# HB1776 HD2



Measure Title: RELATING TO EDUCATION.

Report Title: Education; Physical Examination; Dental Examination; Pilot Program;

Appropriation (\$)

Adds a dental examination to existing medical requirements for initial

entry into school in the State. Requires Board of Education to

Description: establish a pilot program to require a physical examination for entry

into seventh grade in one complex area. Appropriation. Effective July

1, 2050. (HB1776 HD2)

Companion:

Package: None

Current Referral: EDU, WAM

BELATTI, BROWER, CACHOLA, HANOHANO, ING, LOWEN,

Introducer(s): MCKELVEY, MORIKAWA, OSHIRO, Evans, Hashem, Ichiyama,

Nakashima, Nishimoto, Onishi, Tsuji



# STATE OF HAWAI'I DEPARTMENT OF EDUCATION P.O. BOX 2360 HONOLULU, HAWAI'I 96804

Date: 03/14/2014

Committee: Senate Education

Department:

Education

**Person Testifying:** 

Kathryn S. Matayoshi, Superintendent of Education

Title of Bill:

HB 1776, HD2(hscr718-14) RELATING TO EDUCATION.

Purpose of Bill:

Adds a dental examination to existing medical requirements for initial entry into school in the State. Requires Board of Education to establish a pilot program to require a physical examination for entry into seventh grade in one complex area. Appropriation. Effective July 1, 2050.

(HB1776 HD2)

# **Department's Position:**

The Department of Education (Department) expresses serious concerns with this measure as it believes the new entry to school requirements may serve as a deterrent to enrollment and regular attendance and may negatively impact student learning and achievement outcomes. Without access to services, the requirements will be a barrier to students attending school. This is of particular concern with the dental examination requirement as there are areas in the State where dental care is not available.

The bill will also have fiscal impact resulting from needing, at minimum, a support staff at each school (255) responsible for tracking, recordkeeping, and ensuring compliance with the new requirements. Schools already have limited staffing and asking them to do more will require support through funding of additional resources.

The pilot program to newly require proof of a physical examination for entry into seventh grade is also problematic as the scope of the pilot goes beyond just requiring a physical examination. It places responsibilities on the Department of which it has no expertise or ability to provide. For example, the Department is required to provide information on health care provider options and wellness visits and screenings as a health insurance covered benefit under the federal Patient Protection and Affordable Care Act (PPACA). Although there is a provision that other stakeholders may assist the Department with implementation, the Department is nevertheless the lead and must deliver. To do so, funding to hire resources with expertise and to coordinate preparation and implementation are necessary. There are also additional responsibilities to track, recordkeep, and ensure compliance that will be the onus of those schools in the pilot and supplemental funding should also be considered for these schools.

The Department is in the process of determining the exact funding needs resulting from this measure and will be prepared to provide this as the bill moves forward.

We are also aware of SB 2235, SD2 that speaks to this same subject matter. This measure mandates the presentation of the results of a physical examination prior to the seventh grade. No pilot program is proposed in this bill nor is proof of a dental examination required for entry to school.

Thank you for consideration of our testimony and the opportunity to testify.

LINDA ROSEN, M.D., M.P.H.

NEIL ABERCROMBIE



In reply, please refer to

# SENATE COMMITTEE ON EDUCATION HB1776 HD2, RELATING TO EDUCATION

# Testimony of Linda Rosen, M.D., M.P.H. Director of Health March 14, 2014

- 1 **Department's Position:** The Department of Health (DOH) supports the intent and respectfully submits
- 2 amendment suggestions on House Bill 1776 HD2.
- 3 Fiscal Implications: None for DOH.
- 4 **Purpose and Justification:** The purpose of House Bill 1776 House Draft 2 (HB1776 HD2) is to create
- a requirement for dental examinations upon entry into the school system for the first time. HB1776
- 6 HD2 also connects adolescents back to their healthcare provider by expanding the school physical
- 7 examination requirement. Currently, physical examinations are only conducted upon entry into the
- school system. HB1776 HD2 would establish a pilot program to expand the requirement for physical
- 9 examinations to include entry into seventh grade in one complex area of the Board of Education's
- 10 (BOE) choosing. The pilot program would begin in the 2015-2016 school year and the BOE is asked to
- submit a report of its findings, recommendations, and proposed legislation from the pilot program to the
- 12 2016 Legislature. The Department provides recommended amendments to HB1776 HD2 as outlined
- below and in the attached document.

The Department supports the expansion of physical examinations for public school children which will create a systems change to connect children back to their primary care physician and reinforce the adoption of wellness and preventive health care. The Department offers suggested amendments for the physical examination pilot program and recommends implementation as a statewide pilot in seventh grade. In the current version of HB1776 HD2, problems would arise from conducting the pilot in a single school complex area. These problems include; confusion for families in other complex areas about whether a physical exam is required; problems arising from students transferring into the complex area without receiving a physical exam in seventh grade; and whether a pilot in one complex area would provide the information necessary to assess the feasibility of statewide implementation. In restrospect, the additional immunization requirement for seventh grade was introduced statewide. Implementation as a statewide pilot in seventh grade aligns with immunization requirements and provides a broader, systematic approach to connecting children back to their primary care physicians.

The Department also suggests deleting the BOE responsibility for establishing and monitoring the physical examination pilot program. The suggested amendments remove the BOE requirements and revert the bill language to follow current Chapter 302A-1159 and -60, HRS, DOE role and requirements, and Title 11 Chapter 157, HAR DOH role and requirements.

The Department recommends aligning the timing of the physical examination requirements with immunization requirements, by requiring students to submit documentation of a physical exam no later than three months after entering seventh grade. Aligning the timing of physical examination requirements with immunization requirements will avoid duplication of efforts for the initial review and follow up on student health records.

The expansion of physical examination requirements to seventh grade promotes utilization of the covered preventive health benefits established by the Affordable Care Act (ACA). The proposed

- increase in the physical exam requirements is congruent with the policy priority set forth by the Obesity
- 2 Prevention Task Force. The Task Force, co-chaired by our late Director Loretta Fuddy developed and
- recommended legislation pursuant to Act 269 (SB2778 CD1), Session Laws of Hawaii 2012. The
- 4 policy to expand physical examination requirements for public school students was proposed to help
- 5 reinforce the adoption of a culture of wellness and preventive health care. Due to the ACA, annual well
- 6 child examinations are a required covered benefit in all health plans. The requirements are in addition to
- 7 the existing immunization requirements for grade seven which can be done within twelve months before
- 8 first attending school.
- 9 The adoption of this measure will require parental and community engagement. The additional
- physical exam requirements provide physicians and healthcare providers together with parents and
- adolescents the opportunity to address developmentally relevant physical and mental health issues.
- Regular visits are preventive, so health needs can be assessed and addressed early. Early screening and
- health management can contribute to lowered absenteeism rates and support graduation completion.
- 14 The policy change embraces the whole child to assure they are healthy and ready to learn.
- The Department appreciates the intent to improve the oral health of children by requiring that
- students have a dental examination prior to entrance to any school in the state. However, the
- 17 Department has concerns regarding implementation, including the potential impact on the dental service
- delivery system. The Department suggests removal of the dental services section in this bill and instead
- encourages the passage of HB2457, Relating to Dental Sealants. HB2457 will help to improve the oral
- 20 health of children through an oral health surveillance system, administration of a demonstration school-
- based dental sealant program in a high-need school, and through the establishment of a plan for a
- statewide school-based dental sealant program.

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Thank you for the opportunity to provide testimony.

Attachment to Department of Health Testimony March 14, 2014, Senate Education Committee

HOUSE OF REPRESENTATIVES
TWENTY-SEVENTH LEGISLATURE, 2014

STATE OF HAWAII

H.B. NO. S.D.1 REQUEST

# A BILL FOR AN ACT

RELATING TO EDUCATION.

## BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF HAWAII:

SECTION 1. Section 302A-1159, Hawaii Revised Statutes, is amended to read as follows:

"§302A-1159 Physical examination required. (a) Beginning with the 2015-2016 school year, no child shall attend seventh grade unless the child presents to the appropriate school official a report from a licensed physician or advanced practice registered nurse of the results of a physical examination performed within a year of the date of attendance. A child may attend school provisionally upon submitting written documentation from a licensed physician, advanced practice registered nurse, or other authorized representative of the department of health stating that the child is in the process of undergoing a physical examination. Further documentation showing that the required physical examination has been completed shall be submitted to the appropriate school official no later than three months after the child first attends seventh grade.

- (b) No child shall [be admitted to] attend any school for the first time in the State unless the child presents to the appropriate school official a report from a licensed physician or advanced practice registered nurse of the results of a physical examination performed within a year of the date of [entry into] attendance at school. A child may [enter] attend school provisionally upon submitting written documentation from a licensed physician, advanced practice registered nurse, or other authorized representative of the department of health stating that the child is in the process of undergoing a physical examination. Further documentation showing that the required physical examination has been completed shall be submitted to the appropriate school official no later than three months after the child first [entered] attends the school."
- SECTION 2. (a) The department of health, no later than twenty days prior to the convening of the regular session of 2017 and 2018 shall submit a progress report to the legislature on the pilot implementation of the additional seventh grade physical examination requirement.
- (b) Further, no later than twenty days prior to the convening of the regular session of 2019, the department of health shall submit a summary report to the legislature on the pilot implementation of the additional seventh grade physical exam requirement. The report shall:
- (1) Provide a brief summary of the three year implementation of the seventh grade physical exam requirement;

# Attachment to Department of Health Testimony March 14, 2014, Senate Education Committee

- (2) Provide measures of compliance;
- (3) Identify barriers and opportunities for implementation; and
- (4) Provide recommendations and proposed legislation if any, to assist with the implementation of the seventh grade physical exam requirement.

SECTION 3. There is appropriated out of the general revenues of the State of Hawaii the sum of \$ or so much thereof as may be necessary for fiscal year 2014-2015 to the department of education to carry out the purposes of this Act.

The sum appropriated shall be expended by the department of education for the purposes of this Act.

SECTION 4. Statutory material to be repealed is bracketed and stricken. New statutory material is underscored.

SECTION 5. This Act shall take effect on July 1, 2050.

Attachment to Department of Health Testimony March 14, 2014, Senate Education Committee

# Report Title:

Education; Physical Examination; Appropriation

# Description:

Requires children to undergo a physical examination prior to attending kindergarten and seventh grade beginning with the 2015-2016 school year. Requires progress and summary reports on implementation from the department of health and the department of education. Makes an appropriation to the department of education. (HB1776 HD3 PROPOSED)



# **STATE OF HAWAII**

STATE COUNCIL
ON DEVELOPMENTAL DISABILITIES
919 ALA MOANA BOULEVARD, ROOM 113
HONOLULU, HAWAII 96814
TELEPHONE: (808) 586-8100 FAX: (808) 586-7543
March 14, 2014

The Honorable Jill Tokuda, Chair Senate Committee on Education Twenty-Seventh Legislature State Capitol State of Hawaii Honolulu, Hawaii 96813

Dear Senator Tokuda and Members of the Committee:

SUBJECT: HB 1776 HD2 - RELATING TO EDUCATION

The State Council on Developmental Disabilities (DD) **SUPPORTS THE INTENT of HB 1776 HD2.** The bill adds a dental examination to existing medical requirements for initial entry into school in the State; requires the Board of Education to establish a pilot program to require a physical examination for entry into seventh grade in one complex area; and provides an appropriation.

By requiring dental examinations prior to the entrance of school, parents or guardians would make it a priority to have their child complete an examination. This would be a proactive step in preventing tooth decay, providing early diagnosis and treatment of dental caries, and improving the oral health of children.

The proposed "ninety" days (Page 3, line 1) to complete a dental exam seems to be a reasonable timeframe. There are individuals with special needs who cannot and will not be able to sit in a dental chair and tolerate any dental procedure to be performed on them. They may require desensitization to going to a dental office and may require sedation to perform any type of dental procedure. For these situations, it may take more than the 30 days (current language under Notification for noncompliance) to complete a dental examination. As a result, these individuals would not be admitted to school. For students with special needs or a disability, the consequence of not attending school may result in loss of acquired skills.

