

**TESTIMONY OF JAN K. YAMANE, ACTING STATE AUDITOR,
ON HOUSE BILL NO. 2466
RELATING TO NON-GENERAL FUNDS**

House Committee on Finance

March 1, 2016

Chair Luke and Members of the Committee:

Thank you for the opportunity to testify in support of this bill. HB 2466 would repeal, amend, abolish, and transfer balances of various non-general funds of the Department of Health (DOH).

The impetus for this bill is our Report No. 15-17, *Review of Special Funds, Revolving Funds, Trust Funds, and Trust Accounts of the Department of Health*. Our review of these funds includes an evaluation of the original intent and purpose of each fund, including the degree to which each fund continues to serve its intended purpose. We also evaluate whether each fund meets statutory criteria for its respective fund type (i.e., special, revolving, or trust). Moreover, for special and revolving funds we conclude on the need for the fund based on the purpose and scope of the program it supports. This bill would implement many of our report recommendations.

Funds that *do not meet criteria* would be repealed or amended by HB 2466

We support repealing or amending the sources of revenue for the following DOH funds that *do not meet criteria*:

1. **Community Health Centers Special Fund** (Sections 2 and 6) established pursuant to Section 321-1.65, HRS. We recommended repealing the fund and amending Section 245-15, HRS, as provided in Section 5 of this bill, to direct a portion of the cigarette excise tax to DOH for its primary health care incentive program.
2. **Domestic Violence and Sexual Assault Special Fund** (Sections 8 to 11) established pursuant to Section 321-1.3, HRS. We recommended amending Section 321-1.3(c), as provided by Section 9 of this bill, repealing Section 338-14.5(3), HRS, as provided in Section 11 of this bill.
3. **Early Intervention Trust Fund** (Sections 12 and 13) established pursuant to Section 321-356, HRS. We recommended the fund be repealed; DOH concurred.
4. **Hawai'i Birth Defects Special Fund** (Sections 16 and 18) established pursuant to Section 321-426, HRS. We recommended repealing the fund and amending Section 572-5, HRS, as provided in Section 17 of this bill, to direct a portion of marriage license fees to the general fund.

Funds that do not meet criteria would be abolished by HB 2466

We support abolishing the following administratively established DOH funds that *do not meet* criteria:

1. **Early Childhood Obesity Special Fund** (Section 20) – We recommended the fund be closed and the remaining balance returned to the general fund; DOH concurred.
2. **Grant for Catholic Charities – Lanakila Senior Center Special Fund** (Section 20) – We recommended the fund be closed and the remaining balance returned to the general fund; DOH concurred.
3. **Grant for Emergency Room Subsidy at Wai‘anae Coast Clinic Special Fund** (Section 20) – We recommended the fund be closed and the remaining balance returned to the general fund; DOH concurred.
4. **Grant for Hawai‘i Primary Care Association Dental Special Fund** (Section 20) – We recommended the fund be closed and the remaining balance returned to the general fund; DOH concurred.
5. **Hospital-Based Poison Center Special Fund** (Section 20) – We recommended the fund be closed and the remaining balance returned to the general fund; DOH concurred.

6. **Interagency Federal Revenue Maximization Revolving Fund** (Section 20) – We recommended the fund be closed and the remaining balance returned to the general fund; DOH concurred.

7. **Program for All Inclusive Care for Elderly Special Fund** (Section 20) – We recommended the fund be closed and the remaining balance returned to the general fund; DOH concurred.

8. **Public Health Nursing Services Special Fund** (Section 20) – We recommended the fund be closed and the remaining balance returned to the general fund; DOH concurred.

9. **Resources to Nonprofit, Community-Based Health Care Special Fund** (Section 20) – We recommended the fund be closed and the remaining balance returned to the general fund; DOH concurred.

10. **Respite Services Special Fund** (Section 20) – We recommended the fund be closed and the remaining balance returned to the general fund; DOH concurred.

11. **Subsidy for St. Francis Medical Center – Bone Marrow Special Fund** (Section 20) – We recommended the fund be closed and the remaining balance returned to the general fund; DOH concurred.

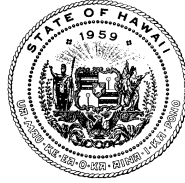
12. **Funding for Grant Pursuant to Chapter 42F, HRS** (Section 21) – We recommended the fund be closed and the remaining balance returned to the Emergency and Budget Reserve Special Fund; DOH concurred.

13. **Healthy Aging Partnerships Program Special Fund** (Section 21) – We recommended the fund be closed and the remaining balance returned to the Emergency and Budget Reserve Special Fund; DOH concurred.

14. **Partnership in Community Living Special Fund** (Section 21) – We recommended the fund be closed and the remaining balance returned to the Emergency and Budget Reserve Special Fund; DOH concurred.

15. **Hilo Shippers’ Wharf Committee Charitable Trust Fund** (Section 22) established pursuant to Third Circuit Court Vesting Order Trust No. 03-1-0010. We recommended the fund be closed and the remaining balance transferred to the County of Hawai‘i; DOH concurred.

Thank you again for the opportunity to testify in support of HB 2466. I am available to answer any questions you may have.



STATE OF HAWAII
DEPARTMENT OF HEALTH
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**Testimony in OPPOSITION to H.B. 2466
RELATING TO NON-GENERAL FUNDS**

REPRESENTATIVE SYLVIA LUKE, CHAIR
HOUSE COMMITTEE ON FINANCE

Hearing Date: March 1, 2016

Room Number: 308

1 **Fiscal Implications:** Three Department of Health (DOH) areas, maternal and child health,
2 community health, and birth defect services, will be negatively impacted by repealing,
3 abolishing, or amending non-general funds pursuant to recommendations made in Auditor's
4 Report No. 15-17.

5 **Department Testimony:** The Department opposes the amending of the revenue sources of the
6 domestic violence and sexual assault special fund, repeal of the community health centers special
7 fund, and repeal of the birth defects special fund. These funds have a clear nexus between the
8 program and revenue sources, and are appropriate financing mechanisms. The state and its
9 communities will be impacted by the loss of the funding.

10 Domestic Violence and Sexual Assault Special Fund (DVSASF): It is critical to continue
11 staffing of a 1.0 FTE program specialist and efforts to address domestic violence and sexual
12 assault supported by the DVSASF. This includes required staffing overseeing the
13 multidisciplinary domestic violence fatality reviews, suicides, and near deaths related to intimate
14 partner violence conducted to reduce the incidence of preventable deaths; service contracts to
15 prevent sexual violence, sexual harassment, dating violence, and cyber stalking, and for victim
16 services; and education and training to ensure evaluation for sexual violence prevention efforts
17 and other efforts identified and determined to be needed from reviews.

18 There is a clear link to unintended births, divorce, and deaths related to domestic violence, as
19 well as issues of control and pressure to enter into marriage. Utilizing fees from these vital
20 records has been essential in providing a nexus to reducing the incidence of death, suicide, and
21 near deaths related to intimate partner control and violence.

22 Community Health Centers Special Fund (CHC Special Fund): There is a direct connection
23 between the bill that established the CHC Special Fund and the current use of the funds. The
24 purpose of Act 316/2006 SLH is to discourage smoking by increasing the tax on cigarettes and to
25 allocate funds to effective sources in the prevention and treatment of disease and injury. The Act

1 also indicates that allocating a significant percentage of tobacco tax revenues to programs that
2 strive to maintain Hawaii's health such as the community health centers are the most appropriate
3 and effective use of such revenues to help the greatest number of people in the State. In
4 conformance with the intent of the law, the DOH has entered into exempt contracts with thirteen
5 (13) federally qualified health centers (FQHCs) for the provision of comprehensive primary care
6 services (medical, behavioral, dental treatment) for the uninsured/underinsured. In addition, the
7 DOH has exempt contracts with Hana Health for the provision of urgent/primary care services,
8 and with Waianae Coast Comprehensive Health Center for the provision of emergency room
9 services. Act 316/2006 SLH stipulates that the CHC Special Fund shall be used by the DOH for
10 the operations of FQHCs, thus the exemption status for purposes of procurement and contracting.

11 Since HRS §321-1.65 designates FQHCs as the sole recipients of the CHC Special Fund and this
12 section of the law is being repealed, redirecting the cigarette tax revenues to the primary health
13 care incentive program established pursuant to HRS §321-1.5 would effectively terminate the
14 aforementioned exemption status for the FQHCs on July 1, 2016. As a result, the DOH will have
15 to procure these services competitively and enter into new contracts which will lead to serious
16 financial hardships for FQHCs due to significant delays in reimbursements. Finally, although
17 HRS §321-1.65 is being repealed, this bill does not establish a special fund account for the
18 primary health care incentive program to accommodate deposits of cigarette tax revenues of up
19 to \$8.8 million per fiscal year, nor does it indicate that the funds are to be used by the DOH.

20 Birth Defects Special Fund: The legislature attached the fee to the marriage license to support
21 families having healthy babies. The birth defects data are used to support families having
22 healthy babies and to provide accurate information to support or disprove theories about
23 increased number of babies born with birth defects or possible causes of birth defects (e.g.,
24 environmental causes). Data have been used to show that the families in certain areas of Hawaii
25 did not have a higher rate of birth defects compared to other areas nationally or in Hawaii. This
26 has helped the state and its communities answer questions about the impact of environmental,
27 industrial, and maternal exposures. Currently, data are being analyzed to help determine if the
28 rates of birth defects in babies born to mothers reporting Kauai residency are higher due to the
29 concern about pesticide use on Kauai. Accurate birth defects data to inform decisions about
30 maternal and environmental exposures will not be available without the program.

31 This state mandated program provides important surveillance and accurate data on the incidence
32 of birth defects to support having healthy babies and plan on services that may be needed for
33 babies born with birth defects. There are insufficient general funds currently appropriated to
34 Children with Special Health Needs Branch (HTH 560/CC) to support this program. Five (5.0
35 FTE) positions are funded by the Birth Defects Special Fund. Additional general funds
36 sufficient to sustain this program will need to be appropriated by legislation.

- 1 Thank you for this opportunity to testify.



