



STATE OF HAWAII
DEPARTMENT OF EDUCATION
P.O. BOX 2360
HONOLULU, HAWAII 96804

Date: 01/27/2014

Committee: House Education

Department: Education

Person Testifying: Kathryn S. Matayoshi, Superintendent of Education

Title of Bill: HB 1776 RELATING TO EDUCATION.

Purpose of Bill: Requires children to undergo a physical examination prior to attending kindergarten, sixth grade, and ninth grade beginning with the 2015-2016 school year. Makes an appropriation to the department of education.

Department's Position:

The Department of Education (Department) opposes HB 1776. While the Department appreciates the intent of this bill, the mandate to present results of a physical examination prior to sixth grade and ninth grade will serve as a deterrent to maintaining continuous enrollment and regular attendance, and may negatively impact student learning and achievement outcomes.



S E A C
Special Education Advisory Council

919 Ala Moana Blvd., Room 101

Honolulu, HI 96814

Phone: 586-8126 Fax: 586-8129

email: spin@doh.hawaii.gov

January 27, 2014

**Special Education
Advisory Council**

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Ms. Martha Guinan, *Vice
Chair*

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Jan Tateishi, Staff
Susan Rocco, Staff

Representative Roy M. Takumi, Chair
House Committee on Education
State Capitol
Honolulu, HI 96813

RE: HB 1777 - Relating to Education

Dear Chair Takumi and Members of the Committee,

The Special Education Advisory Council (SEAC), Hawaii's State Advisory Panel under the Individuals with Disabilities Education Act (IDEA), **supports** HB 1777 that allows for the emergency administration of auto-injectable epinephrine by school staff who volunteer to do so and requires instruction of volunteers by the Department of Health.

SEAC recommends the following change in terminology to provide greater protection to students with severe allergic reactions: substitute the term *anaphylaxis* for the term *anaphylactic shock* in Section 1, 1(a)(2), 1(b)(3) and 2(g).

The basis of our recommendation is our understanding that there is a distinction between the terms *anaphylaxis* and *anaphylactic shock*. *Anaphylaxis* refers to a severe and potentially life-threatening allergic reaction caused by a variety of triggers, including certain foods, drugs, insect stings and bites, and latex. *Anaphylactic shock* is the most serious form of generalized anaphylaxis that is often characterized by lowered blood pressure, irregular heartbeats, vomiting and difficulty in breathing due to a swelling of the larynx. It may lead to coma and death.

Students who have experienced anaphylaxis in the past are likely to experience it again. Symptoms of anaphylaxis usually occur within five minutes to two hours after exposure to the allergen.

If SEAC's understanding of the terms is correct, then the revised language would allow preventive treatment with auto-injectable



Testimony on HB 1777
January 27, 2014
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epinephrine by a trained employee or agent **as soon as anaphylaxis is suspected**, in the event that the student is unable to administer the auto-injectable epinephrine independently (as in the case of a pre-school student or a student with physical or cognitive disabilities). Early administration of epinephrine will help to prevent more life-threatening symptoms and medical complications.

Thank you for the opportunity to provide testimony on this potentially life-saving legislation.

Respectfully,

Ivalee Sinclair, Chair



House Committee on Education

The Hon. Roy M. Takumi, Chair
The Hon. Takashi Ohno, Vice Chair

House Committee on Higher Education

The Hon. Isaac W. Choy, Chair
The Hon. Linda Ichiyama, Vice Chair

Testimony in Support of HB 1776

Relating to Education

**Submitted by Robert Hirokawa, Chief Executive Officer
January 27, 2014, 2:00 pm, Room 309**

The Hawaii Primary Care Association (HPCAWA), which represents the federally qualified community health centers in Hawaii, supports House Bill 1776, requiring children to undergo physical examinations upon entering kindergarten, sixth, and ninth grades.

