

**SCR 146**

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:

## SENATE COMMITTEE OF HEALTH

**S.C.R. 146, Requesting the Convening of a Health Care Reform Task Force to Evaluate Methods to Improve the Quality, Safety, Efficiency, and Cost of Hawaii's Health Care System, to Reduce Medical Errors and Increase Patient Safety, to Seek Solutions to Eliminate Doctor Shortages, and to Address the Role and Impact of the Legal System in Compensating Victims Injured Because of Medical Errors**

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

**March 19, 2010, 3:00 p.m.**

- 1 **Department's Position:** The Department of Health respectfully opposes S.C.R. 146.
- 2 **Fiscal Implications:** Unbudgeted expenses related to staffing and administration of task force.
- 3 **Purpose and Justification:** Due to the ongoing national debate on health care and the potential for
- 4 deep and system-wide reforms, the laudable goals of this task force are better served once the trajectory
- 5 of competing models of health care reform is clearer.
- 6 Further, Hawaii is just now getting underway with multi-year projects on health information technology,
- 7 health care workforce development, and comparative effectiveness research funded by the American
- 8 Recovery and Reinvestment Act (ARRA). The task force's January 1012 due date means its
- 9 recommendations will be too late to inform projects which need to start now and too early to adequately
- 10 assess the impact of projects yet to be completed.
- 11 And lastly, if the arc of the present budget process and revenue projections is sustained, executive
- 12 agencies, and the Department of Health specifically, will be unable to provide the administrative support
- 13 to ensure the task force's success.

1 Until we are better able to come to terms with the forces influencing the national health care debate, the

2 Department of Health respectfully urges S.C.R 146 be held.

3

Testimony of  
John M. Kirimitsu  
Legal and Government Relations Consultant

Before:  
Senate Committee on Health  
The Honorable David Y. Ige, Chair  
The Honorable Josh Green, M.D., Vice Chair

March 19, 2010  
3:00 pm  
Conference Room 016

**Re: SCR 146 Requesting The Convening Of A Health Care Reform Task Force**

Chair Ige, Vice Chair Green, and committee members, thank you for this opportunity to provide testimony on SCR 146.

**Kaiser Permanente supports this bill.**

Kaiser Permanente appreciates the Legislature's efforts to convene a Health Care Reform Task Force to improve the quality, safety, efficiency and cost of medical care by Hawaii's health care system.

Kaiser Permanente recognizes the need for a collaborative effort from all health care stakeholders to successfully reform and improve Hawaii's health system. As the State's largest health maintenance organization (HMO), Kaiser Permanente would like to participate in this common goal by sharing a unique perspective to Hawaii's health insurance needs, as compared to traditional fee-for-service or preferred provider organization plans. Given that Kaiser Permanente's integrated managed care model is comprised of three distinct entities – the health plan, the hospital, and the medical group, Kaiser Permanente believes it can offer valuable insight into the complex integrated HMO model to assist the Health Care Reform Task Force in evaluating health care performances in Hawaii.

Thank you for your consideration.



SENATE COMMITTEE ON HEALTH  
Senator David Ige, Chair

Conference Room 016  
March 19, 2010 at 3:00 p.m.

**Supporting SCR 146.**

The Healthcare Association of Hawaii represents its member organizations that span the entire spectrum of health care, including all acute care hospitals, as well as long term care facilities, home care agencies, and hospices. Thank you for this opportunity to testify in support of SCR 146, which requests the Senate President and Speaker of the House to convene a health care task force to address quality, safety, cost, and other health care issues.

This resolution was introduced at the request of the Healthcare Association as a result of a panel discussion at its annual meeting in November of 2009. The panel included a physician, an attorney, two educators, and a government official, who discussed medical liability and other issues that impact health care. Observing that the usual tort reform proposals introduced in Legislature for a number of years have not been successful, the panel decided that alternate ways of addressing medical liability must be developed. Further, the panel observed that Hawaii's culture of collaboration may foster the development of these alternatives. The panel also decided that other issues that affect the quality of health care may be addressed. The panel agreed upon the organizations and groups that should be represented on a task force to improve Hawaii's health care system.

The Healthcare Association submitted to the Legislature a draft resolution, which has been revised. The thrust of the resolution remains intact, and improvements have been made to it, so we support the resolution. Perhaps inadvertently, however, two groups were excluded from the task force, as follows:

- (1) Other health care practitioners (in addition to physicians); and
- (2) The Hawaii Association of Physicians for Indemnification.

We suggest that the resolution be amended to include these two items.

With the suggested amendment, the Healthcare Association of Hawaii supports SCR 146.



