

LATE TESTIMONY

EXECUTIVE CHAMBERS
HONOLULU

LINDA LINGLE
GOVERNOR

Written Testimony of Linda L. Smith
Senior Policy Advisor to the Governor

Before the

House Committee on Health

March 12, 2008
8:00 AM

Senate Bill 2160, Proposed HD1

Representative Green and Members of the Committee:

The Lingle-Aiona Administration strongly supports the proposed HD1 to Senate Bill 2160. We are committed to initiatives that expand access to quality health care and we commend the Chair for his efforts on medical liability reform.

Hawaii's health care system suffers because of a physician shortage, especially in specialty areas. The Administration strongly believes that the enactment of medical liability reform legislation is one of the best ways to address this issue and to retain and recruit a strong physician workforce in our State. Many health care industry officials are here today who will again articulate this problem and the need for reform. The time is now to come together to address their concerns.

The Administration understands that medical malpractice reform is a complex and emotional issue. Although we may not agree on all the details, we believe we must work together to get a bill passed this year. Again, the Administration extends its gratitude to the Chair for bringing this important issue before the Committee.

000047



LATE
Testimony

The Judiciary, State of Hawaii

Testimony to the Twenty-Fourth State Legislature, 2008 Session

House Committee on Health

The Honorable Josh Green, M.D., Chair

The Honorable John Mizuno, Vice Chair

Wednesday, March 12, 2008, 8:00 a.m.

State Capitol, Conference Room 329

by

Dee Dee Letts

First Circuit Treatment Court Coordinator

Bill No. and Title: Senate Bill No. 2160, S. D. 2, Relating to Health.

Purpose: Requires the Department of Health to submit an annual report on forensic patients; requires yearly court status hearings for individuals ordered to be conditionally released or hospitalized as an inpatient by the mental health court; reduces the minimum length of hospitalization from ninety to thirty days for individuals who are recommitted after conditional release; makes appropriation for mental health court operations.

Judiciary's Position:

The Judiciary takes no position on the sections of Senate Bill No. 2160, S. D. 2, relating to conditional release and supports the technical language changes and the inclusion of language from Senate Bill No. 3071 submitted by the Department of Health as made by the Senate Committee on Ways and Means. Generally speaking, the intent of this omnibus bill is consistent with the report of the SCR 117 Task Force (2006), in which the Judiciary participated.

The Judiciary supports Section 6 of this bill that appropriates monies to support the operation and expansion of the mental health court. Since its inception in February 2004, the mental health court has operated entirely on federal funding provided by grants through the Office of the Attorney General. This funding will end in December 2008.

000048



Senate Bill No. 2160, S. D. 2, Relating to Health
House Committee on Health
March 12, 2008
Page 2

The mental health court was started in response to statistics which showed that more than 16% of the adults incarcerated in the United States have a serious and persistent mental illness. The court is currently operating at capacity and had its first graduation on February 19, 2008. Aside from the obvious benefits of providing better outcomes for its clients, improving public safety, and significantly reducing recidivism in this population, the diversion of these clients also saves the corrections system on Oahu approximately \$90,882 per client per year. In the words of our first graduates: "I used to think of 100 reasons to use, now I think of 100 reasons not to" and "this program gives hope".

Senate Bill No. 2160, S. D. 2, if funded at the level requested below will provide the Judiciary the necessary funds to continue providing Mental Health Court services at the existing level as well as provide funds to explore the expansion of the court into the area of conditional release clients. The amounts requested include \$241,522 for FY 08-09, \$327,346 each year for FY 09-10 and FY 10-11. The requested funding would allow the Judiciary to cover staffing and client services costs (i.e., assessment, training, etc.), to increase the number of clients served from 30 to 50, and to explore expanding the program to deal with the population on conditional release. We would also like to note that the Prosecuting Attorney's Office and the Public Defender's Office are partners with the Judiciary's Mental Health Court and should receive additional funding to support their continued role in providing attorneys for this court.

Thank you for the opportunity to comment on this measure.

000049

mizuno1-Edgar

From: chris taylor [dr_ct1@yahoo.com]
Sent: Thursday, March 13, 2008 8:24 AM
To: HLTtestimony
Subject: medical tort reform

**LATE
Testimony**

March 11, 2008

*Rep. Josh Green, M.D., Chair
Rep. John Mizuno, Vice Chair
House Health Committee
Hearing Scheduled for: Wednesday March 12, 8:00 am, Room 329*

*From:
Christopher A. Taylor, MD
615 Piikoi St Ste 1210
Honolulu, HI 96814
(808) 596-7300*

Re: SB2160 SD2, HD1 Relating to Medical Liability

I strongly support SB2160 SD2, HD1 for the following reasons:

- There is a very real shortage of physicians in Hawaii . Physicians in critical specialties are leaving or cutting back their practice, and every day more and more people do not have access to health care when they need it most.*
- We can remove some of the uncertainty of practicing medicine in Hawaii and stop the exodus or scaling back of practices by doctors if the legislature will pass medical liability reform to bring medical malpractice insurance premiums under control.*
- Research by the American Medical Association and Hawaii Insurance Commissioner has confirmed that medical liability reform will reduce malpractice premiums.*
- Medical liability reform based on the Texas model needs to be passed this session to stop the exodus of doctors and provide the access to health care that the people of Hawaii deserve.*

Thank you for the opportunity to provide this testimony.