The HPCAWA believes in leading a shift from a sickness based form of medicine currently practiced in Hawaii to one of wellness. A key part of this is by instituting wellness physical exams at regularly scheduled intervals to ensure patient health and catch any malady before it becomes catastrophic. Nowhere is this need more apparent than with adolescents, who often only see primary care providers when ill, despite the enormous amount of physical and mental change they encounter.

Further, obesity is becoming more of an issue each year. In recent years, as many as one in four children in Hawaii are already considered overweight or obese, contributing to medical expenditures that totaled more than \$470 million in 2009 alone. Instituting more regular physical examinations will allow providers to keep better information on patients, as well as provide regular feedback for patients about their health status.

For these reasons, and the continued physical and financial health of Hawaii, the HPCAWA supports House Bill 1776. Thank you for the opportunity to testify.

HMSA



An Independent Licensee of the Blue Cross and Blue Shield Association

January 27, 2014

The Honorable Roy Takumi, Chair
The Honorable Takashi Ohno, Vice Chair

House Committee on Education

Re: HB 1776 – Relating to Education

Dear Chair Takumi, Vice Chair Ohno and Members of the Committee:

The Hawaii Medical Service Association (HMSA) appreciates the opportunity to testify on HB 1776 which requires evidence of the completion of a physical examination before a child may attend kindergarten, sixth grade, or ninth grade classes in our public schools. HMSA supports the intent of the Bill which reinforces the preventive health mandate under the Affordable Care Act (ACA) which assures medical examination coverage for children up to age 21.

Recognizing the sagacity of the old adage, “an ounce of prevention is worth a pound of cure,” a critical element of the ACA is a mandate for preventive care for infants and children, as well as for adults. Pursuant to rules promulgated to implement the ACA, children under the age of 21 are covered not only for their annual physical examination and immunizations; but also for vision and hearing screening; oral health risk assessments; developmental assessments to identify any developmental problems; screenings for hemoglobin level, lead, tuberculin, and other test; and screenings to detect, prevent, and treat problems such as obesity and depression.

HMSA believes that preventive health is the cornerstone of a more efficient and effective health care system. We applaud the intent of HB 1776 which reinforces the goal of the ACA’s focus on preventive health generally, and on well-child visits, specifically.

Thank you for the opportunity to offer this testimony today.

Sincerely,

A handwritten signature in black ink, appearing to read 'JD' followed by a long horizontal stroke.

Jennifer Diesman
Vice President
Government Relations

HB 1776
RELATING TO EDUCATION

House Committees on Education and higher Education

Public Hearing – January 27, 2014
2:00pm., State Capitol, Conference Room 309

By
Jay Maddock, Ph.D.

I am writing to **support** HB 1776. This bill requires a physical exam prior to entry into kindergarten and the 6th and 9th grade of DOE schools.

I am a professor of public health at the University of Hawai‘i at Mānoa and have served as director of the Office of Public Health Studies since 2006. I also served as a member of the Childhood Obesity Taskforce that recommended physical exams for youth as part of our comprehensive approach to address obesity in Hawaii. My statement on this measure does not represent an institutional position of the University of Hawaii.

Obesity is a major public health problem in Hawaii. It contributes to premature death and disease and contributes significantly to the health care costs in the state, which are paid for by businesses and taxpayers. Comprehensive approaches are necessary to combat the obesity epidemic. There is no one magic bullet or thing that can be done to change the doubling of the obesity rate over the past two decades. However, prevention of obesity especially in early childhood is much more effective than treatment of obesity.

In addition to childhood obesity, many other positive things come from requiring physical exams. Vision and hearing are screened, which can interfere with learning. Mental and sexual health issues can be addressed. The physical exam helps link the child back to their medical home, which has shown an improvement in health for a variety of outcomes. Under the Affordable Care Act, these physical exams would be done free of charge for all of Hawaii’s keiki.

