

SB1085

LATE

TESTIMONY

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University of Washington

Mub Hamannann, Former Mayor
City and County of Honolulu

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Corporate Communications Manager
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John A. Burns School of Medicine

Ma Niguchi, President
Lotus Pond Communications

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Diagnostic Laboratories Services, Inc.

Executive Director
Leslie Lam

February 5, 2013

The Honorable, Senator Josh Green, MD – Chair, Senate Health Committee
Hawaii State Capitol Room 215
415 South Beretania Street
Honolulu, Hawaii 96813

Dear Senator Green and Members of the Senate Health Committee,

The American Diabetes Association (ADA) supports legislative bills that promote diabetes prevention and persuade strategies that encourage healthy outcomes. In Hawaii, childhood obesity has increased by thirty-eight percent between 1999 and 2009, and adult obesity has more than doubled between 1996 and 2011. Thus, we clearly see a direct correlation with the rise in obesity and the rise in diabetes diagnosis.

Why should the legislature care about obesity and the growing diabetes epidemic? We commend the legislature taking the lead in the fight against obesity and diabetes in Hawaii. **Diabetes now affects more than 113,000 Hawaii residents.** If trends continue, 1 out of 3 children born in the year 2000 in the United States are expected to develop type 2 diabetes in their lifetime. **In Hawaii, the proportion is closer to 1 in 2.**

Diabetes is one of the most serious, common, and costly diseases in Hawaii and across the United States. **The national cost of diabetes in the U.S. exceeds \$174 billion. In Hawaii, it is approximately \$1,038,000,000.** This estimate includes excess medical costs of \$764,400,000 attributed to diabetes and lost productivity valued at \$273,600,000.

If we do not do something about this growing epidemic, the quality of life and the economic cost to Hawaii will be crippling. Because of this, the American Diabetes Association strives to improve public policy as it relates to diabetes. This impending crisis signals a need to implement coordinated efforts utilizing existing services as well as those that need to be developed to effectively meet this public health challenge.

The American Diabetes Association believes **SB 1085**, will effectuate positive movements to reduce the social and economic burden of diabetes in Hawaii and help realize the vision of the ADA for a life free of diabetes and all its burdens.

If you would like to receive additional information or have any questions or concerns please contact me at llam@diabetes.org or 808.393.7319.

Sincerely,



Jane Kadohoro, DrPH, APRN, CDE, FADE
Advocacy Committee Chair
American Diabetes Association



Leslie Lam
Executive Director – Hawaii
American Diabetes Association



February 6, 2013

TO: Senate Committee on Health
Senator Josh Green, MD, Chair
Senator Rosalyn H. Baker, Vice Chair

Senate Committee on Judiciary and Labor
Senator Clayton Hee, Chair
Senator Maile S.L. Shimabukuro, Vice Chair

FR: **M.R.C. Greenwood, PhD**

RE: **SB 1085 Strong Support**
Hearing Date: Wednesday, February 6, 2013, 1:15pm, Conf. Rm #229

Dear Chair Green, Chair Hee, and members of the Committee on Health and Committee on Judiciary and Labor,

Thank you for the opportunity to provide testimony in **strong support of SB 1085** which establishes a fee on the sale of sugar sweetened beverages in the State.

I have spent several decades studying obesity and diabetes, having served as president of the American Society of Clinical Nutrition, chair of the Food and Nutrition Board of the Institute of Medicine, and Fellow of the American Society for Nutrition. More recently, I have served as vice-chair of the Committee on Accelerating Progress in Obesity Prevention (APOP) for the Institute of Medicine and chair of the Hawaii Childhood Obesity Prevention Task Force. Naturally, this proposal is one in which I have great interest.

An obesity epidemic is sweeping the nation. As portion sizes have increased and physical activity levels have decreased, we now find ourselves in crisis. One out of three children is overweight or obese. Two out of three adults are overweight or obese. The estimated cost of obesity-related illness is close to \$200 billion annually - that is more than 20% of all health care spending. Experts estimate an annual loss of \$4.3 billion dollars to businesses because of obesity-related absenteeism. Additionally, obesity is associated with a number of health consequences, including cardiovascular disease, diabetes, high blood pressure, sleep apnea, and depression.

