

SCR25/SR8

Measure Title: EXPRESSING STRONG SUPPORT FOR THE ESTABLISHMENT OF THE WAHIAWA CENTER FOR COMMUNITY HEALTH TO PROVIDE PRIMARY MEDICAL CARE SERVICES TO THE MEDICALLY UNDERSERVED POPULATION OF WAHIAWA AND ITS SURROUNDING RURAL COMMUNITIES.

Report Title: Wahiawa Center for Community Health; Primary Medical Care Services; Underserved Population

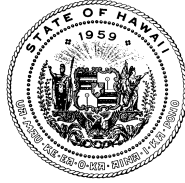
Description:

Companion:

Package: None

Current Referral: CPH, WAM

Introducer(s): DELA CRUZ, CHUN OAKLAND, GABBARD, GALUTERIA, INOUYE, KIDANI, NISHIHARA, RIVIERE, SHIMABUKURO, WAKAI, Baker, Espero



STATE OF HAWAII
DEPARTMENT OF HEALTH
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WRITTEN TESTIMONY ONLY

**Testimony in SUPPORT of S.C.R. 25
EXPRESSING STRONG SUPPORT FOR THE ESTABLISHMENT OF THE
WAHIAWA CENTER FOR COMMUNITY HEALTH TO PROVIDE PRIMARY
MEDICAL CARE SERVICES TO MEDICALLY UNDERSERVED POPULATION OF
WAHIAWA AND SURROUNDING RURAL COMMUNITIES**

SENATOR ROSALYN H. BAKER, CHAIR
SENATE COMMITTEE ON COMMERCE, CONSUMER PROTECTION, AND HEALTH
Hearing Date: March 14, 2016 Room Number: 229

- 1 **Fiscal Implications:** SCR25 proposes no appropriations.
- 2 **Department Testimony:** The purpose of this resolution is to support the establishment of the
- 3 Wahiawa Center for Community Health to provide primary medical care to medically
- 4 underserved residents of Wahiawa and the surrounding communities.
- 5 The Department of Health supports the establishment of the Wahiawa Center for Community
- 6 Health to provide immediate primary, dental and mental health care services.
- 7 On behalf of the Wahiawa community, in 2012, the Department of Health applied to the Health
- 8 Resources and Services Administration (HRSA) to have the Wahiawa community, comprised of
- 9 census tracts 91.0 – 94.0, designated as a Medically Underserved Population. In 2013, the
- 10 application was approved and the Wahiawa community was granted a Medically Underserved
- 11 Population Governor’s Exceptional designation.
- 12 Medically Underserved Areas/Populations are federal designations in which residents of a whole
- 13 county or a group of contiguous counties, a group of county or civil divisions, or a group of
- 14 urban census tracts have a shortage of personal health services. Medically Underserved
- 15 Populations may include groups of persons who face economic, cultural, or linguistic barriers to
- 16 health care.

1 Over twenty federal government programs utilize a Medically Underserved Area or Medically
2 Underserved Populations designation. Programs such as National Health Service Corps, the
3 State J-1 Visa Waiver, and the Medicare bonus payment support the recruitment and retention of
4 primary care providers to serve underserved populations.

5 Thank you for this opportunity to testify.

6 **Offered Amendments:** None.

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HPCCA

HAWAII PRIMARY CARE ASSOCIATION

Senate Committee on Commerce, Consumer Protection, and Health

The Hon. Rosalyn H. Baker, Chair

The Hon. Michelle N. Kidani, Vice-Chair

**Testimony on Senate Concurrent Resolution 25
Relating to the Establishment of the Wahiawa Center for Community Health**

Submitted by Robert Hirokawa, CEO

March 14, 2016, 9:30 am, Room 229

The Hawaii Primary Care Association (HPCCA) is a membership organization comprised of all 14 federally qualified community health centers (FQHC) in Hawaii. Hawaii's FQHCs served 150,000 individuals across the State of Hawaii in 2014.

The HPCCA **strongly supports** Senate Concurrent Resolution (SCR) 25, which expresses strong support for the establishment of the Wahiawa Center for Community Health (WCCH).

Limited access and availability of healthcare services continues to worsen in the Wahiawa community. This is a result of (1) physician retirements, (2) practicing physicians not being able to accept new patients, (3) practicing physicians limiting the types of insurance accepted, and (4) the challenges practicing physicians face in serving those without insurance.

