA") Alex Niko, DEA Kyle Hoppel, DEA Vincent Tenorio, Physician Assistant Troy M. DeNunzio, D.O.
<u>Call to</u> <u>Order:</u>	The meeting was called to order at 1:00 p.m., at which time quorum was established.
<u>Approval of the</u> January 14, 2018,	It was moved by Chair Geimer-Flanders, seconded by Dr. Bintliff, with the exception of Dr. Chun who abstained from the vote, and carried by a majority to approve the minutes of the executive session of

<u>Minutes</u>: the January 11, 2018, meeting as circulated and the minutes of the regular session of the January 11, 2018, meeting with the following amendment:

On page 1, Maria Chun, Ph.D., Public Member, should be listed as excused only.

Dr. Dao left the meeting room at 1:03 p.m.

Due to a lack of quorum, the Board was required by law to take a brief recess until quorum was re-established to carry on with the agenda.

Dr. Dao returned to the meeting room at 1:05 p.m.

A quorum was re-established. Members returned to its scheduled agenda.

<u>Adjudicatory</u> Chair Geimer-Flanders recused herself from discussion and voting on this matter, and left the meeting room at 1:08 p.m.

Vice-Chair Halford called for a recess from the meeting at 1:08 p.m. to discuss and deliberate on the following adjudicatory matter pursuant to Chapter 91, HRS:

Dr. DeNunzio presented oral testimony to the Board members.

Mr. Puletasi entered the meeting room at 1:11 p.m.

Dr. Akaka entered the meeting room at 1:13 p.m.

After discussion, it was moved by Dr. Dao, seconded by Dr. Bintliff, and unanimously carried to remove the probationary status from Dr. DeNunzio's osteopathic medical license, license number DOS-1010.

Following the Board's review, deliberation and decision in this matter pursuant to Chapter 91, HRS, Vice-Chair Halford announced that the Board reconvene to its regular Chapter 92, HRS, meeting at 1:16 p.m.

Applications for
License/
Certification:a.Applications:It was moved by Chair Geimer-Flanders, seconded by Dr. Akaka, and
unanimously carried to enter into executive session at 1:17 p.m. pursuant
to HRS §92-5(a)(1) to consider and evaluate personal information relating
to individuals applying for professional licenses cited in HRS §26-9, and
pursuant to HRS §92-5(a)(4), to consult with the Board's attorney on
questions and issues pertaining to the Board's powers, duties, privileges,
immunities and liabilities.

a. <u>In the Matter of the License to Practice Medicine of Troy M.</u> <u>DeNunzio, D.O.; 2016-217-L;</u>

- (i) <u>Physician:</u>
 - a. John D. McArthur, M.D.
 - b. Jennifer K. Akamine, M.D.
 - c. Aaron B. Boor, D.O.
 - d. Jeffrey L. Galitz, M.D.
 - e. Kevin G. Kaiser, M.D.
 - f. Franklin C-H Lee, M.D.
 - g. Joyce W. Mobley, M.D.
 - h. Meredith L. Peake, M.D.
 - i. Martin A. Senicki, D.O.
 - j. Alexandra G. Takayesu, M.D.
 - k. Michael S.S. Yoon, M.D.
- <u>Correspondence:</u> a. <u>Letter dated January 16, 2018, from Leslie K. Iczkovitz, regarding</u> <u>The Hawaii Medical Board's authority to issue pain management</u> <u>guidelines and/or informed consent requirements regarding</u> <u>recognized alternative treatments to address the opioid epidemic.</u>

It was moved by Dr. Akaka, seconded by Vice-Chair Halford, and unanimously carried to return to the open meeting at 2:03 p.m.

It was moved by Chair Geimer-Flanders, seconded by Dr. Bintliff, and unanimously carried to approve the following applications:

- (i) <u>Physician:</u>
 - a. John McArthur, M.D.
 - b. Jennifer K. Akamine, M.D.
 - c. Aaron B. Boor, D.O.
 - e. Kevin G. Kaiser, M.D.
 - f. Franklin C-H Lee, M.D.
 - g. Joyce W. Mobley, M.D.
 - h. Meredith L. Peake, M.D.
 - j. Alexandra G. Takayesu, M.D.
- (i) <u>Physician:</u>
 - d. Jeffrey L. Galitz, M.D.

After due consideration of the information received, it was moved by Vice-Chair Halford, seconded by Dr. Dao, and unanimously carried to approve Dr. Galitz's application for licensure pending submission of his revised and corrected application and to issue a Non-Disciplinary Letter of Education to Dr. Galitz.

i. Martin A. Senicki, D.O.

		by Dr. Akaka, secon who recused herself	ion of the information received, it was moved ded by Dr. Dao, with the exception of Dr. Sept from the vote and discussion on this matter, ority to approve Dr. Senicki's application.		
		k. <u>Michael S. Yo</u>	oon, M.D.		
		by Vice-Chair Halford carried to deny Dr. Y based its decision or	ion of the information received, it was moved d, seconded by Dr. Bintliff, and unanimously 'oon's application for licensure. The Board in the following grounds of the Hawaii Revised hich find factual support in the records and oplication:		
		HRS §453-8(a)(7):	Professional misconduct, hazardous negligence causing bodily injury to another, or manifest incapacity in the practice of medicine or surgery; and		
		HRS §453-8(a)(8):	Incompetence or multiple instances of negligence, including but not limited to the consistent use of medical service, which is inappropriate or unnecessary.		
Applications for License/ Certification:	b.	Ratifications:			
		(i) List			
		•	Bintliff, seconded by Dr. Akaka, and to ratify the attached lists of individuals for tion.		
<u>Correspondence:</u>	a.	The Hawaii Medical guidelines and/or infe	2 16, 2018, from Leslie K. Iczkovitz, regarding Board's authority to issue pain management ormed consent requirements regarding 20 treatments to address the opioid epidemic.		
	Mr. Le his ree		guests appeared before the Board to discuss		
	Chair Geimer-Flanders asked Mr. Iczkovitz to please limit his presentation to ten (10) minutes as the Board's agenda was quite lengthy and the Board previously heard from him.				
	Mr. Ic	zkovitz acknowledged	the request.		
	the ab	ovementioned letter.	, Mr. Iczkovitz summarized the contents of In particular, he stressed that the Board has odify pain management guidelines and		

> informed consent requirements. Therefore, Mr. Iczkovitz felt that he had the right to ask that the Board modify these guidelines to make it for physicians to inform their patients about non-invasive scientifically proven alternative treatments to opioids.