Hawaii's population of overweight or obese children and adults mirrors the national percentages. An estimated \$470 million is spent on obesity-related health problems right here in our state.

While there are numerous ways in which we can combat this epidemic, and indeed, both the APOP report and the Childhood Obesity Prevention Task Force report provide dozens of strategies and recommendations to that end, it is impossible to deny that sugar sweetened beverages play an important role in this problem. Sugar sweetened beverages are the largest source of excess calories in the U.S. diet. Children and adolescents now consume 10 to 15 percent of their daily caloric intake from sugar sweetened beverages, calories that otherwise

meet no nutritional need. The prevalence and low cost of such beverages make our young people vulnerable to the risks of obesity and related health issues.

In addition to slowing the rapidly-increasing consumption of sugar sweetened beverages, implementation of a beverage fee would provide revenue to support the many programs and strategies recommended in the national and statewide reports.

I believe that Hawaii needs to address its own obesity epidemic before the health and societal costs become prohibitive. Implementing a sugar sweetened beverage fee is an important step in the right direction.

Thank you for the opportunity to provide this testimony.



Wednesday, February 6, 2013
1:15 P.M.
Conference Room 229

To: Senate Committee on Health
Senator Josh Green, M.D., Chair
Senate Committee on Judiciary and Labor
Senator Clayton Hee, Chair

From: Hawaii Public Health Association
Deborah Zeisman, President

Re: **Strong support to SB1085, Relating to Obesity Prevention**

Dear Senator Green, Senator Hee & Members of the Senate Committee on Health & Senate Committee on Judiciary and Labor,

The Hawaii Public Health Association (HPHA) **strongly supports** SB1085 that establishes a fee on the sale of sugar-sweetened beverages in the State. Funds collected from this fee would be utilized to create an obesity prevention special fund to be administered by the Department of Health. The fund would be used to support population-based programs that use educational, environmental, policy, and other public health approaches relating to diabetes, cardiovascular disease, promotion of healthy lifestyles, physical fitness, nutrition, early childhood health, and other prevention-oriented public health programs.

The Hawaii Public Health Association was founded in 1945. Our membership consists of more than 600 public health professionals working in governmental agencies and non-profit organizations statewide, and our mission is to promote public health in Hawaii through leadership, collaboration, education and advocacy.

Decisive public health policy measures must be implemented to counteract the rising rates of sugar-sweetened beverage consumption among children and adults in the United States. Sugar-sweetened beverages are the largest source of excess calories in the U.S. diet. Children and adolescents, now consume 10 to 15 percent of their daily caloric intake from sugar-sweetened beverages, calories that otherwise meet no nutritional need. Consumption of these drinks is a significant contributor to the obesity epidemic and increases the risk of type 2 diabetes, heart disease, and dental decay.

Obesity related chronic diseases cost the country billions of health care dollars each year and are complex problems which must be addressed with multi-faceted strategies, including policy initiatives. Obesity related expenditures in Hawaii were calculated to be over \$470 million in 2009, and are continuing to rise. Taxing certain classes of products to reduce consumption has been proposed as one means of improving the nutrition, raising revenue for health programs, and recovering costs caused by consumption of calorie-dense, nutrient poor foods.

A sugar-sweetened beverage fee would be beneficial for Hawaii in that it could help improve the health of Hawaii residents, would raise funds for crucial public health programs, and could lead to a decrease in obesity related medical expenditures in our State. If passed, a rigorous evaluation of the impact of the fee should be conducted throughout its implementation. We urge you to support the passage of SB1085. Thank you for the opportunity to testify.

Sincerely,

Deborah Zeisman, President



American Cancer Society
Cancer Action Network
2370 Nuʻuanu Avenue
Honolulu, Hawaiʻi 96817
808.432.9149
www.acscan.org

Senate Committee on Health
Senator Josh Green, Chair
Senator Roz Baker, Vice Chair

Senate Committee on Judiciary and Labor
Senator Clayton Hee, Chair
Senator Maile Shimabukuro, Vice Chair

Hearing: February 6, 2013; 1:15 p.m.

SB 1085 – RELATING TO OBESITY PREVENTION

Cory Chun, Government Relations Director – Hawaii Pacific
American Cancer Society Cancer Action Network

Thank you for the opportunity to provide comments on SB 1085, which establishes a \$.01 per ounce fee on sugar on sugar sweetened beverages with the money dedicated to the obesity prevention special fund.

The American Cancer Society Cancer Action Network (ACS CAN), the advocacy affiliate of the American Cancer Society, is the nation's leading cancer advocacy organization. ACS CAN works with federal, state, and local government bodies to support evidence-based policy and legislative solutions designed to eliminate cancer as a major health problem.

The purpose of this measure is to establish a fee on sugar sweetened beverages, syrup, and powder with revenues to be deposited into the obesity prevention special fund. The more important purpose of this measure, however, is its attempt to curb the consumption of sugar sweetened beverages as a means to address our obesity epidemic. Obesity in Hawaii has grown over the last decade. According the U.S. Centers for Disease Control, the number of obese adults rose from 11% in 1995 to 23% in 2010. This is more than double. Even more troubling is that from 1999-2009, the percentage of obese high school students rose 38% from 10.5% to 14.5% of students.

Obesity is a major risk factor in certain types of cancer. According to the American Cancer Society's 2012 Guidelines on Nutrition and Physical Activity for Cancer

Prevention, obesity is clearly associated with increased risks of the following cancer types:

- Adenocarcinoma of the Esophagus, Pancreas;
- Colon and rectum;
- Breast (after menopause);
- Endometrium (lining of the uterus);
- Kidney; and
- Gallbladder

Obesity may also be associated with increased risk of cancer of the liver, non-Hodgkin lymphoma, multiple myeloma, cancer of the cervix, cancer of the ovary, and aggressive prostate cancer.

The American Cancer Society Cancer Action Network appreciates this Committee's willingness to continue the discussion of the relationship between sugar sweetened beverages, obesity, and cancer and other chronic diseases. We are not only concerned with the overall health of adults -- but more importantly -- our children. Thank you for the opportunity to provide comments on this measure.



February 6, 2013

Senator Josh Green M.D., Chair
Senator Rosalyn H. Baker, Vice Chair
Committee on Health
Hawaii State Capitol, Room 222

RE: SB 646 and SB 1085 – **OPPOSE**

Dear Chairman Green, Vice Chair Baker and Members of the Committee:

The Grocery Manufacturers Association¹ (GMA) and its more than three hundred members respectfully oppose SB 646 and SB 1085 because it will do nothing to fight obesity and its selective taxation is arbitrary, discriminatory, regressive, and largely unpopular amongst voters.

Obesity is a Complex Problem with No Simple Solution

Many factors contribute to obesity and related health problems and singling out one particular product for taxation isn't going to solve the issue. Rather than discriminatory taxes on a food product or beverage we need to encourage a balanced diet and promote more physical activity and exercise for all citizens.

GMA and its member companies have taken and will continue to take significant steps to create a balanced approach to combating obesity. For example, since 2002, GMA member companies have introduced more than 20,000 product choices with fewer calories and reduced fat, sugar and sodium. In addition, food and beverage companies have pledged to remove 1.5 trillion calories from the food supply by 2015. And by applying nutrition criteria to our advertising policies,

¹ Based in Washington, D.C., the Grocery Manufacturers Association is the voice of more than 300 leading food, beverage and consumer product companies that sustain and enhance the quality of life for hundreds of millions of people in the United States and around the globe.

Founded in 1908, GMA is an active, vocal advocate for its member companies and a trusted source of information about the industry and the products consumers rely on and enjoy every day. The association and its member companies are committed to meeting the needs of consumers through product innovation, responsible business practices and effective public policy solutions developed through a genuine partnership with policymakers and other stakeholders.

In keeping with its founding principles, GMA helps its members produce safe products through a strong and ongoing commitment to scientific research, testing and evaluation and to providing consumers with the products, tools and information they need to achieve a healthy diet and an active lifestyle.

The food, beverage and consumer packaged goods industry in the United States generates sales of \$2.1 trillion annually, employs 14 million workers and contributes \$1 trillion in added value to the economy every year.