The one thing this bill does not have is an electronic system for student health data to enhance surveillance and program development. This would greatly help target health funding to go to the schools with the most need and to help track the success of public health efforts. I would suggest adding this to the text of the bill.

ohno2-Rexie

From: mailinglist@capitol.hawaii.gov
Sent: Saturday, January 25, 2014 12:15 PM
To: EDNtestimony
Cc: cristeta.ancog@kp.org
Subject: *Submitted testimony for HB1776 on Jan 27, 2014 14:00PM*

HB1776

Submitted on: 1/25/2014

Testimony for EDN on Jan 27, 2014 14:00PM in Conference Room 309

Submitted By	Organization	Testifier Position	Present at Hearing
Cristeta Ancog MD	Individual	Support	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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LATE

Testimony Presented Before the
House Committees on Education and Higher Education
Monday, January 27, 2014 2 p.m.

By
May Okihiro, MD

RE: HB 1776 requiring physical examinations

Chair Takumi, Chair Choy, Vice Chair Ohno, Vice Chair Ichiyama and members of the House Education and Higher Education Committees, good afternoon.

I am a physician with the Department of Pediatrics at the John A. Burns School of Medicine, University of Hawai`i Manoa. I am testifying as a private citizen in support of HB 1776. Unhealthy lifestyles and risk factors for chronic disease, such as smoking, poor nutrition, and mental health problems, begin in childhood and adolescence and track into adulthood. Youth are also at risk for suicide from underlying depression. In 2011, among youth in Hawai`i:

- 29.5% reported that they felt sad or hopeless almost every day for 2 or more weeks in a row
- 15% said they would attempt suicide in the past 12 months
- 1 in 4 are overweight or obese, and in some communities over 50% of adolescents are overweight or obese

Except for routine immunizations and mandated sports physicals, many youth do not receive health screening for depression or chronic health conditions such as obesity. As academic success of Hawai`i's youth is intimately linked to their health, annual health screening of school age youth has great promise for strengthening the fabric of society. Research shows that poor health such as mental health disorders, uncontrolled asthma, poor nutrition and sleep disorders are closely linked to poor academic outcomes. Research also shows that academic success is a primary predictor of adult health outcomes. For example, in Hawai`i, the prevalence of diabetes among those who did not graduate from high school is 10.6%, twice that of those who graduated from college (4.8%).

Primary care providers are in a unique position to screen for chronic disease risk factors and behaviors and provide guidance, brief counseling and care coordination for the adolescent and his/her parents. In the ideal world, youth would see their physicians regularly throughout childhood for preventive health care. However, in today's busy world this often does not happen; physicians often only see children and adolescents when they are sick or injured. Thus mandating annual health screening by a primary care provider prior to beginning school offers great promise for advancing the health of both our keiki and our kupuna.

Mahalo for providing this opportunity to testify.

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Wendy Loh
Franchise Owner
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John Mellish, M.D., FACP
Endocrinologist
Kaplan Medical Center
Professor, John A. Burns School of Medicine

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Director, Hawaii Initiative for Childhood Obesity
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Richard Okazaki
President
Diagnostic Laboratory Services, Inc.
Executive Director, Leslie Lam

January 27, 2014



The Honorable Representative Roy M. Takumi, Chair – Education Committee
The Hawaii State Capitol Conference Room 309
415 South Beretania Street
Honolulu, Hawaii 96813

Dear Chair Roy M. Takumi, Vice Chair Takashi Ohno, and Committee Members,

The American Diabetes Association is the leading voluntary health association for all people with diabetes. The Association's mission is to prevent and cure diabetes and to improve the lives of all people affected by diabetes. The Association carries out this mission by directly funding research; disseminating critical information to the patient, clinician and research communities; and by advocating for research, prevention, and care in ways that will benefit people with diabetes.

The American Diabetes Association (ADA) supports HB 1776 and bills requiring children to undergo a physical examination prior to attending kindergarten, sixth grade, and ninth grade beginning with the 2015-2016 school year.

