



**St. Francis Healthcare
Foundation of Hawaii**
A Subsidiary of St. Francis Healthcare System of Hawaii

FAX To: Senate Sergeant-At-Arms Office at 586-6659

The Honorable David Ige, Chair
The Honorable Carol Fukunaga, Vice-Chair
Senate Committee on Health

The Honorable Suzanne Chun-Oakland, Chair
The Honorable Les Ihara, Vice-Chair
Senate Committee on Human Services and Public Housing

Re: **Testimony in Support of S.B. No. 2537, Relating to Chronic Kidney Disease**

Hearing: Wednesday, January 30, 2008, 1:15 p.m.
State Capitol, Conference Room 016

Testifying: Sister William Marie Eleniki, O.S.F.
President
St. Francis Healthcare Foundation
St. Francis Residential Care Community

The Honorable David Ige, Chair; The Honorable Suzanne Chun-Oakland, Chair; and Honorable Members of the Senate Committee on Health and Members of the Senate Committee on Human Services and Public Housing:

Thank you for the opportunity to testify in support of S.B. 2537, relating to Chronic Kidney Disease (CKD). I am Sister William Marie Eleniki, President of St. Francis Healthcare Foundation. The Sisters of St. Francis are humbled and proud to have taken care of healthcare needs for the people of Hawaii since 1883. We are celebrating our 125th anniversary this year and hope to continue the mission of Blessed Marianne Copc today through this testimony.

The purpose of this bill is to establish a pro-active front in fighting a disease that has a profound effect on 20% of our population. Studies show that 1 person in 7 already have this disease. To make matters worse, another 1 in 7 stand waiting in the wings, with a predisposition to contract CKD. That's just over 200,000 of our kama'aina.... and each year this number increases affecting the lives of not just the patients, but also their 'ohana. I maintain that if we don't take action today our dreams to have a sustainable future of prosperity for Hawaii's children will be in jeopardy.

Case in point; if a significant percentage of our elderly population is overcome with illness and the cost and provision of care is passed on to the children, how will these caregivers survive with their own family on a day-to-day basis? It will be very difficult and almost impossible to many for an extended period of time. And that is why St. Francis is developing the

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Kukui (candlenut)
Used by Ancient Hawaiians for medicinal purposes

"Stay Healthy at Home" program to meet the needs of our expanding older adult population and patients of chronic diseases. The goal is to empower both populations to stay healthy at home for as long as possible. To accomplish this, our concept is to bring health care to the people right where they live; in their communities and in their homes.

Within this program St. Francis is unveiling a major health care initiative in the area of chronic kidney disease through a four year demonstration project to:

1. Address health care access issues for chronic kidney disease patients located in target rural areas of Hawaii based on need and demographics which will include prevention, intervention, surveillance through screenings, patient education, case management and treatment;
2. Develop a research program for chronic kidney disease with the use of an Electronic Health Record system focusing on the development of treatment protocols to stabilize and slow down the progression of this disease with the National Kidney Foundation in conjunction with the University of Hawaii John A. Burns School Of Medicine
3. Develop a proving model for a Modified Home Hemodialysis Program in rural areas to acquire sustainable reimbursements from the Centers for Medicare and Medicaid Services

We are very confident in the positive effect this program will have on the lives of a good slice of our population. And we have put forth the right team to carry out the mission. Because of this we have raised \$1 mil of seed money to bless this project... \$500,000 from each of our organizations, St. Francis and the National Kidney Foundation of Hawaii.

Your investment in our program will not build a new stadium or football field... but at the very least it will allow our present stadium and the many living rooms with TV sets to continue being filled with cheering families. Living, breathing and experiencing each action packed play. Go Warriors!

We're not in the headlines...but certainly we are not on the sidelines... because chronic kidney disease is a silent killer and we're in the middle of a battle alongside 200,000 family, friends and neighbors who have this illness. There are 5 stages to this disease. And like any battle, the sad part is ... over 50% of these patients don't make it... they die between stages 3 and 4. Those that survive either have need for a kidney transplant or a lifetime of dialysis.

The time truly is at hand and we are asking for just enough to make a positive and profound impact in the fight for a sustainable quality of life for future generations. Please join us to make this a public/private partnership that will make as much of a positive impact today... as it will tomorrow.

Aloha



National Kidney Foundation
of HAWAII

January 29, 2008

Senator David Y. Ige, Chair
Senator Carol Fukunaga, Vice-Chair
Committee on Health
Hawaii State Capitol
Conference Room 016
Honolulu, Hawaii 96813

RE: S.B. No. 2537 – Relating to Kidney Disease

Dear Chairman Ige and Vice-Chair Fukunaga and members of the State Senate Health Committee,

I am Glen Hayashida, CEO, National Kidney Foundation of Hawaii (NKFH). We support S.B. 2537, which provides funding for a program to address the dialysis and chronic kidney disease needs of patients in the remote areas of the State of Hawaii. The comprehensive bill is committed to the goals of better prevention, early detection, treatment, and expanded education efforts. It is intended to also be a demonstration project to the federal government.

Worldwide there has been a staggering rise in the number of people with Chronic Kidney Disease (CKD), largely as a consequence of the aging population and the growing global epidemic of type 2 diabetes. People with CKD suffer a 10-100 times greater incidence of death from cardiovascular disease (CVD) compared to the general population, regardless of age, race or gender.

