

TESTIMONY BY KALBERT K. YOUNG
DIRECTOR, DEPARTMENT OF BUDGET AND FINANCE
STATE OF HAWAII
TO THE HOUSE COMMITTEES ON HEALTH AND
LABOR & PUBLIC EMPLOYMENT
ON
HOUSE BILL NO. 1484

February 6, 2013

RELATING TO THE HAWAII HEALTH SYSTEMS CORPORATION

House Bill No. 1484 makes the following amendments to Chapter 325F, HRS, which governs the Hawaii Health Systems Corporation (HHSC): establishes a new personnel system and retirement system; creates new collective bargaining units; reduces the governance structure from five to two regional systems; authorizes the Governor to appoint six additional community members to the corporation board; changes the regional chief executive officers from voting to nonvoting members; and clarifies powers of the HHSC board and regional boards.

The Department of Budget and Finance opposes this measure for the following reasons:

1. The measure establishes a new retirement system separate from the State employee's retirement system without providing specific details with regards to vesting periods, retirement benefits, and contributions for this new retirement system, nor does the bill provide details on how this new retirement system will be funded which may hold the State responsible for significant retirement benefits liabilities because there are no limitations contained in the bill. HHSC is not self-sufficient and receives significant State general fund subsidies. A new retirement system whereby the State is not responsible for the long-term liability of the system would be a more favorable consideration.

2. HHSC is already recognized as a separate public employer jurisdiction pursuant to Section 89-2, HRS. As such, HHSC already has the authority to negotiate supplemental agreements to existing collective bargaining agreements under Section 89-6(e), HRS. HHSC has been operating under a revenue shortfall and collective bargaining agreements for HHSC employees have been funded by the State general fund. As long as the State and the General Fund remains responsible for covering HHSC's collective bargaining costs, the Governor should have an equal and significant voice in collective bargaining negotiations.
3. Presently, HHSC is exempted from the provisions of Chapter 37D, HRS, if a financing agreement is less than \$5,000,000 and the aggregate in any fiscal year does not exceed \$25,000,000. House Bill No. 1484 removes these dollar limits; thus, enabling HHSC to enter into financing agreements without any financial oversight from the State. Considering that the State continues to be responsible for a number of long-standing liabilities of the System, any revision that removes State oversight, but leaves State liability is not tenable.

TESTIMONY BY WESLEY K. MACHIDA
ADMINISTRATOR, EMPLOYEES' RETIREMENT SYSTEM
STATE OF HAWAII
TO THE HOUSE COMMITTEE ON HEALTH
AND
THE HOUSE COMMITTEE ON LABOR AND PUBLIC EMPLOYMENT
ON
HOUSE BILL NO. 1484

FEBRAURY 6, 2013

RELATING TO THE HAWAII HEALTH SYSTEMS CORPORATION

Chair Bellati, Chair Nakashima and Members of the Committees:

H.B. 1484 allows the Hawaii Health Systems Corporation (HHSC) to establish a separate benefit structure, including a new retirement system, for new HHSC employees and to allow current employees who are currently members of the Employees' Retirement System (ERS) to opt into membership with the Hawaii health systems corporation retirement system.

The ERS Board of Trustees opposes this bill as it would jeopardize the tax qualification of the ERS.

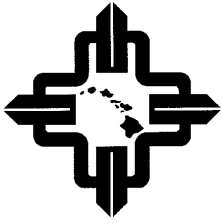
The ERS is a tax-qualified retirement plan under section 401(a) of the Internal Revenue Code of 1986, as amended (Code). Section 414(h)(2) of the Code provides for favorable tax treatment for employee contributions "picked up" (made by the employer on behalf of the employee) to a tax-qualified retirement plan established by the state or county. Should the ERS lose its tax-exempt status, the federal tax consequences would be extremely harmful to its members. Contributions received from employee members would no longer have favorable pre-tax treatment; instead, employees' contributions to the ERS would be entirely subject to federal tax at the time of contribution. In addition, all members would be taxed on the value of their total accrued retirement benefits at the time they vest rather than when they receive their retirement benefits.