Sincerely,

Christopher Taylor, MD

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000050



LATE TESTIMONY

75-5737 Kuakini Hwy., Suite 208
Kailua-Kona, HI 96740
Phone: 808-329-1758 Fax: 808-329-8564
www.kona-kohala.com konakcc@gte.net

March 11, 2008

TO: HOUSE HEALTH COMMITTEE
Rep. Josh Green, M.D., Chair
Rep. John Mizuno, Vice Chair

FROM: Kona-Kohala Chamber of Commerce (in lieu of in-person testimony)
via email

SUBJECT: **Support of SB2160 SD2, HD1 Relating to Medical Liability**
Hearing Scheduled for: Wednesday March 12, 8:00 am, Room 329

The Kona-Kohala Chamber of Commerce (KKCC) represents nearly 700 business members and is the leading business advocacy organization on the west side of Hawai'i Island. The KKCC also actively works to enhance the environment, unique lifestyle and quality of life in West Hawai'i.

The Kona-Kohala Chamber of Commerce strongly supports SB2160 SD2, HD1 addressing medical malpractice insurance costs. In February of 2007, our Chamber was asked by Mayor Kim to address the health care crisis. We responded by forming a Health Care Task Force and invited our Chamber members, including health care providers, to sit on this task force. Over 45 people responded to the call. The first order of business was to outline the problems associated with providing health care to our community. Medical malpractice was listed as one of the top issues.

We understand the issue of health care costs and the health care crisis we are now experiencing will continue to worsen should there not be some changes made within the system. Difficulty in securing and retaining qualified physicians and other health care workers has resulted in a serious shortage and created a lack of medical services to our community. This trend cannot be allowed to continue.

This measure will not solve the health care crisis, but will take a positive step forward in bringing about measures that can bring medical malpractice insurance premiums under control, one step forward in the right direction

We urge you to pass this Bill and work on additional measures that will bring our health care status out of a crisis situation. Thank you.

Sincerely,

A handwritten signature in cursive script that reads "Vivian Landrum".

Vivian Landrum
Executive Director

000051

Gordon C. Ontai, M.D., Inc.

Obstetrics and Gynecology

THE QUEEN'S PHYSICIAN OFFICE BUILDING II

1329 LUSITANA ST., SUITE 201

HONOLULU, HAWAII 96813

TELEPHONE: 523-9300 — PHYSICIANS EXCHANGE: 524-2575

March 11, 2008

LATE TESTIMONY

Rep. Josh Green, M.D., Chair

Rep. John Mizuno, Vice Chair

House Health Committee

Hearing Scheduled for : Wednesday March 12, 8:00 am, Room 329

Fax: 586-6161

Re: SB2160 SD2, HD1 Relating to Medical Liability

I strongly support SB2160 SD2, HD1 for the following reasons:

- There is a very real shortage of physicians in Hawaii. Physicians in critical specialties are leaving or cutting back their practice, and every day more and more people do not have access to health care when they need it most.
- We can remove some of the uncertainty of practicing medicine in Hawaii and stop the exodus or scaling back of practices by doctors if the legislature will pass medical liability reform to bring medical malpractice insurance premiums under control.
- Research by the American Medical Association and Hawaii Insurance Commissioner has confirmed that medical liability reform will reduce malpractice premiums.
- Medical Liability reform based on the Texas model needs to be passed in this session to stop the exodus of doctors and provide the access to health care that the people of Hawaii deserve.

Thank you for the opportunity to provide this testimony.



Gordon C. Ontai, M.D.

000052

Hawaii Pacific Health

55 Merchant Street • Honolulu, Hawaii 96813 • hawaiiapacifichhealth.org

Wednesday - March 12, 2008 - 8:00am
Conference Room 329

LATE TESTIMONY

The House Committee on Health

To: The Honorable Joshua Green, M.D., Chair
The Honorable John Mizuno, Vice Chair

From: Virginia Pressler, MD, MBA
Executive Vice President

Re: **Testimony in Support: SB2160 SD2 HD1 Relating to Medical Liability**

Dear Honorable Committee Chairs and Members:

My name is Virginia Pressler, Executive Vice President for Hawaii Pacific Health (HPH). For more than a century, families in Hawaii and the Pacific Region have relied on the hospitals, clinics, physicians and staff of Hawaii Pacific Health as trusted healthcare providers. Our non-profit integrated healthcare system is the state's largest healthcare provider and is committed to improving the health and well-being of the people of Hawaii and the Pacific Region through its four hospitals -- Kapi`olani Medical Center for Women & Children, Kapi`olani Medical Center at Pali Momi, Straub Clinic & Hospital and Wilcox Memorial Hospital -- 18 outpatient centers and a team of 1,100 physicians on the islands of Oahu, Kauai and Lanai.

I am writing in **support of SB2160 SD2 HD1** which aims to address access to specialty care by placing a cap on medical malpractice insurance claims for non-economic damages. Hawaii Pacific Health is in strong support of measures which seek to reduce the barriers in accessing medical specialty care experienced by neighbor isle and rural Oahu residents. As this is a multi faceted problem involving among others -- low third party government reimbursement, high uninsured population rates, and the economics of delivering specialty services over a unique multi-island geography - we believe that part of the solution may lie in tort reform.

