

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, March 8, 2018

Time: 1:00 p.m.

Place: King Kalakaua Conference Room
King Kalakaua Building
335 Merchant Street, 1st Floor
Honolulu, HI 96813

Present: 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
Peter Holt, M.D., Oahu 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
Darren K. Egami, M.D., Maui Member
Shari J. Wong, Deputy Attorney General
Ahlani K. Quiogue, Executive Officer
Olga Reppun, Secretary

Excused: None

Guests: Seth Tuzon, Applicant
Wagner Baptiste, M.D., Applicant
Lei Fukumura, Special Deputy Attorney General ("SDAG")

Call to Order: The meeting was called to order at 1:03 p.m., at which time quorum was established.

Approval of the February 08, 2018, Minutes: It was moved by Chair Geimer-Flanders, seconded by Dr. Bintliff, and carried by a majority to approve the minutes of the executive session of the February 8, 2018, meeting as circulated and the minutes of the regular session of the February 8, 2018, meeting with the following amendments:

On page 4, title k., should read:

k. Michael S. S. Yoon, M.D.

On page 5, second sentence of the first paragraph, should read as follows:

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

On page 6, the word 'Chari' should be spelled as '**Chair**'.

Board Meeting
Guests:

Chair Geimer-Flanders greeted Board meeting guests. The guests and the Board members introduced themselves.

Adjudicatory
Matter:

Chair Geimer-Flanders called for a recess from the meeting at 1:07 p.m. to discuss and deliberate on the following adjudicatory matters pursuant to Chapter 91, HRS:

- a. In the Matter of the License to Practice Osteopathy of Paul J. Arnold, D.O.; MED 2016-132-L

After discussion, it was moved by Dr. Akaka, seconded by Dr. Egami, and unanimously carried to approve the Settlement Agreement Prior to Filing of Petition for Disciplinary Action and Board's Final Order; Exhibits "1" through "5".

- b. In the Matter of the Physician's License of Thomas Masato Suyeoka, M.D.; MED 2016-147-L

Dr. Young recused herself from discussion and voting on this matter and left the meeting room at 1:13 p.m.

Mr. Puletsi entered the meeting room at 1:17 p.m.

After discussion, it was moved by Dr. Akaka, seconded by Dr. Holt, with the exception of Dr. Young who recused herself, and carried by a majority to approve the Settlement Agreement Prior to Filing of Petition for Disciplinary Action and Board's Final Order.

SDAG Fukumura was excused from the meeting room at 1:54 p.m.

Dr. Young returned to the meeting room at 1:55 p.m.

Following the Board's review, deliberation and decision in this matter pursuant to Chapter 91, HRS, Chair Geimer-Flanders announced that the Board reconvene to its regular Chapter 92, HRS, meeting at 1:55 p.m.

The Board took a short recess from the meeting from 1:55 p.m. to 2:00 p.m.

Applications for
License/
Certification:

a. Applications:

It was moved by Dr. Bintliff, seconded by Dr. Egami, and unanimously carried to enter into executive session at 2:00 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.

(i) Physician:

- a. Wagner Baptiste, M.D.
- b. David J. Gray, M.D.
- c. Rene S. Orquiza, M.D.

(ii) Request for Reconsideration:

- a. Seth H.L.M.A. Tuzon, Advanced Emergency Medical Technician

It was moved by Vice-Chair Halford, seconded by Dr. Dao, and unanimously carried to return to the open meeting at 2:27 p.m.

It was moved by Dr. Sept, seconded by Dr. Bintliff, and unanimously carried to grant Mr. Tuzon's request for reconsideration, and to accept the following additional new information:

1. Letter of recommendation dated January 30, 2018, from Brett McCurtain, Battalion Chief, Federal Fire Department Hawaii

It was moved by Vice-Chair Halford, seconded by Dr. Dao, and unanimously carried to return to the executive session at 2:27 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.

(ii) Request for Reconsideration:

- a. Seth H.L.M.A. Tuzon, Advanced Emergency Medical Technician

(iii) Request for Waiver of Continuing Medical Education for the License Biennium February 1, 2016, to January 31, 2018:

- a. Tai-June Yoo, M.D.

Qualifications for
Examination and
Licensure:

- a. W. Joseph Barrett, DPM, FACFAS requests a determination regarding whether he would qualify for a podiatric license without having completed at least twelve months of an accredited podiatric residency.

It was moved by Vice-Chair Halford, seconded by Dr. Dao, and unanimously carried to return to the open meeting at 3:07 p.m.

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

(i) Physician:

- a. Wagner Baptiste, M.D.

(ii) Request for Reconsideration:

- a. Seth H.L.M.A. Tuzon, Advanced Emergency Medical Technician

After due consideration of the information received, it was moved by Vice-Chair Halford, seconded by Dr. Bintliff, and unanimously carried to approve Mr. Tuzon's application for licensure pending submission of a revised application for licensure and to issue a non-disciplinary Letter of Education to Mr. Tuzon.

Mr. Tuzon left the meeting room at 3:09 p.m.
Dr. Baptiste left the meeting room at 3:09 p.m.

(i) Physician:

- b. David J. Gray, M.D.

After due consideration of the information received, it was moved by Dr. Sept, seconded by Dr. Young, and unanimously carried to approve Dr. Gray's application for licensure.

Ms. Quiogue inquired whether the Board would consider delegating to its executive officer the authority to approve applications with "yes" answers to the question:

With regard to participation in any health plan or Federal or State health care program: Have you ever relinquished participation or certification?

Ms. Quiogue clarified that the delegation would only apply to practitioners who voluntarily relinquished participation or certification in any health plan or federal or state health care program, and whose records and files do not contain adverse or

derogatory information. For instance, the FSMB Practitioner Profile, AMA Physician Profile, NPDB, and OIG Exclusion Database contained no adverse or derogatory information.

Members indicated that they were inclined to delegate such approval authority to its executive officer.

It was moved by Dr. Sept, seconded by Dr. Bintliff, and unanimously carried to delegate, pursuant HRS §436B-8, to its executive officer the authority to approve applications in which a practitioner discloses their voluntary relinquishment of participation or certification in any health plan or federal or state health care program provided that the records and files of the application do not contain adverse or derogatory information.

c. Rene S. Orquiza, M.D.

After due consideration of the information received, it was moved by Dr. Young, seconded by Dr. Egami, and unanimously carried to approve Dr. Orquiza's application for licensure pending submission of a corrected and revised application answering "yes" to question 6.d., instead of question 11.

(iii) Request for Waiver of Continuing Medical Education for the License Biennium February 1, 2016, to January 31, 2018:

a. Tai-June Yoo, M.D.

After due consideration of the information received, it was moved by Dr. Holt, seconded by Dr. Egami, with the exception of Dr. Akaka, who recused himself from the discussion and voting on this matter, and carried by a majority to deny Dr. Yoo's request for waiver of continuing medical education for the License Biennium February 1, 2016, to January 31, 2018, and also to require that, in order for Dr. Yoo to restore his license, he complete 93.5 (53.5 hours to meet the terms of the previous waiver granted and 40 hours of CME for the current biennium) hours of Category 1 or 1A CME approved by the AMA or AOA by January 31, 2020. The 93.5 hours of CME must be completed within the calendar years 2018 and/or 2019.

Qualifications for Examination and Licensure:

a. W. Joseph Barrett, DPM, FACFAS, requests a determination regarding whether he would qualify for a podiatric license without having completed at least twelve months of an accredited podiatric residency.

Members reviewed Dr. Barrett's letter dating February 17, 2018, regarding a possible application for a podiatry license without having had the requisite 12-month residency.

Members referred to §463E-3, Hawaii Revised Statutes (“HRS”); subchapter 8, Podiatric Medicine Hawaii Administrative Rules (“HAR”); and information regarding the American Podiatric Medical Licensing Examination.