Any legislation that permits a current Contributory or Hybrid member to "opt out" of the ERS (and receive a distribution of accumulated contributions while still employed) creates a tax-qualification issue. This bill violates the rule in Revenue Ruling 2006-43 that prohibits 401(k)-type elections in government pick-up plans. In addition, if in service

distributions are permitted, this legislation also violates the long-standing rule that prohibits such distributions from defined benefit pension plans like the ERS.

The ERS Board is committed to preserving the tax-qualified status of the ERS, and therefore strongly opposes the passage of this bill.

Thank you for the opportunity to testify on this important measure.



HAWAII HEALTH SYSTEMS
C O R P O R A T I O N
Quality Healthcare For All

**House Committee on Health
Representative Della Au Belatti, Chair
Representative Dee Morikawa, Vice-Chair**

And

**House Committee on Labor Representative Mark Nakashima, Chair
Representative Mark Hashem, Vice-Chair**

Wednesday, February 6, 2013, 8:30 a.m.
Conference Room 329
Hawaii State Capitol

Testimony on House Bill 1484, Relating to the Hawaii Health Systems Corporation. Amends the governance structure of the Hawaii health Systems Corporation (HHSC). Makes the regional chief executive officers nonvoting board members. Establishes the HHSC personnel system and retirement system. Creates new collective bargaining units. Authorizes the governor to appoint 6 additional community board members. Clarifies the powers of the HHSC board and regional boards. Effective July 1, 2013.

Bruce S. Anderson, Ph.D.
President and Chief Executive Officer
Hawaii Health Systems Corporation

Hawaii Health Systems Corporation (HHSC) strongly supports HB 1483 to restructure HHSC after the Maui and Big Island regions move out of the system. This bill is essential in order to clarify the powers of the HHSC and regional system boards and improve the current governance structure. Specifically, the bill does the following:

1. Removes E. Hawaii, W. Hawaii and Maui regions. This is based on the assumption that those regions will transition into a new entity.
2. Changes corporate board structure. Regional Chief Executive Officers (RCEOs) become nonvoting members. Each Regional System Board (RSB) will appoint 2 members, and the governor will appoint 2 members from each of the two regions (Oahu and Kauai). The governor appoints 2 at large, and the Director of Health remains an ex-officio voting member; RCEOs become ex-officio, nonvoting members.
3. Corporate board powers are altered to give the corporate board additional power to

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www.hhsc.org <<http://www.hhsc.org>>

amend, reject, or approve regional and facility budgets, to give money to wholly or partially owned private entities, and the corporate board and regional boards together hire and fire RCEOs. The power to mortgage real property owned by HHSC is added back in and restrictions on lease financing lifted.

4. Clarifies that HHSC is the sole employer with collective bargaining negotiating authority.

5. Regional board powers are separated out of the statute from the corporate board powers in order to clarify exactly what each type of board has control over. All RSB powers must be exercised consistent with corporate policies and procedures, as in the current law. Regions have day to day operational responsibilities and decision making authority. The RSBs remain the governing body for medical staff matters. Custodial control over facilities, property, and employees remains with the RSBs. The RSBs also retain decision making authority over moving money around their facilities within their respective regions and can lend or give money to other regions with corporate board approval.

6. Language was added allowing HHSC to set up a separate retirement system for all new employees. Existing employees have the option of switching over. The EUTF is not affected.

7. The bill sets up separate bargaining units for HHSC employees, with the governor and HHSC having equal votes for those units. Amendment of several laws and new sections of 323F were needed to effectuate this change.

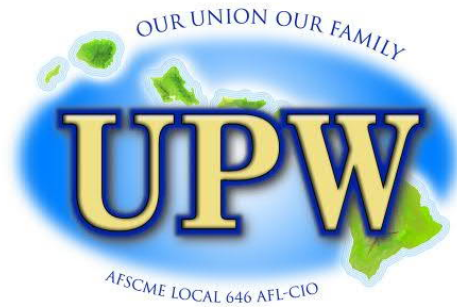
8. Obsolete provisions, like the Management Advisory Committees (MACs.), were deleted.