HAWAII COMMUNITY
DEVELOPMENT AUTHORITY



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STATEMENT OF
AEDWARD LOS BANOS, INTERIM EXECUTIVE DIRECTOR
HAWAII COMMUNITY DEVELOPMENT AUTHORITY

BEFORE THE
HOUSE COMMITTEE ON FINANCE

ON

Tuesday, March 1, 2016

11:02 A.M.

State Capitol, Conference Room 308

in consideration of

H.B. 2466 – RELATING TO NON-GENERAL FUNDS.

Purpose: Repeals and transfers the unencumbered balances of various non-general funds and accounts and amends the revenue source of the domestic violence and sexual assault special fund as recommended by the auditor in auditor's report no. 15-17.

Position: This testimony reflects my view as the Interim Executive Director only, as the Authority has not had an opportunity to review and act on this measure. The Hawaii Community Development Authority does not receive general funds for day-to-day operations and therefore must rely on revenues collected by stewarding its assets and regulating area development. While we appreciate that the current version of HB 2466 exempts those special funds established by section 206E-6, it does not protect HCDA's funds that are used for Public Facilities and Leasing/Management.

The HCDA previously used its Public Facilities account to fund the creation of a new park in Kakaako called Kolowalu Park, and also funded the creation of public parking stalls in the parking garage at Halekauwila Place.

Testimony reflects the view and position of the Executive Director and not that of the Authority.

These funds are derived from assessments made on new development in Kakaako for reinvestment in the Community Development District for public facilities including infrastructure.

The HCDA relies on its Leasing/Management subaccount to fund the maintenance and operation of parks and its HCDA's office headquarters. The HCDA offices and parks are not maintained by either Department of Account and General Services or the Department of Land and Natural Resources that maintains other State buildings and parks, respectively. Due to restrictions on Public Facility Funds in statute, Leasing/Management subaccount is also used to fund the planning activities of the HCDA. As a planning, permitting and re-development authority, these funds are critical to HCDA operations.

We respectfully ask that this bill be amended to exempt all special funds established by section 206E, and not only those under section 206E-6. Doing so would ensure the HCDA has the financial capability to continue its operations and ability to undertake projects that provide great community benefits.

Thank you for the opportunity to provide comments on this measure.

TAX FOUNDATION OF HAWAII

126 Queen Street, Suite 304

Honolulu, Hawaii 96813 Tel. 536-4587

SUBJECT: MISCELLANEOUS, Repeal non-general funds

BILL NUMBER: HB 2466

INTRODUCED BY: LUKE

EXECUTIVE SUMMARY: Repeals various non-general funds including special funds, revolving funds, trust funds, and trust accounts, all in accordance with the State Auditor's recommendations in Report 15-17.

BRIEF SUMMARY: Repeals the community health centers special fund (HRS section 321-1.65) and makes conforming amendments.

Removes the earmark against Department of Health user fees for the domestic violence and sexual assault special fund (HRS section 321-1.3).

Repeals the early intervention trust fund (HRS section 321-356).

Repeals the Hawaii birth defects special fund (HRS section 321-426).

Abolishes the following accounts:

1. The early childhood obesity special fund administratively established in fiscal year 2011-2012 by the department of health;
2. The grant for Catholic Charities-Lanakila Senior Center special fund administratively established in 2007;
3. The grant for emergency room subsidy at Wai'anāe Coast Clinic special fund administratively established in 2007;
4. The grant for Hawai'i Primary Care Association dental special fund administratively established in 2007;
5. The hospital-based poison center special fund established in 2006;
6. The interagency federal revenue maximization revolving fund special fund established pursuant to HRS section 29-24, which was repealed by Act 124, SLH 2011;
7. The program for all-inclusive care for elderly special fund administratively established in 2006;
8. The public health nursing services special fund (HRS section 321-432), which fund was repealed by Act 147, SLH 2015;
9. The resources to nonprofit, community based health care special fund administratively established in 2006;
10. The respite services special fund administratively established in 2009; and
11. The subsidy for St. Francis Medical Center-Bone Marrow special fund administratively established in 2007.

Repeals the following and transfers any unencumbered balances to the emergency and budget reserve fund:

1. The funding for grant pursuant to chapter 42F, HRS, special fund administratively established in 2010 for moneys appropriated from the emergency and budget reserve fund through Act 191, SLH 2010, and Act 25, SLH 2011, which extended the lapse date to the end of fiscal year 2011-2012;
2. The healthy aging partnerships program special fund administratively established in 2010 for moneys from the emergency and budget reserve fund authorized through Act 191, SLH 2010, for fiscal year 2010-2011 and Act 25, SLH 2011, which extended the lapse date from June 30, 2011 to June 30, 2012; and
3. The partnership in community living program special fund administratively established in 2010 for moneys appropriated from the emergency and budget reserve special fund through Act 191, SLH 2010, and Act 25, SLH 2011, which extended the lapse date to the end of fiscal year 2011-2012.

Repeals the following and transfers any unencumbered balance to the county of Hawaii:

1. The Hilo Shippers' Wharf Committee Charitable trust fund established pursuant to third circuit court vesting order trust no. 03-1-0010.

EFFECTIVE DATE: July 1, 2016.

STAFF COMMENTS: This measure implements some of the state auditor's recommendations in the various auditor's reports that reviewed the special funds, revolving funds, trust funds, and trust accounts of the state.

The 1989 Tax Review Commission noted that use of special fund financing is a "departure from Hawaii's sound fiscal policies and should be avoided." It also noted that special funds are appropriate where the revenues to the funds maintain some direct connection between a public service and the beneficiary of that service. The Commission found that special funds which merely set aside general funds cannot be justified as such actions restrict budget flexibility, create inefficiencies, and lessen accountability. It recommended that such programs can be given priority under the normal budget process without having to resort to this type of financing.

Seconding the Commission's harsh criticism was the State Auditor's report issued in February of 1991 that recognized that the "tax is levied on the general public rather than specific beneficiaries of the program," and thus the fund did not reflect a "direct link between user benefits and user charges."

As a result of the recent spotlight of monies in special funds, Act 130, SLH 2013, requires the State Auditor to review all existing special, revolving, and trust funds beginning in 2014 and every five years which assists in making government finances more transparent.



House Committee on Finance

The Hon. Sylvia Luke, Chair

The Hon. Scott Y. Nishimoto, Vice-Chair

Testimony in Opposition of House Bill 2466

Relating to Non-General Funds

Submitted by Robert Hirokawa, CEO

March 1, 2016, 11:02 am, Room 308

The Hawaii Primary Care Association (HPCA), which represents the federally qualified community health centers in Hawaii, **strongly opposes** House Bill 2466, which repeals and transfers the balances of various non-general funds, including the CHC Special Fund.

In December, 2015, the Auditor of the State of Hawaii did a review of the various Special Funds, Revolving Funds, Trust Funds, and Trust Accounts currently under the Department of Health's purview, among them the Community Health Center Special Fund (HRS § 321-1.65). Therein, the report stated the fund should be repealed for failing to demonstrate a clear nexus between the program and the source of revenue.

Funding for the Community Health Center Special Fund is derived from tobacco taxes charged to wholesalers and dealers under HRS § 245-15 with the intent to discourage smoking by increasing the tax on cigarettes and to allocate the resulting funds to effective sources in the prevention and treatment of disease and injury. The Special Fund allows the Department of Health to do that by contracting with 13 community health centers to provide comprehensive primary care services to uninsured/underinsured individuals across the state.

In 2014 alone:

- Health centers provided tobacco use screening and cessation intervention for more than 70% of adult patients;
- More than 7% of all health center patients presented w/ asthma, a malady directed linked to cigarette smoking;
- Of those, 78% received treatment for asthma at their community health center;
- Nearly 25% of all patients suffer from hypertension;
 - Of those, 70% of patients received treatment for high cholesterol; and,
 - Blood pressure control was offered to 67% of patients.

Taken together, these services display a clear and undeniable linkage between the monies derived from the tobacco tax established in HRS § 245-15 and the services they are being used to provide at community health centers.

As it currently stands, the Community Health Center Special Fund is the only form of state funding being received by the community health centers. Despite that, health centers see nearly 150,000 patients each year, more than half of which are enrolled in Medicaid. In addition, 90% of health center patients reside below 200% of the Federal Poverty Level and in 2012 health centers provide services to 9,125 homeless patients, a number comprising as much as 25% of some health center's patient load.

Further, the health centers continue to see high amounts of uninsured patients, despite the presence of the Hawaii Health Connector and healthcare.gov. As of last year, the health center system in Hawaii saw an average of 15% of patients arriving without insurance, and in some cases that number was as high as 25%. In addition, a great deal more are considered underinsured, a trend that will most likely continue moving forward.

What these numbers cumulatively represent is the clear need for health center services in Hawaii, especially among the most vulnerable populations. Without that vital care, the effects will be felt by both the healthcare community – in terms of increased emergency department utilization, higher hospital admission rates, and greater costs – and individual communities, where patients will have heightened difficulty maintaining health, securing/retaining employment, furthering their education, and providing for their families.

The repeal of the Community Health Center Special Fund will not only jeopardize the intended effects of the tobacco tax, it will have a direct and detrimental effect on the state, its healthcare system, and a large percentage of its residents.

For these reasons, we **strongly oppose** House Bill 2466 and thank you for the opportunity to testify.



THE SEX ABUSE TREATMENT CENTER

A Program of Kapi'olani Medical Center for Women & Children

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Robert H. Pantell, MD

Joshua A. Wisch

DATE: March 1, 2016

TO: The Honorable Sylvia Luke, Chair
The Honorable Scott Nishimoto, Vice Chair
House Committee on Finance

FROM: The Sex Abuse Treatment Center
A Program of Kapi'olani Medical Center for Women and Children

RE: Testimony in Strong Opposition to H.B. 2466, Part III
Relating to Non-General Funds

Good morning Chair Luke, Vice Chair Nishimoto, and members of the House Committee on Finance.

The Sex Abuse Treatment Center (SATC) strongly opposes H.B. 2466 Part III, which as written would reduce the revenues of the Department of Health Domestic Violence and Sexual Assault Special Fund (DVSASF) established under Hawaii Revised Statutes (HRS) Section 321-1.3, by over 90% and cause a sharp reduction in domestic violence and sexual assault intervention and prevention services in Hawaii.