Once established, WCCH will play a vital role in providing much needed comprehensive primary care services to the residents of Wahiawa and its neighboring communities, especially to those residents in need. In addition, WCCH will serve a critical role in public health, safety, and general welfare, and will contribute to the improvement of the health care system as a whole for residents of Wahiawa and the State. Finally, WCCH will serve as an economic engine (bringing in federal funds) and a large employer for the Wahiawa Community.

For these reasons, we **strongly support SCR 25**. Thank you for the opportunity to testify.

THE SENATE
THE TWENTY-EIGHTH LEGISLATURE
REGULAR SESSION OF 2016
COMMITTEE ON COMMERCE, CONSUMER PROTECTION, AND HEALTH
Senator Rosalyn H. Baker, Chair

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Jay Raymundo
Nicole Jones Vannatta
Joy Mahiko

DATE: Monday, March 14, 2016
TIME: 9:30 am
PLACE: Conference Room 229
State Capitol
415 South Beretania Street
SCR 25

EXPRESSING STRONG SUPPORT FOR THE ESTABLISHMENT OF THE WAHIAWA CENTER FOR COMMUNITY HEALTH TO PROVIDE PRIMARY MEDICAL CARE SERVICES TO THE MEDICALLY UNDERSERVED POPULATION OF WAHIAWA AND ITS SURROUNDING RURAL COMMUNITIES

IN SUPPORT

Good morning Chair Baker and members of the committee:

My name is Joy Mahiko and I am a member of the board of directors for The Wahiawa Center for Community Health. I support this measure.

- As a board member, I have made a commitment to make our community healthier. My commitment is to the children and families of Wahiawa and join in a concerted effort to revitalize the Wahiawa community. It begins with promoting a “healthy” community.
- As a born and raised third generation resident of Wahiawa, I have seen physicians retire or otherwise leave our community leaving my neighbors without access to healthcare. As a result, access to healthcare is a problem for our families. Eighty percent of our children receive free or reduced lunch in Wahiawa public schools. Resources are limited. They do not have the financial resources to travel and access quality healthcare or are not accepted by physicians that do not accept Medicaid recipients.
- Residents have expressed their desire to see a “transformation” in health and social service delivery. They are ready to embrace the idea of a center for community health that promotes health for the entire community.
- As a small business owner and educator serving people with disabilities, it is clear that people with disabilities face additional barriers to access healthcare. These barriers range from physically accessing a health facility, to accessing exams and medical equipment that accommodate a person with a disability, to

receiving quality healthcare services in a timely manner. Limited access to health care impacts persons with disabilities, and their ability reach full potential, negatively affecting their quality of life. Their health and well being is of utmost importance to me as we move forward to promote a healthy community.

- As a rural community, we are seeing a growth in immigrant and homeless families. These special populations in Wahiawa require more health services and consistent primary care when compared to others. The shortage of primary care providers not only affects access, but presents challenges to patient care and quality of care. Residents have expressed their desire to see a “transformation” in health and social service delivery. They embrace the idea of a center for community health that promotes health for the entire community.
- Because transportation is an issue in our rural community of Wahiawa and because of our lack of physicians in Wahiawa, many spend hours in public transportation to obtain healthcare outside of Wahiawa. The traffic situation out of Wahiawa to outside providers also creates extensive time for our families to get to a physician. The problem worsens when families opt out of needed medical care due to lack of transportation, access, or cost. This widespread issue has grim effects on efforts to prevent major health conditions and chronic diseases. This was made evident in our community health assessment.
- According to community health assessments that we completed in 2012 and 2015, a high percentage of our community members suffer from some form of the top five chronic health conditions, which could be controlled with help from a primary care network in Wahiawa.
- The community is proud of its community hospital, the Wahiawa General Hospital, but with its limited resources, preventable and non-emergency visits are draining its limited resources and these services have proven to be better served at a primary, health center setting.

PLEASE pass SCR 25 so that the message of healthcare needs in Wahiawa becomes an issue that will gain public support.