GROCERY MANUFACTURERS ASSOCIATION

1350 I Street, NW :: Suite 300 :: Washington, DC 20005 :: ph 202-639-5900 :: fx 202-639-5932 ::

www.gmaonline.org

two thirds of the products advertised during children's programming now feature healthier products and/or healthy lifestyle messages.

Another example of our commitment to promoting a healthy diet, GMA and the Food Marketing Institute are working towards "Nutrition Keys", a front-of-pack nutrition labeling initiative that will help consumers make informed decisions when they shop. Combined with the many innovative nutrition information programs implemented in recent years, consumers now have access to more nutrition information about their food than ever before – on products, in stores and online.

SB 646 and SB 1085 are Arbitrary Taxes

SB 646 and SB 1085's arbitrary purpose is explicit in that taxpayers who consume sugar sweetened beverages will experience an increase in the price of these items to fund a health promotion special fund. While establishing a health promotion program is a laudable goal the means in which it is being funded is nonsensical. In short, the health program fund relies on the very thing it sets out to discourage. This is tantamount to a tobacco tax to fund an anti-tobacco program. Presumably, if the program is successful, it will have eventually so reduced its funding base that it can no longer sustain its programming. Would this shortfall be added to the State's general fund obligation?

Furthermore, Hawaiians already pay several taxes on beverages, including: five-cent deposit, one and a half cent handling fee, one-half percent gross receipts tax from the wholesaler, and a four percent gross receipts tax from the retailer. These taxes result in a higher cost to the purchasers and have little to do with the complexities of fighting obesity.

SB 646 and SB 1085 are Regressive and Discriminatory Taxes

This tax is also unpalatable because it would disproportionately impact those Hawaiians who can least afford to pay the higher costs. Hawaii families already pay some of the highest taxes in the nation and like all people are struggling in this difficult economy. There could not be a worse time to ask them to pay more for the products they consume.

In August 2006, GMA released a study on the economic impact of selective taxation of certain foods. The findings detailed the economic impact of a selective tax on certain foods on the economy as a whole, on the food industry in particular, and on individual consumers. The following is a key report finding illustrating the discriminatory nature of such a tax as proposed in SB 646 and SB 1085: Given consumption patterns, a selective tax on certain foods would be more regressive than a general sales tax. Households with incomes below

Senator Josh Green M.D., Chair
Senator Rosalyn H. Baker, Vice Chair
Committee on Health
Page 3 of 3

\$10,000 spent 11.9 percent of their income on these types of foods and beverages in 2004, compared to 1 percent for households with incomes greater than \$70,000.

Similar Measures Have Been Tried and Failed in Other States

In the early 1990s, several jurisdictions, including California, Maine, Maryland and the District of Columbia, implemented ill advised taxes on selective food products. The source of revenue quickly became a failure. The new tax never generated the projected revenue because its complexity prevented its proper collection, its administration was complex, and a decrease in consumer demand made estimating revenue difficult.

In the 2004, 2005, and 2006 sessions, Maryland, Texas and West Virginia respectively, rejected proposals to tax certain foods and beverages because each state believed the tax would create a poor business environment and would be inefficient to administer. In Maine, the legislature passed a new beverage tax that was quickly repealed by the citizens through a ballot measure in the November 2008 general election by an almost two to one margin. Finally, in 2010, Washington residents through a ballot initiative soundly rejected (60% to 40%) the legislature's attempt to impose additional discriminatory taxes candy, bottled water, and soda.

Obesity is a complex problem that requires a comprehensive solution. GMA, food manufacturers and beverage companies have been in the forefront of developing tools for the consumer and making the challenge easier. Selective taxation does nothing to contribute to the solution. As such, the Grocery Manufacturers Association must respectfully oppose SB 646 and SB 1085.

Sincerely,



John Hewitt
Western Region Director
Grocery Manufacturers Association



LEGISLATIVE INFORMATION SERVICES OF HAWAII, INC.