H.B. 2466 Part III, responds to the State Auditor's recent findings concerning the DVSASF. HRS Section 37-52.3 states the criteria for establishment and continuance of special funds. In relevant part, it provides that a special fund must reflect a clear link between the programs supported by the fund and the sources of revenue, as opposed to serving primarily as a means to provide the program or users with an automatic means of support that is removed from the normal budget and appropriation process.

We firmly believe that there is a clear link between the programs supported by the DVSASF and the source of over 90% of its revenue, a \$1 fee per certified copy collected for birth, marriage, divorce or death certificates. These vital records are the means by which the State of Hawaii documents the existence of citizens' important relationships and life events, from child birth and its attendant conditions of maternity and paternity, to the creation and dissolution of marriages, to the loss of one's life and its cause.

The existence of such records and the care that Hawaii takes in their maintenance and distribution underscores the importance that our state ascribes to the relationships between its people, whether through bonds of blood or by choice, and our government's compelling interest in recognizing their key life events.

Sexual and domestic violence tears at the fabric of society by doing severe and lasting harm to family and community relationships. The trauma and injury experienced by victims and their loved ones are intimately linked to the dissolution of many parent-child and marital relationships. Moreover, domestic violence is a known contributing factor or direct cause of death for people of all ages and demographics, as is sexual victimization with respect to its role in suicides. Hawaii has a responsibility to ensure that programs addressing these forms of violence are fully supported and available across our State.

Therefore, it is appropriate that one of our state's primary touch points between government and the people, the transaction fees for obtaining copies of vital records, be used as a source of direct funding for programs that address the maintenance of healthy and safe relationships and that seek to reduce known causes of morbidity and death. The domestic violence and sexual assault service efforts supported by the DVSASF have a clear link to the source of revenue in question.

Please further note that the DVSASF has been invaluable as a dedicated source of uninterrupted funds for domestic violence and sexual assault prevention programs in the State of Hawai'i. A sharp reduction in the revenues available to the DVSASF, like the one envisioned by H.B. 2466 Part III, would have dramatic, disruptive repercussions for Hawai'i's approach to addressing violence in our communities, with definite reductions in critical prevention services. Efforts that have historically been supported by the DVSASF include the SATC's partnership with the Department of Health to deliver sexual abuse prevention education curricula training to Hawai'i school teachers and staff and youth serving organizations, as well as programs at the University of Hawai'i for the prevention of domestic, intimate partner, and sexual violence on campus.

Therefore, we respectfully urge you strongly oppose H.B. 2466 Part III, and to continue the support that the DVSASF provides for domestic violence and sexual assault prevention services statewide. Thank you for this opportunity to testify.



KOKUA KALIHI VALLEY COMPREHENSIVE FAMILY SERVICES

**2239 N. SCHOOL STREET ◆ HONOLULU, HAWAII 96819 ◆ TEL: 808-791-9400 ◆ FAX:
808-848-0979 ◆ www.kkv.net**

COMMITTEE ON FINANCE

Rep. Sylvia Luke, Chair

Rep. Scott Y. Nishimoto, Vice Chair

Testimony on House Bill 2466

Submitted by David Derauf MD MPH
Kokua Kalihi Valley (KKV)

February 29, 2016

Dear Members of the House Committee on Finance,

Thank you for the opportunity to testify with regards to HB2466.

HB2466 has been introduced in reaction to the State Auditor's Report 15-17, which identified a number of special funds that could be eliminated for failing to meet nexus criteria. The bill, as written, seeks to remove the CHC special fund.

This fund was created some years ago to support care for the uninsured population in Hawaii and to support activities related to tobacco and its health effects. The passage of Obamacare has done little to dent the size of KKV's uninsured population. At Kokua Kalihi Valley, more than 30% of our patients in our Medical clinics are uninsured. These are almost all Kalihi Valley residents, many of them waiting for the 5 year waiting period before they become eligible for Federal benefits, another group not eligible for Federal health benefits, and a third group that are between jobs, and between enrollment periods. Many of them work multiple part time jobs and do not therefore receive health benefits.

This special fund has allowed us to provide basic primary care services including tobacco prevention as well as treatment of tobacco related illnesses to a large group of Kalihi residents many of whom would otherwise go without primary care, necessitating more costly emergency or hospital services down the line. Contrary to the auditor's findings, there is a clear nexus between this fund and tobacco. Every single one of these patients who we provide care to receives tobacco screening and assessment, and almost everyone of them gets counseling on tobacco by medical providers. Moreover, the illnesses that this fund allows us to address, such as heart disease, respiratory diseases such as asthma and emphysema, cancer and diabetes have clear links to tobacco use.

Providing Medical & Dental Services, Health Education, Family Planning, Perinatal, WIC and Social
Services to

Kalihi Valley residents since 1972. Neighbors being neighborly to neighbors.

The loss of this funding would mean many more patients would be unable to access basic primary care in our community. The loss of this funding would severely impact the financial sustainability of KKV already suffering from years of cutbacks in many programs and would hinder our ability to serve uninsured patients effectively. We would likely have no other options but to cut back services meaning these patients would go without care, or utilize already overburdened and expensive emergency room services. Please do not pass this bill and undermine the future viability of Hawaii's community health centers.

Thank you for your support to our community.

David D Derauf MD MPH

TO: Hon. Sylvia Luke, Chair
Hon. Scott Y. Nishimoto, Vice Chair
Finance Committee

FROM: Sheila Beckham
CEO, Waikiki Health

RE: HB 2466 Relating to Non-General Funds

DATE: Marcy 1, 2016; 11:02 am; Conf Rm 308

Waikiki Health strongly opposes the repeal of the community health center special fund.

Community Health Centers (CHC) throughout the country are mandated by HRSA to provide medical and social services to everyone, regardless of ability to pay. Thirty-six states provide funding to the CHC in their respective states. In Hawaii, the CHC “special fund” helps cover just under half of a medical visit for individuals who are uninsured.

It is commonly assumed that Hawaii’s uninsured rates have dramatically diminished. Despite having “eligibility workers” on site at four of our clinics to assist in the Medicaid enrollment process, during calendar year 2015, Waikiki Health had 2316 uninsured individual patients. Barriers include the cost of state identification and birth certificates—many of which originate in other countries, as well as homelessness (of which Waikiki Health had 1900 patients in 2015).

Without the special fund or a workable alternative, a hardship will be placed on CHC that service the homeless, poor, and indigent populations.

Cigarette tax monies are also utilized to screen all patients for tobacco use. For those who affirm usage, one on one tobacco cessation is provided with nicotine replacement and group support as needed. Quit rates are steadily increasing through access to the special funds, with 44% having achieved prolonged abstinence.

Opposing the CHC special fund will have an extremely negative financial impact on CHC and its vulnerable populations.

Thank you for allowing me to present before Finance committee.



**WAIANAE COAST
COMPREHENSIVE
HEALTH CENTER**

www.wcchc.com

February 29, 2016

TO: COMMITTEE ON FINANCE
Rep. Sylvia Luke, Chair;
Rep. Scott Y. Nishimura, Vice Chair

FROM: Richard P. Bettini, President and CEO
Waianae Coast Comprehensive Health Center
697-3457 or wcchc@wcchc.com

RE: OPPOSITION TO HB 2466 – RELATING TO NON-GENERAL FUNDS

The Waianae Coast Comprehensive Health Center (WCCHC) strongly opposes HB 2466 as it relates to repealing, displacing and/or losing the Community Health Center Special Fund and the Emergency Medical Services Special Fund effective July 1, 2016.

The potential loss of funding to support the 9% of WCCHC's 34,921 patients who are uninsured/underinsured and the potential loss of subsidy support for WCCHC's 24-hour emergency medical services is of grave concern to our patients and community.

In regards to the **Community Health Center Special Fund** impacting uninsured/underinsured patients, it is important to note that the closure of the Hawaii Health Connector in December 2015 has resulted in thousands of Hawaii residents not re-enrolling in Affordable Care Act plans, thus these individuals are now being added to the uninsured rank. The unintended consequence is the diminishing capacities of the community health centers throughout the State to provide comprehensive health assessments and intervention, including behavioral health and other social needs, as well as smoking cessation education and support.

Another unintended consequence to WCCHC under the **Emergency Medical Services Special Fund** is the loss of approximately \$1.4 million in annual funding to operate emergency medical services for the Waianae Coast between midnight to 8:00 am, 365 days a year. Without funding support, WCCHC will not be able to operate during the midnight to 8:00 am period.

The Department of Health understands the important role the WCCHC 24-hour emergency services holds to cover emergency medical and disaster-related services on the isolated Waianae Coast. WCCHC has a signed four-year ER services contract for July 1, 2016 to June 30, 2020 that will be cancelled if HB 2466 is approved.

For many years, WCCHC's emergency services funding was placed as a line item in the Department of Health budget. This Special Fund budgeting allows for longer term contracting essential to the Legislature's capital investment in WCCHC's emergency medical services facility.

WCCHC's Emergency Department is an integral part of the State Emergency Medical Services System (EMS) providing over 24,000 visits from July 1, 2014 to June 30, 2015, 89% of which were by Waianae Coast residents and 60% who were patients covered under QUEST/Medicaid.

We ask that your Committee strongly consider the negative impact a repeal of the Community Health Center Special Fund will have on the vulnerable populations served by community health centers and the devastating circumstances that could occur with loss of funding through the Emergency Medical Services Special Fund.

Mahalo.