Mr. Iczkovitz addressed Vice-Chair Halford personally to ask what right he had to ignore a scientifically proven, FDA- approved device, and to reject valid scientific studies.

Mr. Iczkovitz also informed the Board that he offered free use of his lasers to the doctors at Shriner's Hospital, and not a single doctor accepted the offer. Mr. Iczkovitz stated that he considered this refusal a demonstration of the physicians' apathy and lack of care about the patients' pain.

Mr. Iczkovitz reiterated his opinion that when doctors refuse to inform their patients about scientifically proven pain management alternatives to opioids, they are violating their legal and ethical duty. He also said that he never sued a physician, and that, instead, he wanted the Board to take action and make pain management guidelines and informed consent requirements more specific.

Chair Geimer-Flanders thanked Mr. Iczkovitz for his presentation. She informed Mr. Iczkovitz that the Board already issued pain management guidelines in 2005, pursuant to section 453-1.5, Hawaii Revised Statutes, and the guidelines are taken into account in considering the proper treatment of pain. The Board does not dictate to physicians which particular treatment options they have to use, nor does the Board endorse specific medications or devices.

Vice-Chair Halford addressed Mr. Iczkovitz to say that the statements Vice-Chair Halford made at the December 14, 2017, meeting were misinterpreted by Mr. Iczkovitz in his January 16, 2018, letter to the Board. Vice-Chair Halford referred to the following statement:

Dr. Peter Halford, having read the published articles he was sent, essentially acknowledged the device's ability to reduce post-surgical pain.

Vice-Chair Halford stated that this statement was incorrect and untrue. He stressed that at the December 14, 2017, meeting, he informed Mr. Iczkovitz that he DID NOT find the two submitted studies persuasive due to the small sample size and the fact that both of these studies were authored by the same researchers.

Vice-Chair Halford also added that the fact that a device is FDA-approved does not automatically mean that it is effective for a specific use.

Mr. Iczkovitz responded to Vice-Chair Halford and referred him to the summaries of 13 case studies he submitted to the Board.

Chair Geimer-Flanders thanked Mr. Iczkovitz again and reminded him that the Board's meeting time was limited.

Mr. Iczkovitz produced a set of photographs of his nose wound that, according to him, was treated with an Erchonia laser to demonstrate to the Board members the effectiveness of the device.

Mr. Iczkovitz informed the Board that his friend Ms. Baki Thomas would like to tell the Board her story.

Chari Geimer-Flanders inquired if her story had anything to do with pain management guidelines.

Mr. Iczkovitz responded that Ms. Thomas would like to tell about newborn incubators, a device which used to be ridiculed by the medical community in the past and is now commonly accepted and used.

Ms. Quiogue addressed Mr. Iczkovitz and Ms. Thomas to remind them that Ms. Thomas' presentation was not on the agenda and that Mr. Iczkovitz had limited time for his presentation, which he already exceeded. She informed Mr. Iczkovitz that the Board still had an 11-page list of bills to review and discuss in connection with the current legislative session.

Ms. Quiogue also reminded Mr. Iczkovitz to please make sure to inform RICO if he knew of any cases where the physicians were doing something unethical or illegal.

<u>2018 Legislation:</u> Chair Geimer-Flanders welcomed Katya Blissard, Alex Niko, and Kyle Hoppel of the DEA.

She stated that the Board was always happy to work with the DEA and inquired if there were any particular issues or concerns that they wanted to address at this meeting.

Ms. Blissard thanked Chari Geimer-Flanders for the warm welcome and informed the Board that they were attending the meeting just to introduce themselves and to observe.

The Board reviewed the following legislative measures:

a. <u>SB2653 / HB2059 Relating to Chapter 453, Hawaii Revised</u> <u>Statutes</u>

The above bills were reviewed and discussed in detail at the previous meetings.

The purpose of the bills is to establish licensing requirements by endorsement for physicians, surgeons, and osteopathic physicians to practice medicine in Hawaii. Ms. Quiogue informed the Board members that Dr. Holt testified on behalf of the Board before the Senate Committee on Commerce, Consumer Protection, and Health to strongly support the measure and provide comments.

Ms. Quiogue informed the Board that the measure was passed unamended on February 2, 2018, and referred to the Committee on Ways and Means. A public hearing will probably be scheduled sometime in February.

b. <u>SB3074 / HB2578 Relating to Physician Assistants</u>

The Board discussed the above bills.

The purpose of the bills is to require continuing education for physician assistants to renew their licenses. Prohibits the Board from requiring a physician assistant to maintain or receive certification by the National Commission of Certification of Physician Assistants ("NCCPA") to satisfy the requirement for continuing education or for license renewal.

Vincent Tenorio, Physician Assistant, presented oral testimony to the Board in support of the bills. Mr. Tenorio informed the Board that the requirement to maintain current NCCPA certification involves not only taking 100 credits of CME every two years, but also taking a recertification examination every recertification cycle (used to be 6 years, as of 2014 it is every 10 years). Mr. Tenorio stated that he believed the requirement to be excessive and an unnecessary financial burden for the physician assistants.

Vice-Chair Halford inquired if Ms. Quiogue knew what the renewal requirements for the physician assistants were in other states.

Ms. Quiogue responded that, according to her research, 20 states require that PAs obtain continuing medical education only, 15 states require NCCPA certification only, 7 states allow either CME or NCCPA certification, and 4 states require that PAs obtain CME and NCCPA certification if the physician assistant prescribes controlled substances.

Chair Geimer-Flanders reminded Board members that, in comparison, physicians are only required to obtain 40 hours of category 1 or 1A CME during the preceding two calendar years of the expiration of a license for MDs, and every two years for DOs.

