



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

**TESTIMONY in SUPPORT of SB 2392 SD2
RELATING TO OPIOID ANTAGONISTS**

REPRESENTATIVE DELLA AU BELLATI, CHAIR
HOUSE COMMITTEE ON HEALTH

Hearing Date: March 14, 2016

Room Number: 329

1 **Fiscal Implications:** There are no appropriations requested in this bill. The Department
2 anticipates that passage of this measure will reduce statewide medical costs by reducing opiate
3 overdose deaths and other severe medical impacts of overdose.

4 **Department Testimony:** The Department strongly supports this measure.

5 The purpose of this bill is to reduce the number of opiate overdose deaths in Hawaii by
6 increasing access and use of opioid antagonists like naloxone hydrochloride. Between 2010 -
7 2014 there were 270 reported overdoses in Hawaii and this is an underestimate. The aim of the
8 bill is to get naloxone into the hands of persons who use opiates and are at risk for overdose as
9 well as those who may be able to assist them in case of overdose.

10 This bill provides immunity for individuals who prescribe, dispense, or possess an opioid
11 antagonist such as naloxone or administer it during an opioid-related drug overdose; creates
12 immunity for emergency personnel, law enforcement, first responders, harm reduction
13 organizations and individuals to administer an opiate antagonist; requires Medicaid coverage for
14 opiate antagonists for this purpose; permits pharmacists to dispense naloxone with a written
15 collaborative agreement between the pharmacist and a physician; and requires the DOH to
16 collect, analyze and publish an annual report related to drug overdoses.

17 The Department wishes to monitor the safe administration of opiate antagonist and recommends
18 the addition of one provision to section 6 of this bill. "The Department of Health shall monitor
19 adverse drug reaction from opiate antagonist use. In order to do so, hospital emergency

1 departments shall report adverse drug reactions following the administration of opiate antagonist
2 use to the Department of Health.”

3 This bill will save lives in Hawaii and is in keeping with recent strong federal initiatives
4 and statutes in over 30 states to reduce opiate overdose deaths. The Department urges passage of
5 this bill.

6 Thank you for the opportunity to testify on this measure.



STATE OF HAWAII
DEPARTMENT OF HUMAN SERVICES

P. O. Box 339
Honolulu, Hawaii 96809-0339

March 13, 2016

TO: The Honorable Representative Della Au Belatti, Chair
House Committee on Health

FROM: Rachael Wong, DrPH, Director

SUBJECT: **SB 2392 SD 2 - RELATING TO OPIOID ANTAGONISTS**
Hearing: Monday, March 14, 2016; 1:15 p.m.
Conference Room 329, State Capitol

DEPARTMENT'S POSITION: The Department of Human Services (DHS) appreciates the opportunity to provide comments on this bill.

PURPOSE: The purpose of this bill creates immunity for health care professionals and pharmacists who prescribe, dispense, or administer an opioid antagonist such as naloxone hydrochloride to assist an individual at risk of experiencing an opioid-related drug overdose or to a harm reduction organization. Creates immunity for first responders, harm reduction organizations, and individuals who administer opioid antagonists to persons believed to be suffering an opioid-related drug overdose. Authorizes emergency personnel to administer an opioid antagonist. Requires medical coverage for opioid antagonists for outpatient use. Authorizes certain persons or organizations acting under standing orders issued by a licensed health care professional to store opioid antagonists without being subject to the Hawaii Food, Drug, and Cosmetic Act, except the portion regarding the storage of wholesale prescription drugs, and to distribute opioid antagonists without charge or compensation.

The Medicaid program, through its QUEST Integration and fee-for-service programs provides coverage for this drug. Additionally, individuals, who are allowed to prescribe within their scope of practice, may write a prescription for the opioid antagonist. Therefore the language requiring Medicaid coverage is not needed.

Thank you for the opportunity to testify on this measure.