TO: Representative Sylvia Luke, Chair
Representative Scott Nishimoto, Vice-Chair
HOUSE COMMITTEE ON FINANCE

FR: Mary Oneha, APRN, PhD
Chief Executive Officer, Waimānalo Health Center

Date: Tuesday, March 1, 2016
11:02am, Conference Room 308

RE: Opposed to HB 2466 Relating to Non-General Funds

The Waimānalo Health Center (WHC) **strongly opposes HB 2466** relating to Non-General Funds to repeal the community health centers special fund. There are three key areas related to the use of these funds that clearly demonstrate our opposition to repeal:

- 1. There is a clear nexus between tobacco tax monies and services provided at community health centers.** Although there has been a slight decrease in the number of individuals diagnosed with a tobacco use disorder, WHC has seen an increase in the number of visits per person diagnosed with a tobacco use disorder. Nearly 99% of patients aged 18 and older are screened for tobacco use, and if found to be a tobacco user, receive cessation counseling intervention or medication.
- 2. There will be a clear negative impact to WHC, patients, and communities if this bill is passed.** WHC also addresses the health effects of smoking or tobacco use including heart disease and stroke, respiratory diseases, and cancer. Smokers are at greater risk for diseases that are among the leading causes of death – yet, cigarette smoking is the **leading preventable cause** of death in the United States. Secondhand smoke exposure also hurts infants and children, particularly at home and in vehicles. As community health centers, and as a State, we must continue to reduce the incidence of smoking and provide support to those motivated to quit.
- 3. Despite the presence of the Connector/healthcare.gov, the health centers are still seeing a large number of uninsured/underinsured patients.** Although we have seen a progressive decline in the number of uninsured patients, WHC still has a substantial number of patients who are uninsured (over 600). We anticipate that there will always be those who are uninsured for a variety of reasons and many who are underinsured.

The Waimānalo Health Center strongly opposes the repeal of HB 2466 and urges your support not to repeal the CHC Special Fund. Thank you for the opportunity to provide testimony.



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4590 Hāna Highway
tel 808.248.8294
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Administration
P.O. Box 807
Hāna, Maui 96713
tel 808.248.7515
fax 808.248.7223

TO: REPRESENTATIVE SYLVIA LUKE, CHAIR
HOUSE COMMITTEE ON FINANCE

REPRESENTATIVE SCOTT NISHIMOTO, VICE CHAIR
HOUSE COMMITTEE ON FINANCE

MEMBERS OF THE HOUSE COMMITTEE ON FINANCE

FROM: CHERYL VASCONCELLOS, EXECUTIVE DIRECTOR
HANA HEALTH

DATE: February 29, 2016

TESTIMONY ON HB 2466
RELATING TO NON-GENERAL FUNDS

Hana Health is strongly opposed to **HB 2466** Relating to Non-General Funds, specifically Section 2. which repeals the community health center special fund.

- The Community Health Center Special Fund provides funding for Hana Health to serve 2,500 residents and 600,000 visitors annually. This takes place seven days a week, 24 hours a day, 365 days a year, as **Hana Health is the only health care provider in the district.** In addition to providing the full scope of primary medical, dental and behavioral health care, Hana Health provides urgent/emergent medical treatment to seriously ill patients who either come to the health center on their own or are brought to the health center by ambulance. When needed, Hana Health coordinates transport of patients to the Maui Memorial Medical Center with the support of American Medical Response. In 2015, three hundred eighteen (318) patients were

cared for **after** regular health center hours. This does not include the urgent care patients served during regular operating hours.

- State funding for Hana Health is mandated by ACT 263 which guarantees continued state financial support to sustain the development of a community based health care program in the Hana District. The state has met its obligation in this regard through the Community Health Center Special Fund. Since, its inception, the special fund has provided Hana Health with a stable funding mechanism, assuring that needed medical care and support services would continue to be available in the Hana community. Prior to establishment of the special fund, Hana Health was forced to secure an appropriation through the legislative process every year. This unpredictable approach to maintaining health care operations in our remote community results in erratic service delivery and subsequently poor patient outcomes.
- A loss in state funding of this magnitude will result in the reduction of primary medical, dental and behavioral health care by more than 50%, and the complete loss of after-hours urgent/emergent care.
- It is shocking that the nexus between the tobacco tax and the services provided by community health centers is so poorly understood, especially when the connection could not be clearer to those of us providing health care to our most vulnerable citizens. The well documented diseases caused by tobacco use – lung and other cancers, COPD, heart disease, stroke, asthma, premature/low birth weight babies, Type 2 diabetes - are addressed by every community health center in the state, every single day.
- Tobacco use remains the leading preventable cause of sickness and death in the United States. Moreover, individuals who live in poverty tend to smoke at disproportionately high rates. Thus, the burden of tobacco-attributable morbidity and mortality is higher among this population. According to the National Association of Community Health Centers, nearly 93% of Federally Qualified Health Center patients are at or below the poverty level (NACHC, 2011). As primary service providers to this population, CHCs play a key role in the provision of evidence-based services to help tobacco users quit.

- Approximately 25% of Hana residents use tobacco based on a 2013 community wide needs assessment conducted by Q-Mark Research for Hana Health. In 2015, Hana Health provided smoking cessation counseling and related services to 584 patients.

Repeal of the Community Health Center special fund will create a health care void in one of the most isolated areas in the state, placing both the resident population of Hana and visitors to the area at undue risk of death due to traumatic injury and/or other life threatening medical conditions.

On behalf of the Hana community and those who we serve, do not let HB 2466 pass out of committee. Thank you.



25 Years

To: Chair Sylvia Luke
Vice Chair Scott Nishimoto
Members of the Committee
FR: Nanci Kreidman, M.A.
Chief Executive Officer

RE: H.B. 2466 Opposed Part III, p 14/Comments

Aloha. There is a section in this Bill that deletes the deposit of monies collected from marriage license, birth certificate and death certificates into the Child and Spouse Abuse Account. These funds are divided among Hawaii's agencies and branches of government (Department of Health, Department of Human Services and Judiciary) to assist in the support of community programs and necessary initiatives (ie. Fatality Review Team, training for judges) related to the perpetration of domestic violence.

There was a lawsuit filed in Illinois by a plaintiff asserting that the fees added to her marriage license were burdensome and a violation of her due process and equal rights protections. Funds are used in Illinois similarly, to support community programs. The Court found that not to be the case and in fact, asserted that *"we believe that the legislature's imposition of a small charge on marriage license applicants is reasonably related to the Fund's narrow purpose of helping married victims of domestic violence leave violent marriages. As we find that the tax bears a rational relationship to a legitimate legislative purpose, the plaintiff's due process claim fails."*

Funds collected in Hawaii, and used to support programs, training, system examination are most definitely related to the lives of married people and children. There can be no clearer connection than exists between marriage and domestic violence. Another thought worth consideration is the fact that the costs of responding to domestic violence are enormous and persistent. Government funds to support responsive programs are always at risk and often reduced. The array of revenue sources is crucial

P. O. Box 3198 Honolulu, HI 96801-3198
O'ahu Helpline: 808 531-3771 | Toll-free: 800 690-6200 | Administration: 808 534-0040 | Fax 808 531-7228
dvac@stoptheviolence.org | www.domesticviolenceactioncenter |
facebook.com/domesticviolenceactioncenterhawaii





25 Years

to maintaining programs to address the complex needs. The costs to our community are much greater than are calculated.

The truth is a healthy community has its roots in safe families. Law enforcement, courts, health care, education, child welfare, and incarceration are all connected to violence in intimate partnerships and families. Without a strong commitment to addressing domestic violence we are diluting the hopes for a safe community in the future.

Thank you for preserving this Fund.

P. O. Box 3198 Honolulu, HI 96801-3198
O'ahu Helpline: 808 531-3771 | Toll-free: 800 690-6200 | Administration: 808 534-0040 | Fax 808 531-7228
dvac@stoptheviolence.org | www.domesticviolenceactioncenter |
facebook.com/domesticviolenceactioncenterhawaii





HO'OLA LAHUI HAWAI'I
P.O. Box 3990; Līhu'e, Hawai'i
Phone: 808.240.0100 Fax: 808.246.9551

February 27, 2016

COMMITTEE ON FINANCE

Rep. Sylvia Luke, Chair

Rep. Scott Y. Nishimoto, Vice Chair

Testimony in OPPOSITION TO HB 2466

Relating to Non-General Funds

Tuesday March 1, 2016, 11:02 A.M., Room 308

Ho`ola Lahui Hawaii the only Federally Qualified Health Center and Native Hawaiian Health Care System on Kauai is in strong **OPPOSITION** to this bill to repeal the Community Health Center's Special Fund

Any effort to reduce funding for health centers undermines the ability of health centers to provide needed services to those who are most in need. It is without question that health centers provide enhanced value to the care network in many communities throughout Hawaii and most importantly on Kauai.

The state auditor prior to issuing their report never contacted our organization to learn of the direct impact this funding makes in our community. If they had we would have been able to demonstrate that this funding supports its legislative purpose to support care to the uninsured and underinsured.

The Department of Health disagreed with the state auditors' opinion as well in their response to the audit that lead to this bill. We agree with the Department of Health's position and justification for maintaining this special fund.

We urge this committee to reject this measure and maintain the health center special fund.

Respectfully Requested,

David Peters
Chief Executive Officer

Date: February 29, 2016

March of Dimes Foundation

To: Representative Sylvia Luke, Chair
Representative Scott Nishimoto, Vice Chair

Hawaii Chapter
1580 Makaloa Street, Suite 1200
Honolulu, HI 96814
Telephone (808) 973-2155
Inter-island 1-800-272-5240
Fax (808) 973-2160

From: Lin Joseph
Director of Program Services
March of Dimes Hawaii Chapter

marchofdimes.org/hawaii

Re: In opposition of
HB2466
Hearing: Wednesday, March 1, 2016
Conference Room 308, State Capitol

Chair Luke, Vice Chair Nishimoto, Members of the Committees:

I am writing to express opposition for a provision in Part V of HB2466: *A Bill for an Act Relating to Non-General Funds*. This provision would repeal the Hawaii birth defects special fund, which supports the state mandated birth defects program to provide important surveillance and accurate data on the incidence of birth defects in Hawaii. Loss of \$10 from each marriage license would necessitate additional general funds to be appropriated by legislation.

The March of Dimes is the leader in advocacy for newborn screening and birth defects surveillance of all infants in the United States. Our mission is to *improve the health of babies by preventing birth defects, premature birth, and infant mortality*.

A birth defect is an abnormality of body structure, function, or metabolism (inborn error of body chemistry) present at birth that results in physical or intellectual disabilities, or death. About 1 in 33 babies, or an estimate 120,000 babies per year, are born with birth defects in the U.S., and it is the leading cause of infant death, accounting for more than 20% of all deaths in the first year of life. In Hawaii, infant deaths due to birth defects are second only to deaths related to prematurity. Birth defects can be caused by genetic abnormalities or environmental factors, but the causes of about 60-70% of all birth defects are unknown.

Since the March of Dimes added birth defects prevention to its mission in the late 1950s, the Foundation has developed and promoted numerous initiatives to advance the field. Through our advocacy at the state level, we have supported state-based birth defects surveillance programs that play a vital role in collecting data for detecting birth defects trends and suggest areas for further research. They also link people to needed services, improving care and quality of life for these babies and their families. Data from birth defects surveillance programs are also increasingly used to assess key longer term outcomes for those born with major birth defects, and to understand barriers to care. The most current example of birth defect surveillance has brought worldwide attention to the microcephaly cases suspected to be linked to the Zika virus that are being seen in South and Central America

 march of dimes®

February 29, 2016

Honorable Sylvia Luke
Honorable Scott Nishimoto
Page 2

HB2466 will remove funding for this vital program in the state. To prevent birth defects, it is vital to know key information about what birth defects are occurring, where they are occurring, and how frequently they are occurring. This is increasingly important if additional cases of Zika-related microcephaly are seen in Hawaii.

Mahalo for the opportunity to testify on this matter.

From: mailinglist@capitol.hawaii.gov
Sent: Monday, February 29, 2016 3:19 PM
To: FINTestimony
Cc: annsfreed@gmail.com
Subject: Submitted testimony for HB2466 on Mar 1, 2016 11:02AM

HB2466

Submitted on: 2/29/2016

Testimony for FIN on Mar 1, 2016 11:02AM in Conference Room 308

Submitted By	Organization	Testifier Position	Present at Hearing
Ann S Freed	Hawaii Women's Coalition	Oppose	No

Comments: Aloha Chair Luke, Vice Chair Nishimoto and members, We are in strong opposition to Part III of this measure which would decimate the revenues of the Department of Health's Domestic Violence and Sexual Assault Special Fund (DVSASF) by more than 90%, by cutting off fees for certified copies of vital records, the DVSASF's primary revenue mechanism. The DVSASF is the major source of support for domestic and sexual violence prevention programs statewide. Part III would basically defund support to DV and Sex Assault treatment programs. Please defer this bill, Mahalo, Ann S. Freed, Co-Chair Hawaii Women's Coalition

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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From: mailinglist@capitol.hawaii.gov
Sent: Monday, February 29, 2016 11:06 AM
To: FINTestimony
Cc: ciAlohaAdvocate@yahoo.com
Subject: Submitted testimony for HB2466 on Mar 1, 2016 11:02AM

HB2466

Submitted on: 2/29/2016

Testimony for FIN on Mar 1, 2016 11:02AM in Conference Room 308

Submitted By	Organization	Testifier Position	Present at Hearing
Charlene Iboshi	Individual	Oppose	No

Comments: I oppose that part of the bill that would eliminate funding for the Domestic Violence, Interpersonal Violence and Sexual Assault Prevention and early intervention. If the repeal of transfer of funding is allowed, the source of revenue is removed, we will all be impacted as follows: · Eliminate Funding (previously approved by the 2013 Legislature) for a 1.0 FTE Program Specialist for the DOH's Domestic Violence Prevention Program · Eliminate Funding to support the Domestic Violence Fatality Review process · Eliminate Funds for the University of Hawaii for infrastructure to prevent sexual violence, sexual harassment, assault, dating violence, cyber stalking, ETC · Eliminate Funds for the Sex Abuse Treatment Center on sexual violence prevention curricula in schools and community · Eliminate future efforts to fund DV/SA training and education to raise awareness and prevent violence Mahalo, Charlene Iboshi Hawaii Island

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February 29, 2016

To: Chair Sylvia Luke, Vice Chair Scott Nishimoto and members of the House Finance Committee

From: Leslie D. Cabingabang, Waipahu, HI

Re: **OPPOSED to HB2466 Relating to Non-General Funds**

I am Leslie D. Cabingabang, a resident of Waipahu, Hawaii and employed by the University of Hawaii at Manoa. I am in strong opposition of HB2466 regarding the removal of the Domestic Violence Sexual Assault Special Funds.

I am currently the program coordinator for the PAU Violence Program at the University of Hawai'i at Mānoa. The PAU Violence Program is a University of Hawai'i system-wide program that creates an infrastructure for sexual violence prevention education and response on each campus. This is a coordinated effort to provide University of Hawai'i students with violence prevention education and heightened awareness of resources available to them. Each campus has a designated team that addresses issues of stalking, sexual, dating and domestic violence.

The Domestic Violence Sexual Assault Special Fund has provided this opportunity for our campuses to do the work that we do. As a result of our on-going efforts, we have seen an increased number of student participants in our education programs. More importantly we have seen an increase in the number of students, faculty and staff seeking services for their own experiences of domestic violence or sexual assault. For many of our campuses, particularly our community colleges, this is the only type of service to address these issues. This fund also supports key agencies that address domestic violence and sexual violence. These services are essential to the most vulnerable in our community.

Removing this fund from these services would be detrimental to an already underfunded area in higher education and in the community. I humbly ask that you **oppose** this measure until further plans are made for the programs and services that are currently covered by this special fund.

Thank you for your time and consideration,

Leslie D. Cabingabang
leslie.cabingabang@gmail.com

February 29, 2016

To: Chair Sylvia Luke, Vice Chair Scott Nishimoto and members of the House Finance Committee

From: Brittany Kalahiki, Honolulu, HI

Re: Opposed to HB2466 Relating to Non-General Funds

My name is Brittany Kalahiki, a resident born and raised in Makiki, and I am currently studying to get my master's degree in Social Work at the University of Hawaii at Manoa. I am writing to state that I am in strong opposition of HB2466 regarding the elimination of the DOH Domestic Violence Sexual Assault Special Funds.

A large part of the Social Work master's program is gaining experience in various levels of social work, including micro, mezzo, and macro. As part of the program, I am currently doing my internship under the PAU Violence Program at the University of Hawaii at Manoa. Prevention, Awareness, Understanding (PAU) Violence Program is held statewide across all ten campuses and is a program that exists to prevent further instances of sexual assault and domestic violence through methods of prevention education. The program provides the opportunity to educate students about these issues to create social change surrounding the entrenched negative attitudes, beliefs, and behaviors about these topics. PAU Violence promotes awareness of additional on-campus and community resources that are available to students if they are struggling with a difficult situation or are helping to refer a friend/someone they know.

As a resident of Hawaii yet new to the UH campus and community, I was unaware of the resources that the University offered and partnered with until I applied for this internship. With my experience working at the program, I have learned that each UH-affiliated campus has a team comprised of passionate people that work to addresses issues of sexual, dating, and domestic violence, and stalking. In the time that I have been working here, I myself have seen an increase in the number of students reaching out to our program and other related services for their own difficult experiences. Like myself, I have encountered many other students who were unaware of our resource and services until they attended a program or event and expressed interest in seeking help for someone they knew who was in trouble. These students are balancing academics, social lives, and trying to create healthy relationships, and the service PAU Violence provides them with is one of the only resources students may require knowledge of access to.

The elimination of funds from these services would be greatly detrimental to the school and community. I am asking that you folks oppose this measure and continue with funding until other financial plans can be made.

Thank you for your time and consideration,

Brittany Kalahiki

From: mailinglist@capitol.hawaii.gov
Sent: Monday, February 29, 2016 12:52 PM
To: FINTestimony
Cc: chappy@honolulu.gov
Subject: Submitted testimony for HB2466 on Mar 1, 2016 11:02AM

HB2466

Submitted on: 2/29/2016

Testimony for FIN on Mar 1, 2016 11:02AM in Conference Room 308

Submitted By	Organization	Testifier Position	Present at Hearing
Christopher Happy	Individual	Oppose	No

Comments: As the Chief Medical Examiner for the City and County of Honolulu, I unfortunately bear witness to the most terrible consequences of domestic violence. I am urging the legislature to oppose measure HB2466, which will remove a major source of funding for the Domestic Violence Sexual Assault Special Fund (DVSASF). The impact of removing this funding, which is provided through the Department of Health's vital records fee, will affect a program that is sorely needed in our State. Not only does the program provide for a 1.0 FTE Program Specialist, but it also coordinates the Domestic Violence Fatality Review (DVFR), of which our Office is a participant. DVFR not only focuses on identifying the causes and documenting instances of domestic violence in our communities, its ultimate goal is Prevention. The source of funding for DVSASF is directly related to the program: the birth, marriage, divorce, and death certificates that generate revenue for the program are used as THE primary source of data when identifying and investigating instances of domestic violence. I believe the auditors who found no clear link between the vital records fee and the DVSASF do not fully understand how the DVFR and other programs administered by the DOH's domestic violence program have direct consequences to the generation of Death Certificates. Death Certificates that I, unfortunately must generate too often for our State. Sincerely, Christopher Happy, MD Chief Medical Examiner Department of the Medical Examiner City and County of Honolulu

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February 29, 2016

To: Chair Sylvia Luke, Vice Chair Scott Nishimoto and members of the House Finance Committee

From: Danielle Berger, Kailua, HI

Re: OPPOSED to HB2466 Relating to Non-General Funds

I am Danielle Berger, a resident of Kailua, HI. I am currently a graduate student at University of Hawaii at Manoa in the Master of Social Work program. As a part of my studies I am also a practicum student at PAU Violence. In addition to school, I work as a domestic violence advocate with Parents and Children Together.

In my position at PAU Violence, PACT and working with various community partner agencies/programs the loss of the Domestic Violence Sexual Assault Special Fund would be detrimental to the organizations that provide prevention and education services. The Domestic Violence Sexual Assault Special Fund provides an opportunity for the UHM campus and other agencies to do the work in this area.

As a practicum student at PAU Violence I have seen an increased number of student participants in our education programs. More importantly we have seen an increase in the number of students, faculty and staff seeking services for their own experiences of domestic violence or sexual assault. For many of our campuses, particularly our community colleges, this is the only type of service to address these issues. This fund also supports key agencies, such as PACT and SATC who's continuous support of the most vulnerable populations in our community, addressed and protects domestic violence and sexual assault survivors.

Removal of special funds would be detrimental to the aforementioned programs and I strongly OPPOSED HB2466.

