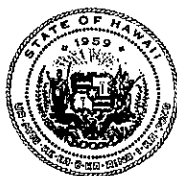


NEIL ABERCROMBIE
GOVERNOR OF HAWAII



LORETTA J. FUDDY, A.C.S.W., M.P.H.
ACTING 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 HEALTH

H.B. 889, RELATING TO HEALTH

Testimony of Loretta J. Fuddy, A.C.S.W., M.P.H.
Acting Director of Health

February 4, 2010, 9:00 a.m.

1 **Department's Position:** The Department of Health appreciates the overall concept of this bill as it
2 includes initiatives supportive of our goals and objectives to protect the public health. However, we
3 strongly prefer the alternate approach proposed in HB 406 as it would achieve similar goals over a more
4 reasonable time frame with attainable benchmarks.

5 **Fiscal Implications:** HB 889 as written would require increased staffing at a cost in excess of \$350,000
6 for a medical epidemiologist, research statistician, statistical clerk, IT specialist and a .5 FTE planner.
7 Hospital and healthcare provider costs would also increase through the need to hire staff to comply with
8 additional uncompensated requirements.

9 **Purpose and Justification:** This bill seeks to reduce healthcare associated infections (HAI) by
10 requiring DOH to collect and report HAI rates. Implementation of this measure would require
11 developing administrative rules, establishing surveillance criteria, and implementing complex
12 technological reporting systems for collecting, analyzing, and reporting extensive healthcare data from
13 providers by January 2012. This proposed timeframe is untenable.

14 HB 406 achieves similar ends utilizing methods developed by the Centers for Disease Control
15 and Prevention (CDC) and the Centers for Medicaid and Medicare Services (CMS). Under this option,

1 healthcare facilities shall allow the department access to data submitted and processed through the
2 national HAI database. Adopting the alternative reporting system proposed in HB 406 will assure that
3 HAI data reported for Hawaii is consistent with national standards and comparable to data from other
4 states.

5 Thank you for the opportunity to testify.

Testimony of
Phyllis Dendle
Director of Government Relations

Before:
House Committee on Health
The Honorable Ryan I. Yamane, Chair
The Honorable Dee Morikawa, Vice Chair

February 4, 2011
9:00am
Conference Room 329

HB 889 RELATING TO HEALTH

Chair Yamane and committee members, thank you for this opportunity to provide testimony on HB 889 requiring hospitals to report infection rates.

Kaiser Permanente Hawaii has some concerns about this bill.

As you might guess protecting our patients from infection is of the greatest importance to the providers at Kaiser Permanente. We work hard at it and think we do a pretty good job. That said we can appreciate the desire to have more information.

This bill tasks the Hawaii Department of Health with designing and implementing a program specifically for Hawaii health care facilities. We think that's unnecessary. We urge you to consider instead HB 406.

HB 406 is based on the requirements of the Centers for Medicare and Medicaid Services (CMS) and the Centers for Disease Control and Prevention (CDC). It uses reporting requirements health care facilities will have to meet by federal law and requires health care facilities to authorize the department's use of this information. It provides protections for the information similar to what is in the bill before you.

Anytime the health care facilities or the department duplicates work already being done it creates additional costs. With that in mind we urge the committee hold this bill and instead consider HB 406. Thank you for your consideration.