HHSC submits that these changes are needed in order to promote a more cohesive system of hospitals. As stated in the purpose clause, a system with clear lines of authority is needed in order to compete in the current health care environment and be ready for all of the changes to come. There has been a great deal of confusion as to the power of the regional boards and the corporate board under the existing law, with HHSC being the sole legal entity but the RSBs having the power to make major policy decisions and set their own budgets. It is very difficult to make major decisions under the current structure.

In addition, the Regional CEOs have the nearly impossible task of trying to ignore what is best for their region alone while sitting as a system board member. The duty of loyalty is owed to the whole system, not just one region. Both the Kauai and Oahu regional CEOs agree that they should not be voting board members. Restructuring the governance structure to allow the governor to appoint more board members will also add more talent and resources to our overtaxed corporate board.

Separate bargaining units will allow HHSC to negotiate for contracts covering its employees, in order to provide for the unique circumstances of running hospitals, which is very different from running other government operations.

All of the changes are needed in order to promote systemness and efficiency in running the state hospital system. Thank you for the opportunity to speak in strong support of this measure.



THE HAWAII STATE HOUSE OF REPRESENTATIVES
The Twenty-Seventh Legislature
Regular Session of 2013

COMMITTEE ON HEALTH

The Honorable Rep. Della Au Belatti, Chair
The Honorable Rep. Dee Morikawa, Vice Chair

DATE OF HEARING: Wednesday, February 06, 2013
TIME OF HEARING: 8:30 A.M.
PLACE OF HEARING: Conference Room 329

TESTIMONY ON HB1484 RELATING TO THE HAWAII HEALTH
SYSTEMS CORPORATION

By DAYTON M. NAKANELUA,
State Director of the United Public Workers,
AFSCME Local 646, AFL-CIO ("UPW")

My name is Dayton M. Nakanelua and I am the State Director of the United Public Workers, AFSCME, Local 646, AFL-CIO (UPW). The UPW is the exclusive representative for approximately 14,000 public employees, which include blue collar, non-supervisory employees in Bargaining Unit 1 and institutional, health and correctional employees in Bargaining Unit 10, in the State of Hawaii and various counties. The UPW also represents about 1,500 members of the private sector.

The UPW strongly opposes HB1484 relating to the Hawaii Health Systems Corporation. This measure does not affirm the State's commitment to provide high-quality health care for the people of this State. While we recognize the complexity of the situation, we do not feel that this bill is a move in the right direction.

Thank you for the opportunity to testify on this measure.

House of Representatives
The Twenty Seventh Legislature

Notice of Hearing:
February 6, 2013
8:30 a.m.
Conference Room 329
State Capitol
415 South Beretania Street

TO: Committee on Health:
Representative Della Au Belatti, Chair
Representative Dee Morikawa, Vice Chair
Committee on Labor and Public Employment:
Representative Mark M. Nakashima, Chair
Representative Mark J. Hashem, Vice Chair

FROM: Susan B. Hunt
P.O. Box 6255
Kamuela, HI 96743
808-936-3572

RE: HB 1483 Relating to the Hawai'i Health Systems Corporation
HB 1484 Relating to the Hawai'i Health Systems Corporation

Thank you for the opportunity to submit testimony in SUPPORT of HB 1483 and HB 1484 which permit the regional systems of the Hawai'i Health Systems Corporation and their health facilities to transition to non-public status and amends the governance structure of the Hawai'i Health Systems Corporation (HHSC).

My name is Susan Hunt and I have had the privilege of serving as a health care administrator in the State of Hawai'i since 1991. I currently serve as a member of the East Hawai'i Regional Board (HHSC) and Chair the Strategic Planning Committee.

In planning for the future of the East Hawai'i Region which includes Hilo Medical Center and two critical access hospitals – Hale Ho Ola Hamakua and Kau Hospital, it has become apparent that the current infrastructure supporting these facilities has become outdated and inadequately equipped to move the organizations forward in a new era of health care delivery and financing. Along with fellow board members of the West Hawai'i Regional Board and the Maui Regional Board, we agree that a new approach to delivering care to our communities is essential and under our current system structure the opportunities are limited.