Why should the legislature care about obesity and the growing diabetes epidemic? We commend the legislature taking the lead in the fight against diabetes and obesity in Hawaii. **Diabetes now affects more than 113,000 Hawaii residents.**

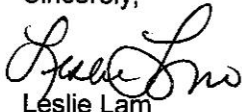
Obesity is a major health and economic concern for Hawaii and the nation, causing higher medical costs and lower quality of life. In Hawaii one in four children entering kindergarten are overweight or obese and one in two adults are overweight or obese. Obesity-related medical expenditures in Hawaii were calculated to be over \$470 million in 2009, and are continuing to rise. The adolescent physical examination visit provides an opportunity for the healthcare provider to assess growth, screen for obesity and possible complications such as prediabetes or high blood pressure, identify the appropriate resources for the child and the child's family and develop a plan to support family-based lifestyle changes.

The health of our students in Hawaii is important and healthy students are better prepared to succeed academically. If we do not do something about the growing epidemic 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.

The American Diabetes Association believes this legislation will provide much needed public health awareness for families and schools. The American Diabetes Association would like to thank you for your support of HB 1776 as this bill could go a long way to help prevent school age children from developing type 2 diabetes in Hawaii.

If you have any questions or concerns please contact me at email: llam@diabetes.org or: 808.947-5979

Sincerely,



Leslie Lam
Executive Director- Hawaii



Laura Keller
Director State Government Relations



Testimony for HB 1776

From: Hawaii Chapter of the American Academy of Pediatrics
January 27, 2014

LATE TESTIMONY

Thank you for an opportunity to testify in strong support of HB 1776, which will establish a policy mandating documentation of a physical examination, by a licensed physician or advanced practice registered nurse, at entry to 6th and 9th grade.

The Hawaii Chapter of the American Academy of Pediatrics 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.

HB 1776 will ensure that all youth attending public school in Hawaii have a well child preventive health care visit at 6th and 9th grade 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.

In order align this policy with current recommendations for yearly well child examinations, we strongly suggest one modification to the proposed bill (Line 8)- that physical examination be performed within twelve months of the date of attendance, rather than 6 months.



LATE

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

In reply, please refer to:
File:

HOUSE COMMITTEE ON EDUCATION

HB1776, RELATING TO EDUCATION

**Testimony of Gary L. Gill
Acting Director of Health**

January 27, 2014

1 **Department's Position:** The Department of Health (DOH) would like to provide the following
2 comments on House Bill 1776.

3 **Fiscal Implications:** None

4 **Purpose and Justification:** The purpose of House Bill 1776 is to connect adolescents back to
5 their healthcare provider by expanding the school physical examination requirement. Currently,
6 physical examinations are only conducted upon entry into the school system in kindergarten. HB1776
7 expands the physical examination requirement to also include entry into sixth grade and ninth grade.
8 Grades six and nine were chosen because they coincide with the immunization requirements. This bill
9 follows the lead of other states and Hawaii private schools who have multiple physical examination
10 requirements throughout a child's educational journey.

11 Due to the Affordable Care Act, annual well child examinations are a required covered benefit in
12 all health plans. The expansion of physical examination requirements for public school students will
13 help reinforce the adoption of a culture of wellness and preventive health care. Adolescent physical
14 examinations and well-child visits reconnect youth to their healthcare providers and their medical home

Promoting Lifelong Health & Wellness

1 in order to provide continuity of care and coordination of services. From ages of 11 to 15 years,
2 adolescents experiencing significant changes physically, emotionally and socially. During this time,
3 many adolescents visit their doctors only when they are very sick.

4 Physical examinations and well child visits engages parents in their child's health. This provides
5 physicians and healthcare providers the opportunity to address developmentally relevant physical and
6 mental health issues with parents and their children. Regular visits allow the healthcare provider to
7 assess and address health problems early. For children and adolescents who are obese, the adolescent
8 physical examination visit provides an opportunity for the healthcare provider to assess possible
9 complications such as prediabetes or high blood pressure, identify the appropriate resources for the child
10 and the child's family and develop a plan to support family-based lifestyle changes.

11 Thank you for the opportunity to provide comments.