HAWAII SUBSTANCE ABUSE COALITION

SB2392 SD2 RELATING TO OVERDOSE PREVENTION AND EMERGENCY RESPONSE:

COMMITTEE ON HEALTH: Representative Belatti, Chair; Representative Creagan, Vice Chair

- Monday, March 14, 2016 at 2:15 p.m.
- Conference Room 329

HSAC Supports SB2392 SD2:

Good Morning Chair Belatti; Vice Chair Creagan, And Distinguished Committee Members. My name is Alan Johnson, Chair of the Hawaii Substance Abuse Coalition, an organization of more than thirty treatment and prevention agencies across the State.

The Hawaii Substance Abuse Coalition fully supports creating immunity for individuals and emergency personnel who prescribe, possess, or administer an opioid antagonist such as naloxone hydrochloride during an opioid-related drug overdose. HSAC supports required Medicaid coverage, and exempting pharmacists as well as dispensing without a prescription.

Across the nation, opioid abuse is becoming an epidemic, especially prescription painkillers and increasingly heroin. We have the proven science today to know what to do:

- **Use naloxone to curb overdose deaths and keep people alive long enough that they can be treated successfully.**
- Reduce drug diversion,
- Expand successful treatments programs (including medication-assisted treatments),
- Develop new medications for pain.

NALOXONE

HSAC supports the amendments to include other first responders in addition to emergency medical personnel

If a person accidentally ingests too much pain medication or overuses prescription opioids, or abuses heroin, naloxone can very quickly restore normal respiration to a person whose breathing has slowed or stopped. Naloxone can be widely used by emergency medical personnel and other first responders for this purpose. Unfortunately, by the time a person having an overdose is reached and treated, it is often too late.

So far, 17 states have passed laws allowing for wider use of naloxone to prevent overdose fatalities. Almost half of the states in the U.S. provide limited immunity from arrest or prosecution for minor drug law violations for people who summon help at the scene of an overdose. Through these laws, family members and friends as well as emergency personnel,

such as police and firefighters, can use this life saving drug.

Good Samaritan laws do not protect people from arrest for other offenses, such as selling or trafficking drugs, or driving while drugged. These policies protect only the caller and overdose victim from arrest and/or prosecution for simple drug possession, possession of paraphernalia, and/or being under the influence.

Naloxone is currently the only FDA approved overdose medication. Moreover, it is relatively safe in its administration because it uses syringes fitted with an atomizer to enable the drug to be sprayed into the nose. NIDA and other agencies are working with the FDA and drug manufacturers to support this intranasal formulation. With Overdose Education and Naloxone Distribution (OEND) programs, naloxone can be applied directly to opioid users by their friends or loved ones, or other potential bystanders. OEND programs are an effective as well as cost-effective way of saving lives.

With science, we can save people's lives in the event of overdose and reverse the current Healthcare trend by improving outcomes and reducing costs.

We appreciate the opportunity to testify and are available for questions

COMMUNITY ALLIANCE ON PRISONS

P.O. Box 37158, Honolulu, HI 96837-0158

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COMMITTEE ON HEALTH

Rep. Della Au Belatti, Chair

Rep. Richard Creagan, Vice Chair

Monday, March 14, 2016

2:15 p.m.

Room 329

STRONG SUPPORT FOR SB2392 SD2 - OPIOID ANTAGONISTS

Aloha Chair Belatti, Vice Chair Creagan and Members of the Committee!

My name is Kat Brady and I am the Coordinator of Community Alliance on Prisons, a community initiative promoting smart justice policies in Hawai'i for almost two decades. This testimony is respectfully offered on behalf of the 6,000 Hawai'i individuals living behind bars or under the "care and custody" of the Department of Public Safety. We are always mindful that approximately 1,400 of Hawai'i's imprisoned people are serving their sentences abroad thousands of miles away from their loved ones, their homes and, for the disproportionate number of incarcerated Native Hawaiians, far from their ancestral lands.

