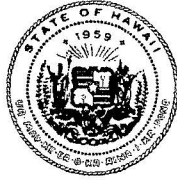


LINDA LINGLE  
GOVERNOR



LILLIAN B. KOLLER, ESQ.  
DIRECTOR

HENRY OLIVA  
DEPUTY DIRECTOR

STATE OF HAWAII  
DEPARTMENT OF HUMAN SERVICES  
P. O. Box 339  
Honolulu, Hawaii 96809-0339

March 26, 2008

MEMORANDUM

TO: Honorable Marcus R. Oshiro, Chair  
House Committee on Finance

FROM: Lillian B. Koller, Director

SUBJECT: **S.B. 3185, S.D. 2 – RELATING TO CANCER**

Hearing: Wednesday, March 26, 2008 11:00 a.m.  
House Conference Room 308, State Capitol

PURPOSE: The purpose of this bill is to: 1) change the name of the program to the Comprehensive Breast and Cervical Cancer Control Program; 2) require the Department of Human Services (DHS) to collaborate with the Department of Health (DOH) to provide screening, education, and outreach, regardless of a woman's eligibility for Medicaid coverage; 3) require DHS to transfer \$150,000 from its funds to DOH for cervical and breast cancer screening, education, and outreach; and 4) require DOH and DHS to submit an annual report to the Legislature on the expenditure of funds for the program.

DEPARTMENT'S POSITION: The Department of Human Services (DHS) supports the intent of this bill that provides funding for the Department of Health (DOH) to help screen and treat women in Hawaii for the breast and cervical cancer treatment

program, provided that it does not adversely affect the priorities of the Executive Supplemental Budget.

DHS is collaborating with the DOH through a memorandum of agreement (MOA) to accommodate the funding transfer for services as intended by this bill. DHS does not believe this bill is necessary with the continued efforts through the MOA.

Furthermore, Section 2 of this bill proposes to amend DHS' chapter 346-59.2, HRS, detailing DOH program specifics. DHS recommends placement of this language in DOH's chapter 321-41, HRS, relating to the educational program for the purpose of preventing and aiding in the early diagnosis of cancer, which allows the DOH to assist and cooperate with all territorial, state, and national organizations conducting educational programs for the prevention and control of cancer as part of chapter 321 pertaining exclusively to DOH.

Thank you for this opportunity to testify.

LINDA LINGLE  
GOVERNOR OF HAWAII



CHIYOME LEINAALA FUKINO, M.D.  
DIRECTOR OF HEALTH

STATE OF HAWAII  
DEPARTMENT OF HEALTH  
P.O. Box 3378  
HONOLULU, HAWAII 96801-3378

In reply, please refer to:  
File:

HOUSE COMMITTEE ON FINANCE

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HOUSING AND COMMITTEE ON  
HEALTH

SB3185, SD2, RELATING TO CANCER

Testimony of Chiyome Leinaala Fukino, M.D.  
Director of Health

March 26, 2008, 11:00AM

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1 **Department's Position:** The Department of Health supports what SB 3185, SD2 is intended to  
accomplish – redirection of funds that are currently allotted purely for the treatment of breast and  
3 cervical cancer, to increased support for its prevention, screening and early detection, particularly for  
4 underserved populations.

5 **Fiscal Implications:** Potential interagency reassignment of funds.

6 **Purpose and Justification:** The Department of Health recognizes the value of prevention, screening  
7 and early detection of all cancers, particularly among underserved populations.

8 Breast and cervical cancer early detection services are currently offered through the Breast and  
9 Cervical Cancer Control Program (BCCCP), a \$1.1M cooperative agreement between the Centers for  
10 Disease Control and Prevention and the Department of Health.

11 This program provides timely high-quality services to approximately 1,100 low-income,  
12 uninsured and underserved women annually.

13 The program's priority population includes Native Hawaiians, Filipinos, Asians and Pacific  
14 Islanders, all of whom have high cancer-related morbidity and mortality rates than do Hawaii's other  
15 ethnic groups, and who therefore stand to benefit most from the BCCCP.

16 The Department of Health is currently collaborating with the Department of Human Services in  
17 an effort to appropriately and efficiently redirect unexpended cancer treatment funds, toward increased  
18 screening and detection services.