After due consideration of Dr. Barrett’s request, it was moved by Dr. Sept, seconded by Dr. Akaka, and unanimously carried to deny Dr. Barrett’s request to substitute his experience and accomplishments in podiatric medicine/surgery in other jurisdictions for the Board’s license requirements set forth in the statutory and administrative rule provisions; and to inform Dr. Barrett that the Board does not have the statutory or administrative rule authority to grant the request.

Applications for License/
Certification:

b. Ratifications:

(i) List

It was moved by Chair Geimer-Flanders, seconded by Dr. Holt, and unanimously carried to ratify the attached lists of individuals for licensure or certification.

2018 Legislation:

The Board reviewed the following legislative measures:

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

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

The purpose of the bills is to establish licensing requirements by endorsement for physicians, surgeons, and osteopathic physicians to practice medicine in Hawaii.

Members discussed the implementation of such legislation, and stated that in its testimony it should request that the bills’ effective date be amended to reflect upon approval provided that section 2 of the bills be effective December 31, 2018, to allow the Department of Commerce and Consumer Affairs to recruit and hire staff.

b. SB3074 / HB2578, HD2 Relating to Physician Assistants

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

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.

Ms. Quiogue informed the Board that the House Committee on Commerce and Consumer Protection accepted the Board's proposed amendments, which included CME requirements similar to what is required for physicians in HRS 453-6, as well as the random audit requirement.

c. HB1813, HD2 Relating to Health

The Board discussed the above bill.

The purpose of the bill is to establish a three-year pilot program to create a new category of professional licensure for assistant physicians, through which recent medical school graduates who have passed certain medical exams but have not been placed into a residency program may work under the supervision of a licensed physician to provide primary care in medically underserved areas.

The Board expressed concerns that the proposed bill leaves vulnerable populations at risk due to lack of training of the assistant physicians.

The members also voiced concerns with the following:

- Page 4, lines 1-2, definition of “medical school graduate”.

Members stated that its current statutory provisions do not allow an osteopathic physician to become licensed in this State if their program is not accredited by the American Osteopathic Association (“AOA”). The language in this bill would open the doors for foreign trained osteopaths to qualify for licensure when the curriculum is subpar to AOA accredited programs.

- Page 4, lines 20-21 and page 5, lines 1-3.

The language in subsection (d) provides that an assistant physician shall be considered a “physician assistant” for insurance reimbursement purposes.

Members stated that: 1) this may be in violation of HRS §453-2(5); and 2) the terms “assistant physician” and “physician assistant” should not be interchangeable as this would cause confusion amongst the general public.

- Page 5, lines 20-21 and page 6, lines 1-4.

Subsection (g) provides that an assistant physician shall be permitted to use the terms “doctor”, “Dr.”, or “doc”.

Regarding the term “doc”, members stated that this is a colloquial term for doctor and should not be placed in law.

- Page 7, lines 2-9.

Collaborative practice arrangements, which shall be in writing, may delegate to an assistant physician the authority to administer or dispense drugs and provided treatment as long as the delivery of such health care services is with the scope of practice of the assistant physician and is consistent with that assistant physician’s skill, training, and competence and the skill and training of the collaborative physician.

Concerns include: no definition of the “scope of practice of an assistant physician”; no definition of an assistant physician’s “skill, training, and competence and the skill and training of the collaborative physician”.

- Page 8, lines 4-6.

(4) All specialty or board certifications of the collaborating physician and all certifications of the assistant physician.

Members noted that the Board does not license physicians by specialty, thus it does not maintain information regarding a physician’s specialty or board certification.

- Page 8, lines 14-21.

Subsection (B): Maintain geographic proximity; except, the collaborative practice arrangement may allow for geographic proximity to be waived for a maximum of twenty-eight days per calendar year for rural health clinics as defined by Public Law section 95-210, as amended, as long as the collaborative practice arrangement includes alternative plans.