SB 2392 SD2 creates immunity for health care professionals and pharmacists who prescribe, dispense, or administer an opioid antagonist such as naloxone hydrochloride to assist an individual at risk of experiencing an opioid-related drug overdose or to a harm reduction organization. Creates immunity for first responders, harm reduction organizations, and individuals who administer opioid antagonists to persons believed to be suffering an opioid-related drug overdose. Authorizes emergency personnel to administer an opioid antagonist. Requires medicaid coverage for opioid antagonists for outpatient use. Authorizes certain persons or organizations acting under standing orders issued by a licensed health care professional to store opioid antagonists without being subject to the Hawaii Food, Drug, and Cosmetic Act, except the portion regarding the storage of wholesale prescription drugs, and to distribute opioid antagonists without charge or compensation.

Community Alliance on Prisons is in strong support of this life-saving measure. Naloxone is a non-narcotic Opioid antagonist that blocks opioids, like heroin and oxycodone, yet has no potential for abuse and side effects are rare. When administered during an overdose, it blocks the effects of opioids and restores breathing within 3 minutes.

From 2010-2014, drug poisoning/overdose was the leading cause of fatal injuries in Hawai'i¹ — surpassing falls, motor vehicle, drowning and other injury-related deaths.

In Hawai'i there were 155 deaths in 2014 from drug poisonings/overdose and over the past decade, there were a total of 1,465 overdose deaths².

On September 17, 2015, HHS Secretary Sylvia M. Burwell announced a \$1.8 million in \$100,000 grants to help 18 rural communities in 13 states to reduce morbidity and mortality related to opioid overdoses.

The Rural Opioid Overdose Reversal (ROOR) Grant Program supports the purchase and distribution of naloxone (a drug that reverses symptoms of a drug overdose), and the training for its use by licensed healthcare professionals and emergency responders in rural areas. According to the CDC, prescription opioid abuse is more common in rural communities. In 2013, rates of death involving an overdose of prescription opioids were higher in rural counties than urban counties.

As data gathering organizations like the CDC, the National Council on Alcoholism and Drug Dependence, American Society of Addiction Medicine and National Institute on Drug Abuse work to accurately gauge the severity of the problem (no easy task), the U.S. Department of Health and Human Services (HHS) recently established a fund to make available, to rural communities, a drug that can save lives by reversing the body's innate response to an overdose.³

The CDC reported that deaths from opioid drug overdoses have hit an all-time record in the U.S., rising 14 percent in just one year. More than 47,000 people died from these drug overdoses last year. "These findings indicate that the opioid overdose epidemic is worsening," the CDC's Rose Rudd and colleagues wrote in their report.⁴

**"SINCE 2000, THE RATE OF DEATHS FROM DRUG OVERDOSES HAS INCREASED
137 PERCENT."**

This is a common-sense measure that saves the lives of our community members. Community Alliance on Prisons urges the legislature to pass a good naloxone bill this session for the sake of the families in our communities. Mahalo for this opportunity to testify.

¹ Hawaii State Department of Health, Injury Prevention and Control Program

² Id.

³ *Heroin Doesn't Care Where It Is: HHS to Distribute Naloxone to Rural Areas*, By John Collins, Thursday, September 24, 2015. <http://inthesetimes.com/rural-america/entry/18444/heroin-doesnt-care-where-it-is>

⁴ *Drug Overdose Deaths Hit 'Alarming' New Record in U.S., CDC Says*, by Maggie Fox, December 18, 2015. <http://www.nbcnews.com/health/health-news/drug-overdose-deaths-hit-new-record-u-s-cdc-says-n482746>

From: mailinglist@capitol.hawaii.gov
Sent: Sunday, March 13, 2016 12:23 PM
To: HLTtestimony
Cc: lcook@kualoha.org
Subject: Submitted testimony for SB2392 on Mar 14, 2016 14:15PM

SB2392

Submitted on: 3/13/2016

Testimony for HLT on Mar 14, 2016 14:15PM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Lisa Cook	Ku Aloha Ola Mau	Support	No

Comments: Please support this lifesaving bill.

