



UNIVERSITY OF HAWAII SYSTEM

‘ŌNAEHANA KULANUI O HAWAII

Legislative Testimony

Hō'ike Mana'o I Mua O Ka 'Aha'ōlelo

Testimony Presented Before the
House Committee on Consumer Protection and Commerce
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SB 1245 SD2 HD1 – RELATING TO PHARMACISTS

Chair Matayoshi, Vice Chair Chun, and Members of the Committee:

Thank you for the opportunity to submit testimony on SB 1245 SD2 HD1. The University of Hawai'i at Hilo (UH Hilo) supports SB 1245 SD2 HD1, which mandates reimbursement for services provided by participating registered pharmacists practicing within their scope of practice by private and public health plans in the State.

Pharmacists are among the most trusted and accessible health care professionals, with about 90% of Americans living within 5 miles of a pharmacy. With their doctoral level of training, pharmacists can provide high quality services, particularly related to the safe and effective use of medications. Most relevant to Hawai'i is the improved access to health care services when pharmacists are able to provide preventative care such as a vaccinations and health screenings (e.g. blood pressure, A1C testing for diabetes), and chronic disease state management (e.g. regular visits with their pharmacists within their health systems to monitor disease states that are treated with medications and make adjustments as needed). This facilitates access to high quality health care while reducing the burden on physicians for routine chronic disease state management once the diagnosis is made.

For example, a pharmacist may receive a physician referral for a specific area of care (diabetes, blood pressure, asthma). To address the patient's specific need, the pharmacist must initially conduct a review of the entire medication profile from a generalist standpoint. For example, a diabetes certified pharmacist may receive a referral to initiate and maintain a diabetes medication(s) and monitor the disease. In order to manage the diabetes itself, the pharmacist must address the entire medication profile and all of the patient's disease states, especially chronic diseases that include major organ systems such as heart, kidney, and liver. Ongoing management through regularly scheduled visits with the patient of all medications and diseases is performed

on a routine basis, with the patient being part of the pharmacist's panel for ongoing management. In this way, a patient with a chronic disease state can receive high quality of care from a doctoral level trained health professional, while relieving the burden on physicians. This is especially important for rural and underserved communities, including Hawai'i island where we have only 59% of the physicians needed.

These pharmacist services are routinely provided in select in-patient, out-patient and community/retail settings in Hawai'i, but because pharmacists are unable to be directly reimbursed for many of these services, building budget models that can sustainably pay for and expand these needed services are a challenge. SB 1245 SD2 HD1 will provide a path forward.

The University of Hawai'i is aware that the Hawai'i Pharmacists Association is proposing additional modifications to this bill to substitute stricter language related to networking, credentialing, and payment. We support these changes because they provide additional clarity that will facilitate implementation should this bill be passed.

It should be noted that a similar bill was introduced in the 2023 legislative session (SB693) and a subsequent audit (SCR17) for financial and social assessment of pharmacy services under the medical benefit did not find any additional costs to the State or Hawai'i healthcare plans.

Thank you for the opportunity to testify in support of SB 1245 SD2 HD1.