

Testimony of
John M. Kirimitsu
Legal & Government Relations Consultant

Before:
Senate Committee on Health
The Honorable Josh Green, M.D., Chair
The Honorable Clarence K. Nishihara, Vice Chair

Senate Committee on Commerce and Consumer Protection
The Honorable Rosalyn H. Baker, Chair
The Honorable Brian T. Taniguchi, Vice Chair

March 11, 2011
2:45 pm
Conference Room 229

Re: SCR 10 Requesting The Auditor To Conduct An Impact Assessment Report On Legislation Mandating Coverage Of Palliative Care

Chairs, Vice Chairs, and committee members, thank you for this opportunity to provide testimony on SCR 10 requesting an Auditor's report regarding the social and financial impact of mandating coverage of palliative care.

Kaiser Permanente supports the recommendation for an audit impact assessment report, but would like to offer comments.

Kaiser recognizes the need for palliative care for Hawaii's growing aging population. Reportedly, persons older than 65 years--a group that currently represents 12.6% of the US population--will nearly double by 2030 to account for 20.2% of the US population.

Kaiser Hawaii developed a home-based model of palliative care that uses an interdisciplinary team of providers to manage symptoms and pain, provide emotional and spiritual support, and educate patients and family members on an ongoing basis about changes in the patient's condition. In 2004, Kaiser Hawaii's Palliative Care Program was named Community Supporter of the Year by Hospice Hawaii.

A trial study conducted at Kaiser Colorado and Kaiser Hawaii between 2002 and 2004 showed:

- **Higher satisfaction:** Approximately 80 percent and 93 percent of palliative care patients were very satisfied with their care 30 and 90 days after enrollment, respectively, well above the 74 percent and 81 percent figures within the usual care group.

- **More likely to die at home:** 71 percent of palliative care patients died at home, in accordance with their wishes, compared with 51 percent of usual care patients.
- **Lower utilization and costs:** Among palliative care patients, 22 percent visited the ED while 36 percent required hospitalization. Comparable figures for the usual care group were significantly higher—at 33 percent and 59 percent, respectively. The mean cost of care was \$12,670 for the palliative care group, compared with \$20,222 for the usual care group.

In examining the proposed bill, Kaiser Hawaii has concerns that its current language is overbroad. First, the bill expands coverage to anyone with a “chronic or serious medical condition”. The standard in the industry is that palliative care is reserved for terminally ill patients at the end of life. Likewise, expanding this palliative coverage to all extended family or household members who otherwise are ineligible for these services is beyond the industry standard. To assist the families, Kaiser Hawaii offers ongoing education and counseling, including a 24-hour nurse call center support line. We recommend reviewing the legislation to specifically see the impact of these two proposals.

Thank you for the opportunity to comment.

**Testimony by:
Ann Frost, PT
SCR 10, Requesting the Auditor to Conduct An Impact
Assessment Report on Legislation Mandating Coverage of
Palliative Care
Sen HTH/CPN Hearing, Wednesday, March 16, 2011
Room 229 – 2:45 pm**



Position: Support

Chairs Green and Baker, and Members of the Sen HTH/CPN Committees:

I am Ann Frost, P.T., President of HAPTA and member of HAPTA's Legislative Committee. HAPTA represents 250 physical therapists and physical therapist assistants employed in hospitals, nursing homes, the Armed Forces, the Department of Education and Department of Health (DOH) systems, and private clinics throughout our community. Physical therapists work with everyone, from infants to the elderly, to restore and improve function and quality of life. 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 function from neuromusculoskeletal injuries and impairments.

HAPTA believes that the Auditor's review and recommendations for mandating coverage for palliative care will facilitate further discussions in the community about palliative care and further health insurance coverage.

As physical therapists, we are part of the team of clinicians that provide care to patients with severe chronic pain or acute pain originating from cancer or noncancerous conditions. As such, we offer our expertise whenever it is needed.

I can be reached at (808) 382-2655 if you have any questions. Thank you for the opportunity to testify.

green1 - Karen

From: mailinglist@capitol.hawaii.gov
Sent: Tuesday, March 15, 2011 6:59 PM
To: HTHTestimony
Cc: jyadao@stfrancishawaii.org
Subject: Testimony for SCR10 on 3/16/2011 2:45:00 PM

Testimony for HTH/CPN 3/16/2011 2:45:00 PM SCR10

Conference room: 229
Testifier position: support
Testifier will be present: No
Submitted by: Joy Yadao
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Submitted on: 3/15/2011

Comments: