

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

Testimony COMMENTING on H.B. 0062
RELATING TO CANCER

REPRESENTATIVE JOHN M. MIZUNO, CHAIR
HOUSE COMMITTEE ON HEALTH & HUMAN SERVICES

Hearing Date: February 6, 2018

Room Number: 329

1 **Fiscal Implications:** The Department of Health (DOH) defers to the priorities of the Governor's
2 Executive Biennium Budget request. The bill appropriates out of the general revenues \$250,000
3 for fiscal year (FY) 2017-2018 and \$250,000 for FY 2018-2019 and would be repealed on June
4 30, 2020.

5 **Department Testimony:** The DOH offers comments on House Bill 0062 (H.B. 0062)
6 which was introduced in the previous session. House Concurrent Resolution 0129 (H.C.R.)
7 0129), was also introduced and passed during the 2017 Legislative Session. H.C.R. 0129
8 requested the DOH to convene a working group, with the assistance of the American Cancer
9 Society (ACS) Hawaii Pacific and the ACS Cancer Action Network to develop recommendations
10 to increase colorectal cancer screening rates in the State. The DOH Hawaii Comprehensive
11 Cancer Control Program (HCCCP) convened the Colorectal Cancer Working Group in response
12 subsequently submitted a report of recommendations and findings to the 29th Legislature. The
13 working group recommended pursuing the following evidence-based strategies: small media
14 campaigns; provider-client reminder systems; and reducing structural barriers. ¹

15 The U.S. Preventive Services Task Force recognizes the importance of early detection
16 and recommends screening for colorectal cancer beginning at age 50 years and continuing until

¹ Report to the 29th Legislature State of Hawai'i, 2018. Pursuant to H.C.R. 0129 SLH 2017, Requesting the DOH to Convene a Working Group to Develop Recommendations to Increase Colorectal Cancer Screening Rates in the State. https://health.hawaii.gov/opppd/files/2017/12/HCR-129-LegReport-2017_Colorectal-Cancer-1.pdf

1 age 75 years.² According to the American Cancer Society (ACS) 2018 Cancer Facts and
2 Figures, early detection of colorectal cancer is critical. Studies have shown that the five (5) year
3 survival rate is close to 90 percent among individuals whose cancer was found early and treated
4 appropriately.³ Colorectal cancer is the second leading cause of cancer death in Hawaii with
5 clear ethnic and gender disparities.

6 Increasing colorectal cancer screening for people age 50 years and over is a key priority
7 for the DOH Hawaii Comprehensive Cancer Control Program (HCCCCP) and the Hawaii Cancer
8 Control Coalition. The proposed Colorectal Cancer Screening and Awareness Pilot Program in
9 H.B. 0062 aligns with the priorities in the Hawaii State Cancer Plan 2016–2020 to increase
10 colorectal screening rates and reduce morbidity and mortality of colorectal cancer through
11 screening and early detection. Colorectal cancer screening rates are much lower for those
12 residing in low-income households and those with less than a high school education. The
13 colorectal screening rates for Hawaii increased from 59.4% in 2011, to 66.5% in 2014, and was
14 71.3% in 2016, though still below the nationally recommended goal of 80% by 2018.⁴

15 H.B. 0062 raises issues that relate to procurement, sustainability, and capacity. Section
16 (a)(2), page 4, lines 6-8 of the bill requires the DOH to, “award grants to health care providers to
17 provide colorectal cancer screening to eligible participants.” Since state agencies are not
18 authorized to award grants, the Department would need to competitively select health care
19 providers in accordance to Chapter 103F-401, Hawaii Revised Statutes. The 80% by 2018
20 would require an 8.7% increase in adult screening rates from 71.3% in 2016. The development
21 of a comprehensive program would require more time. Without continued public education and
22 screening interventions the increases in screening rates may erode over time, unless systems and

² U.S. Preventive Services Task Force, Colorectal Cancer: Screening. Release Date: June 2016.
<https://www.uspreventiveservicestaskforce.org/Page/Document/UpdateSummaryFinal/colorectal-cancer-screening2?ds=1&s=colorectal>.