Dr. Sept expressed concern that the bill does not specify the type of CME credits that physician assistants should take. She also stated that she

was sympathetic with the intent of the bill but wanted to ensure that if the physician assistants are only required to take CME, that physician assistants provide proof of taking such courses.

Ms. Quiogue stated that if the Board chose to support such measures, she would submit proposed amendments to the bills so that it mirrors language similar to what is contained in §453-6, HRS.

The Board agreed by consensus to support the bills and to propose that the language include CME requirements similar to those of physicians: 40 credit hours of category 1 or 1A continuing medical education, with random audits conducted by the Board to determine compliance.

c. <u>SB2298 / HB1967 Relating to Healthcare Preceptor Tax Credits</u>

The Board discussed the above bills.

The purpose of the bills is to allow advanced practice registered nurses, physicians, dentists, and pharmacists to receive tax credits for acting as preceptors in volunteer-based supervised clinical training rotations provided to eligible students that enable the students to obtain an eligible healthcare professional degree or certificate.

Ms. Quiogue reminded the Board members that, at the January meeting, the Board decided to support the bill, but deferred to the Department of Taxation regarding any possible fiscal impacts to the State.

Ms. Quiogue also informed the Board that she submitted written testimony on the Board's behalf.

d. HB2465 Relating to Medical Education

The Board discussed the above bill.

The purpose of the bill is to require the Department of Health to conduct a study regarding a pilot program to pay for Hawaii residents to attend the College of Medicine of the University of Northern Philippines in Ilocos Sur in exchange for a commitment to practice medicine in Hawaii after graduation.

Members stated that they would not take a position on this bill, but would monitor it.

e. <u>DC113 Report; Annual Report on the Findings from the Hawaii</u> <u>Physician Workforce Assessment Project; University of Hawaii</u>

The Board reviewed the above report.

- f. <u>SB141, SD2, HD1 Relating to Physician Workforce Assessment</u> (Carried over to the 2018 Regular Session)
- e. <u>SB1026 / HB1160 Relating to Physician Workforce Assessment</u> (Carried over to the 2018 Regular Session)

The Board discussed the above bills.

The purpose of the bills is to allow the John A. Burns School of Medicine to continue receiving revenues from the physician workforce assessment fee until June 30, 2027, for ongoing physician workforce assessment and planning to support the recruitment and retention of physicians in the State, particularly those in rural and medically underserved areas.

Ms. Quiogue informed the Board that HB428, SD1, CD1 (Act 040, SLH 2017) deleted the repeal date of June 30, 2018, and that physicians will be assessed the physician workforce assessment fee indefinitely.

The Board confirmed its position on these bills, specifically, the Board prefers that the statutory language (HRS 453-8.8) contain a repeal date. This bill, if heard, contains a repeal date of June 30, 2027.

f. <u>SB728 Relating to the John A. Burns School of Medicine Special</u> <u>Fund</u> (Carried over to the 2018 Regular Session)

The Board discussed the above bill.

The purpose of the bill is to permit moneys in the John A. Burns School of Medicine ("JABSOM") special fund to be used for loan repayment for certain health care professionals. Removes the cap on expenditures from the special fund. Removes the sunset date from the physician workforce assessment fee and related requirements for use of moneys in the JABSOM special fund.

The Board confirmed its 2016 position on this bill: (SB2388/HB1949) Board supports the intent of disbursing funds towards health care student loan repayment. However, the Board would prefer that any assessed fees transferred and deposited into the special fund pursuant to HRS § 453-8.8, be used towards student loan repayment for physicians only.

g. <u>SB735 Relating to the Health Corps Program</u> (Carried over to the 2018 Regular Session)

The Board discussed the above bill.

The purpose of the bill is to appropriate funds for the implementation and administration of the Hawaii health corps program that provides loan repayment for physicians, physician assistants, nurse practitioners, psychologists, and social workers who agree to work in a federally designated health professional shortage area or an area of Hawaii found to be underserved.

Members stated that they would not take a position on this bill, but would monitor it.

h. <u>SB1078, SD1 Relating to Loan Repayment for Health Care</u> <u>Professionals</u> (Carried over to the 2018 Regular Session)

The Board discussed the above bill.

The purpose of the bill is to make an appropriation for the Hawaii Rural Health Care Provider Loan Repayment Program administered through the JABSOM.

Ms. Quiogue informed the Board that companion HB916, HD1, SD2, CD1 was passed out as Act 058, SLH 2017. The Legislature appropriated \$250,000 or so much thereof as may be necessary for fiscal year 2017-2018 and the same sum or so much thereof as may be necessary for fiscal year 2018-2019, for the health care provider loan repayment program; provided that no funds shall be expended unless matched on a dollar-for-dollar basis by funds from a private or other public source.

Members stated that they would not take a position on this bill, but would monitor it.

i. <u>SB184 Relating to Health</u> (Carried over to the 2018 Regular Session)

The Board discussed the above bill.

The purpose of the bill is to provide an income tax credit to primary health care providers that recruit and employ licensed nurse practitioners, physician assistants, and psychologists to provide primary health care services.

Members stated that they would not take a position on this bill, but would monitor it.

j. <u>SB2071 Relating to Medicine</u>

The Board discussed the above bill.

The purpose of the bill is to require JABSOM to convene a working group to discuss nutrition and lifestyle behavior changes for the prevention and treatment of chronic disease. Requires a report to the legislature prior to the convening of the regular session of 2020.

Members stated that they would not take a position on this bill, but would monitor it.

k. <u>SB784 Relating to Medicine</u> (Carried over to the 2018 Regular Session)

The Board discussed the above bill.

The purpose of the bill is to require JABSOM to convene a working group to discuss nutrition and lifestyle behavior for the prevention and treatment of chronic disease. Requires a report to the legislature prior to the convening of the regular session of 2019.

Members stated that they would not take a position on this bill, but would monitor it.

I. <u>SB740 Relating to Health</u> (Carried over to the 2018 Regular Session)

The Board discussed the above bill.

The purpose of the bill is to designate specific professional identifications that may be used by certain persons to advertise, announce, or imply that they are prepared or qualified to practice a particular type of healing art in the State.