No clear definition of “geographic proximity”, and thus could lead to a physician being on Oahu and an assistant physician in a location which is not quickly accessible.

- Page 9, lines 11-13.

Subsection (C) Provide coverage during absence, incapacity, infirmity, or emergency by the collaborating physician.

The Board questioned whether this provision would allow an assistant physician to work independently without the collaborative physician in “geographic proximity” and accessible by any means, and whether a collaborative physician relationship is even required in these instances.

- Pages 11-12, subsection (m).

Requires the Board to establish rules regulating the use of written collaborative practice arrangements for assistant physicians, including:

- (1) Geographic areas to be covered;

Members stated that this provision is beyond the Board’s scope, and that it does not establish shortage areas.

- (3) In conjunction with the dean of the John A. Burns school of medicine and primary care residency program directors in the State, the development and implementation of educational methods and programs undertaken during the collaborative practice arrangements service which shall facilitate the advancement of the assistant physician’s medical knowledge and capabilities, and which may lead to credit toward a future residency program for programs that deem such documented educational achievements acceptable.

Members stated that this language goes beyond the Board’s statutory authority and legislative mandate. Further, they do not have the expertise in this area. There are recognized organizations such as the Accreditation Council for Graduate Medical Education (ACGME) and AOA who have the expertise and knowledge of graduate medical education training.

- (4) The requirements for review of services provided under written collaborative practice arrangements, including delegating authority to prescribe controlled substances.

Members queried whether this is permissible. Current federal and State laws do not permit a physician to delegate their authority to any other individual to prescribe controlled substances.

Ms. Quiogue stated that currently physicians who are issued any kind of limited license or who have a limited scope of practice are not issued controlled substance numbers by the NED. For instance, physicians participating in accredited graduate medical education training programs use the institution's DEA/controlled substance number.

- Page 12, subsection (p).

The Hawaii medical board shall not deny, revoke, suspend, or otherwise take disciplinary action against a collaborating physician for health care services delegated to an assistant physician; provided the provisions of this section and the rules adopted thereunder are satisfied.

Members expressed concerns that this provision prohibits the Board from carrying out its legislative mandate, which is to protect the consumers from unsafe, incompetent, and unprofessional practitioners. The Board was unsure what remedies it would have if an assistant physician were to harm a patient.

The Board agreed by consensus to strongly oppose the bill.

d. SB2298, SD1 Relating to Healthcare Preceptor Tax Credits

The above bill was reviewed and discussed in detail at the previous meetings.

The purpose of the bill is to allow advanced practice registered nurses and physicians to receive income 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 provided the following update regarding the bill's current version:

SD1: includes language which would only provide a tax credit for physicians and APRNs that lead to practice in primary care.

The Board agreed by consensus that, in the current version, the Board will only be monitoring the bill.

e. HB 1967, HD2 Relating to Healthcare Preceptor Tax Credits

The above bill was reviewed and discussed in detail at the previous meetings.

The purpose of the bill is to allow advanced practice registered nurses, physicians, dentists, psychologists, pharmacists, and social workers 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. Establishes the Preceptor Credit Assurance Committee to issue certificates to volunteer preceptors upon verifying that the volunteer preceptors meet the requirements of the tax credit.

The Board determined that it will monitor the bill.

f. SB2491, SD2 / HB1906, HD1 Relating to Health Care Workers

The Board discussed the above bill.

The purpose of the bill is to make intentionally or knowingly causing bodily injury to certain health care workers a Class C felony.

The Board agreed by consensus that it will monitor the bill.

g. SB2374, SD1 Relating to Community Paramedic Services

The above bill was reviewed and discussed in detail at the previous meetings. The Board is monitoring the bill.

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

h. SB270, SD1 Relating to Minors (Carried over to the 2018 Regular Session)

The above bill was reviewed and discussed in detail at the previous meetings. The Board is monitoring the above bill.