³ Howlader N, Noone AM, Krapcho M, et al, eds. SEER cancer statistics review, 1975–2010, Bethesda, MD: National Cancer Institute. Available at http://seer.cancer.gov/csr/1975_2010/.

⁴ Source: Hawaii Health Data Warehouse; Hawaii State Department of Health, Hawaii Behavioral Risk Factor Surveillance System, Colorectal screening (50-75), for the State of Hawaii, for the Years 2011, 2012, 2013, 2014, 2015, 2016.

1 structural changes are also implemented that support and sustain the behavior change. H.B. 0062
2 does not specify that the funds can be used for personnel costs associated with administering the
3 proposed screening and awareness program, and the expectations in this measure will require
4 more capacity than currently available in the HCCCP which is currently funded by federal
5 grants. However, the DOH will continue efforts with the Working Group to implement the
6 recommendations with stakeholder organizations within the available resources and capacity.

7 Thank you for the opportunity to provide comments.



**TESTIMONY OF
THE DEPARTMENT OF THE ATTORNEY GENERAL
TWENTY-NINTH LEGISLATURE, 2018**

ON THE FOLLOWING MEASURE:
H.B. NO. 62, RELATING TO CANCER.

BEFORE THE:
HOUSE COMMITTEE ON HEALTH & HUMAN SERVICES

DATE: Tuesday, February 6, 2018 **TIME:** 8:30 a.m.

LOCATION: State Capitol, Room 329

TESTIFIER(S): Russell A. Suzuki, Acting Attorney General, or
Jill T. Nagamine, Deputy Attorney General

Chair Mizuno and Members of the Committee:

The Department of the Attorney General provides the following comments.

This bill would establish a colorectal cancer screening and awareness pilot program, to be administered by the Department of Health (DOH). The DOH would be required to provide education and outreach regarding the risks associated with colorectal cancer and the benefits of screening, and would also be required to award grants to health care providers to use to screen eligible participants, who are individuals who are at least fifty years of age or at high risk for colorectal cancer. The DOH would be required to report to the Legislature on the expenditure of funds. The bill would appropriate \$250,000 for each of the 2017-2018 and 2018-2019 fiscal years.

While we support the intent of the bill, as currently drafted the means of expending funds may be challenged as violating the Hawaii Constitution. Section 2(a)(2) at page 4, lines 6-8, requires the DOH to "[a]ward grants to health care providers to provide colorectal cancer screening to eligible participants, as described in subsection (b)." Article VII, section 4, of the Hawaii Constitution provides in part that "No grant of public money or property shall be made except pursuant to standards provided by law." The DOH is not authorized to award grants, but it could achieve the goals intended by this bill if the Legislature appropriated additional funds in its budget for the DOH to procure the services that the Legislature intended to provide by this bill. Possible wording to accomplish this is:

There is appropriated out of the general revenues of the State of Hawaii the sum of \$_____ or so much thereof as may be necessary for fiscal year 2018-2019 and the same sum or so much thereof as may be necessary for fiscal year 2019-2020 to carry out the purposes of this Act, including providing colorectal cancer screening to individuals who are at least fifty years of age or at high risk for colorectal cancer.

The sums appropriated shall be expended by the department of health for the purposes of this Act.

We believe that the first appropriation period was intended to be fiscal year 2018-2019 and have accordingly updated the reference to fiscal year 2017-2018 in section 3 of the bill.

If the Committee decides to proceed with this bill, we respectfully ask the Committee to amend the funding provision of the bill to meet the requirements of article VII, section 4, of the Hawaii Constitution.



American Cancer Society
Cancer Action Network
2370 Nuʻuanu Avenue
Honolulu, Hawaiʻi 96817
808.432.9149
www.acscan.org

House Committee on Health and Human Services
Representative John Mizuno, Chair
Representative Bert Kobayashi, Vice Chair

HB 62 – RELATING TO CANCER

Cory Chun, Government Relations Director – Hawaii Pacific
American Cancer Society Cancer Action Network

Thank you for the opportunity to provide testimony in support of HB 62, which appropriates funds to the Department of Health to provide for colorectal cancer screening services to underserved individuals and outreach of colorectal cancer prevention.