Thank you for considering this written testimony.

Danielle Berger

dbberger@hawaii.edu

February 29, 2015

To: Chair Sylvia Luke, Vice Chair Scott Nishimoto and members of the House Finance Committee

From: Jennifer Pagala Barnett

Re: **OPPOSED to HB2466 Relating to Non-General Funds**

I am Jennifer Pagala Barnett, a resident of Mililani, HI. I am also employed at the University of Hawai'i at Manoa and am in strong opposition of HB2466 regarding the removal of the Domestic Violence Sexual Assault Special Funds.

I assist in coordinating the PAU Violence Program at the University of Hawai'i. The support from these funds has helped us to build a UH system program that provides prevention education and raise awareness of issues of gender based violence such as domestic violence and sexual assault on each UH campus. It also has improved and informed the way our institutions respond and provide appropriate supports to students who have experienced dating and domestic violence, sexual assault and stalking.

Our program has reached a tremendous amount of students, faculty and staff throughout the UH system with education, training and advocacy work. Our work has also encouraged students the opportunity to get involved and for student victims, to have a safe space to discuss options and be supported as they heal. We promote healthy relationships and ways to be a successful student even if an incident of interpersonal violence has occurred. PAU Violence supports the campus task forces who provide meaningful prevention work to their unique campus communities. This collective work continues to be implemented by faculty, staff and programs that are understaffed, underfunded or not funded at all.

The removal of these funds would have tremendous negative effect to our higher education students and communities. I humbly urge you to oppose this bill as our work gravely depends on this funding support.

Thank you for your time and consideration on this important matter.

Jennifer Pagala Barnett
jenpbarnett@gmail.com

DATE: February 29, 2016

TO: House Finance Committee
Rep. Sylvia Luke, Chair
Rep. Scott Nishimoto, Vice Chair

FROM: Christine Quemuel
PAU Violence Program

RE: OPPOSED to HB 2466, Relating to Non-General Funds
Tuesday, March 1, 2016
11:02am
Conference Room 308

My name is Christine Quemuel, I am a resident of Hawai'i Kai, and work at the University of Hawai'i at Mānoa. I am writing OPPOSED to HB 2466, Relating to Non-General Funds, specifically relating to the domestic violence and sexual assault special fund. It is critically important that the revenue from a portion of the fees for copies of birth, marriage, divorce, and death certificates continues to fund domestic violence and sexual assault prevention efforts in our state.

The University of Hawai'i Systemwide PAU Violence Program currently receives funding from the Domestic Violence Sexual Assault Special Fund for the prevention education work that we offer to college students throughout the state. To illustrate the broad reach PAU Violence has on all of the University of Hawai'i campuses, from July 2015 through December 2015, we provided violence prevention education and information to over 8,670 students, which translates into safer campuses and communities.

There is a very real connection between our violence prevention work and the vital records that provide the funding for our programs. Many of the students that we work with at the university are engaging in their first serious romantic relationships, many of which will result in marriage and children, and sometimes divorce. It is important that students receive prevention education as they are developing their relationships to support the creation of healthier families that are free from domestic violence and sexual assault. We need the state to continue funding the Domestic Violence Sexual Assault Special Fund through the revenue from vital records in order to ensure a violence free future in Hawai'i.

From: mailinglist@capitol.hawaii.gov
Sent: Monday, February 29, 2016 2:29 PM
To: FINTestimony
Cc: rachel.langeme@gmail.com
Subject: Submitted testimony for HB2466 on Mar 1, 2016 11:02AM

HB2466

Submitted on: 2/29/2016

Testimony for FIN on Mar 1, 2016 11:02AM in Conference Room 308

Submitted By	Organization	Testifier Position	Present at Hearing
Rachel Lange	Individual	Oppose	No

Comments: I am a Medical Examiner and a member of the Domestic Violence Fatality Review (DVFR) Committee for the State of Hawaii. I am writing to urge the legislature to oppose HB2466, which will remove a major source of funding for the Domestic Violence Sexual Assault Special Fund (DVSASF) based on auditors' assessments that the benefits of the DVSASF are not linked with its source (vital records). The primary purpose of the DVFR is to identify deaths resulting from domestic violence, investigate the factors contributing to the deaths, and ultimately, prevent these deaths. Vital records, specifically death certificates, are the primary source of data in these investigations and, therefore, are linked with the DVSASF, which funds the coordinator for the DVFR and its activities. Removing this funding source will significantly impact the ability to conduct domestic violence fatality reviews.

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LATE

Christopher D. Yanuaria
954A 'Ālewa Drive
Honolulu, HI 96817

Rep. Sylvia Luke, Chair

Rep. Scott Y. Nishimoto, Vice Chair

COMMITTEE ON FINANCE

Tuesday, March 01, 2016 11:02 A.M.

State Capitol, 415 South Beretania Street, Conference Room 308

RE: HB 2466 RELATING TO NON-GENERAL FUNDS.

Repeals and transfers the unencumbered balances of various non-general funds and accounts and amends the revenue source of the domestic violence and sexual assault special fund as recommended by the auditor in auditor's report no. 15-17.

Aloha Committee on Finance:

My name is Christopher D. Yanuaria, a resident of 'Ālewa Heights, Hawai'i and an employee at the University of Hawai'i at Mānoa. I am testifying in **STRONG OPPOSITION OF HB 2466.**

I am currently the Respondent Support Coordinator and the Violence Prevention Educator under the Prevention Awareness Understanding (PAU) Violence Program at the University of Hawai'i at Mānoa. PAU Violence is the University of Hawai'i's system-wide program that provides training, prevention education, and response to students, faculty and staff around the issue of stalking, sexual, dating and domestic violence. Through multiple campus events and workshops throughout the year, the PAU Violence Program increases awareness about the important resources available to the university community.

HB 2466 calls for the removal of majority of the revenue sources for the Domestic Violence Sexual Assault Special Fund, which directly funds the work that I do with PAU Violence. If this funding is removed there will be less resources to prevent domestic violence and sexual assault on campus. When we understand the staggering statistic that

*“1 in 5 women and 1 in 16 men are sexually assaulted while in college”*¹ it needs to be our responsibility to support the kind of efforts to prevent such crimes to occur.

The effects of domestic violence and sexual assault on students are endless. Some of the most common effects on victims of domestic violence and sexual assault that I have seen are: depression, low self-esteem, addiction, and psychological damage. This directly impacts marriage relationships in that, when victims of such abuse decide to get married they bring all of the effects of domestic violence and sexual assault into their marriage, causing their marriage to be very challenging and strenuous from the beginning.

Prevention is paramount. If we can support more efforts towards preventing domestic and sexual assault on the university campus, we would not only be creating a safer and healthier campus, but also safer and healthier marriages and families.

I urge you to please OPPOSE HB 2466.

Mahalo,

Christopher D. Yanuaria, MSW
Respondent Support Coordinator
Violence Prevention Educator
Prevention Awareness and Understanding (PAU) Violence Program
University of Hawai‘i at Mānoa

¹ Krebs, C. P., Lindquist, C., Warner, T., Fisher, B., & Martin, S. (2007). *The campus sexual assault (CSA) study: Final report*. Retrieved from the National Criminal Justice Reference Service: <http://www.ncjrs.gov/pdffiles1/nij/grants/221153.pdf>

From: mailinglist@capitol.hawaii.gov
Sent: Monday, February 29, 2016 4:41 PM
To: FINTestimony
Cc: jeffrey.acido@gmail.com
Subject: Submitted testimony for HB2466 on Mar 1, 2016 11:02AM

LATE

HB2466

Submitted on: 2/29/2016

Testimony for FIN on Mar 1, 2016 11:02AM in Conference Room 308

Submitted By	Organization	Testifier Position	Present at Hearing
Jeffrey Acido	Individual	Oppose	No

Comments: Aloha, I am writing to oppose this measure because it will affect the funding for programs at UH-Manoa that address Sexual Violence and Domestic Violence. As a male and as a student at Manoa, I found the programs under SEED, specifically the PAU Violence program, to help me understand my role as a man in the community. I've witnessed my family be abusive to women, and gay men, and I've witnessed many men deal with their stresses through violence. I wish to never repeat what I saw as a child. I experienced violence myself, and I know that the programs at UH have helped me to address my own masculinity. I urge you to support and keep the funding for such programs. This bill ensures that we do not have any substantive funding for such programs.

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



March 1, 2016

TO: Chair Luke, Vice Chair Nishimoto and members of the Finance Committee

FROM: Amy Agbayani, Co-chair Hawaii Friends of Civil Rights

RE: HB 2466 Relating to Non-General Funds

I am representing the Hawai'i Friends of Civil Rights (HFCR) in opposition to this bill that repeals and transfers unencumbered fund balances and amends the revenue source of the domestic violence and sexual assault special funds. HFCR supports policies, programs and individuals who are committed to state and federal laws relating to equal rights and non-discrimination. We urge the continuation of funding for critical domestic violence programs.

The programs that are supported by these cannot function without resources and this bill will result in eliminating these services or drastically reduce their ability to provide needed educational and support services. For example, the PAU violence program at the University of Hawai'i provides sexual violence prevention training and student support services at the ten campuses. Sexual assault and domestic violence and its prevention occurs in pre-marital situations, marriages and divorces. The department of health and the legislature should continue using these sources of funds because these services are essential or provide other sources of funding these services.

LATE

DATE: February 29, 2016

TO: Committee on Finance
Chair Rep. Sylvia Luke, Vice Chair Rep. Scott Y. Nishimoto, and
Members of the Committee on Finance

FROM: Ashley Galacgac

SUBJECT: Opposing HB2466, Relating to Non-General Funds

My name is Ashley Galacgac. Thank you for the opportunity for me to express my opposition of HB2466.

I am a proud graduate of the University of Hawai‘i at Mānoa (UHM). When I was a student, PAU (Prevention, Awareness, Understanding) Violence program raised my awareness about sexual violence and domestic violence. I attended workshops and participated in events at the campus center with others committed to stopping the cycle of violence. I felt empowered because this is a very important issue affecting the quality of life of community. I was inspired to participate in Kundiman 808: Raising Domestic Violence Awareness— Variety of Voices of Filipino American Culture. It was held at the Filipino Community Center. It was a multigenerational and multiethnic gathering that brought many communities together. Members of PAU Violence also participated in the event.