1188 Bishop St., Suite 608, Honolulu, HI 96813.
Phone (808)533-6750 - Fax (808)356-0133
Email: lishawaii@aol.com www.lish.info Dick's Direct line (808)479-7966

February 6, 2013

Testimony to:

**Senate Committee on Health Senator Josh Green, Chairman
 Senator Rosalyn H. Baker, Vice Chair**

By: LISH—Richard C. Botti, President

Relating to: SB 1085 Relating to Obesity Prevention

Position: Oppose

Chair and Committee Members:

While the intent of this measure may be admirable, The Legislature will be shooting themselves in the foot when local manufacturers lose business based on the approach of SB 1085.

We suggest that a task force of local manufacturers be created to address this issue, and not use the tax stick as a solution.



Wednesday, February 6, 2013

COMMITTEE ON HEALTH

Senator Josh Green, Chair

Senator Rosalyn H. Baker, Vice Chair

COMMITTEE ON JUDICIARY AND LABOR

Senator Clayton Hee, Chair

Senator Maile S.L. Shimabukuro, Vice Chair

Written Testimony: Ms. Luana Bass, Assistant
Nutrition and Physical Activity Coalition (NPAC) for the State, a
University of Hawaii at Manoa Office of Public Health Studies,
John A. Burns School of Medicine Program.

Description: S.B. 1085, RELATING TO OBESITY PREVENTION.
Establishes the Obesity Prevention Special Fund to support obesity
prevention programs, for the imposed sugar-sweetened beverages
fee. **Companion Bill: H.B. 854**

Purpose: **Support of SB 1085:** Imposes a fee on sugar-sweetened beverages.
And Establishes the Obesity Prevention Special Fund to support
obesity prevention programs.

Position: State Nutrition and Physical Activity Coalition **supports this Bill**
and urges the state legislature to support obesity prevention by
imposing a fee on all sugar-sweetened beverages. As our
communities presently exist there are too many barriers to staying
healthy and physically active. Approximately two-thirds of adults
are overweight or obese and the proportion of children who are
overweight has tripled. NPAC believes that this is a perfect
opportunity for Hawaii state legislature to implement a measure
that will greatly lower the health disparities and medical costs in
our state.

I urge the committees to **pass this important legislation**. Thank you
for the opportunity to testify.

Written Testimonial In Support of SB1085: Relating to Obesity Prevention

My name is Lara Nicol, and I am a medical student at the John A. Burns School of Medicine at the University of Hawai'i at Manoa.

Childhood obesity is the most significant risk factor for adult obesity and chronic diseases such as diabetes and heart disease. These diseases have no cure; however they may be prevented.

Of great concern, keiki in Hawai'i now rank amongst the most obese in the nation. Approximately 1/3 of children entering kindergarten in Hawaii are overweight or obese. (Pobutsky, 2006) In some communities and ethnic groups in Hawaii, as many as 50% of children are overweight or obese (Okiihiro, 2005).

Sugar-sweetened beverages (defined as soda, energy and sports drinks, and sweetened water) and fruit drinks combined provide the largest source of daily calories in the diets of children ages 2-18. Soda alone is the third largest source. (Reedy, 2010) These beverages are inexpensive, abundant, high in calories, deliver little or no nutrition, and appeal to our tastes. They are heavily marketed, especially to children. Each extra serving of SSBs consumed per day throughout childhood increases the chance of becoming obese by 60% (Ludwig, 2001).

The economic cost of obesity to our community is substantial. Approximately \$470 million is spent annually on obesity-related health problems in Hawai'i (Trogon, 2012). At the state level, a penny-per-ounce excise tax on SSBs in Mississippi, Louisiana, and West Virginia is projected to bring in approximately \$136 million, \$210 million, and \$84 million, respectively, in 2013 (Rudd Center, 2012).

Taxing alcohol and cigarettes has proved to be highly successful in reducing consumption and its consequences, resulting in major public health benefits. Economists also predict significant public health benefits for taxes on SSBs (Chaloupka, 2011).

Obesity is a complex problem that must be addressed with multifaceted strategies. By enacting a fee on sugar-sweetened beverages, SB1085 can raise considerable funds towards obesity-prevention initiatives such as subsidies for healthy foods or physical education programs in schools. By raising the relative price of unhealthy beverages, a fee can discourage their consumption and influence demand for healthy alternatives.