There is a very real shortage of physicians in Hawaii. Physicians in critical specialties are leaving or cutting back their practice, and every day more and more people do not have access to health care when they need it most. We can remove some of the uncertainty of practicing medicine in rural areas in Hawaii and curtail the exodus of physicians by working to reduce malpractice insurance premiums.

Thank you for the opportunity to provide this testimony.

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KAPI'OLANI
MEDICAL CENTER
AT PALI MOMI



KAPI'OLANI
MEDICAL CENTER
FOR WOMEN & CHILDREN



Straub
CLINIC & HOSPITAL

 **Wilcox Health**

March 11, 2008

LATE TESTIMONY

Rep. Josh Green, M.D., Chair
Rep. John Mizuno, Vice Chair

House Health Committee
Hearing Scheduled for: Wednesday March 12, 8:00 am, Room 329

From:

Robert C Durkin MD
2721 Huapala St, Honolulu, HI 96822
(808) 988-9731

Re: SB2160 SD2, HD1 Relating to Medical Liability

Last year, I almost lost my middle son, Aidan age 5, to acute encephalitis (severe brain swelling). Through the quick action of the doctors and specialists at Kapi'olani Medical Center for Women & Children, he was revived after one week in intensive care on a breathing machine. He has made a complete recovery. Luckily, we were not traveling on the North Shore or visiting a neighbor island when he suddenly collapsed into a coma as his outcome would have been far worse. Any delay in life-saving care due to the lack of ready access to specialists in these areas would have left him severely compromised or dead. If the outcome had not been optimal, then I am sure the small but vocal special interest group represented by personal injury lawyers would have found some way to turn the blame to seek some magnificent settlement. But, frankly, what is most important to me is that my little boy is healthy and enjoying Kindergarten at Manoa Elementary School. I bet most residents and visiting guests to Hawaii would feel the same.

I strongly support SB2160 SD2, HD1 for the following reasons:

- *There is a very real shortage of physicians in Hawaii. Physicians in critical specialties are leaving or cutting back their practice, and every day more and more people do not have access to health care when they need it most.*
- *We can remove some of the uncertainty of practicing medicine in Hawaii and stop the exodus or scaling back of practices by doctors if the legislature will pass medical liability reform to bring medical malpractice insurance premiums under control.*
- *Research by the American Medical Association and Hawaii Insurance Commissioner has confirmed that medical liability reform will reduce malpractice premiums.*

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- Medical liability reform based on the Texas model needs to be passed this session to stop the exodus of doctors and provide the access to health care that the people of Hawaii deserve.

Thank you for the opportunity to provide this testimony.

Robert C Durkin, Manoa

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mizuno1-Edgar

From: Vince K. Yamashiroya [yamashirv002@hawaiiintel.net]
Sent: Tuesday, March 11, 2008 2:54 PM
To: HLTtestimony
Subject: SB2160 SD2, HD1 Relating to Medical Liability

LATE TESTIMONY

March 11, 2008

*Rep. Josh Green, M.D., Chair
Rep. John Mizuno, Vice Chair
House Health Committee
Hearing Scheduled for: Wednesday March 12, 8:00 am, Room 329*

*From:
Vince Yamashiroya
1010 South King Street, Suite 105
Honolulu, HI 96814
(808) 596-2030*

Re: SB2160 SD2, HD1 Relating to Medical Liability

I strongly support SB2160 SD2, HD1 for the following reasons:

- There is a very real shortage of physicians in Hawaii. Physicians in critical specialties are leaving or cutting back their practice, and every day more and more people do not have access to health care when they need it most.*
- We can remove some of the uncertainty of practicing medicine in Hawaii and stop the exodus or scaling back of practices by doctors if the legislature will pass medical liability reform to bring medical malpractice insurance premiums under control.*
- Research by the American Medical Association and Hawaii Insurance Commissioner has confirmed that medical liability reform will reduce malpractice premiums.*
- Medical liability reform based on the Texas model needs to be passed this session to stop the exodus of doctors and provide the access to health care that the people of Hawaii deserve.*

Thank you for the opportunity to provide this testimony.

Vince Yamashiroya, M.D., FAAP
General Pediatrics in Private Practice and Clinical Associate Professor of Pediatrics at the University of Hawaii

Medical Arts Building
1010 South King Street, Suite 105
Honolulu, Hawaii 96814

Tel: (808) 596-2030; Fax (808) 596-2034
yamashirv002@hawaii.rr.com; www.vinceyamashiroya.yourmd.com

000056

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3/11/2008

LATE TESTIMONY

CLAUDINE M. TOMASA

1268 MOKAPU BLVD

KAILUA, HAWAII 96734

TESTIMONY SUPPORTING SB2160 SD2, HD1 RELATING TO MEDICAL LIABILITY

March 12, 2008

Rep. Josh Green, M.D., Chair
Rep. John Mizuno, Vice Chair

House Health Committee
Hearing Scheduled for: Wednesday March 12, 8:00 am, Room 329

Re: SB2160 SD2, HD1 Relating to Medical Liability

Good morning Chair Green, Vice Chair Mizuno, and members of the Committee on Health. My name is Claudine M. Tomasa, I am a Registered Nurse and a long time Kailua Resident testifying in support of SB2160SD2, HD1 for the following reasons:

- There is a very real shortage of physicians in Hawaii . Physicians in critical specialties are leaving or cutting back their practice, and every day more and more people do not have access to health care when they need it most. As a long time OB Nurse working with pregnant women throughout the State of Hawaii, I am much aware of this grave shortage, particularly on the neighbor islands- Molokai and the Big Island of Hawaii. Pregnant women must fly to Oahu for OB care especially if they are considered "high risk." Is this fair for tax paying citizens of Hawaii?
- We can remove some of the uncertainty of practicing medicine in Hawaii and stop the exodus or scaling back of practices by doctors if the legislature will pass medical liability reform to bring medical malpractice insurance premiums under control. Between 1975 and 1992 I worked at Kapiolani Medical Center with many promising physicians -doing their four year residency in Obstetrics/Gynecology- with plans of going out to the community to provide care for Hawaii's women. It has been over 20 years- and most of these brilliant physicians will no longer provide OB services

000057

because of the uncertainty of practicing medicine in this wonderful State of Hawaii.