Members stated that they would not take a position on this bill, but would monitor it.

m. <u>SB191 Relating to Health Care Practitioner Transparency</u> (Carried over to the 2018 Regular Session)

The Board discussed the above bill.

The purpose of the bill is to require advertisements for health care services that name a health care practitioner to identify the type of license held by the health care practitioner and be free of deceptive and misleading information. Requires health care practitioners to conspicuously post and affirmatively communicate the practitioner's specific license and related information. Members stated that they would not take a position on this bill, but would monitor it.

n. <u>SB726 Relating to Health Care Practitioners</u> (Carried over to the 2018 Regular Session)

The Board discussed the above bill.

The purpose of the bill is to require health care providers to conspicuously post and communicate their specific type of licensure in their offices, communicate that information to patients in their practices, and include that information in their advertising. Imposes penalties for licensed health care providers who include deceptive or misleading information about their qualifications in their advertising, or misrepresent their qualifications to patients.

Members stated that they would not take a position on this bill, but would monitor it.

o. <u>SB738 Relating to Health Care Practitioners</u> (Carried over to the 2018 Regular Session)

The Board discussed the above bill.

The purpose of the bill is to require specified health care practitioners to disclose to patients the practitioner's name, license, highest level of academic degree, and board certification, where applicable.

Members stated that they would not take a position on this bill, but would monitor it.

p. <u>HB1484, HD2 Relating to Assault</u> (Carried over to the 2018 Regular Session)

The Board discussed the above bill.

The purpose of the bill is to establish the offense of assault in the second degree if a person intentionally or knowingly causes bodily injury to a health care professional, as defined in section 451D-2, Hawaii Revised Statutes, who is engaged in the performance of duty at the time of the assault.

Members stated that they would not take a position on this bill, but would monitor it.

q. SB2374 Relating to Community Paramedic Services

The Board discussed the above bill.

The purpose of the bill is to establish and appropriate funds for a threeyear community paramedic services pilot program. Establishes reporting requirements. Repeals December 31, 2021.

Members stated that they would not take a position on this bill, but would monitor it.

r. <u>HB216 Relating to Community Paramedic Services</u> (Carried over to the 2018 Regular Session)

The Board discussed the above bill.

The purpose of the bill is to implement the recommendations of the working group convened pursuant to House Concurrent Resolution No. 90, Regular Session of 2016, by establishing and appropriating funds for a three-year community paramedic services pilot program. Requires a report to the Legislature before the Regular Session of 2021.

HCR 90 requests the Chief of the Dept. of Health Emergency Medical Services and Injury Prevention System Branch to Convene and Chair a Working Group to Develop a Community Paramedic Program, Including Educational Standards for Certifications, to Alleviate Emergency Services from Responding to Non-Emergency Calls.

s. <u>HB1410, HD2, SD2 Relating to Emergency Medical Services</u> (Carried over to the 2018 Regular Session)

The Board discussed the above bill.

The purpose of the bill is to repeal the Emergency Medical Services Special Fund and appropriate an equal amount of general funds to the Department of Health for emergency medical services. It also appropriates funds for community paramedic services. Effective 7/1/2090.

Members stated that they would not take a position on this bill, but would monitor it.

t. <u>SB347, SD1, HD1 / HB527, HD1, SD2 Relating to Mobile Clinics</u> (Carried over to the 2018 Regular Session)

The Board discussed the above bills.

The purpose of the bills is to appropriate funds for establishing, staffing, and operating two mobile clinics to serve the homeless population.

Members stated that they would not take a position on these bills, but would monitorthem.

u. <u>HB2251 Relating to Authorized OVUII Blood Draws by</u> <u>Paramedics</u>

The Board discussed the above bill.

The purpose of the bill is to allow emergency medical services personnel to draw blood at the scene of an automobile accident potentially involving an intoxicated driver, if conditions of existing blood draw statute §291E-21 are met.

Members stated that they would not take a position on this bill, but would monitor it.

v. <u>HB2148 Relating to Minors</u>

The Board discussed the above bill.

The purpose of the bill is to prohibit teachers and persons who are licensed to provide professional counseling from engaging in or advertising sexual orientation change efforts on students and persons under eighteen years of age.

Members stated that they would not take a position on this bill, but would monitor it.

w. <u>SB270 / HB1266 / HB800 Relating to Minors</u> (Carried over to the 2018 Regular Session)

The Board discussed the above bills.

The purpose of the bills is to prohibit persons licensed to provide professional counseling from engaging in, attempting to engage in, or advertising sexual orientation change efforts on persons under 18 years of age.

Members stated that they would not take a position on these bills, but would monitor them.

x. HB2202 Relating to Workers' Compensation

The Board discussed the above bill.

The purpose of the bill is to provide that a duly qualified physician or duly qualified surgeon selected and paid for by an employer to perform a medical examination on an employee relating to a work injury under workers' compensation shall be duly qualified to treat the injury being examined, possess medical malpractice insurance, and owe the same duty of care to the injured employee as to a traditional patient.

Ms. Quiogue informed the Board that on February 1, 2018, the House Committee on Labor recommended that the measure be passed with amendments.

She stated that she did not attend the hearing, but it is her understanding that the following occurred: HB 2202 seeks to impose a duty of care on physicians performing independent medical examinations. The Department of Labor and Industrial Relations testimony was to not include the term "duly qualified" as that is not how it referred to in statutory chapter.

She went on to say that it is her understanding that the Chairperson of the House Committee on Labor would like to clearly define the term "duly qualified" to mean a doctor whose specialty is appropriate for the injury to be examined.

The Board members stated that if the bill continues to be heard, they would like to submit testimony to further clarify the term "duly qualified".

Vice-Chair Halford stated, and several members agreed, that from the consumer safety standpoint, mandating that a "duly qualified" physician as defined in the HD1, would ensure that a trained physician is examining an injured patient, and not just any physician.

y. <u>SB741 Relating to Workers' Compensation</u> (Carried over to the 2018 Regular Session)

The Board discussed the above bill.

The purpose of the bill is to require a workers' compensation impartial exam to be conducted by a doctor whose specialty is appropriate for the injury to be examined in cases where the director of labor and industrial relations appoints a doctor to conduct an exam. The bill also appropriates funds for the purpose of this measure.