CKD is a progressive illness that has a silent, symptom-less onset and is characterized by declining kidney function over years. During the later stages of kidney disease, referred to as End Stage Renal Disease (ESRD), patients will require dialysis treatment or kidney transplantation. Despite numerous guidelines to screen patients at high risk of CKD, many patients remain unscreened or are poorly characterized with respect to the extent of their kidney disease. Chronic non-communicable diseases (particularly cardiovascular disease, hypertension, diabetes mellitus and chronic kidney disease) have now replaced the communicable diseases as the leading threat to public health and health budgets worldwide.

Deaths claimed by infectious diseases will decline by 3% over the next decade. In marked contrast, chronic diseases - that already account for 72% of the total global burden of disease in people over 30 - will increase by 17%.

The cost of treating these chronic diseases, already 80% of many country's health care budgets, represents a leading threat to public health and healthcare resources worldwide. The only feasible global response to this pending health and socio-economic crisis is chronic disease prevention.

Chronic Kidney Disease (CKD) has recently become a major healthcare priority in the United States due to many factors including:

- the morbidity and mortality rates from people suffering from kidney failure remain high;
- the increasing number of people on dialysis (more than doubling every ten years);
- the high cost of providing dialysis and associated medical treatment (\$65,000 per patient per year);

In Hawaii, there are over 2300 people on dialysis. At \$65,000 per patient per year, we are spending over \$150,000 per year.

The growth in the number of people with kidney failure is due to the rapid increase in CKD and the progression of kidney disease. Unfortunately, this problem was not being detected due to the under diagnosis and under treatment of CKD in the U.S.

The lack of awareness of the CKD epidemic has led to lost opportunities for aggressive treatment and prevention of complications in patients that are a direct result of or associated with CKD.

The National Kidney Foundation of Hawaii is looking forward to this collaboration with the St. Francis Healthcare System. Our work has just begun and the challenges ahead are great, but through this collaboration and with our existing relationships within our community, we will begin to accelerate the pace in addressing the needs of our aging population along with chronic kidney disease.

The National Kidney Foundation of Hawaii views S.B. 2537 as an opportunity to insure early detection and treatment of CKD to delay the progression of CKD, prevent and treat complications of CKD and produce better healthcare outcomes for the people of Hawaii.

LATE TESTIMONY

Testimony in Support of Senate Bill 2537

To: **Senate Committee on Health**
Senate Committee on Human Services and Public Housing
Senator David Y. Ige, Chair, Committee on Health
Senator Carol Fukunaga, Vice Chair, Committee on Health
Senator Suzanne Chun Oakland, Chair, Committee on Human Services and Public Housing
Senator Les Ihara, Jr., Vice Chair, Committee on Human Services and Public Housing

From: Gary Simon. *Gary Simon*
Chair
Legislative Committee
Policy Advisory Board for Elder Affairs
Email: GarySimon@hawaii.rr.com

Date and Time of Hearing: January 30, 2008, 1:15 p. m.

Position: Support for Senate 2537, Relating to Kidney Disease

I am Gary Simon, Chair of the Legislative Committee of the Policy Advisory Board for Elder Affairs (PABEA). I am testifying as an individual who has worked in healthcare for over twenty years.

On behalf of the Legislative Committee of PABEA, I am pleased to state our strong support of Senate Bill 2537, which awards a grant to St. Francis Healthcare System to support the modified home care and community health demonstration project.

The citizens of our State are fortunate to anticipate the longest life expectancy in our nation. Unfortunately, up to ten percent of our State population have chronic kidney disease. The size of this segment of our population forces us to confront and address the challenge of providing the best care to those of our fellow citizens with chronic kidney disease.

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To face ~~a~~ challenge, our State needs to serve as the catalyst to develop innovative programs to meet these challenges. The modified home care and community health demonstration project for chronic kidney disease patients proposed by St. Francis Health Care System is multi-disciplinary, encompassing the compassion, expertise, and skills of both professionals and para-professionals in the fields of medicine, nursing, social work, nutrition, and spiritual services. The establishment of the project will:

- Promote an enhanced quality of life for those with chronic kidney disease and for their loved ones.
- Promote collaboration between the private and public sectors for the benefit of our communities at large.
- Identify the needs of those with chronic kidney disease in an ever-changing society and develop policies in support of responding to these needs.

Two of my immediate relatives have died from end stage renal disease. Both lived in urban Honolulu and were able to receive care, services, and dialysis within their own communities, decreasing the physical burden upon their frail bodies.

In order to reduce their pain and suffering, those chronic kidney disease patients living in remote areas also need to receive care and services in their own communities.

State funding for the establishment of the major chronic kidney disease health care demonstration project will allow the needs of those with chronic kidney disease and their families to be addressed in short due course.

The development and implementation of this modified home care and community health demonstration project is a good program (support to those with chronic kidney disease and to their caregivers) based upon good policy (enhancing the welfare of our citizens). We wish to see the establishment of the program in our remote communities for the benefit of these patients and their families.

We urge you to support Senate Bill 2537 and to recommend its passage, and we thank you for seriously considering the Bill.