19 Thank you for the opportunity to testify.

**Deleted:** SB3185, SD2 is intended to accomplish including

**Deleted:** the proposed increased utilization of funds currently identified for breast and cervical cancer treatment and the increased support for screening and early detection of breast and cervical cancer to high risk populations.

**Deleted:** Appropriation out of general funds

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**Deleted:** provides needed breast and cervical cancer early detection services through the Breast and Cervical Cancer Control Program. The program is funded for \$1.1 million through a cooperative agreement with the Centers for Disease Control and Prevention and serves approximately 1,100 women annually. ¶  
The Department of Health, Breast and Cervical Cancer Control Program (BCCCP) provides low-income, uninsured, and underserved women access to timely, high-quality screening and diagnostic services, to detect breast and cervical cancer at the earliest stages and to refer women with cancer or pre-cancerous conditions to treatment. The program's priority population includes Native Hawaiian, Filipino, and Pacific Island/Asian women. Women served by the program have rarely or never been screened, are medically underserved, and have higher morbidity and mortality rates than other women. Early detection of cancer greatly reduces treatment costs and increase survival rates. ¶

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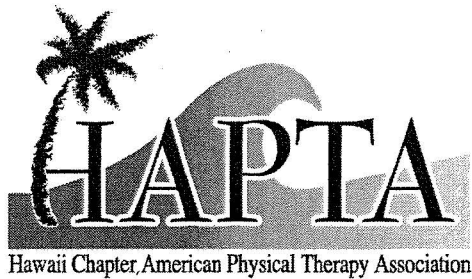
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**Testimony by:  
Ann Frost, PT**

**SB 3185sd2, Cancer  
House FIN Committee  
March 26, 2008 - 11:00 am  
Conference Room 308**



**Position: Support**

Chair Oshiro and Members of the House FIN Committee:

I am Ann Frost, P.T., President of the Hawaii Chapter – American Physical Therapy Association, and member of the Government Relations Committee. The Hawaii Chapter – American Physical Therapy Association (HAPTA) is comprised of 300 member physical therapists and physical therapist assistants employed in hospitals and health care facilities, the Department of Education school system, and private practice. We are part of the spectrum of care for Hawaii, and provide rehabilitative services for infants and children, youth, adults and the elderly. Rehabilitative services are a vital part of restoring optimum functioning from neuromusculoskeletal injuries and impairments.

HAPTA supports SB 3185sd2, which provides funds for cervical and breast cancer screening, education and outreach. Screening for cervical cancer and breast cancer has proven to be effective in the detection and early treatment of these diseases. The incidence of cervical cancer has decreased since the onset of routine PAP smear examinations. However, many women do not schedule routine OB/GYN examinations. If they do develop cervical cancer, it is usually not found until the later stages. Cervical cancer is known as one of the “silent killers” since symptoms do not manifest until later, possibly at an untreatable stage since the cancer has already metastasized.

Education and early detection of breast cancer is just as critical. One of my patients never did self-breast exams, as she didn’t think she would feel anything anyway---so why waste her time. If she had been properly educated that it’s possible to feel lumps not only with her bare hands but also with new tools on the market like the “Breast Self Exam Pad” her cancer may have been diagnosed sooner. Another patient was 25 years old when she was diagnosed with Stage 4 breast cancer. She thought the hardness in her breast was no big deal since she was so young. This was despite the fact that her aunt and grandmother had also dealt with breast cancer. She thought that since her mother and older sister did not have breast cancer, she would not be susceptible until she was older.

So, I say again, education and early screening is key!

Please support this bill. I can be reached at (808) 537-7729 if there are any questions. Thank you for the opportunity to provide testimony.



March 26, 2008

Committee on Finance

Representative Marcus Oshiro, Chair

Representative Marilyn Lee, Vice-Chair

11:00 AM, Wednesday, March 26, 2008

State Capitol, Room 308

**RE: In Strong Support of SB3185 SD2-Relating to Cancer**

Dear Chair Oshiro, Vice-Chair Lee and Members of the Committee:

Good Morning, my name is Jackie Young and I am the Chief Staff Office for Mission of the American Cancer Society Hawaii Pacific Inc. Thank you for the opportunity to comment on SB3185.