When I was a resident assistant at the on-campus dormitories, the PAU Violence program provided the training for resident assistants to be a resource. PAU Violence program made available vital resources and support services for students, faculty, staff, and their loved ones. I truly believe the sexual and domestic violence prevention education is very important in creating a safe place for academic, personal, professional, and spiritual growth for all. Its positive impact extends beyond the campus, enriching communities of Hawai‘i and wherever people call home.

In closing, thank you for your time and allowing me to express my opposition of HB2466.

Aloha,
Ashley Galacgac

LATE

Hawaii Family Law Clinic, dba



ala kuola

let's end the violence

February 29, 2016

TO: The Honorable Sylvia Luke, Chair
House Committee on Finance

From: Ed Flores, Executive Director

Subject: HB 2466, RELATING TO NON-GENERAL FUNDS

Thank you for the opportunity to provide testimony on HB 2466, more specifically Part III, SECTION 8, that will amend the revenue sources of the domestic violence and sexual assault special fund. Contrary to the finding that the account does not meet the “clear nexus criterion”, more specifically that there is not link between the benefits of domestic violence and sexual assault intervention or prevention sought by the fund and revenues derived from a portion of fees for copies of birth certificates, marriage, divorce, and death certificates provided under Section 338-14.5 Hawaii Revised Statutes, we respectfully believe that there is a clear link that fees derived from birth certificates, marriage, divorce, and death certificates directed to the Department of Health serves an integral purpose by providing funding for primary services for education, healthy marriages, healthy relationships and prevention services to the community. For these reasons, we strongly oppose the amendment to HB2466, Part III Section 8.



House Committee on Finance
March 1, 2016, 11:02 a.m., Conference Room 308

LATE

TESTIMONY IN STRONG OPPOSITION TO HB 2466

To: Rep. Sylvia Luke, Chair & Rep. Scott Y. Nishimoto, Vice Chair
Members of the House Committee on Finance
From: Jovanie de la Cruz, Chair, Executive Board of Directors, Filipino Coalition for Solidarity
Subject: Repeals and transfers the unencumbered balances of various non-general funds and accounts and amends the revenue source of the domestic violence and sexual assault special fund as recommended by the auditor in auditor's report no. 15-17.

My name is Jovanie de la Cruz. I am an Executive Board of Directors Member for the Filipino Coalition for Solidarity. The Coalition strongly supports this bill. Since its inception in 1990, the Coalition has represented more than 50 Filipino community leaders, whose aim is to work for social justice issues to empower Filipinos to make socially responsible contributions to Hawai'i and our global neighbors through education, advocacy, and social action.

Please consider the drastic consequences of dismantling University of Hawai'i system Title IX compliance through the proposed elimination of funds and provisions:

- Previously approved (by the 2013 Legislature) 1.0 FTE Program Specialist for the DOH's Domestic Violence Prevention Program
- Support for the Domestic Violence Fatality Review process
- University of Hawai'i infrastructure to prevent sexual violence, sexual harassment, assault, dating violence, cyber stalking, etc.
- Sex Abuse Treatment Center on sexual violence prevention curricula in schools and community
- Future efforts to fund DV/SA training and education to raise awareness and prevent violence.

Thank you for the opportunity to advocate for the protection against violence. This bill will hurt, not help. Please preserve funding for these vital services

Respectfully,

Jovanie de la Cruz
Executive Board of Directors Member
Filipino Coalition for Solidarity



LATE

Nursing Advocates & Mentors, Inc.

... a non-profit organization with a mission to address the global nursing shortage by providing guidance and assistance for nursing colleagues to obtain their professional license in nursing.

P.O. Box 2034 Aiea, HI 96701 · E-mail: namihonolulu@yahoo.com

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Tina Salvador, RN, BSN, CNN

Linnette Takenaka, RN, DON

House Committee on Finance

March 1, 2016, 11:02 a.m., Conference Room 308

TESTIMONY IN STRONG OPPOSITION TO HB 2466

To: Rep. Sylvia Luke, Chair
Rep. Scott Y. Nishimoto, Vice Chair
Members of the House Committee on Finance

From: Beatrice Ramos-Razon, RN, FACDA, President, NAMI

Subject: Repeals and transfers the unencumbered balances of various non-general funds and accounts and amends the revenue source of the domestic violence and sexual assault special fund as recommended by the auditor in auditor's report no. 15-17.

My name is Beatrice Ramos-Razon. I am submitting our strong opposition to this bill, as the founder and president of NAMI (Nursing Advocates & Mentors, Inc.). NAMI's membership is comprised of over 75 volunteer nurses, instructors, allied health care professionals, and Filipino leaders, who are dedicated to improve the health of Hawai'i's people through education, mentoring, advocacy and service.

We are deeply troubled that this bill will result in loss of funding, which will jeopardize University of Hawai'i system Title IX compliance through the elimination of funding for the following integral provisions:

- Previously approved (by the 2013 Legislature) 1.0 FTE Program Specialist for the DOH's Domestic Violence Prevention Program
- Support for the Domestic Violence Fatality Review process
- University of Hawai'i infrastructure to prevent sexual violence, sexual harassment, assault, dating violence, cyber stalking, etc.
- Sex Abuse Treatment Center on sexual violence prevention curricula in schools and community
- Future efforts to fund DV/SA training and education to raise awareness and prevent violence.

Your leadership is greatly needed to ensure continued funding and protection from violence in our schools and communities. Thank you for the opportunity to provide written testimony.

Sincerely,

Beatrice Ramos Razon, RN, FACDA, President, Nursing Advocates and Mentors, Inc.

Filipino American Citizens League

Jake Manegdeg, President
P. O. Box 270126 * Honolulu, Hawai'i 96827

House Committee on Finance
March 1, 2016, 11:02 a.m., Conference Room 308

LATE

TESTIMONY IN STRONG OPPOSITION TO HB 2466

To: Rep. Sylvia Luke, Chair & Rep. Scott Y. Nishimoto, Vice Chair
Members of the House Committee on Finance
From: Jake Manegdeg, President, Filipino Coalition For Solidarity

Subject: Repeals and transfers the unencumbered balances of various non-general funds and accounts and amends the revenue source of the domestic violence and sexual assault special fund as recommended by the auditor in auditor's report no. 15-17.

My name is Jake Manegdeg, president of the Filipino American Citizens League. **I strongly oppose this bill.** The Filipino American Citizens League was formed over ten years ago to contribute to the advancement of civil rights and social justice for minority groups, underserved populations, and vulnerable communities through education, advocacy, and social action.

Let us not throw the baby out with the bathwater. Protections against violence are needed to comply with Title IX. Eliminating funding is wrongheaded. Please reconsider how you can retain these important services:

- Previously approved (by the 2013 Legislature) 1.0 FTE Program Specialist for the DOH's Domestic Violence Prevention Program
- Support for the Domestic Violence Fatality Review process
- University of Hawai'i infrastructure to prevent sexual violence, sexual harassment, assault, dating violence, cyber stalking, etc.
- Sex Abuse Treatment Center on sexual violence prevention curricula in schools and community
- Future efforts to fund DV/SA training and education to raise awareness and prevent violence.

Thank you for hearing this bill, and for the opportunity to support your leadership to determine that these Title IX safeguards, advocated by our dear friend and former Congresswoman Patsy Takemoto Mink, are a priority, and merit full and secure funding for the public safety of our University of Hawai'i system.

Very Sincerely,

Jake Manegdeg
President
Filipino American Citizens League

LATE

House Committee on Finance
March 1, 2016, 11:02 a.m., Conference Room 308

TESTIMONY IN STRONG OPPOSITION TO HB 2466

To: Rep. Sylvia Luke, Chair & Rep. Scott Y. Nishimoto, Vice Chair
Members of the House Committee on Finance

From: Armi Farinas, President, Magsingal Association of Hawaii
armiof@msn.com

Subject: Repeals and transfers the unencumbered balances of various non-general funds and accounts and amends the revenue source of the domestic violence and sexual assault special fund as recommended by the auditor in auditor's report no. 15-17.

My name is Armi Farinas, president of the Magsingal Association of Hawaii. I strongly oppose this bill. Our organization is comprised of fellow hometown mates from Magsingal. We devote civic and cultural activities toward scholarships for Filipino youth to get a good education, especially for those who are still in the Philippines. We also support young Filipinos who have the privilege of education in America, particularly in Hawaii. That is why we are concerned about this proposal that would do away with the following:

- Previously approved (by the 2013 Legislature) 1.0 FTE Program Specialist for the DOH's Domestic Violence Prevention Program
- Support for the Domestic Violence Fatality Review process
- University of Hawai'i infrastructure to prevent sexual violence, sexual harassment, assault, dating violence, cyber stalking, etc.
- Sex Abuse Treatment Center on sexual violence prevention curricula in schools and community
- Future efforts to fund DV/SA training and education to raise awareness and prevent violence.

We cannot afford to go backwards in public safety for students in the UH system. Please save these student services.

Thank you for the chance for the Magsingal Association to speak up for saving these violence prevention initiatives.

Very Sincerely,

Armi Farinas
President

LATE

House Committee on Finance
March 1, 2016, 11:02 a.m., Conference Room 308

TESTIMONY IN STRONG OPPOSITION TO HB 2466

To: Rep. Sylvia Luke, Chair & Rep. Scott Y. Nishimoto, Vice Chair; Members of the House Committee on Finance

From: Charlene Cuaresma, ccuaresma@gmail.com

Subject: Repeals and transfers the unencumbered balances of various non-general funds and accounts and amends the revenue source of the domestic violence and sexual assault special fund as recommended by the auditor in auditor's report no. 15-17.

My name is Charlene Cuaresma. As a private citizen and public health educator, I strongly oppose this bill. I served as an Advisory Council member of the former Pilipina Rural Project Advisory Council under the Domestic Violence Clearinghouse and Hotline, now called the Domestic Violence Action Center.

