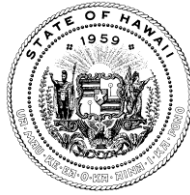


HB1897 HD1

Measure Title:	RELATING TO INSURANCE COVERAGE OF HEALTH SCREENINGS.
Report Title:	Women's Caucus; Health Insurance Coverage; Sexually Transmitted Diseases; Human Immunodeficiency Virus; Acquired Immunodeficiency Syndrome
Description:	Ensures insurance coverage for sexually transmitted disease screenings, including screenings for human immunodeficiency virus and acquired immunodeficiency syndrome. (HB1897 HD1)
Companion:	SB2323
Package:	Women's Legislative Caucus
Current Referral:	CPH, WAM
Introducer(s):	FUKUMOTO CHANG, BELATTI, DECOITE, EVANS, ICHIYAMA, C. LEE, LOPRESTI, LOWEN, LUKE, MIZUNO, MORIKAWA, SAN BUENAVENTURA, THIELEN



DAVID Y. IGE
GOVERNOR
SHAN S. TSUTSUI
LT. GOVERNOR

STATE OF HAWAII
OFFICE OF THE DIRECTOR
DEPARTMENT OF COMMERCE AND CONSUMER AFFAIRS
335 MERCHANT STREET, ROOM 310
P.O. Box 541
HONOLULU, HAWAII 96809
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CATHERINE P. AWAKUNI COLÓN
DIRECTOR
JO ANN M. UCHIDA TAKEUCHI
DEPUTY DIRECTOR

TO THE SENATE COMMITTEE ON
COMMERCE, CONSUMER PROTECTION, AND HEALTH

TWENTY-EIGHTH LEGISLATURE
Regular Session of 2016

Thursday, March 17, 2016
9:45 a.m.

**TESTIMONY ON HOUSE BILL NO. 1897, H.D. 1 – RELATING TO INSURANCE
COVERAGE OF HEALTH SCREENINGS.**

TO THE HONORABLE ROSALYN H. BAKER, CHAIR, AND MEMBERS OF THE
COMMITTEE:

My name is Gordon Ito, State Insurance Commissioner, testifying on behalf of the Department of Commerce and Consumer Affairs (“Department”).

The purpose of this bill is to ensure insurance coverage for annual screenings for sexually transmitted disease screenings, including screenings for human immunodeficiency virus and acquired immunodeficiency syndrome. The Department submits the following comments.

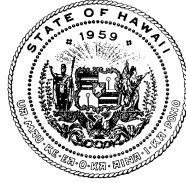
Sections 2 to 4 of this bill would require all health policies, plans, contracts, or agreements (except limited benefit and specified diseases policies as described in section 431:10A-102.5, Hawaii Revised Statutes) to cover sexually transmitted disease screenings annually. It would also require reimbursement to the health care provider of all costs associated with such coverage.

Pursuant to the federal Patient and Affordable Care Act (2010) (“ACA”), the federal Department of Human Services adopted guidelines for ACA compliant plans

regarding coverage for women's preventative services, including annual well-woman visits and HIV/AIDS screening without cost sharing. ACA compliant plans currently cover these screenings for women. To the extent that the proposed legislation mandates new coverage benefits for patients of all genders with ACA qualified health plans, the addition of new expanded mandated coverage may trigger section 1311(d)(3) of the ACA which requires states to defray the additional cost of any benefits in excess of the essential health benefits of the state's qualified health plan.

The Department takes no position as to mandating new coverage benefits for these ACA qualified health plans and non-ACA compliant plans. The Department defers to the Legislature to determine the appropriate health coverage mandates. Pursuant to Section 23-51, Hawaii Revised Statutes, any proposed mandatory health insurance coverage may also require the passage of a concurrent resolution requesting the State Auditor to prepare and submit a report assessing the social and financial impacts of the proposed mandate.

We thank this Committee for the opportunity to present testimony on this matter.



STATE OF HAWAII
DEPARTMENT OF HEALTH
P. O. Box 3378
Honolulu, HI 96801-3378
doh.testimony@doh.hawaii.gov

Testimony COMMENTING on HB1897HD1
RELATING TO INSURANCE COVERAGE OF HEALTH SCREENINGS

SENATOR ROSALYN H. BAKER, CHAIR
SENATE COMMITTEE ON COMMERCE, CONSUMER PROTECTION, AND HEALTH
Hearing Date: March 17, 2016 Room Number: 229

1 **Fiscal Implications:** None.