The purpose of the bill is to prohibit specific state-licensed persons who are licensed to provide professional counseling from engaging in, attempting to engage in, or advertising sexual orientation change efforts on persons under eighteen years of age.

i. HB2202, HD2 Relating to Workers' Compensation

The above bill was reviewed and discussed in detail at the previous meetings.

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 the bill passed Third Reading and was transmitted to Senate on March 1, 2018.

The Board agreed by consensus that it will continue monitoring the bill.

j. SB2358, SD1 Relating to Workers' Compensation Prescription Drug Reimbursement

The above bill was reviewed and discussed in detail at the previous meetings. The Board is monitoring the above bill.

The purpose of the bill is to limit physician-dispensed prescription drugs in workers' compensation claims to the first 30 days from the work injury date. Lowers the reimbursement rates of prescription drugs in workers' compensation claims. Takes effect January 1, 2045.

k. HB1631, HD1 Relating to Workers' Compensation Prescription Drug Reimbursement

The above bill was reviewed and discussed in detail at the previous meetings. The Board is monitoring the above bill.

The purpose of the bill is to limit physician-dispensed prescription drugs in workers' compensation claims to an unspecified number of days from the work injury date. Lowers the reimbursement rates of prescription drugs in workers' compensation claims.

l. SB2365 Relating to Workers' Compensation

The above bill was reviewed and discussed in detail at the previous meetings. The Board is monitoring the above bill.

The purpose of the bill 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."

m. HB1602, HD2 Relating to Opioids

The above bill was reviewed and discussed in detail at the previous meetings. The Board is monitoring the above bill.

The purpose of the bill is to permit the inclusion of a label warning of the risks of addiction and death on the packaging of any opioid drug dispensed by a health care professional or pharmacist.

n. HB1603, HD2 Relating to Health Insurance

The above bill was reviewed and discussed in detail at the previous meetings. The Board is monitoring the above bill.

The purpose of the bill is to require the auditor to conduct a study to assess the social and financial effects of requiring 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.

o. SB2646, SD1 / HB2531, HD1 Relating to Prescription Drugs

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

p. SB2811, SD1 / HB2384, HD1 Relating to the Uniform Controlled Substances Act

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

The purpose of the bill is to update chapter 329, Hawaii Revised Statutes, 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.

q. SB2818 / HB2391 Relating to the Uniformed Controlled Substances Act

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

The purpose of the bill is to amend section 329-104(c), Hawaii Revised Statutes, to allow the 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.

r. SB504 / HB666 Relating to Controlled Substances
(Carried over to the 2018 Regular Session)

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

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

s. HB2145, HD1 Relating to Medication Synchronization

The above bill was reviewed and discussed in detail at the previous meetings. The Board is monitoring 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.

t. SB2294 Relating to the Licensure of Midwives

The above bill was reviewed and discussed in detail at the previous meetings. The Board is monitoring 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.

u. SB2718, SD1 Relating to Cannabis for Medical Use

The Board discussed the above bill.

Ms. Quiogue provided the following update regarding the bill's current version:

SD1: Allows a bona fide physician-patient or advanced practice registered nurse-patient relationship to be established via telehealth. Adds 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 up to the existing statutory dispensing limits.

The Board noted that HRS Section 453-1.3, subsection c, specifically provides that, for the purposes of prescribing opiates or medical cannabis, a physician-patient relationship shall only be established after an in-person consultation between the prescribing physician and the patient.

The Board also reviewed The Ryan Haight Act and expressed concern that the proposed bill might be in violation of the Federal Law.

The Board agreed by consensus to oppose the bill.

v. HB2729, HD2 Relating to Cannabis for Medical Use

The Board discussed the above bill.