Access to dental care services for individuals with DD is a priority of the Council and is addressed in our 2012-2016 State Plan through partnerships with dental hygienists, the University of Hawaii School of Nursing and Dental Hygiene, the Maternal Child Health Leadership in Neurodevelopmental and Related Disabilities program, and Special Olympics to do in-service training on preventive oral health care for families and other caregivers. Children and adults with DD face increased oral health challenges to find a dentist willing and able to treat them due to their disability.

The Honorable Jill Tokuda Page 2 March 14, 2014

With regards to the pilot program to be established by the Board of Education which is referenced in Section 5, Page 3, lines 14-20, we noticed that dental examinations are not included as a requirement for entrance into the seventh grade. We respectfully ask for your consideration to amend the bill to include dental examinations as part of the pilot project.

Thank you for the opportunity to submit testimony supporting the intent of HB 1776 HD2, and consideration to include dental examinations as part of the proposed pilot project.

Sincerely,

Waynette K.Y. Cabral, MSW Executive Administrator

J. Curtis Tyler, III

Chair



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Andy Levin nbor Island Board Liaison

March 14, 2014

Senate Committee on Education Hearing in Conference Room 414 at 1:15 p.m.

Re: HB 1776 HD2 **Relating to Education** 

Dear Chair Tokuda and Members of the Committee:

I am writing in support of HB 1776 HD2 amended to remove the language regarding the creation of a pilot program and require more regular physical and dental exams of all public school students.

Prior to taking my current position with Hale Kipa, a youth services agency, I spent three decades working in health care in Hawai'i. During that time, I watched the health status of Hawai'i's youth worsen despite attempts to encourage more physical activity, eating "5-a-Day", reduce smoking, avoid drugs, etc. As well-intended—and often successful—as these initiatives were, they often ended prematurely due to shifting priorities of public and private funders. Ultimately, the improvements made were not sustained. We need a sustainable solution to what has become a large and growing problem—the poor health of Hawai'i's young people.

The link between a child's health and their ability to do well in school is indisputable. As the Director of Education/Vocational Services at Hale Kipa, I see firsthand the strong relationship between a youth's lifestyle and their academic performance. If Hawai'i is to achieve its goals of improving childhood health as well as its academic performance, it makes sense to me to require more regular physical and dental exams of school-aged youth to ensure that the gambit of physical, social and emotional issues can be addressed early, and in so doing, youth can be helped to be as mentally and physically prepared for school as possible.

I believe we need to take a more systems-oriented and coordinated approach to improving the health of Hawai`i's youth. HB 1776 HD2 will require two major systems—education and health care—to work together to address adolescent health issues early enough to make a positive difference in the (worsening) health status of our young people. Significantly, this youth-centered early intervention strategy can also help identify developmental and other social/emotional issues that, if addressed early enough, can keep youth on track at school and doing what comes naturally to them—being active and engaged learners. HB 1776 HD2 represents an opportunity to establish a more efficient, coordinated approach to addressing two problems for Hawai`i.

I respectfully ask that you amend this bill by removing the pilot program language and pass HB 1776 HD2 on to the next committee.

Sincerely,

Stacy Evensen Director, Education/Vocational Services







Hawaii Chapter

### AAP - Hawaii Chapter 5414 Kirkwood Place Honolulu, HI 96821

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# **Testimony for HB 1776 HD2**

From: Hawaii Chapter of the American Academy of Pediatrics March 12, 2014

Thank you for an opportunity to testify in strong support of HB 1776 HD2, which will establish a policy mandating documentation of a physical examination, by a licensed physician or advanced practice registered nurse, at entry to 7<sup>th</sup> grade entry.

The Hawaii Chapter of the American Academy of Pediatrics (HAAP) is a voluntary organization of over 200 pediatricians in Hawaii. Our mission is to attain optimal physical, mental and social health and well being for infants, children, adolescents and young adults in Hawaii.