As a future physician committed to improving the health of our community, I support legislation that promotes healthy living and lifestyle disease prevention. For these reasons, I support passage of SB1085: Relating to Obesity Prevention.

Mahalo for the opportunity to submit written testimony on this issue.

Testimony in Opposition of Senate Bill 1085

Promotes safety and health in Hawaii by assessing a new sugary beverage fee.

I strongly oppose the passage of Senate Bill 1085

Dear Senators

How much should one pay for a drink or a beer or for that matter a cheeseburger? For the sake of Health you will price everything beyond the means to operate a small business in Hawaii. Liquor tax, Excise tax, bottle fee, recycling fee, rail tax, unemployment tax, liquor license fee, health permit, income tax, on and on to a sugar tax and next year a cheeseburger tax. Each one of these things cost money and take from the bottom line of a bar or restaurant.

Will you come out to a business and pay \$12 for a beer? \$6 for a soda? \$18 for a cheeseburger? Where are the customers to pay these prices that you place upon our products? The never ending nickels and dimes add up. These are just the small costs and they count for a lot. When we get to the bigger cost of labor's wages, benefits and health care how much will those 3 items cost? Ultimately we cannot survive and thus we cannot be the provider of wages and health care. Ultimately government will have to become the provider as our small businesses continue to disappear.

Will you kill jobs to prevent obesity? Will it work? Are not aware you are killing the golden goose as you try to get more and more from it. The Health industry fails to assess the health of our industry. You ask to put your burdens on a dying industry and industry that you have put in jeopardy. Connectively the industry is a key in the Tourism trade our by which our state measures its economy.

I strongly oppose this measure and ask all legislators to take an honest look at the measures before them and how they affect small business. Government makes a poor partner to small business since you profit more than we do. To clearly put it to you, for every dime we make you make 50 cents. That represents the products sold within our operation. This does not represent the huge amount of taxes put upon these products before they reaches us. Thus the cost of the product already is heavily burdened with taxes before we get it and forcibly raises the cost of all products in the door. I would venture the costs of taxes on cigarettes outweighs the cost of the product. It may now near that on alcohol and will certainly on soda.

Yes we put soda in our drinks so as a result all prices must now be raised. If prices exceed what the market will bear then there will be no business. No business and for the sake of new taxes you loose all taxes garnered in our industry.

Sadly when we are out of business you can no longer tax us. Your net gain will be a huge negative not a small increase. Please legislators take a look around and see how many small businesses have closed. How many storefronts remain unopened?

I personally feel I am no longer working for myself as a business owner but as an abused serf to the state.

I ask you to defer this bill as it will not effectively change the habits of citizens in this state and it certainly will not help my budget as an employer of 80 people in this state.

Sincerely,

A handwritten signature in black ink that reads "Bill Comerford". The signature is written in a cursive, flowing style.

Bill Comerford
Hawaii Bar Owners Association
10 Marin Lane
Honolulu, HI 96817
808-223-3997
bill@ejlounge.com

Written Testimonial In Support of SB1085: Relating to Obesity Prevention

My name is Jackie Arnold, and I am a resident on the island of Maui.

Childhood obesity is the most significant risk factor for adult obesity and chronic diseases such as diabetes and heart disease. These diseases have no cure; however they may be prevented.

Of great concern, keiki in Hawai'i now rank amongst the most obese in the nation. Approximately 1/3 of children entering kindergarten in Hawaii are overweight or obese. (Pobutsky, 2006) In some communities and ethnic groups in Hawaii, as many as 50% of children are overweight or obese (Okihiro, 2005).

Sugar-sweetened beverages (defined as soda, energy and sports drinks, and sweetened water) and fruit drinks combined provide the largest source of daily calories in the diets of children ages 2-18. Soda alone is the third largest source. (Reedy, 2010) These beverages are inexpensive, abundant, high in calories, deliver little or no nutrition, and appeal to our tastes. They are heavily marketed, especially to children. Each extra serving of SSBs consumed per day throughout childhood increases the chance of becoming obese by 60% (Ludwig, 2001).