## **Hawai'i Primary Care Association**

345 Queen Street | Suite 601 | Honolulu, HI 96813-4718 | Tel: 808.536.8442 | Fax: 808.524.0347  
www.hawaiipca.net

To: **The Senate Committee on Health**  
The Hon. David Y. Ige, Chair  
The Hon. Josh Green, MD, Vice Chair

### **Testimony in Support of SCR 146**

**REQUESTING THE CONVENING OF A HEALTH CARE REFORM TASK FORCE TO EVALUATE METHODS TO IMPROVE THE QUALITY, SAFETY, EFFICIENCY, AND COST OF HAWAII'S HEALTH CARE SYSTEM, TO REDUCE MEDICAL ERRORS AND INCREASE PATIENT SAFETY, TO SEEK SOLUTIONS TO ELIMINATE DOCTOR SHORTAGES, AND TO ADDRESS THE ROLE AND IMPACT OF THE LEGAL SYSTEM IN COMPENSATING VICTIMS INJURED BECAUSE OF MEDICAL ERRORS.**

**Submitted by Beth Giesting, CEO**  
**March 19, 2010, 3:00 p.m. agenda, Room 016**

The Hawai'i Primary Care Association supports this resolution, which is similar to SCR 122 in its concerns and recommendations.

We ask that the Committee consider adding the Hawai'i Primary Care Association to the organizations included on the Task Force, since the federally qualified health centers that we represent are a significant part of the solution to the problem of provider shortages in rural areas and medical malpractice insurance costs.

Thank you for the opportunity to support this measure.

# HMSA



An Independent Member of the Blue Cross and Blue Shield Association

March 19, 2010

The Honorable David Ige, Chair  
The Honorable Josh Green M.D., Vice Chair  
Senate Committee on Health

**Re: SCR 146 – Requesting the Convening of a Health Care Reform Task Force to Evaluate Methods to Improve the Quality, Safety, Efficiency, and Cost of Hawaii’s Health Care System, to reduce Medical Errors and Increase Patient Safety, to Seek Solutions to Eliminate Doctor Shortages, and to Address the Role and Impact of the Legal System in Compensating Victims Injured because of Medical Errors**

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

The Hawaii Medical Service Association (HMSA) appreciates the opportunity to testify in support of SCR 146 which would create a dialogue between stakeholders in order to improve the quality of Hawaii’s health care system. Indeed this legislative session, more than any in recent past, has brought together various stakeholders rallying around the issue of the Department of Human Services proposed delay of payments to QUEST health plans. A coalition which formed to work together on this issue includes representatives from QUEST health plans, QUEST Expanded plans, the Healthcare Association of Hawaii as well as smaller providers such as home health agencies. We believe that the spirit of cooperation fostered this session has set the stage to achieve the goals set out in SCR 146.

We would respectfully request that in addition to the members already outlined in the measure, language be added to include representation from HMSA as well. Health plans play a vital role in the health care system and including everyone in these types of discussions will ensure successful outcomes. This could be accomplished by adding the following language to page 3, line 22:

*(14) Two representatives of different health insurance plans offering coverage in the state of Hawaii*

We look forward to working with all health care stakeholders in the community as we shape Hawaii’s health care future. Thank you for the opportunity to testify today.

Sincerely,

Jennifer Diesman  
Vice President  
Government Relations



## HAWAII MEDICAL ASSOCIATION

1360 S. Beretania Street, Suite 200, Honolulu, Hawaii 96814  
Phone (808) 536-7702 Fax (808) 528-2376 www.hmaonline.net

**Friday, March 19, 2010, 3:00 pm, Conference Room 016**

To: COMMITTEE ON HEALTH  
Senator David Y. Ige, Chair  
Senator Josh Green, M.D., Vice Chair

From: Hawaii Medical Association  
Gary A. Okamoto, MD, Legislative Co-Chair  
Linda Rasmussen, MD, Legislative Co-Chair  
April Donahue, Executive Director  
Lauren Zirbel, Government Affairs  
Dick Botti, Government Affairs

RE: SCR 46  
REQUESTING THE CONVENING OF A HEALTH CARE REFORM TASK FORCE TO  
EVALUATE METHODS TO IMPROVE THE QUALITY, SAFETY, EFFICIENCY, AND COST OF  
HAWAII'S HEALTH CARE SYSTEM, TO REDUCE MEDICAL ERRORS AND INCREASE  
PATIENT SAFETY, TO SEEK SOLUTIONS TO ELIMINATE DOCTOR SHORTAGES, AND TO  
ADDRESS THE ROLE AND IMPACT OF THE LEGAL SYSTEM IN COMPENSATING VICTIMS  
INJURED BECAUSE OF MEDICAL ERRORS.

In Support

Chairs & Committee Members:

Hawaii Medical Association supports SCR 146 as a measure to create a multi-disciplinary task force that will address the health care system of Hawaii, in particular issues with medical liability and physician shortages. HMA looks forward to participating.

Thank you for the opportunity to testify.

### OFFICERS

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**UNIVERSITY OF HAWAII 'I AT MĀNOA**

William S. Richardson School of Law

Hazel G. Beh  
Professor of Law and Director, Health Law Policy Center

March 16, 2010

The Honorable David Y. Ige, Chair  
The Honorable Josh Green, MD, Vice Chair  
Committee on Health  
415 South Beretania Street, Room 215  
Honolulu, Hawaii 96813

*Re: SCR 146*

Dear Chair Ige, Vice Chair Green and Committee Members:

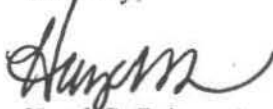
My name is Hazel Beh. I am a Professor of Law and Co-Director of the Health Policy Center at the William S. Richardson School of Law. I am testifying in support of SCR 146.