Ms. Quiogue provided the following update regarding the bill's current version:

HD1: Amends the reciprocity program and adds a visiting patient certifying fee. Extends expiration of a written certification to 3 years for chronic conditions. Permits retesting of a failed batch of medical cannabis or products. Permits dispensary licensees to distribute devices that provide safe pulmonary administration. Increases the maximum allowable tetrahydro cannabinol limit for multi-pack cannabis products and single containers of oil.

w. HB1893, HD1 Relating to Health

The above bill was reviewed and discussed in detail at the previous meetings. The Board is monitoring the above bill.

The purpose of the bill is to allow for the medical use of cannabidiol products upon approval by the Federal Food and Drug Administration.

x. SB2727 Related to Health

The above bill was reviewed and discussed in detail at the previous meetings. The Board is monitoring 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.

y. HB2739, HD1 Relating to Health

The above bill was reviewed and discussed in detail at the previous meetings. The Board is monitoring the above bill.

The purpose of the bill is to establish a regulatory process under which an adult resident of the State with a medically confirmed terminal disease and less than six months to live may choose to obtain a prescription for medication to end the patient's life. Imposes criminal sanctions for tampering with a patient's request for a prescription or coercing a patient to request a prescription.

Advisory
Committees:

- a. Physician Assistants
- b. Emergency Medical Personnel
- c. Podiatrists

Open Forum: None

Next Meeting: Thursday, April 12, 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 3:45 p.m.

Reviewed and approved by:

Taken and recorded by:

/s/ Ahlani Quiogue
(Ms.) Ahlani K. Quiogue
Executive Officer

/s/ Olga Reppun
(Ms.) Olga Reppun
Secretary

AKQ:or
04/04/18

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(x)

Minutes approved as is.
Minutes approved with changes: see minutes of 04/12/2018 meeting.

HAWAII MEDICAL BOARD 03/08/2018-RATIFICATION LIST

LTYPE LIC NUM BP NAME PART 1

MD 19455 FRANKLIN W <GOLDWIRE<
MD 19456 SHANA R <THEOBALD<
MD 19457 REBECCA M <ONEY<
MD 19458 TINA M <PASSALARIS<
MD 19459 TERESA G <HAYES<
MD 19460 SAIFUDDIN <KASUBHAI<
MD 19461 ZAO <ZHANG<
MD 19462 BENNETT O W <LEE<
MD 19463 NICOLE B <KURATA<
MD 19464 PAMELA L <KENNEY<
MD 19465 MARK R <VILLARIN<
MD 19466 TIFFINIE R <MERCADO<
MD 19467 CATHERINE E <DODDS<
MD 19468 YOUSEF <EL-GOHARY<
MD 19469 JOHN A <STAHL<
MD 19470 EMILY N <SUMNER<
MD 19471 MARK A <WIECHERT<
MD 19472 WILLIAM P <MANSFIELD<
MD 19473 JOHN <ELLIS<
MD 19474 LUIS <VELASQUEZ<
MD 19475 GANESH L <DEVENDRA<
MD 19476 JOSEPH G <WIEDERMANN<
MD 19477 JAMES W <O'BRIEN<
MD 19478 MICHAEL M <HOVSEPIAN<
MD 19479 ERNEST T <OSTERMANN<

MD 19480 SCOTT T <GUTHRIE<
MD 19481 KIT SHAN <LEE<
MD 19482 MIN C <KIM<
MD 19483 MICHAEL N <KABAR<
MD 19484 JEANETTE M <CARPENTER<
MD 19485 UPENDRA <MADDINENI<
MD 19486 ANRIADA <NASSIF<
MD 19487 MATTHEW R <WILLIAMS<
MD 19488 AVIVA P <AIDEN<
MD 19489 MICHAEL T <SHICK<
MD 19490 JENNIFER MARIE S I <BEAIR<
MD 19491 IAN P <BROWN<
MD 19492 BRIAN J <KEEGAN<
MD 19493 ANDREW W <PARLIN<
MD 19494 NICOLE R <AGOSTINELLI<
MD 19495 LINDA L <BERKLEY EDDO<
MD 19496 CHARMIAN L T <LEWIS<
MD 19497 JUSTIN T <HUGGINS<
MD 19498 PRACHAK <SIRIPRAKORN<
MD 19499 TROY H <MAETANI<
MD 19500 JON C <CARTER<
MD 19501 VICTOR <PACHECO-FOWLER<
MD 19502 JOHN G <GALE< JR
MD 19503 DAVID M <ROSENTHAL<
MD 19504 MARGARET A <COPLIN<
MD 19505 KEYVAN <HARIRI<
MD 19506 GREGORY S <MCFADDEN<
MD 19507 MICHAEL A <MECCA<
MD 19508 MICHAEL P <DEL DO<
MD 19509 BRADLEY N <YOUNGGREN<