The economic cost of obesity to our community is substantial. Approximately \$470 million is spent annually on obesity-related health problems in Hawai'i (Trogon, 2012). At the state level, a penny-per-ounce excise tax on SSBs in Mississippi, Louisiana, and West Virginia is projected to bring in approximately \$136 million, \$210 million, and \$84 million, respectively, in 2013 (Rudd Center, 2012).

Taxing alcohol and cigarettes has proved to be highly successful in reducing consumption and its consequences, resulting in major public health benefits. Economists also predict significant public health benefits for taxes on SSBs (Chaloupka, 2011).

Obesity is a complex problem that must be addressed with multifaceted strategies. By enacting a fee on sugar-sweetened beverages, SB1085 can raise considerable funds towards obesity-prevention initiatives such as subsidies for healthy foods or physical education programs in schools. By raising the relative price of unhealthy beverages, a fee can discourage their consumption and influence demand for healthy alternatives.

As a future physician committed to improving the health of our community, I support legislation that promotes healthy living and lifestyle disease prevention. For these reasons, I support passage of SB1085: Relating to Obesity Prevention.

Mahalo for the opportunity to submit written testimony on this issue.

Jackie Arnold

Caryl Burns, M.P.H., R.D.
73-1014 Ahulani Street
Kailua-Kona, HI 96740

TO: Senator Josh Green, M.D., Chairperson
Senate Committee on Health

Senator Clayton Hee, Chairperson
Senate Committee on Judiciary and Labor

FROM: Caryl Burns, M.P.H., R.D.

SUBJECT: Senate Bill 1085, Relating to Obesity Prevention

Dear Chairpersons Josh Green and Clayton Hee, and Members of the Committees on Health and Judiciary and Labor:

I am writing to support Senate Bill 1085, Relating to Obesity Prevention, which establishes a fee on sugar-sweetened beverages sold in the State and designates the fees to be used for the coordination of obesity prevention programs by the Department of Health.

I am also writing as a Public Health nutrition professional, and former Coordinator of Nutrition Education in the Neighbor Islands, a USDA grant that brought funding to Hawaii for nutrition education.

In Hawaii, approximately 1 in 4 adults are obese; 1 in 3 children entering kindergarten are overweight or obese. Children and adolescents today derive 10-15% of their total calories from sugary beverages. I worked as a registered dietitian in schools and have seen first hand the need for reduction in sugary drink consumption.

The proposed fee is expected to reduce consumption of sugary beverages by 8-10 % and will raise approximately \$38 million in new revenue that will go into a fund for obesity prevention programs. A recent random phone survey of Hawaii adults shows that 65% are in support of a fee on sugar-sweetened beverages to fund programs to fight childhood obesity.

A fee on sugary drinks is not the only solution but since these beverages contribute greatly to the problem, efforts to reduce consumption needs to be a focal point in a comprehensive effort to combat obesity.

Thank you for allowing me to submit testimony. Please contact me at cburns@sonic.net or at (808) 938-8165 if you have any questions or need further information.

Sincerely,
Caryl Burns
Caryl Burns, M.P.H., R.D.

green1 - George

From: mailinglist@capitol.hawaii.gov
Sent: Wednesday, February 06, 2013 7:16 AM
To: HTHTestimony
Cc: denise.rentiquiano@parbev.com
Subject: *Submitted testimony for SB1085 on Feb 6, 2013 13:15PM*

SB1085

Submitted on: 2/6/2013

Testimony for HTH/JDL on Feb 6, 2013 13:15PM in Conference Room 229

Submitted By	Organization	Testifier Position	Present at Hearing
DENISE RENTIQUIANO	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.

Do not reply to this email. This inbox is not monitored. For assistance please email webmaster@capitol.hawaii.gov

green1 - George

From: mailinglist@capitol.hawaii.gov
Sent: Wednesday, February 06, 2013 7:15 AM
To: HTHTestimony
Cc: chalei.belford@parbev.com
Subject: *Submitted testimony for SB1085 on Feb 6, 2013 13:15PM*

SB1085

Submitted on: 2/6/2013

Testimony for HTH/JDL on Feb 6, 2013 13:15PM in Conference Room 229

Submitted By	Organization	Testifier Position	Present at Hearing
Chalei Belford	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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