Adolescence is a period of tremendous physical, emotional and social change. During this period youth can develop numerous health issues, the majority of which are preventable. High-risk health behaviors that contribute to the most common causes of morbidity and mortality among young adults are often established in childhood and adolescence. These include smoking, drinking/drug use, high-risk sexual practices, unhealthy nutrition, lack of sleep and physical inactivity. These behaviors are also intimately linked to academic failure and achievement.

Primary care practitioners, pediatricians, family physicians and nurse practitioners who have a long-standing relationship with families, are ideally suited for preventing problem behaviors. The adolescent well child visit creates a safe environment where adolescents can feel comfortable talking to their doctor about their health and wellness. The American Academy of Pediatrics has advocated that child should have regular "Well Child" physical exams throughout childhood. In adolescence, they should receive appropriate screening and guidance for alcohol and drug use, depression and suicide, sexuality and reproductive health issues as well as obesity, diabetes and cardiovascular disease. However, this cannot be done in a 10-minute sick visit for a cold.

Too many adolescents are now only seen by their primary care provider for the occasional sick visit. The reasons are many. Prior to the Affordable Care Act, some health insurance policies did not cover preventive healthcare visits for children. The Hawaii Department of Education has mandated documentation of a comprehensive physical exam *only* at kindergarten entry. In turn, many busy, over-taxed parents have not prioritized preventive healthcare visits. It should not be surprising then that many public school students have not had a comprehensive physical exam for years. It should also not be a surprise that depression, obesity, pre-diabetes, substance abuse too often go undiagnosed until a crisis occurs.

In order align this policy with current recommendations for yearly well child examinations, we strongly suggest a modification to the proposed bill—that physical examination be performed within twelve months of the date of attendance, rather than 6 months. We also support that the implementation of this program across the State, rather than limiting it to a pilot program for only one school complex.

The HAAP, along with our working group of healthcare stakeholders, will continue to discuss additional opportunities to address the barrier to entry concern raised by the DOE.

HB1776 HD2 now contains an amendment to add a dental exam requirement prior to entry into public school. The HAAP fully supports regular dental care as a part of the optimal health care home model. However, we are still seeking to better understand whether this dental requirement would be affordable to all families of school-aged children based on ACA and MedQUEST health insurance coverage for students.

HB 1776 HD2, with the amendments we've suggested above, will ensure that all youth attending public school in Hawaii have a well child preventive health care visit at 7th entry. While we know this is just the start, we think this bill strongly supports the medical home, optimal adolescent health and student achievement. In addition, the bill enhances the working relationship between adolescents, their parents, and the health and educational systems in Hawaii.

Thank you for this opportunity to testify.

my ofi

May Okihiro, MD, HAAP Obesity Taskforce Member for

Michael Hamilton MD, HAAP President



March 14, 2014

TO: Senate Committee on Education

Senator Jill Tokuda, Chair

Senator Michelle Kidani, Vice Chair

FROM: Dr. Vija Sehgal, Pediatrician and Chief Quality Office / Associate Medical Officer

Waianae Coast Comprehensive Health Center / 697-3457 or wcchc@wcchc.com

RE: <u>HB1776 HD2: Relating to Education</u>

Thank you for the opportunity to submit testimony regarding HB1776 HD2 to mandate a physical examination for entry into seventh grade and require a dental examination prior to entry into the public school system.

The Waianae Coast Comprehensive Health Center (WCCHC) is a Federally Qualified Health Center serving over 31,000 patients in Leeward Oahu. Our main campus in Waianae has a pediatric clinic that serves 8,485 of the school age children along the Leeward Coast. To better meet the dynamic physical, emotional and social needs of our adolescent patients, a new adolescent clinic at the Waianae Mall is under development.

It is during adolescence that youth can develop numerous health issues, the majority of which are preventable. High-risk health behaviors that contribute to the most common causes of morbidity and mortality among young adults are often established in childhood and adolescence. These include smoking, drinking/drug use, high-risk sexual practices, unhealthy nutrition, lack of sleep and physical inactivity. These behaviors are also intimately linked to academic achievement.