Hospitals that survive and thrive in this challenging environment will be those that address payment cuts and change their operating models by implementing sustainable, systematic transformation to

bend the healthcare cost curve, not by implementing short-term incremental change or maintaining the status quo. This transformation requires focus not only on eliminating expense and maximizing revenue but also on quality improvements that avoid payment penalties.

These two bills allow HHSC to begin the process of restructuring to meet the challenges we face over the next 10 years which include up to \$200 billion in reimbursement cuts nationally and penalties for failing to demonstrate meaningful use of health information technology. In addition, up to 8% of total payments made to hospitals will be tied to quality improvements based on the ability to adhere to evidence based care measures, reduction in readmission rates and prevention of hospital acquired conditions.

Banner Health System presents an outstanding template of successful performance in today's challenging health care environment. They have found ways to optimize clinical practice and care delivery, reduce waste, enhance revenue, align physicians, foster collaboration and implement state of the art technology. We must learn from them and completely understand what HHSC will need in the future to thrive and survive. At this time we are only investigating the possibilities.

As a member of the East Hawai'i Regional Board it is my responsibility to ensure that we are making the right choices for our community – choices that ensure our hospitals will remain viable for years to come. As a tax payer I also want to ensure that my tax dollars are supporting a system of health care delivery that is state of the art and one of which we can be proud.

Thank you for allowing me to testify in support of HB1483 and HB 1484. Your support of these bills would be greatly appreciated.

House of Representatives
The Twenty-Seventh Legislature, State of Hawaii
Regular Session of 2013
Committee on Health

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February 6, 2013

H.B. 1483 – RELATING TO
THE HAWAII HEALTH SYSTEMS CORPORATION

H.B. 1484 – RELATING TO
THE HAWAII HEALTH SYSTEMS CORPORATION

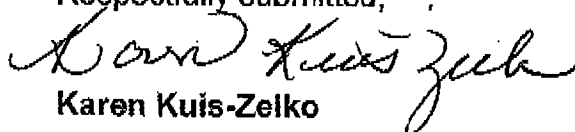
Chair Belatti, Chair Nakashima, and members of the Committee on Health and Committee on Labor & Public Employment:

Thank you for the opportunity to provide testimony in **strong opposition of the language in H.B. 1483 and H.B. 1484**, which permits the regional systems of the Hawaii health systems corporation and their health facilities to transition to non-public status and amends the governance structure of the Hawaii Health Systems Corporation (HHSC).

My name is **Karen Kuis-Zelko**, and I have worked as a **X-ray tech** for the **Hale Ho'ola** for **13 years**. As a government employee, I dedicate my career to public service. Banner Health is a national nonprofit hospital system that only wants private employees. If they take over, they will most likely terminate all employees in **Hale Ho'ola**, and re-hire only those who pass pre-employment requirements. Banner Health does not believe in unions, and my civil servant service status and benefits will be lost as I will no longer be a state employee. With regards to its impact in the community, if Banner Health deems services unfeasible to maintain or lack clinical quality, they will cut those vital services and possibly close facilities that our community depends on. For example, Banner Health has minimal experience with services such as long-term care that are currently provided to our community. Additionally, with Banner Health, Hawaii taxpayers' dollars will be supporting and funding a mainland company to provide Hawaii health services. It deeply troubles me that the Legislature is considering this partnership.

I **strongly oppose the passage of H.B. 1483 and H.B. 1484**. Thank you for the opportunity to provide testimony.

Respectfully submitted,


Karen Kuis-Zelko

morikawa2 - Shaun

From: mailinglist@capitol.hawaii.gov
Sent: Tuesday, February 05, 2013 8:55 AM
To: HLTtestimony
Cc: pbasabe@hawaii.rr.com
Subject: *Submitted testimony for HB1484 on Feb 6, 2013 08:30AM*

Follow Up Flag: Follow up
Flag Status: Flagged

HB1484

Submitted on: 2/5/2013

Testimony for HLT/LAB on Feb 6, 2013 08:30AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Pete Basabe	Individual	Oppose	No

Comments:

Please note that testimony submitted less than 24 hours prior to the hearing, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