Members stated that they would not take a position on this bill, but would monitor it.

z. <u>SB2358 / HB1631 Relating to Workers' Compensation</u> <u>Prescription Drug Reimbursement</u> The Board discussed the above bills.

The purpose of the bills is to limit physician-dispensed prescription drugs in workers' compensation claims to the first 30 days from the work injury date. This bill also lowers the reimbursement rates of prescription drugs in workers' compensation claims.

Members stated that they would not take a position on these bills, but would monitor the bills.

aa. <u>HB1181, HD2, SD1 Relating to Workers' Compensation</u> <u>Prescription Drug Reimbursement</u> (Carried over to the 2018 Regular Session)

The Board discussed the above bill.

The purpose of the bill is to require an opioid therapy informed consent process agreement to be executed. Requires the harm reduction services branch of the Department of Health to develop and make available a template of an opioid therapy informed consent process agreement and advise the department of labor and industrial relations on the contents of the agreement. Restricts the provision of physician-dispensed prescription drugs to an unspecified time following injury. Specifies that the reimbursement rate for prescription drugs in the workers' compensation system shall be one hundred and one percent of the average wholesale price. Restricts the provision of physician-dispensed prescription drugs to a specified time following injury. Specifies that reimbursements for any schedule II drug under the Uniform Controlled Substances Act prescribed by a physician shall be limited to an initial seven-day supply. Effective July 1, 2050.

Members stated that they would not take a position on these bills, but would monitor it.

bb. <u>SB253 Relating to Workers' Compensation</u> (Carried over to the 2018 Regular Session)

The Board discussed the above bill.

The purpose of the bill is to require, among other things, independent medical examinations and permanent impairment rating examinations for workers' compensation claims to be performed by physicians mutually agreed upon by employers and employees or appointed by the director of labor and industrial relations. Allows for the use of an out-of-state physician under certain conditions. Appropriates funds for positions to assist with workers' compensation claims. Effective January 1, 2018. Repeals on June 30, 2023.

Members stated that they would not take a position on this bill, but would monitor it.

cc. SB2365 / HB1694 Relating to Workers' Compensation

The Board discussed the above bills.

The purpose of the bills is to allow employer and employee to mutually agree to an independent medical examiner or permanent impairment rating examiner. An out-of-state physician may conduct the examination upon approval by the Director of Labor and Industrial Relations (Director) or when an employee resides out-of-state. Without the parties' mutual agreement, the Director shall appoint the physician who shall be paid from funds appropriated by the Legislature. Defines "medical stability."

Members stated that they would not take a position on these bills, but would monitor it.

dd. <u>SB731 Relating to Workers' Compensation</u> (Carried over to the 2018 Regular Session)

The Board discussed the above bill.

The purpose of the bill is to provide that an independent medical examination and permanent impairment rating examination shall be conducted by a qualified physician selected by the mutual agreement of the parties. Provides a process for appointment in the event that there is no mutual agreement.

Members stated that they would not take a position on this bill, but would monitor it.

ee. <u>SB330 / HB705 Relating to Workers' Compensation</u> (Carried over to the 2018 Regular Session)

The Board discussed the above bills.

The purpose of the bills is to reduce repackaged, relabeled, and compounded prescription drug payments under workers' compensation from 140% to 90% of the average wholesale price. Requires physician dispensed prescription drugs to only be prescribed within 90 days of the injury.

Members stated that they would not take a position on these bills, but would monitor the bills.

ff. <u>SB983, SD1 / HB1117 Relating to Workers' Compensation</u> (Carried over to the 2018 Regular Session)

The Board discussed the above bills.

The purpose of the bills is to limit reimbursements for compounded prescription drugs to \$1,000 in a thirty-day period. Limit reimbursements for any schedule II drug under chapter 329, Uniform Controlled Substances Act, Hawaii Revised Statues, dispensed by a physician to a one-time thirty-day supply upon the first visit.

Members stated that they would not take a position on these bills, but would monitor the bills.

gg. <u>HB977 Relating to Workers' Compensation</u> (Carried over to the 2018 Regular Session)

The Board discussed the above bill.

The purpose of the bill is to define duly qualified physician or surgeon. Allows an employee to record medical examinations of the employee that are ordered by the Director of Labor and Industrial Relations. Allows employees to have a chaperone present at medical examinations.

Members stated that they would not take a position on this bill, but would monitor it.

hh. <u>HB1118 Relating to Workers' Compensation</u> (Carried over to the 2018 Regular Session)

The Board discussed the above bill.

Amends the definition of "physician" in workers' compensation law to include advanced practice registered nurses.

Members noted that during the 2017 legislative session, it had recommended that the term "physician" be changed to "licensed independent health care practitioner" so that it could be inclusive all health care practitioners, and not have the potential of misleading the general public in thinking that someone? other than medical doctor or doctor of osteopathy is a physician.

It was noted that SB984, HD1, CD1, Passed out as Act 153, SLH 2017

ii. <u>SB1116 / HB980 Relating to Workers' Compensation</u> (Carried over to the 2018 Regular Session)

The Board discussed the above bills.

The purpose of the bills is to provide that an independent medical examination and permanent impairment rating examination shall be conducted by a qualified chiropractor or physician selected by the mutual agreement of the parties. Provides a process for appointment in the event that there is no mutual agreement.

Members stated that they would not take a position on these bills, but would monitor them.

jj. <u>HB1592 Relating to Workers' Compensation</u> (Carried over to the 2018 Regular Session)

The Board discussed the above bill.

The purpose of the bill is to provide for workers' compensation claims that an employer may appoint, at the employer's expense, a qualified physician selected by the mutual agreement of the parties to conduct an independent medical examination or permanent impairment rating examination. Provides a process for appointment in the event that there is no mutual agreement.

Members stated that they would not take a position on this bill, but would monitor it.

kk. HB1602 Relating to Opioids

The Board discussed the above bill.

The purpose of the bill is to require that persons who sell opioid drugs must also provide a label warning of the risks of addiction and death.

Members stated that they would not take a position on this bill, but would monitor it.