Establishing a health care home, where primary care practitioners, pediatricians, family physicians and nurse practitioners have a long-standing relationship with families, is a factor in preventing these problem behaviors. The adolescent well child visit creates a safe environment where adolescents can feel comfortable talking to their doctor about their health and wellness. They should receive appropriate screening and guidance for alcohol and drug use, depression and suicide, sexuality and reproductive health issues as well as obesity, diabetes and cardiovascular disease. However, this cannot be done in a 10-minute sick visit for a cold. The Waianae Coast Comprehensive Health Center supports the American Academy of Pediatrics standard that regular "Well Child" physical exams should occur throughout childhood.

There are many reasons that adolescents are *only* seen by their primary care provider for the occasional sick visit. Prior to the Affordable Care Act, some health insurance policies did not cover preventive healthcare visits for children. The Hawaii Department of Education has mandated documentation of a comprehensive physical exam *only* at kindergarten entry. Thus, busy parents have not prioritized preventive healthcare visits. It should not be surprising then that many public school students have not had a comprehensive physical exam for years. It should also not be a surprise that depression, obesity, pre-diabetes and substance abuse too often go undiagnosed until a crisis occurs.

In a recent study of children seeking care at our Waianae Pediatric Clinic, 52% of the 11-14 year olds are overweight or obese and 55% of the 15-19 year olds are overweight or obese. We know that obesity is the primary risk factor for type 2 diabetes and cardiovascular disease. And, studies have shown that 80% of children who are overweight at 10-15 years become obese adults. This recent study indicates increasing rates of adult obesity on the Waianae Coast when compared to 2012 data (from the Hawaii Primary Care Needs Assessment Data Book, DOH.). This data on obesity alone is cause for alarm and a motivating factor for the health center to support mandatory physicals for adolescents.

HB1776 HD2 was amended to mandate a physical assessment during 7<sup>th</sup> grade rather than in the 6<sup>th</sup> and 9<sup>th</sup> grades. The Waianae Coast Comprehensive Health Center supports this amendment because immunization updates occur at the same age, thus lessening the additional burden for parents. Further amending the bill to implement the 7<sup>th</sup> grade physical assessment in a way that doesn't create a barrier to entry is ideal. Allowing the physical to occur within the 12 months surrounding the 7<sup>th</sup> grade school year could help to address this concern from the Department of Education (DOE) about the bill.



The Waianae Coast Comprehensive Health Center, along with our working group of healthcare stakeholders, has continued to discuss additional opportunities to address the barrier to entry concern raised by the DOE. The amendment to HB1776 HD2, requiring notice of the exam mandate to sixth grade students and their parents, is a great start. We all can do a better job of reaching out to students and their parents to come in for a physical assessment throughout the school year. Bringing together health plans, medical providers, school health personnel, families, and others is exactly the model of wrap around services we've all been saying that our students need.

HB1776 HD2 now contains an amendment to add a dental exam requirement prior to entry into public school. The WCCHC fully supports regular dental care as a part of our health care home model. However, we are still seeking to better understand whether this dental requirement would be affordable for everyone based on ACA and MedQUEST health insurance coverage for students.

Finally, the WCCHC supports amending HB1776 HD2 to implement the 7<sup>th</sup> grade physical assessment across the school system rather than as a pilot. This amendment would mirror the language in the companion legislation SB2235 to more efficiently roll-out the program universally. Otherwise, a pilot diminishes the positive impact we hope to achieve with all 7<sup>th</sup> grade students reconnecting with their medical provider.

Reconnecting our adolescents with their primary care provider embraces the whole child to assure they are healthy and ready to learn. Refining amendments to HB1776 HD2 can help to ensure that all youth attending public school in Hawaii have a well-child preventive health care visit during 7<sup>th</sup> grade. While we know this amended bill is just a start, we think it strongly supports our patient centered medical home model, optimal adolescent health and student achievement. **Most importantly, the bill strengthens the relationship between our health and educational systems, as well as adolescents and parents in Hawaii.**