**The American Cancer Society Hawaii Pacific Inc. strongly supports SB 3185 which appropriates funds to the Hawaii Breast and Cervical Cancer Control Program.**

In the state of Hawaii, breast cancer is the most common cancer among women regardless of race or ethnicity. Every year over 800 women are diagnosed with breast cancer and 120 die from it. When breast cancer is diagnosed at its earliest stage, survival rates are excellent. However, the survival rate falls to 78 percent when the cancer is detected at a regional stage and 23 percent when the cancer is detected at a late stage. Similarly, pap tests detect pre-cancerous lesions that can be treated before they progress to cervical cancer, resulting in a nearly 100 percent survival rate. As these statistics show, early detection of breast and cervical cancer is critical to saving lives.

The Hawaii Breast and Cervical Cancer Control Program is a necessary and effective safety net program that provides free breast and cervical cancer screenings to women who are not otherwise able to afford or access these life-saving screenings because of insurance status or other barriers. Uninsured and underinsured women ages 50-64 who qualify as low-income (<250% poverty level) are eligible for program services. Available through providers at eleven sites throughout the state, this program is helping to improve health outcomes for some of our state's most medically underserved women. The American Cancer Society actively promotes this program to women in need who contact us about the availability of free breast or cervical cancer screening programs in their community.

**Currently, Hawaii is one of only eleven states nationwide that does not appropriate any state funds to support this program.** The Hawaii Breast and Cervical Cancer Control Program is supported exclusively by federal funding from the Centers for Disease Control and Prevention (CDC) through the National Breast and Cervical Cancer Early Detection Program which the Society also advocates for on a national level. State funding for this program is critical to ensure that eligible women who qualify for this program are able to receive screenings and follow-up services and that all women have the opportunity to have their cancer detected in its earliest, most curable stage.

American Cancer Society Hawai'i Pacific, Inc.

2370 Nu'uuanu Avenue, Honolulu, Hawai'i 96817-1714

●Phone: (808) 595-7500 ●Fax: (808) 595-7502 ●24-Hour Cancer Info: (800) 227-2345 ●<http://www.cancer.org>

We urge you to pass this bill in order to increase the number of women who can access life-saving screenings through this program. Thank you for your consideration.

Sincerely,

Jackie Young  
432-9142



March 26, 2008

**TO:** House Committee on Finance  
Rep. Marcus Oshiro, Chair  
Rep. Marilyn Lee, Vice-Chair

**FROM:** Gay Polido, Breast Cancer Survivor  
FINtestimony@Capitol.hawaii.gov.

**RE:** **Testimony in strong support of SB 3185 Relating to Cancer**  
March 26, 2008  
11:00 AM  
Conference Room 308

Chair Oshiro, Vic-Chair Lee and members of the Finance Committee:

My name is Gay Polido. I am a volunteer advocate for the American Cancer Society Hawaii Pacific and a breast cancer survivor. Thank you for the opportunity to submit testify in strong support of SB 3185.

**I am here today as a beneficiary of the Hawaii Breast and Cervical Cancer Control Program.** I detected a lump in my left breast in 2003, but did not seek medical attention at that time. Just six months before I detected the lump I had lost my medical insurance in pursuit of my dream to own my own business. Without health insurance I was not sure where to go or who to see for a breast cancer screening.

When I did seek a mammogram in 2004, I was turned away from the examination room after the doctor learned I did not have health insurance. This despite my offer to pay out of pocket for the screening. I was not offered any additional resources by this office about where to turn or where to go for a mammogram.

Finally, in 2006, I saw an ad in the newspaper for the Hawaii Breast and Cervical Cancer Control Program. I was at the end of my rope by this time, and ready to give up. I called the number listed and left a message with little hope for a return call. However, less than twenty four hours later I received a follow up call from the provider at Hawaii Medical Center offering me not only a mammogram but support, counseling, and genuine concern for me and my situation.

It really was a life-saving call. I am now in treatment for breast cancer and doing well, but I truly believe I never would have received the treatment I need without the competent and timely return call I received from the service provider of the Hawaii Breast and Cervical Cancer Control Program. I know from hard, personal experience that the BCCCP really is the last option for women without health insurance.

Other women who are at the end of their rope should have the same opportunity as I did to receive not only medical screenings, but support and reassurance at a very frightening time. I hope the committee will support this program with additional funding.

Sincerely,  
Gay Polido  
92-628 Aahualii Street  
Makakilo, Hawaii 96707