Mahalo



SCR 25
RELATING TO THE ESTABLISHMENT OF THE
WAHIAWA CENTER FOR COMMUNITY HEALTH TO PROVIDE PRIMARY
MEDICAL CARE SERVICES TO THE MEDICALLY UNDERSERVED
POPULATION OF WAHIAWA & SURROUNDING RURAL COMMUNITIES

Senate Committee on Commerce, Consumer Protection and Health

Chair: Senator Rosalyn Baker and Vice Chair Michelle Kidani

Hawaii State Capitol, Conference Room 229, Monday-March 14, 2016

By

R. Doug Aton, President- Wahiawa Community & Business Association

The Wahiawa Community & Business Association (WCBA) strongly supports the establishment of the Wahiawa Center for Community Health to provide primary medical care services to the medically underserved population of Wahiawa and surrounding communities. We understand that this project will provide the resources necessary to lay the foundation for a Federal 330 community health center in Wahiawa, where residents confront financial, geographical and cultural barriers to primary medical and dental care.

There is widespread support for a community health center in Wahiawa. The demographics and health indicators for the Wahiawa community clearly demonstrate there is a large population of uninsured and underinsured residents that will benefit from and sustain a section 330 community health center. According to WCCH figures, one in five residents live at or below the Federal Poverty Level, eight percent are uninsured, 22 percent are covered by Medicaid and 53 percent have either Medicaid dental coverage or no dental insurance at all. Major health challenges in the area include inadequate prenatal care, obesity, high blood pressure, smoking, heavy alcohol use, and a lack of primary care physicians.

The WCBA seeks to secure civic, recreational, educational, social, and business improvements and to encourage the coordination of community activities for the health and well being of the residents and businesses of Wahiawa. Our primary focus is on residents and businesses within the federally recognized Neighborhood Revitalization Strategy Area that covers a major portion of Wahiawa, and areas of Wheeler Army Air Field, Schofield Barracks, Whitmore Village, Poamoho, and Helemano. A Federally qualified health center (FQHC) would materially contribute to a better quality of life for area residents.

It is without reservation, therefore, that we support WCCH's efforts to establish a FQHC for our Wahiawa community and surrounding communities. Thank you for this opportunity to testify.

R. Doug Aton
P.O. Box 861408
Wahiawa, Hawaii
96786



March 14, 2016
9:30am
Conference Room 229

To: The Honorable Rosalyn Baker, Chair
The Honorable Michelle Kidani, Vice Chair
Senate Committee on Commerce, Consumer Protection, and Health

From: Paula Arcena, Chief Customer Officer
Rachel Wilkinson, Public Policy Analyst

Re: SCR25

Thank you for the opportunity to provide testimony in support for SCR25, expressing strong support for the establishment of the Wahiawa Center for Community Health to provide primary medical care services to the medically underserved population of Wahiawa and its surrounding rural communities.

AlohaCare is a non-profit, Hawaii based health plan founded in 1994 by Hawaii's community health centers to serve low-income families and medically vulnerable members of our community through government sponsored health insurance programs. We serve beneficiaries of Medicaid and Medicare on all islands.

Access to critical health care services—especially in rural areas—can be incredibly challenging for individuals who need chronic disease management interventions and multi-disciplinary approaches to care.

Since its inception, the Wahiawa Center for Community Health has been a grassroots and community-driven initiative. The strength of its board of directors lies in its members, all of whom are well-respected Wahiawa community leaders, residents and volunteers. It is a much-needed healthcare facility for the residents of Wahiawa and its neighboring rural communities. We appreciate the Committee's favorable consideration of this measure and ask that you pass SCR25.



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March 14, 2016

To: The Honorable Chair Rosalyn Baker
Senate Committee on Commerce, Consumer Protection, and Health

From: 'Ohana Health Plan
Wendy Morriarty, State President

Re: SCR25; **In Support**
March 14, 2016; Conference Room 229

'Ohana Health Plan ('Ohana) is a member of the WellCare Health Plans, Inc.'s ("WellCare") family of companies and provides healthcare for Hawai'i residents statewide. Since 2009, 'Ohana has utilized WellCare's national experience to develop a Hawai'i -specific care model that addresses local members' healthcare and health coordination needs. By focusing on the state's Medicaid and Medicare population, 'Ohana serves Hawaii's most vulnerable residents: low-income, elderly, disabled, and individuals with complex medical issues. Our mission is to help our members' lead better, healthier lives.

'Ohana Health Plan offers our **support** of SCR25, which expresses support for the establishment of the Wahiawa Center of Community Health to provide primary medical care services to the medically underserved population of Wahiawa and its surrounding rural communities.