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House of Representatives
The Twenty-Seventh Legislature, State of Hawaii
Regular Session of 2013
Committee on Health
Committee on Labor & Public Employment

February 6, 2013

H.B. 1483 – RELATING TO
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My name is **Cindy DeSa**, and I have worked as a **Registered Nurse** for the **Hilo Medical Center** for **3 years**. As a government employee, I dedicate my career to public service. ~~Banner Health is a national non-profit hospital system~~ that only wants private employees. If they take over, they will most likely terminate all employees in **Hilo Medical Center**, and re-hire only those who pass pre-employment requirements. Banner Health does not believe in unions, and my civil servant service status and benefits will be lost as I will no longer be a state employee. With regards to its impact in the community, if Banner Health deems services unfeasible to maintain or lack clinical quality, they will cut those vital services and possibly close facilities that our community depends on. For example, Banner Health has minimal experience with services such as long-term care that are currently provided to our community. Additionally, with Banner Health, Hawaii taxpayers' dollars will be supporting and funding a mainland company to provide Hawaii health services. It deeply troubles me that the Legislature is considering this partnership.

I strongly oppose the passage of H.B. 1483 and H.B. 1484. Thank you for the opportunity to provide testimony.

Respectfully submitted,



Cindy DeSa, Registered Nurse

House of Representatives
The Twenty-Seventh Legislature, State of Hawaii
Regular Session of 2013
Committee on Health
Committee on Labor & Public Employment

February 6, 2013

H.B. 1483 – RELATING TO
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My name is **Alisa Malama**, and I have worked as a **CLERK IV** for the **HILO MEDICAL CENTER** for **13 years**. As a government employee, I dedicate my career to public service. Banner Health is a national nonprofit hospital system that only wants private employees. If they take over, they will most likely terminate all employees in **Hilo Medical Center**, and re-hire only those who pass pre-employment requirements. Banner Health does not believe in unions, and my civil servant service status and benefits will be lost as I will no longer be a state employee. With regards to its impact in the community, if Banner Health deems services unfeasible to maintain or lack clinical quality, they will cut those vital services and possibly close facilities that our community depends on. For example, Banner Health has minimal experience with services such as long-term care that are currently provided to our community. Additionally, with Banner Health, Hawaii taxpayers' dollars will be supporting and funding a mainland company to provide Hawaii health services. It deeply troubles me that the Legislature is considering this partnership.

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Respectfully submitted,



House of Representatives
The Twenty-Seventh Legislature, State of Hawaii
Regular Session of 2013
Committee on Health
Committee on Labor & Public Employment

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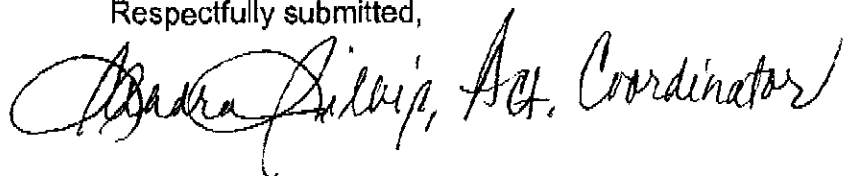
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My name is **Sandra Silvis**, and I have worked as a **Activity Coordinator** for the **Hilo Medical Center- Hale Ho'ola** for **1 ½ years**. . As a government employee, ~~I dedicate my career to public service. Banner Health is a national nonprofit~~ hospital system that only wants private employees. If they take over, they will most likely terminate all employees in **Hilo Medical Center- Hale Ho'ola**, and re-hire only those who pass pre-employment requirements. Banner Health does not believe in unions, and my civil servant service status and benefits will be lost as I will no longer be a state employee. With regards to its impact in the community, if Banner Health deems services unfeasible to maintain or lack clinical quality, they will cut those vital services and possibly close facilities that our community depends on. For example, Banner Health has minimal experience with services such as long-term care that are currently provided to our community. Additionally, with Banner Health, Hawaii taxpayers' dollars will be supporting and funding a mainland company to provide Hawaii health services. It deeply troubles me that the Legislature is considering this partnership.

I strongly oppose the passage of H.B. 1483 and H.B. 1484. Thank you for the opportunity to provide testimony.