- Research by the American Medical Association and Hawaii Insurance Commissioner has confirmed that medical liability reform will reduce malpractice premiums.
- Medical liability reform based on the Texas model needs to be passed this session to stop the exodus of doctors and provide the access to health care that the people of Hawaii deserve.
- Hawaii can no longer afford to loose more of our physicians- especially specialists. This is a public health/ public safety issue that is turning into a CRISIS.

Thank you for the opportunity to provide this testimony supporting SB2160 SD2 HD1.

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2



March 12, 2008

LATE TESTIMONY

PLEASE DELIVER to:

Health Committee

Wed.

3/12/08

8:00am

Room 329

To: Rep. Josh Green, M.D., Chair
Rep. John Mizuno, Vice Chair
House Health Committee

From: Paula Arcena, Executive Director
Hawaii Medical Association

Re: SB2160, SD2, HD1 Proposed, Relating to Health

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Thomas Kosasa, MD
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Jonathan Cho, MD
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Paula Arcena
Executive Director

Thank you for the opportunity to testify on SB2160, SD2, proposed HD1 Relating to Health.

The proposal that the Hawaii legislature enact medical tort reform has received much discussion this session. In addition, there has been heavy media coverage of the issue because the crisis is having a serious affect on the availability of patient care in our community.

I would like to take this opportunity to discuss some of the arguments that have been made against medical tort reform.

Medical Errors are the Real Problem

Opponents of medical tort reform claim that the real solution to lowering the malpractice premiums for physicians is to reduce medical errors.

This is untrue. Removing "incompetent" physicians based on how many times they have been sued or have been found liable for negligence would be an ineffective method of trying to resolve the crisis because of the randomness of the litigation system.

Also, according to the U.S. Department of Health and Human Services, researchers have found that most errors are system failures, rather than failures of individual physicians. That is to say, most errors occur even though physicians perform their jobs correctly. According to experts, since medical liability payments correlate with disability and not negligence, a better approach to reducing errors and improving patient safety would be to create a confidential, voluntary reporting system in which physicians and other health care providers could report information on errors to entities to be known as Patient Safety Organizations.

Increasing reimbursements is the solution

Opponents have asserted that inadequate reimbursement is the primary economic issue for physicians in Hawaii. And, if HMSA and other health insurers would increase their reimbursements to physicians, they would not have a problem.

Hawaii Medical Association
1360 S. Beretania St.
Suite 200
Honolulu, HI 96814
(808) 536-7702
(808) 528-2376 fax
www.hmaonline.net

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The fact is that reimbursement and medical liability reform are both important for different reasons.

For specialists such as orthopedic surgeons, neurosurgeons and others who have seen their medical malpractice premiums skyrocket in the last 5 years, medical tort reform is vital. Without it, they are forced to cut back their practices or leave the islands altogether.

There is clear evidence that Hawaii's supply of these specialists is shrinking. In a 2004 survey of Hawaii Obstetricians/Gynecologists, 42% plan to stop providing pregnancy care for women, largely because of malpractice issues. Over the past 10 years, Hawaii has lost 20 orthopedic surgeons, a decrease from 68 to 48. Queen's Trauma Center has had only two orthopedic surgeons on call, recently adding a third, who will take one day of call per week.

For other physicians of other specialties, it's equally or more important for HMSA and others to increase their reimbursements to physicians to help cover the true cost of medical treatment.

Regardless, Hawaii requires all physician specialists in order for our healthcare system to function.

Hawaii does not have a physician shortage

Citing, Hawaii State Data Book statistics, opponents claim that Hawaii does not have a physician shortage and Hawaii is in fact gaining physicians.

This is a misleading representation of statistics on licensed physicians in Hawaii.

Statistics from the Hawaii State Data Book indicate the number of licensed physicians and whether they have a Hawaii, mainland or foreign mailing address. There are no statistics available on how much care is available from Hawaii licensed physicians.

In other words, there is no data to show whether a physician is retired from practice but maintaining a license, a part-time resident who lives elsewhere, performing an administrative job rather than providing clinical care, whether there are limitations on the physicians practice such as part-time practice, or whether the physician has stopped performing high-risk treatment and surgery or stopped volunteering for emergency or trauma duty.

According to the Board of Medical Examiners, compared to other states, Hawaii has an unusually high proportion of licensed physicians who live elsewhere.

Excessive Premiums

The opposition has stated that malpractice insurance companies are making excessive premiums to make a profit.

This is simply untrue.

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Hawaii has only three malpractice insurance companies remaining, all are not for profit physician operated and owned. The for-profit companies have long gone because it is no longer profitable to offer malpractice insurance in Hawaii.