The American Cancer Society Cancer Action Network (ACS CAN) is the nation's leading cancer advocacy organization. ACS CAN works with federal, state, and local government bodies to support evidence-based policy and legislative solutions designed to eliminate cancer as a major health problem.

Colorectal cancer is preventable. It begins as a non-cancerous formation, known as a polyp. If the polyp is detected during the screening process, the entire polyp is removed before it can become cancer. Screening is also critical to detecting cancer at the earliest stages, when treatment is most effective. Despite the overwhelming benefits of screening for colorectal cancer, less than 40% of patients are diagnosed at a localized stage, partly due to the underuse of screening. Individuals 50 to 64 years old – particularly certain ethnicities, persons living in rural areas, and individuals with lower socio-economic status are the groups least likely to be screened for colorectal cancer, contributing to higher death rates from the disease.

Colorectal cancer is the second leading cause of cancer death in men and the third leading cause of death in women in the state. According to data collected from the Hawaii tumor registry, Hawaii sees an average of 722 new cases of colon and rectum cancer each year, with an average of 224 deaths from the disease. Hawaii has a higher incidence rate than the overall U.S. rate, with the highest ethnic incidence rate coming from Japanese males and females while the highest mortality rate coming from Native Hawaiian males and females. These deaths are preventable, and increasing access to screenings will go a long way to saving more lives from cancer.

Thank you for the opportunity to provide testimony on this important issue.



**Testimony to the House Committee on Health and Human Services
Tuesday, February 6, 2018; 8:30 a.m.
State Capitol, Conference Room 329**

RE: SUPPORTING HOUSE BILL NO. 0062, RELATING TO CANCER.

Chair Mizuno, Vice Chair Kobayashi, and Members of the Committee:

The Hawaii Primary Care Association (HPCA) is a 501(c)(3) organization established to advocate for, expand access to, and sustain high quality care through the statewide network of Community Health Centers throughout the State of Hawaii. The HPCA **SUPPORTS** House Bill No. 0062, RELATING TO CANCER.

The bill, as received by your Committee, would:

- (1) Establish the Colorectal Cancer Screening and Awareness Pilot Program (Program) within the Department of Health (DOH) to provide education and outreach regarding the risks associated with colorectal cancer and the benefits of screening with particular emphasis on at greater risk individuals, and award grants to health care providers to provide colorectal cancer screening to eligible participants;
- (2) Create eligibility standards for screening participants;
- (3) Provide grants to pay the costs for a colonoscopy for eligible participants;
- (4) Require DOH to submit preliminary and final reports to the Legislature on the expenditure of funds; and
- (5) Appropriates \$250,000 in general funds for each year of fiscal biennium 2017-2019, to be expended by DOH; and
- (6) Provide that the take effect on July 1, 2017 and sunset on June 30, 2020.

Federally Qualified Health Centers (FQHCs) provide desperately needed medical services at the frontlines in rural communities. Long considered champions for creating a more sustainable, integrated, and wellness-oriented system of health, FQHCs provide a more efficient, more effective and more comprehensive system of health.

Testimony on Senate Bill No. 0062

February 6, 2018; 8:30 a.m.

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According to the Centers for Disease Control and Prevention (CDC), colorectal cancer--cancer of the colon or rectum-- is one of the most commonly diagnosed cancers in the United States, and is the second leading cancer killer in the United States. The CDC estimates that if all adults aged 50 or older had regular screening tests for colon cancer, as many as 60% of the deaths from colorectal cancer could be prevented. Risks and benefits of using different screening methods, such as stool-based tests, sigmoidoscopies, and colonoscopies, vary. The US Preventive Service Task Forces recommends that screening begin at age 50 and continue until age 75; however, testing may need to begin earlier or be more frequent if colorectal cancer runs in the family, or if there is a previous diagnosis of inflammatory bowel disease.