Respectfully submitted,



House of Representatives
The Twenty-Seventh Legislature, State of Hawaii
Regular Session of 2013
Committee on Health
Committee on Labor & Public Employment

February 6, 2013

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My name is **Margaret Ruelke**, and I have worked as a **RPN-111** for the **Hilo Medical center** for **13**. As a government employee, I dedicate my career to public service. Banner Health is a national nonprofit hospital system that only wants private employees. If they take over, they will most likely terminate all employees in **Hilo Medical Center**, and re-hire only those who pass pre-employment requirements. Banner Health does not believe in unions, and my civil servant service status and benefits will be lost as I will no longer be a state employee. With regards to its impact in the community, if Banner Health deems services unfeasible to maintain or lack clinical quality, they will cut those vital services and possibly close facilities that our community depends on. For example, Banner Health has minimal experience with services such as long-term care that are currently provided to our community. Additionally, with Banner Health, Hawaii taxpayers' dollars will be supporting and funding a mainland company to provide Hawaii health services. It deeply troubles me that the Legislature is considering this partnership.

I **strongly oppose the passage of H.B. 1483 and H.B. 1484**. Thank you for the opportunity to provide testimony.

Respectfully submitted,



Margaret Ruelke, RN

House of Representatives
The Twenty-Seventh, State of Hawaii
Regular Session of 2013
Committee on Health
Committee on Labor & Public Employment

February 6, 2013

H.B. 1483 - RELATING TO THE HAWAII HEALTH SYSTEMS CORPORATION
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My name is *RUTH N. HARPER* and I have worked as a *ER TRANSPORTER* For the Maui Memorial Medical Center for *6* years. As a government employee, I dedicate my career to public service. Banner Health is a national nonprofit hospital system that only wants private employees. If they take over, they will most likely terminate all employees in Maui Memorial Medical Center, and re-hire only those who pass pre-employment requirements. Banner Health does not believe in unions, and my civil servant service status and benefits will be lost as I will no longer be a state employee. With regards to its impact in the community, if Banner Health deems services unfeasible to maintain or lack clinical quality, they will cut those vital services and possibly close facilities that our community depends on. For examples, Banner Health has minimal experience with services such as long-term care that are currently provided to our community. Additionally, with Banner Health, Hawaii taxpayers' dollars will be supporting and funding a mainland company to provide Hawaii health services. It deeply troubles me that the Legislature is considering this partnership.

I strongly oppose the passage of H.B. 1483 and H.B. 1484. Thank you for the opportunity to provide testimony.

Respectfully submitted,

Ruth N. Harper

As an employee of Maui Memorial Medical Center I am submitting testimony with a little fear and trepidation to oppose HB 1483. Should this bill pass I fear that it would have very negative impacts on our community and families.

First I fear that there could be a severe reduction in services particularly in the areas that don't generate money but rather lose money. These areas would be mental health, indigent care to the uninsured or underinsured, visits to the ER for those who have no doctor or worse can't find one. Can you afford to have more patients transferred to O'ahu and Hawai'i State Hospital or other facilities because of a declining number of beds on Maui or elsewhere? What will you say to the family that may lose a loved one because the ER restricts a visit that was deemed not to be critical in nature? Believe me people do die from neglected things such as centipede bites. Restricted care could only compound the problem. What if cancer treatment is restricted or curtailed? Will we have to seek care on O'ahu or the mainland when we use to be able to get it here on Maui? Will I need to go to O'ahu to see a loved one who is now in long term care because beds have been closed down? Will our kupuna now have to die alone with no loved ones near?

The incoming of a private management company to manage MMMC, Hilo Medical Center and Kona Community Hospital will surely lead to the loss of physicians to these areas which could lead to a worsening problem of doctors for areas such as Hilo. Private MDs could be restricted from practicing at these facilities because they are not part of the hospital chain of providers of care.