2 **Department Testimony:** The Department supports increasing women’s access to STD and HIV
3 screening and is providing comments on HB1897. This measure will address situations in
4 which lack of insurance reimbursement or the perception of such is the reason “certain healthcare
5 providers do not screen specifically for sexually transmitted diseases (STDs), including human
6 immunodeficiency virus (HIV) and acquired immunodeficiency syndrome at annual screenings,
7 even though the Patient Protection and Affordable Care Act (ACA) requires health insurance to
8 cover those screenings without a co-pay.” The Department has no data or anecdotal reports that
9 limitations in insurance coverage are reducing women’s access to STD screening. Thus, it is not
10 clear the degree of benefit offered through the screening mandated in this measure. This bill,
11 however, would remove any possible gaps in covered screening services under grandfathered
12 policies from pre-Affordable Care Act implementation.

13 The Department recommends that women be screened in accordance with national STD
14 guidelines for risk of infection, in consultation with her health provider. This may not
15 correspond with annual gynecological exams as stated in the bill. Currently, the U.S. Preventive
16 Services Task Force recommendations are the basis for STD and HIV screening reimbursement
17 by insurance policies without co-pay under the ACA.

18 Thank you for the opportunity to testify.

DAVID Y. IGE
GOVERNOR



STATE OF HAWAII
HAWAII EMPLOYER-UNION HEALTH BENEFITS TRUST FUND

P.O. BOX 2121
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TESTIMONY BY DEREK MIZUNO
ADMINISTRATOR, HAWAII EMPLOYER-UNION HEALTH BENEFITS TRUST FUND
DEPARTMENT OF BUDGET AND FINANCE
STATE OF HAWAII
TO THE SENATE COMMITTEE ON COMMERCE, CONSUMER PROTECTION, AND
HEALTH
ON
HOUSE BILL NO. 1897 HD 1

March 17, 2016, 9:45 a.m.

RELATING TO INSURANCE COVERAGE OF HEALTH SCREENINGS

Chair Baker, Vice Chair Kidani, and Members of the Committee:

The Hawaii Employer-Union Health Benefits Trust Fund (EUTF) Board of Trustees has not taken a position on this bill. However, the Committee should be aware that the current EUTF medical plans provide coverage at no cost for sexually transmitted disease screenings, including screenings for human immunodeficiency virus and acquired immunodeficiency syndrome, during the insured's annual exam in accordance with the Patient Protection And Affordable Care Act.

Thank you for the opportunity to testify.

EUTF's Mission: We care for the health and well being of our beneficiaries by striving to provide quality benefit plans that are affordable, reliable, and meet their changing needs. We provide service that is excellent, courteous, compassionate, and informative.



To: Hawaii State Senate Committee on Commerce, Consumer Protection and Health
Hearing Date/Time: Tuesday, March 17, 2016, 9:45 a.m.
Place: Hawaii State Capitol, Rm. 229
Re: Testimony of Planned Parenthood of Hawaii in support of H.B. 1897, H.D.1,
Relating to Insurance Coverage of Health Screenings

Dear Chair Baker and Members of the Committee,

Planned Parenthood Votes Northwest and Hawaii (“PPVNH”) writes in support of H.B. 1897, HD1., which requires insurance coverage for annual screenings for sexually transmitted diseases, including screenings for human immunodeficiency virus and acquired immunodeficiency syndrome.

PPVNH is dedicated to advocating for policies that promote sexual and reproductive health care and so we support H.B. 1897 because it will increase the affordability and availability of regular STI testing for those who seek to proactively take care of their health. Patients should be able to obtain insurance coverage for testing if it is determined to be advisable based on a consultation with their doctors, as opposed to a determination made by their insurance company.

Further, the economic and other costs associated with STI testing are minimal compared to the cost of treating STIs. Promoting STI testing will ensure that those who with STIs have access to the treatment and care that they need and will result in a decrease in the rates of infection and costs associated with STIs.

Thank you for this opportunity to testify in support of H.B. 1897, HD1.

Sincerely,
Laurie Field
Hawaii Legislative Director and Public Affairs Manager



An Independent Licensee of the Blue Cross and Blue Shield Association

March 17, 2016

The Honorable Rosalyn H. Baker, Chair
The Honorable Michelle N. Kidani, Vice Chair
Senate Committee on Commerce, Consumer Protection, and Health

Re: HB 1897, HD1 – Relating to Insurance Coverage of Health Screenings

Dear Chair Baker, Vice Chair Kidani, and Members of the Committee:

The Hawaii Medical Service Association (HMSA) appreciates the opportunity to testify on HB 1897, HD1, which would require health plan coverage of screenings for sexually transmitted diseases. HMSA supports this Bill, and we offer clarifying amendments.

