



**TESTIMONY OF MARION M. HIGA, STATE AUDITOR
ON SENATE BILL 2599, SENATE DRAFT 2
RELATING TO HEALTH INSURANCE**

House Committee on Health

March 9, 2010

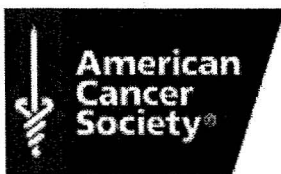
Chair Yamane and Members of the Committee:

Thank you for this opportunity to testify in support of Senate Bill 2599, Senate Draft 2. The purpose of this bill is to provide coverage for the early detection of colorectal cancer by requiring health insurers to cover colorectal cancer screening procedures and tests, including colonoscopy every ten years for adults beginning at age 50 and continuing until age 75, that received a grade A or B from the United States Preventive Services Task Force (USPSTF).

In Report No. 10-02 entitled *Study of Proposed Mandatory Health Insurance Coverage for Colorectal Cancer Screening*, we reported that the USPSTF 2008 recommended procedures for average risk adults between the ages of 50 and 75 are: colonoscopy at ten year intervals, annual fecal occult blood tests, and flexible sigmoidoscopy every five years combined with high sensitivity fecal occult blood testing every three years. These procedures received a grade A from the USPSTF in its 2008 guidelines.

Senate Bill 2599, SD2, implements the recommendations in our report. For this reason, we support passage of this bill.

I would be pleased to answer any questions you may have.



LATE

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March 8, 2010

Committee on Health
Representative Ryan Yamane, Chair
Representative Scott Nishimoto, Vice Chair

Hearing:

10:00 A.M., Tuesday, March 9, 2010
Hawaii State Capitol, Room 329

RE: SB2599, SD2 – Relating to Health Insurance

Testimony in Strong Support

Chair Yamane, Vice Chair Nishimoto and members of the Committee on Health. Thank you for the opportunity to testify in strong support of SB2599, SD2, which will require health insurance coverage for colorectal cancer screening including the use of colonoscopy.

This bill was introduced at the request of the American Cancer Society as a result of a colorectal cancer screening guideline that was released in 2008. Beginning last year, the American Cancer Society offered extensive testimony on the benefits of early detection and treatment of colorectal cancer which is the third most common cancer in the United States and the second leading cause of cancer deaths among men and women. In 2009, 146,000 new cases were diagnosed and 49,000 deaths recorded. This year in Hawai'i, over 710 of our residents will develop colon cancer and approximately 200 will die.

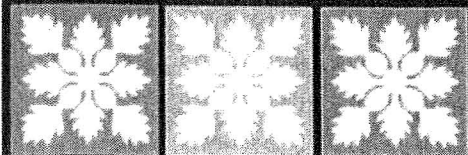
As the committee is aware the Society has previously offered extensive testimony on the benefits of colorectal screening using colonoscopy. **At this juncture we would like to reiterate that colorectal cancer screening using colonoscopy emerges as an effective and affordable benefit for health plan members, when compared to the cost of treating colon cancer which can easily run between \$100,000 and \$200,000.** It will dramatically reduce colon cancer death and incidents rates in Hawai'i. We would urge the committee to pass this measure forward.

Mahalo for the opportunity to provide testimony in very strong support this measure.

Sincerely,

A handwritten signature in black ink, appearing to read "George S. Massengale".

George S. Massengale, JD
Director of Government Relations



Hawaii Association of Health Plans

March 9, 2010

The Honorable Ryan Yamane, Chair
The Honorable Scott Nishimoto, Vice Chair
House Committee on Health

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Re: SB 2599 SD2 – Relating to Health Insurance

Dear Chair Yamane, Vice Chair Nishimoto and Members of the Committee:

My name is Howard Lee and I am President of the Hawaii Association of Health Plans (“HAHP”). HAHP is a non-profit organization consisting of seven (7) member organizations:

AlohaCare
Hawaii Medical Assurance Association
HMSA
Hawaii-Western Management Group, Inc.