Over the past decade, the average cost to settle and defend the Hawaii claims have increased significantly. The average indemnity payment increased by 73% for Hawaii's major insurer, Medical Insurance Exchange of California. The average was \$145,358 for 1995-1999 and increased to \$251,438 for 2000-2004. Similarly, average defense costs increased by 75.5% for the same periods from \$36,419 to \$63,904.

Opponents have also claimed that insurance companies raised premiums to make up for losses in the stock market. Contrary to that claim, medical liability premiums are strictly tied to estimates of future paid losses. There is no possible way to raise rates in order to cover losses – whether in the stock market or anywhere. (Source: Best's Aggregates & Averages, Property-Casualty, 2005).

Malpractice premiums are declining

Critics of medical tort reform have said that premiums for doctors have been falling in Hawaii. They cite that MIEC gave Hawaii physicians a \$5 million premium credit, which represented an average rate reduction of 7.5%, and the lower rates have held steady for 2006 and 2007.

The fact is that Hawaii's average annual Medical malpractice insurance premium increased 90% from \$33,000 to \$63,000 between 2002 and 2006 for physician specialists who provide high risk, life-saving treatment, due to the cost of defending malpractice cases filed in Hawaii. The fact that rates have stabilized for the moment is little consolation. What's important to understand is that the uncertainty of medical malpractice suits when there is no cap on non-economic damages creates an untenable risk environment for physicians.

Physicians prefer to live in urban over rural areas

Opponents have claimed that physicians prefer an urban rather than rural lifestyle and there for medical tort reform will do nothing to get physicians to move to Neighbor Islands and rural areas.

HMA does not believe that that is necessarily true. Patients did not always need to be flown to Queen's Medical Center for broken bones. It used to be that neighbor islands had orthopedic surgeons and other high risk specialists to provide local communities with the medical care they needed. Not true now.

In Texas, where medical liability reform has been passed, rural areas are seeing an increase in physicians. For example, critical specialties have increased in underserved areas such as Rio Grande Valley which gained 189 physicians.

Medical tort reform will not lower premiums

The opposition will claim that there is no proof that limiting medical malpractice laws results in lower insurance rates, or less costs for doctors. In fact, they say that medical malpractice claims in Hawaii have actually dropped 34% from 173 claims in 2001 to 115 claims last year.

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The fact is that medical liability reform works.

The Insurance Division of the Hawaii Department of Commerce and Consumer Affairs recently completed an actuarial study demonstrating that Hawaii's premiums would decrease by 12-18% if medical tort reform is enacted.

Other new independent research on medical liability reforms continues to show that caps on non-economic damages are effective in lowering medical liability premiums by at least 17%, depending on the specialty.

And, more important than the number of claims filed in Hawaii is that 86% of claims filed against insured Hawaii physicians are found to be without merit and result in no payment to the claimant. Further, the Medical Claims Conciliation Panel of Hawaii found no negligence in 82% of the cases it reviewed.

We need a cap on non-economic damages to reign in this uncontrolled litigation that's driving up malpractice premiums and driving physicians away from Hawaii.

Deprives plaintiffs of damages

It has been often suggested that medical tort reform denies victims legal remedy by capping medical liability damages.

This is untrue. The medical liability reform we support establishes a cap of \$250,000 only on non-economic damages for things like pain and suffering in order to get the uncontrolled costs that drive up premiums under control. There is still NO CAP on economic damages, such as medical costs and present and future lost income.

Absent medical tort reform, we are actually creating more victims — patients who cannot get medical help when they need it because of a physician shortage driven by the escalating malpractice premiums for physicians in Hawaii.