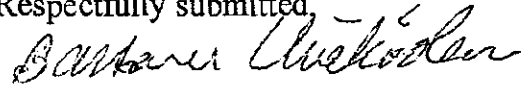
Why is this new private company being allowed to cherry pick what facilities the HHSC has? Worse yet they shall have free use of facilities and receive supplemental payments. This deal will cost the state millions in those costs plus costs for employees vacation and compensatory payments when we are no longer state employees. I equate this to the same thinking of sending prisoners to the mainland. All this money will go to a mainland company just like all the money for housing prisoners on the mainland.

The management at MMMC has done little to fully explain to employees what these changes will mean to us. Simple analogies have been used such as dating or engaged. Quite frankly I think we're into heavy petting now. Likewise the public is very little aware of what is occurring to our facilities.

Finally I fear for the change in culture that mainland doctors and staff would bring. I spend a portion of my time acquainting others with many of our local customs and beliefs. Having spent time on O'ahu at Queen's

medical center for an illness I found only the security guard and transporter could say or even attempted to say my name. It is insulting when people hear that others don't understand their English or customs.

Respectfully submitted,



Barbara RS "Susie" Uweko'olani RN, BSN
165 Ani Street, Kahului, HI, 96732

House of Representatives
The Twenty-Seventh, State of Hawaii
Regular Session of 2013
Committee on Health
Committee on Labor & Public Employment

February 6, 2013

H.B. 1483 – RELATING TO THE HAWAII HEALTH SYSTEMS CORPORATION
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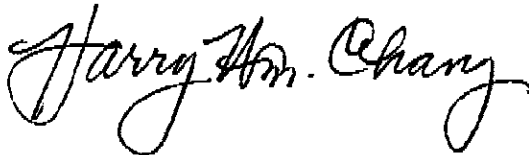
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My name is **HARRY W. CHANG**, and I have worked as a **RADIOLOGY CLERK** For the Maui Memorial Medical Center for **3** years. As a government employee, I dedicate my career to public service. Banner Health is a national nonprofit hospital system that only wants private employees. If they take over, they will most likely terminate all employees in Maui Memorial Medical Center, and re-hire only those who pass pre-employment requirements. Banner Health does not believe in unions, and my civil servant service status and benefits will be lost as I will no longer be a state employee. With regards to its impact in the community, if Banner Health deems services unfeasible to maintain or lack clinical quality, they will cut those vital services and possibly close facilities that our community depends on. For examples, Banner Health has minimal experience with services such as long-term care that are currently provided to our community. Additionally, with Banner Health, Hawaii taxpayers' dollars will be supporting and funding a mainland company to provide Hawaii health services. It deeply troubles me that the Legislature is considering this partnership.

I strongly oppose the passage of H.B. 1483 and H.B. 1484. Thank you for the opportunity to provide testimony.

Respectfully submitted,



NEIL ABERCROMBIE
GOVERNOR OF HAWAII



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

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

In reply, please refer to:
File:

February 5, 2013

TO: Honorable Dee Morikawa
Hawaii State Capitol, Room 310
phone: 808-586-6280
fax: 808-586-6281

FROM: Lorrin Kim
Office of Planning, Policy, and Program Development

SUBJECT: Hearing Notice Request

We are requesting hearing for the following:

- House Bill No. 893

We are faxing 2 pages which include this cover sheet.

Should you have any questions please call us at 586-4188.

Promoting Lifelong Health & Wellness

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HONOLULU, HI 96801-3378

In reply, please refer to
File:

February 4, 2013

The Honorable Della Au Belatti
Chair, House Committee on Health
Twenty-Seventh State Legislature
State Capitol, Room 331
Honolulu, HI 96813

Dear Chair Belatti:

House Bill No. 893, Relating to Dietitian Licensure Special Fund, is an Administration Proposal referred to your committee. This legislative proposal is a housekeeping measure that will allow fees collected to license dietitians to be used to support licensing operations.

I respectfully request a hearing at your earliest convenience so that I and other supporters of this bill can provide information to you and the members of your committee on the need and importance of this legislation.

Please do not hesitate to contact me at 586-4410 if you have any concerns, or our Planning Office at 586-4189 for specific coordination issues. We look forward to a productive session with you.

Thank you and aloha.

Sincerely,

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

c: Speaker Joe Souki
Office of the Governor, Policy

Promoting Lifelong Health & Wellness