II. HB1603 Relating to Health Insurance

The Board discussed the above bill.

The purpose of the bill is to require health insurers, mutual benefit societies, and health maintenance organizations to provide health care coverage and benefits for a minimum of 6 months of inpatient and

outpatient treatment for opioid dependence beginning after December 31, 2018.

Members stated that they would not take a position on this bill, but would monitor it.

mm. HB2032 Relating to Controlled Substances

The Board discussed the above bill.

The purpose of the bill is to clarify that treatment drugs such as suboxone may be used in the maintenance or detoxification of narcotic dependent persons.

Members stated that they would not take a position on this bill, but would monitor it.

nn. SB2646 / HB2531 Relating to Prescription Drugs

The Board discussed the above bills

The purpose of the bills is to require prescribers of certain controlled substances to consult the electronic prescription accountability system before issuing a prescription for the controlled substance.

Members stated that they would not take a position on these bills, but would monitor the bills.

oo. <u>SB2811 / HB2384 Relating to the Uniform Controlled Substances</u> <u>Act</u>

The Board discussed the above bills.

The purpose of the bills is to update chapter 329, Hawaii Revised Statutes, as follows: amend sections 329-16 and 329-38(h) to be consistent with federal law, by allowing prescribing authorization of drugs which include buprenorphine and naloxone to patients undergoing "medically managed withdrawal", also known as "detoxification treatment" and "maintenance treatment" by practitioners who are properly registered.

Members stated that they would not take a position on these bills, but would monitor the bills.

pp. <u>SB2818 / HB2391 Relating to the Uniformed Controlled</u> <u>Substances Act</u>

The Board discussed the above bills.

The purpose of the bill is to amend section 329-104(c), Hawaii Revised Statutes, to allow the Director of? Department of Public Safety Narcotics Enforcement Division Administrator to disclose, at his discretion, confidential information from the Electronic Prescription Accountability System, more commonly known as the Prescription Drug Monitoring Program, to authorized employees of the Department of Health Alcohol and Drug Abuse Division and the Emergency Medical Services and Injury Prevention Systems Branch.

Members stated that they would not take a position on these bills, but would monitor the bills.

qq. <u>HB797 Relating to Pharmacies</u> (Carried over to the 2018 Regular Session)

The Board discussed the above bill.

The purpose of the bill is to authorize pharmacies to dispense controlled substances, other than Schedule II substances, without an authorization to refill a prescription under limited conditions.

Members stated that they would not take a position on this bill, but would monitor it.

rr. <u>SB190, SD1 Relating to the Controlled Substances Act</u> (Carried over to the 2018 Regular Session)

The Board discussed the above bill.

The purpose of the bill is to amend Hawaii's controlled substances act to mirror federal regulations, which permit qualified practitioners to administer, dispense, and prescribe any schedule II, III, IV, or V narcotic drug approved by the Food and Drug Administration for use as a medically-managed withdrawal treatment, otherwise known as a detoxification treatment, or maintenance treatment; provided the practitioner complies with federal and state requirements. Allows physicians under certain circumstances to administer narcotic drugs to relieve acute withdrawal symptoms for not more than three days and to treat a person as an incidental adjunct to medical or surgical treatment.

Members stated that they would not take a position on this bill, but would monitor it.

ss. <u>SB868, SD1 / HB1316</u> (Carried over to the 2018 Regular Session)

The Board discussed the above bills.

The purpose of the bills is to amend Hawaii's controlled substances act to mirror federal regulations, which permit qualified practitioners to administer, dispense, and prescribe any schedule II, III, IV, or V narcotic drug approved by the Food and Drug Administration for use as a medically-managed withdrawal treatment, otherwise known as a detoxification treatment, or maintenance treatment; provided the practitioner complies with specific federal requirements. Allow physicians under certain circumstances to administer narcotic drugs to relieve acute withdrawal symptoms for not more than three days and to treat a person as an incidental adjunct to medical or surgical treatment. Effective July 1, 2050.

Members stated that they would not take a position on these bills, but would monitor the bills.

tt. <u>SB504 / HB666 Relating to Controlled Substances</u> (Carried over to the 2018 Regular Session)

The Board discussed the above bills.

The purpose of the bills is to limit initial prescriptions for opioids and benzodiazepines to a maximum of seven consecutive days.

Members stated that they would not take a position on this bill, but would monitor the bills.

uu. <u>SB998 / HB1132, HD1 Relating to the Uniform Controlled</u> <u>Substances Act</u> (Carried over to the 2018 Regular Session)

The Board discussed the above bills.

The purpose of the bills is to update the State Uniform Controlled Substance Act consistent with federal law to authorize the prescription of drugs including buprenorphine and naloxone for detoxification treatment and maintenance treatment. Deposit fines for violation of the Act into the Controlled Substance Registration Revolving Fund.

Members stated that they would not take a position on these bills, but would monitor the bills.

vv. HB2145 Relating to Medication Synchronization

The Board discussed the above bill.

The purpose of the bill is to require health insurance and hospital and medical service plans that provide prescription drug benefits to apply prorated daily cost-sharing rates for prescriptions dispensed by pharmacies.

Members stated that they would not take a position on this bill, but would monitor it.

ww. HB1288 Relating to Licensure for Certified Professional Midwives

The Board discussed the above bill.

The purpose of the bill is to establish licensure requirements for the practice of midwifery. Requires the Director of Commerce and Consumer Affairs to adopt rules regulating the practice of midwifery.

Members stated that they would not take a position on this bill, but would monitor it.

xx. HB2184 Relating to the Licensure of Midwives

The Board discussed the above bill.

The purpose of the bill is to establish the criteria for licensure of midwives by the Department of Commerce and Consumer Affairs. Provides for interim rules for continuing education requirements, standards of professional conduct, prescriptive authority, and penalties for violations. Appropriates funds.

Members stated that they would not take a position on this bill, but would monitor it.

yy. SB2294 Relating to the Licensure of Midwives

The Board discussed the above bill.

The purpose of the bill is to establish the criteria for licensure of midwives by the Department of Commerce and Consumer Affairs. Provides for interim rules for continuing education requirements, standards of professional conduct, prescriptive authority, and penalties for violations. Appropriates funds.

Members stated that they would not take a position on this bill, but would monitor it.

zz. <u>SB1312, SD2 Relating to Licensure of Midwives</u> (Carried over to the 2018 Regular Session) The Board discussed the above bill.

The purpose of the bill is to establish the board of midwifery to regulate the practice of midwifery by certified midwives and certified professional midwives. Requires licensing of certified midwives and certified professional midwives to commence beginning on July 1, 2020. Requires the department of commerce and consumer affairs to convene a working group of interested stakeholders and submit a report to the legislature. Effective July 1, 2050.

Members stated that they would not take a position on this bill, but would monitor it.

aaa. SB2718 / HB2729 Relating to Cannabis for Medical Use

The Board discussed the above bills.

The purpose of the bills is to amend the reciprocity program, subject to certain safeguards, reporting and transparency requirements, and payment of a visiting patient certifying fee. Extend the maximum period of validity of a qualifying patient's written certification of a debilitating medical condition. Allow a bona fide physician-patient or advanced practice registered nurse-patient relationship to be established via telehealth. Add certain devices that provide safe pulmonary administration to the list of medical cannabis products that may be manufactured and distributed. Increases the tetrahydrocannabinol limit per pack or container of certain manufactured cannabis products. Exempt from the background check requirement employees of a dispensary or subcontracted production center or retail dispensing location without direct access, contact, or exposure to any cannabis or manufactured cannabis product. Condition the department of health's mandatory disclosure of information and documents of dispensaries and production centers, for purposes of verifying qualifying patient information, only upon receipt of a legally authorized subpoena.

The Board expressed concern with the provision of the bill which would allow a health care professional to establish a relationship with a patient via telehealth. Ms. Quiogue noted that such a relationship would conflict with the requirement of HRS §453-1.3(c) which states:

Treatment recommendations made via telehealth, including issuing a prescription via electronic means, shall be held to the same standards of appropriate practice as those in traditional physician-patient settings that do not include a face-to-face visit but in which prescribing is appropriate, including on-call telephone

> encounters and encounters for which a follow-up visit is arranged. Issuing a prescription based solely on an online questionnaire is not treatment for the purposes of this section and does not constitute an acceptable standard of care. For the purposes of prescribing opiates or medical cannabis, a physicianpatient relationship shall only be established after an in-person consultation between the prescribing physician and the patient.

Several members stated that establishing a physician-patient relationship via telehealth to qualify a patient for medical marijuana may violate federal law and directed Ms. Quiogue to research the matter.

The Board members stated that they would monitor the bill, and if the intent of the Legislature is to allow for a physician-patient relationship to be established via telehealth to qualify a patient for medical marijuana, then it would submit testimony in opposition to that section only.

bbb. <u>SB120 / HB170 Relating to the Scheduling of Marijuana</u> (Carried over to the 2018 Regular Session)

The Board discussed the above bills.

The purpose of the bills is to require the Department of Public Safety to reassess the classification of marijuana as a Schedule I drug under state law and to report its findings to the Legislature.

Members stated that they would not take a position on these bills, but would monitor the bills.

ccc. <u>HB922 Relating to Marijuana</u> (Carried over to the 2018 Regular Session)

The Board discussed the above bill.

The purpose of the bill is to require DCCA to submit annual report regarding physician discipline related to medical marijuana certifications. Requires DOH to submit monthly report on medical marijuana certifications. Requires Hawaii medical board to investigate potential misconduct regarding medical marijuana, take appropriate disciplinary action, and submit annual report.

The Board confirmed it previous position on this bill which was to oppose the measure.

While the Board takes very seriously patient harm, professional misconduct, etc., the Board must also consider the fact the use of medical marijuana is regulated pursuant to HRS Chapter 329. Any possible

violations of that chapter must initially be investigated by DPS. Once DPS concludes its investigation, RICO, the enforcement arm of the Board, may then be able to bring a case against a physician who is inappropriately qualifying patients to use medical marijuana.

Further, the Board does not have the ability to segregate disciplinary action based on "misconduct related to medical marijuana certifications" as the bill would require.

ddd. HB1893 Relating to Health

The purpose of the bill is to include the medical use of cannabidiol products as allowable medical uses of cannabis for opioid use disorder.

Ms. Quiogue informed the Board that on February 1, 2018, the House Committee on Health and Human Services deferred this measure indefinitely.

eee. <u>SB174, SD2, HD2 Relating to Medical Marijuana</u> (Carried over to the 2018 Regular Session)

The Board discussed the above bill.

The purpose of the bill is to amend the definition of debilitating medical condition to include lupus, epilepsy, multiple sclerosis, and arthritis as conditions that qualify for the legal use of medical marijuana.

Members stated that they would not take a position on this bill, but would monitor it.

fff. <u>SB1159, SD1</u> (Carried over to the 2018 Regular Session)

The Board discussed the above bill.

The purpose of the bill is to establish the Office of Medical Marijuana Administration in DOH to administer marijuana dispensary licensing and regulation, and patient registration. Limits each location used to cultivate marijuana to use by five qualifying patients. Authorizes primary caregivers to cultivate marijuana for qualifying patients until December 31, 2020. Extends civil service exemptions. Extends interim rulemaking authority. Authorizes an alternate medical marijuana dispensary tracking system for use when the DOH computer tracking system in nonfunctional and requires DOH to report to the legislative oversight working group. Adds considerations for establishing marijuana testing standards and selecting additional dispensary licensees. Allows DOH to consider whether existing dispensary licensees shall be allowed to increase plant count, increase the number of production centers, or increase the number of retail dispensing locations. Requires retention of video security recordings of production centers and dispensaries for not less than 45 days. Effective July 1, 2050.

It was noted that HB1488, HD1, SD1, CD1 Passed out as Act 041, SLH 2017.

Members stated that they would not take a position on this bill, but would monitor it.

ggg. SB2727 Related to Health

The Board discussed the above bill.

The purpose of the bill is to establishes a medical aid in dying act that establishes a regulatory process under which an adult resident of the State with a medically confirmed terminal disease may obtain a prescription for medication to be self-administered to end the patient's life.