Research has shown that preventive health services can save lives and improve health by identifying illnesses earlier, managing them more effectively, and treating them before they develop into more complicated, debilitating conditions, and that some services are also cost-effective. In recognition of this, the Affordable Care Act (ACA) mandates coverage for a range of preventive services without cost-sharing. The required preventive services come from recommendations made by four expert medical and scientific bodies – the U.S. Preventive Services Task Force (USPSTF), the Advisory Committee on Immunization Practices (ACIP), the Health Resources and Services Administration’s (HRSA’s) Bright Futures Project, and HRSA and the Institute of Medicine (IOM) Committee on Women’s Clinical Preventive Services.

In compliance with the ACA, all of HMSA’s non-grandfathered plans currently provide coverage for all USPSTF grade a and b recommendations which include: chlamydia screening: gonorrhea screening: HIV screening, and syphilis screening. In addition we offer coverage for sexually transmitted infections counseling.

In further reviewing the Bill, we realized a couple of provisions may require clarification. In both Sections 2 and 3 of the Bill, the phrase, “annual screenings of sexually transmitted diseases” is not defined. To ensure alignment with ACA, the Committee may wish to consider amending that phrase to read:

*...annual screenings of sexually transmitted diseases, **as prescribed by the United States Preventive Services Task Force, including screenings for human immunodeficiency virus and acquired immunodeficiency syndrome.***

The Committee may also wish to consider an amendment clarifying that reimbursement for “all costs associated with the coverage” mandated in this Bill also is in accordance with a member’s coverage plan. While we certainly wish to ensure coverage for these preventive services in all of our plans, our contracts with businesses and organizations have varying levels of deductibles and co-pays, and we would want to ensure this provision does not interfere with those contractual arrangements. We suggest §432:1- (b) in Section 3 be amended as follows:



An Independent Licensee of the Blue Cross and Blue Shield Association

*(b) Each mutual benefit society shall reimburse all costs **described as payable under the individual's policy and** associated with the coverage under subsection (a) to any physician or healthcare provider complying with this section.*

A comparable amendment is suggested for similar provision in Section 2 of the Bill.

Thank you for allowing us to testify in support of HB 1897, HD1. Your consideration of our suggested amendments is appreciated.

Sincerely,

A handwritten signature in black ink, appearing to read "JD", with a long horizontal stroke extending to the right.

Jennifer Diesman
Vice President, Government Relations

Testimony of
John M. Kirimitsu
Legal and Government Relations Consultant

Before:
Senate Committee on Commerce, Consumer Protection and Health
The Honorable Rosalyn H. Baker, Chair
The Honorable Michelle N. Kidani, Vice Chair

March 17, 2016
9:45 am
Conference Room 229

Re: HB 1897 HD1 Relating to Insurance Coverage of Health Screenings

Chair, Vice-Chair, and committee members thank you for this opportunity to provide testimony on HB 1897 HD1 relating to insurance coverage for sexually transmitted disease screenings.

Kaiser Permanente Hawaii supports this bill.

According to the Center for Disease Control and Prevention, it is estimated that more than 1.2 million people have HIV in the United States. About 20 percent (1 in 5) don't even know they are infected because symptoms don't show up for many years. Kaiser Permanente Hawaii recognizes that the earliest possible identification and treatment of HIV is the most effective way to manage living with HIV or AIDS, for a lifetime. That being said, Kaiser Permanente Hawaii already provides coverage for annual examinations for sexually transmitted disease screenings, including HIV and AIDS, proposed in HB 1897 HD1 through its base plans at no charge, and we are always proud to sponsor healthy lifestyles.

Thank you for your consideration.