Historically, the debate regarding changing medical liability laws in Hawai'i has been contentious. Recent legislative sessions have devoted inordinate and largely unproductive time and energy toward debate of Hawai'i's malpractice laws. Proposals have been largely traditional "tort reform" measures that are one-sided, such as placing additional limits on noneconomic damages (caps). While the debate has garnered public and media attention and consumed private and state resources, no specific proposals have gained traction. The legislature has proven to be a difficult forum for meaningful discussion and consensus building. In addition the ineffective engagement of stakeholders in these debates has failed to generate research that could examine the relative costs and impacts of the proposals that have been advanced. Instead, stakeholders in the medical, legal, and consumer communities have become increasingly polarized in the legislative hearings process and seem increasingly unable within their own chosen frameworks to seek effective outcomes.

I believe that through the combined efforts of all stakeholders engaged in a collaborative and transparent process, Hawai'i can find ways to improve the current medical malpractice system and achieve three paramount goals: 1) to understand and reduce the occurrence of medical errors; 2) to provide adequate compensation for those injured by medical errors; and 3) to improve claims resolution process in terms of efficiency, fairness, and dignity for the benefit of both Hawai'i's health care workforce and their patients.

SCR 146 does not call for any preordained outcome. Instead this resolution asks stakeholders to jointly engage in an examination of all of the issues surrounding the current system to determine if a better system that is fair to all parties may be found. I believe that such efforts will ultimately assist the legislature in finding sound solutions to this issue.

Sincerely,



Hazel G. Beh  
Professor of Law  
Director, Health Law Policy Center

Testimony to the Hawaii State Legislature, 2010

Testimony of Kelley Withy, President of Hawaii State Rural Health Association

The Hawaii State Rural Health Association would like to express our strongest support for SCR 122 and 146 regarding health care.

3/2010

The Hawaii State Rural Health Association would like to express our strongest support for SCR122 and SCR146. We have conducted published research on the rural health care needs across the State and found that while all communities are unique, there are some themes that are common throughout the state. Needs that are commonly identified in our rural and underserved communities include:

1. Financial assistance (insurance coverage, medication, free services)
2. Expanding services that are available to rural communities (including telehealth, CHCs, community services)
3. Improving access to available services (Long term care, primary care, specialty care, mental health care, substance abuse treatment, health care training and other services)
4. Decreasing drug use
5. Increasing health education and training opportunities for community members
5. Increasing the number of health care providers working in rural areas
6. Increasing cultural sensitivity of providers

The most recent assessment of physicians in the State of Hawaii performed by my office at JABSOM estimates that we have 500 providers less than we need to meet the demand estimated by population mix. Furthermore, this deficit may grow to 1,500 providers by 2020 if no action is taken. There are many actions that must be taken to meet the growing demand for health care providers and SCR 122 and SCR 146 are the first steps.

**We would like to volunteer to provide a member to participate in these activities that represents the Hawaii State Rural Health Association and who can speak to the specific needs of rural communities in Hawaii.**

Mahalo for your consideration.

Sincerely,  
Kelley Withy, MD, PhD  
President, Hawaii State Rural Health Association

Kelley Withy, MD, PhD  
571 Kaimalino St.  
Kailua, HI 96734

Testimony in support of SCR 122 and SCR 146 regarding health


3/10

As a physician workforce researcher I offer my strongest support for this bill, and commend you on introducing it. Currently in Hawaii we have 500 fewer physicians than we are estimated to need, so many patients go without care. If we don't do anything to change the situation, we are estimated to be 1,100 to 1,500 physicians short by 2020 due to aging and population growth, retirements and attrition.

I have performed numerous focus groups across the state with physicians, business leaders, administrators and medical students. There are things that can be done by all sectors of society to help meet the physician demand, and I am happy to share this data with a task force and at a summit. For example, demand can be reduced by developing a team approach to care and implementing effective disease-management programs. Increasing supply can be achieved through expanded training, coordinated recruitment and retention with community input and focused attention on the physician practice environment. Sharing the burden between the medical sector, the community, industry and government, offers the best chance of success for systematically meeting the provider shortage challenges.

Thank you for considering this important topic.

Sincerely,

  
Kelley Withy, MD, PhD

**TESTIMONY OF ROBERT TOYOFUKU ON BEHALF OF THE HAWAII  
ASSOCIATION FOR JUSTICE (HAJ) formerly known as the CONSUMER LAWYERS  
OF HAWAII (CLH) IN SUPPORT OF S.C.R. NO. 146**

March 19, 2010

To: Chairman David Ige and Members of the Senate Committee on Health:

My name is Bob Toyofuku and I am presenting this testimony on behalf of the Hawaii Association for Justice (HAJ) in support of S.C.R. No. 146.

HAJ has been involved in commenting on many of the issues set out in this concurrent resolution and supports the convening of a task force to gather facts and study the issues.

Thank you for the opportunity to testify.