Members stated that they would not take a position on this bill, but would monitor it.

hhh. HB2218 Relating to Voluntary Assisted Dying

The Board discussed the above bill.

The purpose of the bill is to establish the right of certain terminally ill adults to request and access the process of voluntary assisted dying through self-administration or physician administration of a voluntary assisted dying substance. Effective July 1, 2019.

Members stated that they would not take a position on this bill, but would monitor it.

iii. <u>SB357 Relating to Aid in Dying</u> (Carried over to the 2018 Regular Session)

The Board discussed the above bill.

The purpose of the bill is to authorize a terminally ill adult with the capacity to make an informed health care decision to request a prescription for aid in dying medication from their attending physician to facilitate a peaceful death. Establishes that an attending physician determines a terminally ill adult's capacity to make an informed health care decision. Establishes that medical aid in dying does not constitute euthanasia, suicide, homicide, elder abuse or neglect, or cause a person

to be considered a danger to self. Protects physicians who assist patients in obtaining aid in dying medication from civil or criminal liability. Makes it a felony to coerce an individual to request medication for the purpose of ending his or her life or to conceal a rescission of such request.

Members stated that they would not take a position on this bill, but would monitor it.

jjj. <u>HB201 Relating to Aid in Dying</u> (Carried over to the 2018 Regular Session)

The Board discussed the above bill.

The purpose of the bill is to allow a terminally ill adult with the capacity to make an informed healthcare decision to request a prescription for aid in dying medication from their attending physician to facilitate a peaceful death. Ensures that physicians who assist patients in obtaining aid in dying medication are not subject to civil or criminal liability.

Members stated that they would not take a position on this bill, but would monitor it.

kkk. <u>SB1129, SD2 Relating to Health</u> (Carried over to the 2018 Regular Session)

The Board discussed the above bill.

The purpose of the bill is to establish a medical aid in dying act that establishes a regulatory process under which an adult resident of the State with a medically confirmed terminal disease may obtain a prescription for medication to be self-administered to end the patient's life.

Members stated that they would not take a position on this bill, but would monitor it.

III. <u>HB550 Relating to Death with Dignity</u> (Carried over to the 2018 Regular Session)

The Board discussed the above bill.

The purpose of the bill is to authorize terminally ill adults seeking to end their life to request lethal doses of medication from medical and osteopathic physicians.

Members stated that they would not take a position on this bill, but would monitor it.

<u>Advisory</u> Committees:	a.	Physician Assistants	
	b.	Emergency Medical Personnel	
	C.	Podiatrists	
<u>Open Forum:</u>	None.		
<u>Next Meeting:</u>	Thursday, March 8, 2018 1:00 p.m. King Kalakaua Conference Room, First Floor 335 Merchant Street Honolulu, Hawaii 96813		
Adjournment:	It was moved by Chair Geimer-Flanders, seconded by Dr. Halford, and unanimously carried to adjourn the meeting at 3:38 p.m.		

Reviewed and approved by:

Taken and recorded by:

<u>/s/ Ahlani Quiogue</u> (Ms.) Ahlani K. Quiogue Executive Officer <u>/s/ Olga Reppun</u> (Ms.) Olga Reppun Secretary

AKQ:or 02/23/18

() (x) Minutes approved as is. Minutes approved with changes: see minutes of March 8th, 2018, meeting

HAWAII MEDICAL BOARD 02/08/2018-RATIFICATION LIST

LTYPE LIC NUM BP NAME PART 1

MD 19434 AMY R <WELCH< MD 19435 RAY K < BRADFORD< MD 19437 BRETT E <MATHEWS< MD 19438 FELIX C <NWOKOLO< MD 19439 CHRISTOPHER N <SCHMICKL< MD 19440 MARK L <LUKENS< MD 19441 RICHARD L <COURSEY< JR MD 19442 BRANDON P < GOODWIN< MD 19443 ARTHUR C <LEE< MD 19444 GORDON M < MAGONET < MD 19445 DAVID J <WOODING< MD 19446 EDWARD T <TRAPANI< MD 19447 JAYESH K <HARI< MD 19448 KYLE E < MOUERY< MD 19449 REBECCA A <BEACH< MD 19450 PARIS N <STOWERS< MD 19451 BARRETT G <LEVINE< MD 19452 PAUL J <FERREIRA< MD 19453 SUZANNE M < GILLERN< MD 19454 VIVIAN K < GOMEZ GONZALEZ< AMD 810 0 RHONDA L <GLEASON< AMD 811 0 KAITLYN E <SZEKALSKI< AMD 812 0 SAVANNAH R <KLINGSHIRN< _____ ____ DOS 1864 0 AARON < THORNBURG < DOS 1866 0 DEBORAH R <HELLINGER< -----DOSR 432 0 RYAN M <CAULFIELD< DOSR 433 0 KENNETH E < DZIKE< DOSR 4283 0 KELLI T <FRITZ< DOSR 7445 0 VICTORIA G < GOODHEART < _____ _____ MDR 7442 0 LI W <CUI< MDR 7443 0 CHAD M <BAILEY< MDR 7444 0 KASSANDRA K < MCMILLEN< MDR 7446 0 ZACHARY <SCHIRM< MDR 7447 0 AILEEN N <NEWMYER< MDR 7448 0 STEPHANIE < CHARSHAFIAN < MDR 7449 0 DIANA C < ROBLES< MDR 7450 0 NADIA M <EL-FAKIH< _____ _____ EMT 2820 0 TROY K < ODO <

EMT 2821 0 JAVIER A <BELLIDO FATACCIOLI< EMT 2823 0 SIMONE <ERMEL-SPIES<

EMT 2824 0 JOY S <YAMASHITA< EMT 2825 0 KIAN K <AQUINO<

EMTA 15 0 TROY D <GIBSON< EMTA 16 0 JOHN K IOANE <LOPES< III

EMTP 2177 0 T JEREMY F <JONES< EMTP 2178 0 T EDWARD <WHEAT< EMTP 2179 0 T KRYSTLE M <TAKASANE< EMTP 2180 0 T DATHAN H <LLOYD< EMTP 2181 0 T JAMES B <YAMANOHA<