There has long been a need for the people of Wahiawa to have greater access to health services. With limited options in the area for primary care providers, residents are often forced to seek care at Wahiawa General Hospital. This creates an additional workload for an already overburdened facility to treat individuals who could easily be cared for in a non-acute setting. As the central Oahu population continues to grow, this strain on the healthcare system will continue to worsen. We strongly support the Wahiawa community's effort to build a health center to ensure their families have the same access to care as other communities across Oahu.

Thank you for the opportunity to submit testimony on this measure.

Faith Action for



Community Equity

Affiliate of People Improving
Communities through
Organizing (PICO)

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Mr. Patrick Zukemura
President, FACE Oahu

March 14, 2016

THE SENATE
THE TWENTY-EIGHTH LEGISLATURE
REGULAR SESSION OF 2016
COMMITTEE ON COMMERCE, CONSUMER PROTECTION, AND HEALTH
Senator Rosalyn H. Baker, Chair

DATE: Monday, March 14, 2016
TIME: 9:30 am
PLACE: Conference Room 229
State Capitol
415 South Beretania Street

SCR 25

EXPRESSING STRONG SUPPORT FOR THE ESTABLISHMENT OF THE WAHIAWA
CENTER FOR COMMUNITY HEALTH TO PROVIDE PRIMARY MEDICAL CARE SERVICES
TO THE MEDICALLY UNDERSERVED POPULATION OF WAHIAWA AND ITS
SURROUNDING RURAL COMMUNITIES

IN SUPPORT

Good morning Chair Baker and members of the committee:

I am Patrick Zukemura, President of FACE Oahu and I am here to testify in support of SCR 25.

In early 2011, the late Senator Daniel Inouye and the Hawaii Primary Care Association contacted FACE with a request to apply for a federal planning grant to organize and complete a health needs assessment in Wahiawa. FACE applied for the grant as health care was one of its core issues. In August 2011, FACE was awarded the grant and spent the next year completing a community needs assessment for its access to care. The results were staggering as this community had suffered with decades of diminishing access with the loss of over 200 physicians due to retirement and other reasons for departure..

The grant also required that FACE create a new non-profit entity comprised of community leaders. On January 25, 2012, two FACE members, active in FACE member Wahiawa churches became the founding corporate officers. The Wahiawa Center for Community Health was born. FACE continued its organizing work and completed all legal corporate work and selected the initial board members. FACE also provided the initial board training and assisted in setting up the by-laws and other corporate requirements.

At the end of the planning grant, FACE left the new non-profit in the hands of an able community board of directors.

As SCR 25 described, the community continues to suffer great disparities in its access to health care and it continues to increase as time goes by. The Wahiawa General Hospital continues to deliver charity care and its emergency room is used by patients as a primary care setting, as there are no other options in the community. This is an expensive unnecessary use of the ER.

The Wahiawa Center for Community Health will fulfill the dream of our great late Senator Daniel Inouye as it provides for the health care needed in Wahiawa. The Wahiawa Center for Community Health is now designated as a Senator Daniel Inouye Legacy Project by our current congressional delegation.

Please pass SCR 25 as it will raise the awareness of the health needs of Wahiawa so that all can be prepared to help that community become healthy members of the State of Hawaii.

From: mailinglist@capitol.hawaii.gov
To: [CPH Testimony](#)
Cc: annsfreed@gmail.com
Subject: Submitted testimony for SCR25 on Mar 14, 2016 09:30AM
Date: Wednesday, March 09, 2016 1:04:53 PM

SCR25

Submitted on: 3/9/2016

Testimony for CPH on Mar 14, 2016 09:30AM in Conference Room 229

Submitted By	Organization	Testifier Position	Present at Hearing
Ann S Freed	Individual	Support	No

Comments: As a kamaina resident of Central Oahu and member of NB25 Mililani, I have long seen the need for some type of primary care facility in our area. The promised Castle and Cooke hospital in Koa Ridge may or may not actually be built. This resolution would help in finding more immediate as well as long-term solutions. Mahalo, Ann S. Freed, resident Mililani

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From: mailinglist@capitol.hawaii.gov
To: [CPH Testimony](#)
Cc: victor.amos@mpd.net
Subject: *Submitted testimony for SR8 on Mar 14, 2016 09:30AM*
Date: Thursday, March 10, 2016 10:21:08 AM

SR8

Submitted on: 3/10/2016

Testimony for CPH on Mar 14, 2016 09:30AM in Conference Room 229

Submitted By	Organization	Testifier Position	Present at Hearing
Victor K. Ramos	Individual	Support	No

Comments:

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