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Dedicated to safe, responsible, humane and effective drug policies since 1993

TO: House Committee on Health

FROM: Carl Bergquist, Executive Director

HEARING DATE: 14 March 2016, 2:15PM

RE: SB2392 SD2, Relating to Opioid Antagonists, **STRONG SUPPORT**

Dear Chair Belatti, Vice Chair Creagan and Members of the Committee:

The Drug Policy Forum of Hawai'i (DPFHI) **strongly supports** the amended version of this harm reduction measure to increase access to naloxone, a drug that can reverse all types of opioid overdoses and thereby save lives. Naloxone, also known by brand names like Narcan & Evzio, is a generic drug that is completely safe in most instances, easy to administer and historically inexpensive.

This bill is not just time-sensitive, but it is also timely. Last week, on March 10, the U.S. Senate in a nearly unanimous vote passed the **Comprehensive Addiction and Recovery Act (CARA) of 2015** that treats the national opioid epidemic as a public health crisis rather than as part of the failed War on Drugs. It would **make federal grants available** to combat the epidemic, and it give **priority to states that have civil liability protections such as the ones proposed in this bill**. Further, in 2015 the White House hosted a related 50 state summit, and just last month, President Obama – who here clearly has bipartisan support in Congress - requested over \$1 billion in his budget to help combat this scourge.

Hawai'i is no outlier in this prescription painkiller (e.g. oxycodone) and illicit drug (e.g. heroin) addiction crisis. On average, our state has seen an average of 150 deaths from opioid overdoses per year, and in 95% of cases, these happen in homes or in public. That is why it is so vital to ensure that Naloxone gets into the hands of those best placed to help immediately or to reach vulnerable populations, namely friends, loved ones and harm reduction organizations. Pharmacies also have a crucial role to play in helping to dispense Naloxone, and operating under collaborative agreements, they could do so without individualized prescriptions. Similarly, harm reduction organizations like the CHOW Project, with standing orders from doctors, would be able to obtain Naloxone and distribute it in affected communities.

One issue that has been widely discussed recently is the price of Naloxone. As states have increased access, pharmaceutical companies have increased the price. We believe that to authorizing the administering and dispensing of Naloxone, including for law enforcement and fire fighters who are often first on the scene after a 911 call, will help put pressure on the producers to break this trend. In addition, new, easier forms of delivery, including a nasal spray, are changing the market.

In conclusion, this bill dovetails with last year's Good Samaritan Medical Amnesty law, Act 217. If those best positioned in the case of an overdose are both protected from prosecution as well as equipped with Naloxone, lives are more likely to be saved. We must never forget the obvious: an overdose reversal is the prerequisite to beginning any treatment at all.

Mahalo for the opportunity to testify.



Monday March 14, 2016
2:15 PM.
Capitol Rm. 329

To: HOUSE COMMITTEE ON HEALTH
Rep. Della Au Belatti, Chair
Rep. Richard Creagan, Vice Chair

From: Hawaii Medical Association
Dr. Scott McCaffrey, MD, President
Dr. Linda Rasmussen, MD, Legislative Co-Chair
Dr. Ronald Keinitz, MD, Legislative Co-Chair
Dr. Christopher Flanders, DO, Executive Director
Lauren Zirbel, Community and Government Relations

Re: SB 2392 SD2 – RELATING TO OPIOID ANTAGONISTS

IN SUPPORT

Chair, Vice Chair, and Committee Members:

The Hawaii Medical Association supports SB2392 SD2. For more than 40 years, naloxone has been saving the lives of people who overdose on an opioid. With the United States in the midst of an opioid misuse, overdose and death epidemic, the Hawaii Medical Association strongly encourages widespread access to naloxone as well as broad Good Samaritan protections to those who aid someone experiencing an overdose. Combined, these two policies have saved tens of thousands of lives across the nation.

Opioid overdose is most often accidental and can occur in patients with and without substance use disorders. Naloxone can save lives. The HMA applauds the public support for naloxone access and Good Samaritan protections from the U.S. Department of Health and Human Services, the U.S. Office of National Drug Control Policy, the U.S. Substance Abuse and Mental Health Services Administration and other key federal agencies.

Thank you for the opportunity to provide this testimony.