HPCA fully and wholeheartedly supports efforts to promote screening and awareness of colorectal cancer in the State of Hawaii. As a member of the Colorectal Cancer Screening Working Group established pursuant to House Concurrent Resolution No. 129 during the Regular Session of 2017, HPCA joins DOH, the American Cancer Society, the American Cancer Society Cancer Action Network, and other community partners in this endeavor.

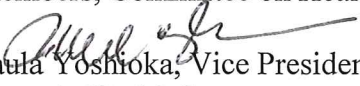
Accordingly, we respectfully request your favorable consideration of this measure.

In advance, thank you for your consideration of our testimony.



THE QUEEN'S HEALTH SYSTEMS

To: The Honorable John M. Mizuno, Chair
The Honorable Bertrand Kobayashi, Vice Chair
Members, Committee on Health and Human Services

From:  Paula Yoshioka, Vice President, Government Relations and External Affairs, The Queen's Health Systems

Date: February 5, 2018

Hrg: House Committee on Health and Human Services Hearing; Tuesday, February 6, 2018 at 8:30 AM in Room 329

Re: **Support for HB 62, Relating to Cancer**

My name is Paula Yoshioka, and I am a Vice President at The Queen's Health Systems (QHS). I would like to express my **support** HB 62, which would establish a colorectal cancer screening and awareness program.

Colon cancer is the second leading cause of cancer-related deaths in our nation. Screening and early detection is key in the prevention of colorectal cancer. Screening can detect pre-cancerous polyps and discover colorectal cancer at an early stage, when treatment is most effective. As a member of the MD Anderson Cancer Network, Queen's is committed to deliver the very best cancer management services and works diligently to advocate for increased early detection within the community.

We urge the legislature to support HB62. Thank you for the opportunity to testify on this measure.

The mission of The Queen's Health Systems is to fulfill the intent of Queen Emma and King Kamehameha IV to provide in perpetuity quality health care services to improve the well-being of Native Hawaiians and all of the people of Hawai'i.



An Independent Licensee of the Blue Cross and Blue Shield Association

February 6, 2018

The Honorable John M. Mizuno, Chair
The Honorable Bertrand Kobayashi, Vice Chair
House Committee on Health and Human Services

Re: HB 62 – Relating to Cancer

Dear Chair Mizuno, Vice Chair Kobayashi, and Committee Members:

The Hawaii Medical Service Association (HMSA) appreciates the opportunity to testify on HB 62, which creates the colorectal cancer screening and awareness pilot program within the department of health and appropriates funds for the program. HMSA appreciates and supports the Committee's efforts to promote and encourage colorectal cancer screenings in conjunction with the National Colorectal Cancer Roundtable's "80% by 2018" initiative.

Thank you for the opportunity to testify in support of HB 62.

Sincerely,

Pono Chong
Vice-President, Government Relations

HB-62

Submitted on: 2/5/2018 9:31:15 AM

Testimony for HHS on 2/6/2018 8:30:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Lea Minton		Support	No

Comments:

I appreciate the move to increase colorectal cancer screening and I also believe that the state should consider developing a hub where colonoscopy results for patients is housed. Just as we have set up the immunization registry. Many people who get colonoscopy's don't remember when they had them or what the result was, and the hospital where they had their colonoscopy done doesn't house the record - it lives with the physician who performed the colonoscopy. Often I have found, as a provider, that patients don't recall who the doctor was or the doctor's office may have closed or the doctor's office doesn't have the record because it was more than 5-7 years ago so it's been put in a box in storage somewhere and they are not willing to retrieve it. Now that we've moved to electronic records the colonoscopy record often comes in as a scanned report and the result is not pulled to a data cell where the data can then be retrieved. A person must physically enter the result. If that is not done then it can be difficult in the future to pull the colonoscopy report as someone will have to dig through the records. This is an inefficient and ineffective way to keep track of important medical screenings.

In consideration of creating a program to improve awareness and access, I ask that the State of Hawaii and Department of Health consider developing a medical screening record system where we can house results even when people move through different providers and health insurance plans. That way when people enter the result of their colonoscopy (or mammogram and pap smear as well for that matter), the data can be pulled and centralized for future retrieval.

Mahalo for your consideration on this important health care topic.