MD 19510 JESSICA L <LANGENHAN<

MD 19511 MARCELO <VENEGAS-PIZARRO<

AMD 813 0 HEATHER K <WILBER<

DOS 1867 0 06/30/2018 JEREMY C <KORT<

DOS 1868 0 06/30/2018 BARBARA L <BAKUS<

DOS 1869 0 06/30/2018 CHRISTINA M <YANG<

DOS 1870 0 06/30/2018 JACLYN J <TOLENTINO<

DOS 1871 0 06/30/2018 RITU <GUPTA<

DOS 1872 0 06/30/2018 AARON B <BOOR<

DOS 1873 0 06/30/2018 MARTIN A <SENICKI<

DOS 1874 0 06/30/2018 RICHARD P <SMITH<

DOS 1875 0 06/30/2018 JENA Y <NAKATA<

DOS 1876 0 06/30/2018 LAURA E <LOCKWOOD<

DOS 1877 0 06/30/2018 DEREK B <JOHNSON<

DOS 1878 0 06/30/2018 ELIZABETH D <FIGA<

MDR 7451 0 03/31/2018 WESTON <SACCO<

MDR 7452 0 05/31/2018 MARK G <PRODGER<

MDR 7454 0 05/05/2018 WENJIA <ZHANG<

MDR 7455 0 04/30/2018 CHARLOTTE <DELEO<

EMT 2826 0 01/31/2020 ALVIN T <TURLA<

EMT 2827 0 01/31/2020 AUGGIE R A <ALVAREZ<

EMT 2828 0 01/31/2020 HARLAN K <TAMAYE<

EMT 2829 0 01/31/2020 DEVIN T <TANAKA<

EMT 2830 0 01/31/2020 STEPHANIE M <TAVAJIAN<

EMT 2831 0 01/31/2020 CHAD K <WISSING<

EMT 2832 0 01/31/2020 NOA A K <TERADA-PAGDILAO<

EMTA 17 0 01/31/2020 JEREMY K <RHODE<
EMTA 18 0 01/31/2020 MERIKA R L <HUNTER<
EMTA 19 0 01/31/2020 LYLE K <TAMARIBUCHI<
EMTA 20 0 01/31/2020 ROBERT J <ROBINSON<
EMTA 21 0 01/31/2020 JONAH K <WILSON<
EMTA 22 0 01/31/2020 KEKOA K K <GONZALES<
EMTA 23 0 01/31/2020 DALE K <ALEJANDRO<
EMTA 24 0 01/31/2020 MICHAEL E <CALLOWAY<
EMTA 25 0 01/31/2020 RAYMUND <MANUEL<
EMTA 26 0 01/31/2020 RANDY B <DELOS SANTOS<
EMTA 27 0 01/31/2020 ALLISON A <NIHEI<
EMTA 28 0 01/31/2020 MATTHEY C <BELLUOMINI<
EMTA 29 0 01/31/2020 REYNOLD S <MATTHEWS<
EMTA 30 0 01/31/2020 JUSTIN M <SABIO<

EMTP 2182 0 01/31/2020 CHERYL A <KELLEY<
EMTP 2185 0 01/31/2020 JUSTIN W <MORS<