OFFICERS

PRESIDENT – D. SCOTT MCCAFFREY, MD, PRESIDENT ELECT – BERNARD ROBINSON, MD
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March 14, 2016

The Honorable Della Au Belatti, Chair
House Committee on Health
The Honorable Richard Creagan, Vice-Chair
House Committee on Health

Re: SB 2392 SD2 – Relating to Opioid Antagonists

Dear Chair Belatti, Vice-Chair Creagan and Committee Members:

The Hawaii Medical Association (HMSA) appreciates the opportunity to provide comments supporting SB 2392 SD2 which, among other things, governs how opioid antagonists such as naloxone hydrochloride are administered.

HMSA appreciates the Committees' willingness to address opioid related health complications and deaths in our state through SB 2392 SD2. We would note that this issue is receiving national attention with fourteen other states making naloxone hydrochloride more safely accessible for individuals and populations most in need. In November 2015 the FDA provided fast-track approved a naloxone nasal spray for outpatient use.

It is also worth noting the U.S. Senate's recent passage of the Comprehensive Addiction Recovery Act that expands prevention and education efforts within the Department of Justice and the Department of Health and Human Services', and part of President Obama's fiscal year 2017 budget proposal specifically provides the following:

- \$1 billion in new mandatory funding to address the prescription opioid abuse and heroin use epidemic. The budget proposal contains approximately \$500 million— an increase of more than \$90 million— to continue and build on current efforts across the Departments of Justice and HHS to expand state-level prescription drug overdose prevention strategies, increase the availability of medication-assisted treatment programs, improve access to the overdose-reversal drug naloxone, and support targeted enforcement activities.

Thank you for allowing us to testify in support of SB 2392 SD2.

Sincerely,

Jennifer Diesman
Vice President, Government Relations

From: mailinglist@capitol.hawaii.gov
Sent: Saturday, March 12, 2016 8:16 PM
To: HLTtestimony
Cc: wailua@aya.yale.edu
Subject: Submitted testimony for SB2392 on Mar 14, 2016 14:15PM

SB2392

Submitted on: 3/12/2016

Testimony for HLT on Mar 14, 2016 14:15PM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Wailua Brandman	Hawaii Assoc. of Professional Nurses	Support	No

Comments: Aloha Representative Della Au Belatti, Chair, Representative Richard P. Creagan, Vice Chair, and members of the House Committee on Health. Mahalo for the opportunity to testify in SUPPORT of SB2392, SD2, on behalf of the Hawaii Association of Professional Nurses (HAPN). The companion to this bill, HB1671 included APRNs under Chapter 457, as well as the physicians in this bill. An oversight, no doubt, that APRNs were not included in this bill. HAPN would like to encourage you to amend this bill to include APRNs. We thank you for all you do to support excellent health care for the people of Hawaii and the profession of Nursing. Again, HAPN stands in SUPPORT of SB2392, SD2. Wailua Brandman APRN FAANP, Chair, HAPN Legislative Committee

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From: mailinglist@capitol.hawaii.gov
Sent: Monday, March 14, 2016 8:48 AM
To: HLTtestimony
Cc: melanie.boehm@usw.salvationarmy.org
Subject: Submitted testimony for SB2392 on Mar 14, 2016 14:15PM

SB2392

Submitted on: 3/14/2016

Testimony for HLT on Mar 14, 2016 14:15PM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Melanie Boehm	The Salvation Army Addiction Treatment Services and Family Treatment Services	Support	No

Comments: There have been over 10,000 overdose reversals using naloxone nationwide. In Hawaii, naloxone has been administered by EMS providers outside of a medical setting over 95% of the time. I have seen first hand how this saves lives.

