

NEIL ABERCROMBIE
GOVERNOR OF HAWAII



DIRECTOR OF HEALTH

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

In reply, please refer to:
File:

Committee on Finance

H.B. 774, RELATING TO STATE FUNDS

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

February 15, 2011

1 **Department's Position:** The Department of Health is in opposition to H.B. 774 due to the statutory
2 requirements of HRS 321H which would be impossible to meet with the passage of this bill.

3 **Fiscal Implications:** The Department estimates that \$1,640,000 will be transferred to the emergency
4 medical services special fund during the proposed two-year period. As of January 2011, there is a
5 balance of \$2.2M in the Neurotrauma Special Fund (NSF). The 2010 legislature passed Act 192 which
6 authorizes the director of finance to transfer from the Neurotrauma Special Fund to the general fund the
7 sum of \$1,000,000 or so much thereof as may be necessary for fiscal year 2010-2011. This will result in
8 reducing the Neurotrauma Special Fund balance to \$1.2M, of which \$985,000 funds critical multi-year
9 projects in the area of neurotrauma endorsed by the Department's State Traumatic Brain Injury and
10 Neurotrauma Advisory Boards, respectively. Three positions in the Disability Supports Branch are
11 funded through the NSF.

12 **Purpose and Justification:** H.B. 774 will severely impact the Department's responsibility to develop,
13 lead, administer, coordinate, monitor, evaluate, and set direction for a comprehensive system to support
14 and provide services for survivors of neurotrauma injuries in compliance with Neurotrauma, mandated
15 by HRS 321H-2. Two examples of the Department's efforts under HRS 321H-2, include the funding of

1 these life saving projects: 1) The Queen's Medical Center Statewide Stroke Network project to improve
2 the benefits of affording stroke victims timely access to expert stroke care evaluation and treatment
3 using tissue plasminogen activator (tPA) without the need to transfer patients to a tertiary facility; and 2)
4 The University of Hawaii Concussion Management project that will impact approximately 90,000 high
5 school student athletes statewide and result in the development of a standardized concussion
6 management protocol for Hawaii high school student athletes. The passage of H.B. 774 will not only
7 require the Department to terminate all of the multi-year contracts that are currently in place and
8 process, it will essentially eliminate and significantly reduce the effectiveness of the neurotrauma
9 program for at least three years in order to allow the special fund to replenish.
10 Thank you for this opportunity to testify.



LATE TESTIMONY

BRAIN INJURY ASSOCIATION OF HAWAII

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**STATE HOUSE
COMMITTEE ON FINANCE
FEBRUARY 15, 2011, 2:00 pm
STATE CAPITOL, CONF. RM. 308**

**Testimony in opposition of
HB 774, Relating to State Funds**

CHAIR MARCUS OSHIRO, VICE CHAIR MARILYN LEE, AND MEMBERS OF THE COMMITTEE:

The Brain Injury Association of Hawaii (BIA-HI) strongly opposes HB 774, which requires the temporary deposit of surcharge revenues to the Emergency Medical Services Special Fund from the Neurotrauma Special Fund.

Clearly, the Emergency Medical Services does not understand the importance of the Neurotrauma Special Fund to survivors of "neurotrauma," which includes brain injuries, spinal cord injuries and strokes. The Neurotrauma Special Fund was established by the State Legislature because of the apparent lack of awareness and understanding of the causes and consequences of neurotrauma. The Neurotrauma Special Fund was patterned after Trust Funds on the U.S. Mainland that serve brain injury survivors. Since traffic accidents are the main cause of brain injuries and spinal cord injuries, their penalties are the source of funds.

The Neurotrauma Special Fund has been able to fund projects that help the community, such as the DOE Study on Concussion among Student Athletes, and the Queen's Medical Center's Falls Study, which will help in preventing brain injuries among our youth and senior population.

We understand that the present economic situation is driving state and county services to look for funds they can use. However, taking the whole Neurotrauma Special Funds and transferring that to the Emergency Medical Services Special Fund for the next two years is just too much.

We urge you to stop HB 774. It will deprive a large group of underserved individuals in Hawaii the opportunity to be heard and eventually get the proper services that they need.

Respectfully Submitted,

Lynn O. Burian

Member, BIA-HI Board of Directors