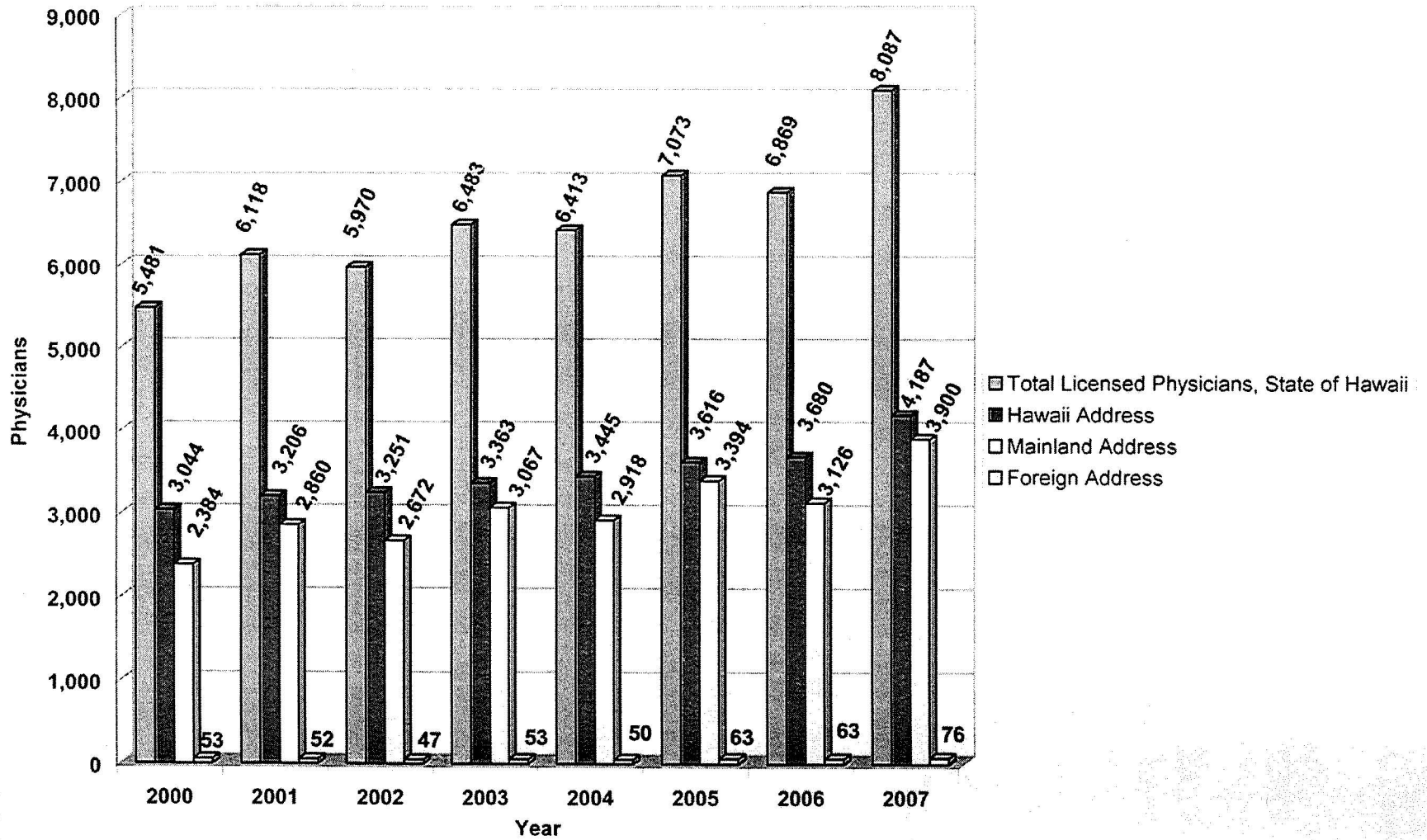
That concludes my testimony. I would be glad to answer any questions you may have.

Thank you for the opportunity to testify.

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2000-2007 Licensed Physicians

Source: Hawaii State Data Book



000063



March 11, 2008

Rep. Josh Green, M.D., Chair
Rep. John Mizuno, Vice Chair
House Health Committee

LATE TESTIMONY

Hearing Scheduled for: Wednesday March 12, 8:00 am, Room 329

From:

Pamela McKenna M.D. FAAP
65-1267 Kawaihae Rd., Kamuela, Hi. 96743
808-885-7111

Re: SB2160 SD2, HD1 Relating to Medical Liability

I strongly support SB2160 SD2, HD1 for the following reasons:

There is a very real shortage of physicians in Hawaii. Physicians in critical specialties are leaving or cutting back their practice, and every day more and more people do not have access to health care when they need it most. I am a Physician and have no doctor to attend to me – that's a Doctor shortage! Big Island is critical.

We can remove some of the uncertainty of practicing medicine in Hawaii and stop the exodus or scaling back of practices by doctors if the legislature will pass medical liability reform to bring medical malpractice insurance premiums under control.

Research by the American Medical Association and Hawaii Insurance Commissioner has confirmed that medical liability reform will reduce malpractice premiums; it has worked well for other states. Texas now has a 6 month waiting list for licensure.

Medical liability reform based on the Texas model needs to be passed this session to stop the exodus of doctors and provide the access to health care that the people of Hawaii need and richly deserve.

Thank you for the opportunity to provide this testimony.

PC McKenna M.D.

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65-1267 Kawaihae Road



Maui Health Care Initiative Task Force

c/o Hawaii State Health Planning and Development Agency
1177 Alakea St. #402, Honolulu, HI 96813
Phone: (808)-587-0788
FAX: (808)-587-0783
Email: shpda@doh.hawaii.gov
www.shpda.org

**Meetings are
Open to the Public**
Maui Contact Information
871-7749
264-0491
rbarreras@hawaiiantel.net

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March 11, 2008

LATE TESTIMONY

Rep. Josh Green, M.D., Chair
Rep. John Mizuno, Vice Chair
House Health Committee
Hawaii State Capitol, Room 327
415 South Beretania Street
Honolulu, HI 96813

Re: SB2160 SD2, HD1 Relating to Medical Liability
Hearing Schedule for Wednesday, March 12, 2008 8 a.m.

Dear Chairman Green and Vice-Chair Mizuno:

The Maui Health Initiative Task Force, established pursuant to Section 2 of Act 219 Session Laws of Hawaii 2007, supports tort reform legislation as a means of addressing the high cost of medical malpractice premiums and the impact that it has on the ability to attract and retain healthcare workforce and facilities.

In its report to the Legislature, the task force points out that supporting tort reform in the area of medical malpractice litigation includes, without limitation, caps on non-economic damages and legislation to protect efforts by hospitals, doctors, and other experts, and to improve quality by encouraging reporting of needed information about medical errors and collaborative use of the data.

On behalf of the task force, I am transmitting this recommendation for the House Health Committee's consideration. Please contact me at 264-0491 should you have any questions.

Sincerely,

Rita Barreras, Chair
Maui Health Care Initiative Task Force

cc: House Committee members
Task Force members

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Act 219, signed in to law on June 28, 2007, creates the Maui Health Care Initiative Task Force within the state health planning and development agency (SHPDA) for administrative purposes to develop a comprehensive strategic health plan for the county of Maui. SHPDA and the Department of Health provide technical and administrative support to the task force. Members are appointed by the Mayor of the County of Maui, the President of the Senate and the Speaker of the House.

Ko'olau Clubhouse
March 12, 2008

To: Representative Josh Green, Chair
Representative John Mizuno, Co-Chair

My name is Earl Maeda and I am a member of the Ko'olau Clubhouse, part of the Hawaii Clubhouse Coalition. I am a mental health consumer and have been receiving services through the Adult Mental Health Division. I am for SB 2160, Relating to Health.

I have spent time in jail years ago. Half the time I was incarcerated in the psyche module and the other half I was placed in the general population. Some incarcerated mental health consumers aren't fit for jail because they are too sick. One of the many side effects of my medication is that I get really sleepy during the day. In prison I was unable to sleep in the module during the day so I had stay up and suffer. I believe that the whole jail system does not understand what a mental health consumer goes through and what our needs are. I do believe in everyone paying for their crimes but they should be helped by professionals who understand their needs.

Please support SB2160, Relating to Health, as Mental Health Court understands the needs of consumers.

Thank you for your time,

Earl Maeda

000066

Ko'olau Clubhouse
March 12, 2008

To: Representative Josh Green, Chair
Representative John Mizuno, Co-Chair

My name is Edward Robins and I am a member of the Ko'olau Clubhouse, part of the Hawaii Clubhouse Coalition. I am a mental health consumer and have been receiving services through the Adult Mental Health Division. I am for SB 2160, Relating to Health.

I have been in jail many times for various reasons. Luckily they put me in the medical module and not the general population module because in the medical module they closely monitored my medication. Not all mentally ill people get this—some are in the general population. Many times they do not receive the right medication if they receive medication at all. This is why I support mental health court.

Please support SB2160, Relating to Health, as Mental Health Court would support mentally ill felons.

Thank you for your time,

Edward Robins

000067

Ko'olau Clubhouse
March 12, 2008

To: Representative Josh Green, Chair
Representative John Mizuno, Co-Chair

My name is Sheldon Nishimura and I am a member of the Ko'olau Clubhouse, part of the Hawaii Clubhouse Coalition. I am a mental health consumer and have been receiving services through the Adult Mental Health Division. I am for SB 2160, Relating to Health, for many reasons.

I was in prison for 8 months after committing a crime in the Big Island, where I am from. I believe in mental health court because when I was in the State Hospital I learned that it costs hundreds of dollars per day to house each incarcerated individual whether in prison or the State Hospital. Money is just one of the issues regarding this bill. The more important issue is giving the right services, support and transition that would benefit individuals. In regard to mental health consumers, they would benefit from mental health court more than by being in prison. I believe that consumers going through the process of mental health court would also benefit the community, as they would be positive, active, and contributing members of the community.

If this bill is passed it would benefit mental health consumers, save money, and help the community because clients would be reintegrated into society. So please support SB2160, Relating to Health, as Mental Health Court understands the needs of consumers.

Thank you for your time,

Sheldon Nishimura

000068

Ko'olau Clubhouse
March 12, 2008

To: Representative Josh Green, Chair
Representative John Mizuno, Co-Chair

My name is Randolph Kalahiki jr., and I am a member of the Ko'olau Clubhouse, part of the Hawaii Clubhouse Coalition. I am a mental health consumer and have been receiving services through the Adult Mental Health Division. I am for SB 2160, Relating to Health.

This bill is very important to me because I think mental health court would benefit consumers. I spent time in jail and consumers like me have a harder time in prison due to our mental illness as we have different needs from others. One example is that we need medication and get side effects from the medication. We also have symptoms from our mental illness that those in the general population do not have. I was in prison for 3 years for a non-violent crime and would have greatly benefited from mental health court.

Please support SB2160, Relating to Health, as mental health consumers who committed non-violent crimes would benefit from a program like this.

Thank you for your time,

Randolph Kalahiki jr.

000069

March 12, 2008

To:

Representative Josh Green, MD, Chair
Representative John Mizuno, Vice Chair
House Health Committee

From:

Lori Kamemoto, MD, MPH, FACOG
P.O. Box 62148
Honolulu, Hawaii 96839

Re: SB2160 SD2, HD1 Relating to Medical Liability, hearing scheduled Wednesday
March 12, 8:00 am, Room 329

I strongly support SB2160 SD2, HD1 for the following reasons.

There is a very real shortage of physicians in Hawaii. Physicians in critical specialties are leaving or cutting back their practice, and every day more and more people do not have access to health care when they need it most. This physician shortage has had particular impact on the neighbor islands. In the past four to five months, I have occasionally done locum tenens coverage for my obstetrician/gynecologist colleagues in Hilo. I have seen first hand the alarming physician shortage on the Big Island which has already adversely affected patient care.

One of the ways in which we can encourage the practice of medicine in Hawaii and stop the exodus or scaling back of practices by doctors, is if the legislature passes medical liability reform to bring medical malpractice insurance premiums and the uncertainty of practicing medicine without tort reform under control. Research by the American Medical Association and Hawaii Insurance Commissioner has confirmed that medical liability reform will reduce malpractice premiums.

Medical liability reform based on the Texas model should be passed this session to stop the exodus of doctors and provide the access to health care that the people of Hawaii deserve.