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From: mailinglist@capitol.hawaii.gov
Sent: Monday, March 14, 2016 8:59 AM
To: HLTtestimony
Cc: hlusk@chowproject.org
Subject: *Submitted testimony for SB2392 on Mar 14, 2016 14:15PM*

SB2392

Submitted on: 3/14/2016

Testimony for HLT on Mar 14, 2016 14:15PM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Heather Lusk	The CHOW Project	Support	Yes

Comments:

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**Testimony of
Gary M. Slovin / Mihoko E. Ito
on behalf of
Walgreen Company**

DATE: March 13, 2016

TO: Representative Della Au Belatti
Chair, Committee on Health
HLTestimony@capitol.hawaii.gov

RE: **S.B. 2392, S.D.2 – Relating to Opioid Antagonists**
Hearing Date: Monday, March 14, 2016 at 2:15 p.m.
Conference Room: 329

Dear Chair Belatti and Members of the Committee:

We submit these comments on behalf of Walgreen Co. (“Walgreens”). Walgreens operates stores at more than 8,200 locations in all 50 states, the District of Columbia and Puerto Rico. In Hawaii, Walgreens now has 20 stores on the islands of Oahu, Maui and Hawaii.

Walgreens **supports** S.B. 2392, S.D.2, which, among other things, creates immunity for health care professionals and pharmacists who prescribe, dispense, or administer an opioid antagonist such as naloxone hydrochloride to assist an individual at risk of experiencing an opioid-related drug overdose or to a harm reduction organization. The bill also allows pharmacists to dispense opioid antagonists pursuant to a collaborative agreement between a licensed physician and a pharmacist.

Walgreens is committed to comprehensive efforts to combat drug abuse. Naloxone can be used in the event of an overdose to reverse the effects of heroin or other opioid drugs, and is administered by injection or nasal spray. By allowing pharmacists to dispense opioid antagonists and providing immunity for dispensing and administering the same, S.B. 2392, S.D.2 provides an important mechanism to save lives and help combat drug overdoses.

Thank you for the opportunity to testify in support of this measure.

Gary M. Slovin
Mihoko E. Ito
C. Mike Kido
Tiffany N. Yajima

999 Bishop Street, Suite 1400
Honolulu, HI 96813
(808) 539-0840

**COMMENTS OF ROBERT TOYOFUKU ON BEHALF OF THE HAWAII
ASSOCIATION FOR JUSTICE (HAJ) REGARDING S.B. NO. 2392, SD 2**

Date: Monday, March 14, 2016

Time: 2:15 pm

Room: 329

To: Chairperson Della Au Belatti and Members of the House Committee on Health:

My name is Bob Toyofuku and I am presenting comments on behalf of the Hawaii Association for Justice (HAJ) regarding S.B. No. 2392, SD 2 Relating to Opioid Antagonists.

The Hawaii Association for Justice generally opposes any limitation of civil liability which reduces protection for consumers and limits or lessens the incentive for everyone to act responsibly to reduce or eliminate harm to others. This measure does reduce civil protections for by eliminating strict products liability and strict liability for use of dangerous material, however, it does at least prohibit unreasonable conduct and requires good faith compliance with its terms in order to qualify for reduced liability.

HAJ recognizes that this measure is well intended and addresses an important option for those who suffer opioid-related drug overdoses. Accordingly, HAJ does not object to the liability provision as currently drafted, but will object to any amendments that decrease patient protection or provide additional immunity.

Thank you very much for allowing me to testify regarding this measure. Please feel free to contact me should you have any questions or desire additional information.

From: mailinglist@capitol.hawaii.gov
Sent: Friday, March 11, 2016 5:39 PM
To: HLTtestimony
Cc: rontthi@gmail.com
Subject: *Submitted testimony for SB2392 on Mar 14, 2016 14:15PM*

SB2392

Submitted on: 3/11/2016

Testimony for HLT on Mar 14, 2016 14:15PM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Ronald Taniguchi, Pharm.D.	Individual	Support	No

Comments:

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HLTtestimony

From: mailinglist@capitol.hawaii.gov
Sent: Monday, March 14, 2016 3:44 PM
To: HLTtestimony
Cc: maukalani78@hotmail.com
Subject: Submitted testimony for SB2392 on Mar 14, 2016 14:15PM

SB2392

Submitted on: 3/14/2016

Testimony for HLT on Mar 14, 2016 14:15PM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
E. Ileana Funakoshi	Individual	Support	No

Comments: SORRY FOR LATE SUBMISSION. BY PASSING THIS MEASURE YOU WILL BE SAVIG MANY LIVES SO I ENCOURAGE YOU TO PASS THIS BILL.

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