MDX Hawai'i
University Health Alliance
UnitedHealthcare

Our mission is to promote initiatives aimed at improving the overall health of Hawaii. We are also active participants in the legislative process. Before providing any testimony at a Legislative hearing, all HAHP member organizations must be in unanimous agreement of the statement or position.

HAHP appreciates the opportunity to testify on SB 2599 SD2 which would mandate colorectal cancer screenings based on U.S. Preventive Services Task Force (USPSTF) recommendations which have been awarded an “A” or “B” rating. While we appreciate the changes made to this measure to adopt the State Auditor’s recommendations, we do believe that as currently drafted, SB 2599 SD2 could be overly broad.

We support changes being proposed by HMSA which would add the word “colorectal” throughout the measure in order to ensure that the references to mandated USPSTF screenings are specifically those for colorectal cancer. Thank you for the opportunity to provide testimony today.

Sincerely,

Howard Lee
President

HMSA

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An Independent Licensee of the Blue Cross and Blue Shield Association

March 9, 2010

The Honorable Ryan Yamane, Chair
The Honorable Scott Nishimoto, Vice Chair
House Committee on Health

Re: SB 2599 SD2 – Relating to Health Insurance

Dear Chair Yamane, Vice Chair Nishimoto and Members of the Committee:

The Hawaii Medical Service Association (HMSA) appreciates the opportunity to testify on SB 2599 SD2 which would mandate health plans cover screening colonoscopies and other U. S. Preventive Services Task Force (USPSTF) “A” and “B” graded colorectal cancer screenings. HMSA supports this language with a slight amendment.

We would like to take this opportunity to note that at the beginning of this year, HMSA’s PPO plan began providing colonoscopy screenings as a covered benefit. For many years, up until the American Cancer Society (ACS) expanded their recommended colon cancer screenings, colonoscopies for screening purposes were the gold standard promoted by ACS. We would also state that we do not support unfunded mandated benefits, and prefer to give those purchasing health care coverage, typically employers, the ability to tailor their benefit plans as they see fit.

We do appreciate the changes made to this measure to incorporate recommendations of the recently released State Auditor’s report on the social and financial impacts of mandating colorectal cancer screenings. The recommendations from this report supported mandating colorectal cancer screenings which follow the 2008 USPSTF 2008 guidelines. The USPSTF recommends colorectal cancer screenings when they have achieved an “A” or “B” grading meaning that the benefit of the procedure is greater than the risk to the individual.

We do have concerns that without some additional clarifying language SB 2599 SD2 could end up being overly broad and mandate screenings not related to colorectal cancer. Therefore we would suggest, in order to follow the Auditor’s recommendations, that the word “colorectal” be added throughout the measure to clarify that the USPSTF screenings being referred to are in relation to colorectal cancer screenings only.

In order to accomplish this, the word “colorectal” would need to be added to three sections, page 2, line 22, page 3, line 12 & page 9, line 20 (language provided below):

"§432:1- Colonoscopy coverage. Notwithstanding any provision to the contrary, each policy, contract, plan, or agreement, except for policies that only provide coverage for specified diseases or other limited benefit coverage, shall provide coverage for the screening of colorectal cancer by colonoscopy and any other colorectal screening modalities that have received a grade of A or B from the United States Preventative Service Task Force."

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"§432:2- Colonoscopy coverage. Notwithstanding any provision to the contrary, each policy, contract, plan, or agreement for hospital, medical, or nursing benefits, except for policies that only provide coverage for specified diseases or other limited benefit coverage, shall provide coverage for the screening of colorectal cancer by colonoscopy and any other colorectal screening modalities that have received a grade of A or B from the United States Preventative Service Task Force."

(7) Notwithstanding any provision to the contrary, each policy, contract, plan, or agreement, except for policies that only provide coverage for specified diseases or other limited benefit coverage, shall provide coverage for the screening of colorectal cancer by colonoscopy and any other colorectal screening modalities that have received a grade of A or B from the United States Preventative Service Task Force."

We believe that this small addition will ensure the spirit of the legislation. Thank you for the opportunity to provide testimony.

Sincerely,



Jennifer Diesman
Vice President
Government Relations