These destructive recommendations would eliminate funds established to mitigate a nationwide domestic violence crisis on college campuses right here in our own backyard. Please carefully weigh this bill's unintended consequences of sacrificing Title IX protections and public safety by doing away with the following:

- Previously approved (by the 2013 Legislature) 1.0 FTE Program Specialist for the DOH's Domestic Violence Prevention Program
- Support for the Domestic Violence Fatality Review process
- University of Hawai'i infrastructure to prevent sexual violence, sexual harassment, assault, dating violence, cyber stalking, etc.
- Sex Abuse Treatment Center on sexual violence prevention curricula in schools and community
- Future efforts to fund DV/SA training and education to raise awareness and prevent violence.

Your leadership is needed to protect these provisions and make our campuses safe for all people. Thank you for the opportunity to offer my testify.

Sincerely,

Charlene Cuaresma, MPH

LATE

My name is Rouel Garingo Velasco. I write to you in opposition of HB 2466.

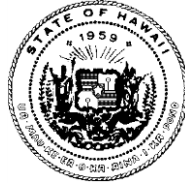
I am writing about the removal of revenue sources for the Domestic Violence Sexual Assault Special Fund. As visibly seen in the news and media, past and current cases within the State of Hawaii show that an overwhelming amount of cases involves Filipinos, Native Hawaiians as well as other Pacific Islanders. I would like to think they are overly represented in all Domestic Violence and Sexual Assault cases. This shows a real need in our community to address this widespread issue. There is a relationship between Domestic Violence and Sexual Assault to births, marriages, divorces, and deaths. The common theme that strings together births, marriages, divorces and deaths is developing healthy human beings to be in healthy relationships. Prevention and awareness efforts must be provided to show Hawaii's people that there are agencies, professionals and resources available to support their growth and development in being healthy people for one another.

I am committed to volunteer my time assist with prevention and education efforts because a friend, a schoolmate of mine lost her life at the hands of her former lover, a domestic violence case. It is through the programs that are funded from the Domestic Violence Sexual Assault Special Fund that I learned about the role of a bystander in ways to intervene without putting myself at risk. The knowledge I gained from the workshops I attended has reframed my way of thinking that I will no longer remain silent on this issue. As a bystander, I am obligated to act and do something. I am blessed to call this place home. The State of Hawaii, is a group of islands that connects us in a special way, through the Aloha Spirit. However, the Aloha Spirit is far from where we would like it to be. Everyone turns the left cheek when they hear fighting, loud noises, hitting and so on. It is not common practice for one to intervene, they fear for themselves. As island people, we must become better human beings, by taking care of one another, which starts with respecting one another and not tolerating any form of violence. Prevention and education work is needed and bystander intervention must be provided to everyone in our community.

It is important that this funding remains intact to provide Hawaii's people, the opportunity to better themselves as fathers, mothers, caregivers, guardians, as well as engaging young people to be better individuals in fostering healthy relationships thereby, creating healthy families and thriving communities.

Thank you for allowing me to submit testimony on an important issue to me and the communities (Filipino and Wai'anae –West Oahu) I come from.

DAVID Y. IGE
GOVERNOR



RACHAEL WONG, DrPH
DIRECTOR

PANKAJ BHANOT
DEPUTY DIRECTOR

STATE OF HAWAII
DEPARTMENT OF HUMAN SERVICES
P. O. Box 339
Honolulu, Hawaii 96809-0339

LATE

February 29, 2016

TO: The Honorable Representative Sylvia Luke, Chair
House Committee on Finance

FROM: Rachael Wong, DrPH, Director

SUBJECT: **HB 2466 RELATING TO NON-GENERAL FUNDS**

Hearing: Tuesday, March 1, 2016; 11:02 a.m.
Conference Room 308, State Capitol

DEPARTMENT'S POSITION: The Department of Human Services (DHS) agrees with the intent to improve government efficiency and the best use of public funds, however, DHS opposes the repeal of the community health centers special fund (Part II) and the amendment to the revenue sources of the domestic violence and sexual assault special fund (Part III). We defer to the Department of Health's position regarding the other parts of the measure.

PURPOSE: Repeals and transfers the unencumbered balances of various non-general funds and accounts and amends the revenue source of the domestic violence and sexual assault special fund as recommended by the auditor in auditor's report no. 15-17.

The Community Health Centers Special Fund (CHC Special Fund) provides federally qualified health centers (FQHCs) with funds dedicated to the prevention and treatment of disease and injury. This aligns with the Department's Medicaid program's goals and activities that focus on whole person-whole family care throughout the lifespan.

The Domestic Violence and Sexual Assault Special Fund (DVSASF) funds 1.0 FTE program specialist at the Department of Health whose role is to participate on multidisciplinary review teams to reduce the incidence of preventable deaths and near deaths as a result of domestic violence, suicide, and intimate partner violence. Additionally, prevention efforts that address

sexual violence, sexual harassment, dating violence and cyber stalking are funded through the DVSASF.

In the State of Hawaii Violence Against Women Grant Implementation Plan, the Department of the Attorney General reported that between 2008 and 2012:

1. Domestic violence increased 18% statewide in the category of Abuse of Family or Household Members (2,586 to 3,044);
2. Temporary Restraining Orders (TRO) issued by Family Court increased by 14% (4,532 to 5,169); and
3. Most seriously, over a five-year period, there were a total of 46 murders involving domestic violence.

This information is shared to highlight that the state cannot successfully address spousal and child violence and abuse without access to resources to provide additional services and programs to whole families. Prevention, evaluation and planning efforts are fundamental to the community's approach to reduce the incidents of familial violence, child abuse and neglect. Concurrently, we are aware that inter-generational trauma impacts children and this requires intervention to stop these cycles of violence. It's all about families.

Thank you for the opportunity to testify on this bill.

LATE

Lorri Taniguchi
99-944 Kalamoho Place
Aiea, HI 96701
808-845-9282
lorri@hawaii.edu

February 29, 2016

Re: HB 2466 Non-General Funds

Position: DO NOT SUPPORT

Dear Honorable Committee Chair Representative:

Domestic violence and sexual assault intervention and prevention funding derived from a portion of fees for copies of birth, marriage, divorce and death certificates is much needed to continue the progress being made in creating a climate of change possible for victims in our State.

I oppose HB2466 because it would remove critical funding for sexual violence awareness and prevention programs. The Department of Health has collaboratively worked in large part due to funding that has been made available through the above sources, to support community partnerships with the CDC, the Sex Abuse Treatment Center, Domestic Violence Action Center, to name a few, and through our PAU (Prevention, Awareness, Understanding) Violence Against Women Program at University of Hawai'i Manoa Campus. The PAU Violence Against Women Program brings all ten (10) campuses together to form a response team known as the Sexual Assault Task Force that meets regularly to develop, implement, and evaluate victim-centered policies and procedures related to sexual and relationship violence as well as host educational speakers, share information on successful educational/training programs implemented, and more. Not just because it's the right thing to do, but additional pressures in adhering to compliance to Title IX mandates make the cause for even more consistent collaboration not only within the UH system but to our community partners so that we do not splinter from the positive work that has been done thus far, and so we continue to work together. The investment and support by the Department of Health is ever so important in resonating to not only college age students, but to our younger, vulnerable children and teens that need awareness and prevention education so that they can have the tools to prevent becoming a victim, learn bystander training, and know where to go to get the appropriate resources and assistance early.

As the nurse at Honolulu Community College (HCC) for over 24 years, I have worked with various entities such as the State TB and Immunization areas and community medical clinics for mandatory health clearance for our students. It seemed like an uphill battle to make known the challenges of adhering to Admin Rules that were antiquated and difficult to fulfill as written, and in essence, there was never a commitment or investment made to address problems. Working with State and Private Voc Rehab and DOE high schools was equally challenging in trying to ensure a smooth transition of disability accommodations for prospective students would be well-planned depended on how invested the high school transition teach was. In comparison, I would like to say that there is something special about how the DoH in this case in supporting prevention funding for domestic violence and sexual assault is

page 2

February 29, 2016

Lorri Taniguchi

Testimony HB 2466

SUCCESSFUL! In the 7 or 8 years that I have come to know of the UH PAU Violence Against Women Program and what they have done within our campuses and I have seen the overwhelming energy of this 10 (ten) campus representatives due to our collaboration with the DoH. I am just amazed at the breadth of work that has been heralded by the campuses. To name a few, screenings of various movies like "Hunting Ground" and "The Mask You Live In", and "kNOw More Violence Workshops", and UH system-wide [RESPECT] campaigns and much more thrive because of the collaboration and support between UH and DoH. Never before have I seen private and public agencies like DoH and UH and the Sex Abuse Treatment Center, and Domestic Violence Action Center to come together and be on the same page, all fighting for the same things. I am sure that I am not alone in believing this to be the case. As late as this testimony may be, and due to the short turnaround time knowing that this was needed, I'm sure that there would have been many letters that would not support the passage of HB2466 from colleagues from our other nine (9) campuses.

The direct benefactors are those victims and those we are able to reach through education. The societal benefit would be to save lives. What small investment made through the funding sources has far-reaching effects that are having dramatic effect. Please continue to sustain and allow the programming and activities to thrive and do more.

To learn more about the PAU Violence Against Women Program, I invite you to contact Jennifer Pagala Barnett, Program Coordinator at the Women's Center at UH Manoa at 956-8059 or via email at jpagala@hawaii.edu. Mahalo!

Sincerely,

A handwritten signature in dark ink, appearing to read "Lorri K. Taniguchi". The signature is fluid and cursive, with the first name "Lorri" being the most prominent.

Lorri K. Taniguchi, R.N.

LATE

From: mailinglist@capitol.hawaii.gov
Sent: Tuesday, March 01, 2016 9:25 AM
To: FINTestimony
Cc: catherine.a.betts@hawaii.gov
Subject: Submitted testimony for HB2466 on Mar 1, 2016 11:02AM

HB2466

Submitted on: 3/1/2016

Testimony for FIN on Mar 1, 2016 11:02AM in Conference Room 308

Submitted By	Organization	Testifier Position	Present at Hearing
Catherine Betts	Hawaii State Commission on the Status of Women	Oppose	No

Comments: The Commission strongly opposes HB 2466, as it would have detrimental reductions in funding for domestic violence and sexual assault services throughout the state. We request that you defer this measure.

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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