American Congress of Obstetricians and Gynecologists
District VIII, Hawaii (Guam & American Samoa) Section
Greigh Hirata, MD, FACOG, Chair
94-235 Hanawai Circle, #1B
Waipahu, Hawaii 96797



To: Committee on Commerce, Consumer Protection, and Health
Sen. Rosalyn Baker, Chair
Sen. Michelle Kidani, Vice Chair

DATE: Thursday, March 17, 2016 (0945)

FROM: Hawaii Section, ACOG
Dr. Greigh Hirata, MD, FACOG, Chair
Dr. Jennifer Salcedo, MD, MPH, MPP, FACOG, Vice-Chair
Lauren Zirbel, Community and Government Relations

Statement of the Hawaii Section of the American Congress of Obstetricians and Gynecologists
HB 1897 HD1: SUPPORT WITH AMENDMENTS

The Hawaii Section of the American Congress of Obstetricians and Gynecologists (HI ACOG) supports HB 1897 and other legislative proposals that promote increased access to sexually transmitted infection (STI) testing and treatment. As a Section of the Nation's leading group of physicians dedicated to improving health care for women, HI ACOG represents more than 200 obstetrician/gynecologist physicians in our state.

Burden of Sexually Transmitted Infections

- Hawaii has the 15th highest rate of chlamydial infection in the country with significant disparities across age and racial and ethnic groups in disease prevalence.¹
- Despite clear national recommendations for STI testing, rates of STI testing in young women are troublingly low. A study of adolescents seen for routine health check-ups found that only 34% had received any STI counseling or screening at their visit.² Among sexually active women ages 16-25, only 42% with commercial PPOs and 58% with Medicaid had received chlamydia screening within the past year.³ Of six health plans in Hawaii reporting chlamydia screening data for sexually active women ages 16-25 in 2008, a 56.2% screening rate was reported.⁴
- Unrecognized and untreated sexually transmitted infections can result in pelvic inflammatory disease, ectopic pregnancy, infertility, and chronic pelvic pain, as well as infections of sexual partners and neonates.
- Unrecognized and untreated sexually transmitted infections in male partners results in infection and reinfection of women.
- Infection with one STI predisposes a person to contracting other STIs.

Insurance Coverage for Sexually Transmitted Infection Testing

- Under the Affordable Care Act (ACA), private health plans are required to cover recommended preventive health services without any patient cost-sharing. This includes A and B level recommendations by the U.S. Preventive Services Task Force (USPSTF).
- ACOG and the USPSTF recommend screening for chlamydia and gonorrhea in sexually active women age 24 years or younger, and in older women who are at increased risk for infection, at least annually or when new risk factors develop since the last negative result.^{5,6}
- ACOG and the USPSTF recommend screening for HIV in women 15-65, and in younger and older women at increased risk. Need for repeat screening is recommended to be assessed at least annually.^{5,6}
- More frequent STI testing is recommended by national STI testing guidelines for pregnant women, those with symptoms of STIs, and those whom have recently tested positive for an STI.

- Since some women are covered by ‘grandfathered’ plans not currently subject to ACA-mandated coverage of preventive health services, not all non-‘grandfathered’ plans are compliant with ACA coverage requirements, and it is extremely difficult to efficiently determine a woman’s insurance coverage for STI testing, many health care providers and women are hesitant to perform STI testing as recommended due to coverage and cost concerns.

Requested Amendments

For the reasons that: many women may not have an annual gynecologic exam, STI testing is often indicated outside of an annual gynecologic exam, STI testing may be medically indicated more often than annually, and male partners serve as sources of STI infection and re-infection for women, we respectfully request that this committee change the bill’s language as follows, “shall provide insurance coverage for sexually transmitted disease testing in accordance with national professional guidelines, such as those of the U.S. Preventive Services Task Force and the Centers for Disease Control and Prevention.”

For these reasons, **HI ACOG supports HB1897 with the above requested amendments** and urges the Legislature to work toward decreasing the health burdens of sexually transmitted infections in Hawaii. We stand ready to provide you with factual information on medical issues that come before the Legislature, and hope you will contact us at any time.

¹STD Surveillance 2013: Table 2: Chlamydia- reported cases rates by state, ranked by state, United States, 2013. (Accessed January 8, 2015, at <http://www.cdc.gov/std/stats13/tables/2.htm>.)

²Rietmeijer CA, Bull SS, Ortiz CG, et al. Patterns of general health care and STD services use among high risk youth participating in community-based urine chlamydia screening. *Sex Transm Dis* 1998;25:457-63.

³The State of Health Care Quality 2006; Chlamydia Testing. (Accessed January 10, 2015, at <http://www.ncqa.org/tabid/447/Default.aspx>.)

⁴Chlamydia Screening Percentages Reported by Commercial and Medicaid Plans by State. (Accessed February 10, 2015, at Chlamydia Screening Percentages Reported by Commercial and Medicaid Plans by State and Year.)