Patient health care has already been adversely affected by the lack of legislative reforms to help prevent the physician shortage on the neighbor islands. I am hopeful that the legislature will support this bill, as well as other legislation to assist in providing the excellent medical care that Hawaii's people deserve.

Thank you for the opportunity to provide this testimony.

000070

Testimony In Support of
SB2160 SD2, HD1 Relating to Medical Liability

Committee: House Health Committee

Hearing: Wednesday March 12, 2008, 8:00 am, Room 329

To: Chair, Rep. Josh Green, M.D.
Vice Chair, Rep. John Mizuno
Members of the Committee

From: Mike Abe
3556 Maunaloa Avenue
Honolulu, Hawaii 96816

Ph. 734-6603 Cell: 754-1561

Dear Chair Green, Vice Chair Mizuno, and Members of the Committee:

Thank you for holding this hearing. It is indeed unfortunate that other legislators and committees do not care enough about the health care crisis in this State to at least hold hearings and openly and honestly study all proposals that may in some way help save lives.

I take this personally. In December 2006, I was bed ridden with severe back pain. I could not walk or climb the stairs of my house without great difficulty. My immune system had shut down. At the age of 52, I was diagnosed with stage 4 prostate cancer.

But I count myself as one of the lucky ones. I had excellent doctors. Dr. Bernard Chun, my internist. Dr. Clayton Chong, my oncologist. He treated me with the most advanced treatment available.

I also had health insurance with drug coverage. It wasn't cheap paying the insurance all these years, but I'm glad I had it. I wouldn't be able to afford the doctors, medical treatment, hospital procedures, and drugs I needed.

I found out how fortunate I really am. My life could have been at even greater risk if instead of cancer, I needed emergency orthopedic surgery in Kona, Kihei, or even Kahuku. I learned how lucky my wife and I were to live in Moiliili when our daughter was born at Kapiolani Children's and Women's Hospital,

000071

rather than in Wahiawa or even Kapolei today, where hospitals can't support Obgyn's and delivery rooms.

I don't know for sure whether capping non-economic damages against doctors will cause medical malpractice insurance companies to lower premium costs for doctors and hospitals. But I know that if the costs are lowered, it would make it more economically feasible for doctors to keep practicing medicine and prevent hospitals from closing practice areas or from closing completely. I know more people's lives will be saved.

I'm not a medical malpractice lawyer, so I don't know about the economics of a malpractice case. But my guess is that medical liability reform will save more people's lives. Hundreds. Thousands.

The stakes are high. Medical liability reform has been stopped for years. But there must be a balance. I'd rather have a doctor in the house, than none at all.

I urge. No, I beg you to give medical liability reform a chance. A trial period will do. From personal experience, I'd try that new experimental medical treatment with its 50% chance of saving my life, than the 100% certainty of dying by not trying at all.

Thank you.

000072



**TESTIMONY OF THE STATE ATTORNEY GENERAL
TWENTY-FOURTH LEGISLATURE, 2008**

ON THE FOLLOWING MEASURE:

S.B. NO. , .

BEFORE THE:

HOUSE COMMITTEE ON HEALTH

DATE: Wednesday, March , 2008 **TIME:** AM

LOCATION: State Capitol Room
Deliver to: , Room , copies

TESTIFIER(S):

(For further information, please contact Adrian Kwock,
Branch Chief of Grants and Planning, Crime Prevention
Justice Assistance Division at 586-1155.)

Chair Green and Members of the Committee:

The Attorney General supports the Mental Health Court, and supports the expansion of the Mental Health Court, provided that this does not adversely impact priorities as indicated in the Executive Supplemental Budget request.

000073

mizuno2-Leolani

From: derek ching [dchingd@gmail.com]
Sent: Wednesday, March 12, 2008 9:08 AM
To: HLTtestimony
Subject: Fwd: SB2160 SD2, HD1 Relating to Medical Liability
Follow Up Flag: Follow up
Flag Status: Red

LATE TESTIMONY

----- Forwarded message -----

From: derek ching <dchingd@gmail.com>
Date: Mar 12, 2008 9:04 AM
Subject: SB2160 SD2, HD1 Relating to Medical Liability
To: HTLtestimony@capitol.hawaii.gov

March 12, 2008

Rep. Josh Green, M.D. Chair
Rep. John Mizuno, Vice Chair
House Health Committee
Hearing Scheduled for: Wednesday March 12, 8:00, room 329

From: Derek Ching MD
Address: 1029 Kapahulu Avenue Suite 308 Honolulu, HI 96816
Phone: (808) 733-5111

Re: SB2160 SD2, HD1 Relating to Medical Liability

I strongly support SB2160 SD2, HD1 for the following reasons:

- There is a very real shortage of physicians in Hawaii. Physicians in critical specialties are leaving or cutting back their practice, and every day more and more people do not have access to health care when they need it most.
- We can remove some of the uncertainty of practice medicine in Hawaii and stop the exodus or scaling back of practices by doctors if the legislature will pass medical liability reform to bring medical malpractice insurance premiums under control.
- Research by the American Medical Association and Hawaii Insurance Commissioner has confirmed that medical liability reform will reduce medical malpractice premiums.
- Medical liability reform based on the Texas model needs to be passed this session to stop the exodus of doctors and provide the access to health care that the people of Hawaii deserve.

Thank you for the opportunity to provide this testimony.

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