⁵American College of Obstetricians & Gynecologists Guidelines for Women’s Health Care: A Resource Manual. 4th Edition. 2014.

⁶*Final Recommendation Statement: Chlamydia and Gonorrhea: Screening*. U.S. Preventive Services Task Force. December 2014.
<http://www.uspreventiveservicestaskforce.org/Page/Document/RecommendationStatementFinal/chlamydia-and-gonorrhea-screening>



March 14, 2016

Senate's Committee on Commerce, Consumer Protection and Health
Hawaii State Capitol
415 South Beretania Street, Room 229
Honolulu, HI 96813

Hearing: Thursday, March 17, 2016 – 9:45 a.m.

RE: **STRONG SUPPORT for House Bill 1897 HD 1 – RELATING TO INSURANCE
COVERAGE OF HEALTH SCREENINGS**

Aloha Chairperson Baker, Vice Chair Kidani and fellow committee members,

I am writing in STRONG SUPPORT to House Bill 1897 HD 1 on behalf of the LGBT Caucus of the Democratic Party of Hawai'i. HB 1897 HD 1 will ensure insurance coverage for sexually transmitted disease screenings, including screenings for human immunodeficiency virus (HIV) and acquired immunodeficiency syndrome (AIDS).

We have seen great advances in the medical field around HIV and AIDS, but like every other disease only if you catch it early enough. This bill will save lives and help relieve the pressure off of non-profits like the Life Foundation and Waikiki Health Center.

We cannot encourage you enough to pass this bill.

Mahalo nui loa,

Michael Golojuch, Jr.
Chair

From: mailinglist@capitol.hawaii.gov
To: [CPH Testimony](#)
Cc: tabraham08@gmail.com
Subject: *Submitted testimony for HB1897 on Mar 17, 2016 09:45AM*
Date: Monday, March 14, 2016 12:42:17 PM

HB1897

Submitted on: 3/14/2016

Testimony for CPH on Mar 17, 2016 09:45AM in Conference Room 229

Submitted By	Organization	Testifier Position	Present at Hearing
Troy Abraham	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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Representative Rosalyn H. Baker, Chair
Representative Michelle N. Kidani, Vice Chair
Committee on Commerce, Consumer Protection, and Health

Tuesday, March 15, 2016

Date of Hearing: Thursday, March 17th, 2016

Time of Hearing: 9:45 A.M

Room of Hearing: Conference Room 229

Re: Support for HB 1897 HD1, Relating to Insurance Coverage of Heath Screenings

Dear Chair Baker, Vice Chair Kidani, and Members of the Committee,

My name is Gene T. Yoshikawa and I am a medical student at the John A. Burns School of Medicine located in Kaka'ako, Honolulu. I am testifying in **support** of HB 1897 HD1, Relating to Insurance Coverage of Heath Screenings.

By the end of 2012, approximately 1.2 million people in the United States were infected with Human Immunodeficiency Virus (HIV). Of these individuals, 153,600 (approximately 12.8%) were unaware they were infected. Furthermore, of this population, individuals aged 13 – 24 were particularly affected by HIV. This sub-population composed 16% of the all HIV infected individuals in the United States, but accounted for 26% of all new HIV cases (CDC.gov).

Occasionally, the diagnosis of HIV in infected individuals is missed or misdiagnosed due to clinical presentation of “normal” flu-like symptoms in the patient during the acute phase of the infection. Unfortunately, this phase is also when patients are most infectious and highly susceptible to transmission of the virus to others via exchange of bodily fluids. Because of this, early HIV screening and preventative services are essential for impediment of HIV infection and Acquired Immune Deficiency Syndrome (AIDS). Under the Affordable Care Act (ACA), newer insurance plans will cover HIV testing for everyone of ages 15 – 65 and for those of other ages at increased risk (AIDS.gov). This implementation, however, does not directly apply to all insurance plans and other commonly affected individuals determined by the CDC, such as those of age 13 and 14. As a result, patients may not receive screening, become unaware they are infected, and pose high risk of transmission to others.

For the reasons stated above, I am in full support of measure HB 1897 HD1. Insurance coverage for screening of sexually transmitted diseases would not only aid in the prevention of transmission of HIV to others, but also allow for quicker introduction of anti-retroviral treatment (ART), ultimately saving the lives of many. Thank you very much for giving me this opportunity to testify.

Sincerely,



Gene T. Yoshikawa