

STATE OF HAWAII DEPARTMENT OF HEALTH

P. O. Box 3378 Honolulu, HI 96801-3378 doh.testimony@doh.hawaii.gov

Testimony in SUPPORT of HCR 118 REQUESTING THE DEPARTMENT OF HEALTH TO CONVENE A WORKING GROUP TO EXAMINE PALLIATIVE CARE SERVICES AND DEVELOP RECOMMENDATIONS TO EXPAND PALLIATIVE CARE SERVICES IN HAWAII.

REP. JOHN M. MIZUNO, CHAIR HOUSE COMMITTEE ON HEALTH AND HUMAN SERVICES Hearing Date: March 21, 2018 Room Number: 329

- 1 Fiscal Implications: N/A.
- 2 **Department Testimony:** The Department of Health supports this resolution and encourages
- 3 greater community conversation on the issue of palliative care.
- 4 **Offered Amendments:** N/A.



Formerly HOSPICE of HILO

1011 Waiānuenue Avenue Hilo, HI, 96720-2019 P: (808) 969-1733 F: (808) 961-7397

care@hawaiicarechoices.org www.hawaiicarechoices.org

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House Committee on Health & Human Services The Honorable John Mizuno, Chair The Honorable Bertrand Kobayashi, Vice Chair

RE: TESTIMONY IN SUPPORT OF HCR118 - RELATING TO PALLIATIVE CARE

Hearing: March 21, 2018 at 8:30 a.m.

Dear Chair Mizuno and Members of the Committee,

My name is Brenda S. Ho, CEO of Hospice of Hilo now doing business under the tradename Hawai'i Care Choices. Our organization has served the palliative, hospice and bereavement needs of the east and south portions of Hawai'i County since 1983.

We are grateful for and are in strong support of the Cancer Action Network's resolution to shine a spotlight on the need for expansion of palliative care services statewide. Studies have shown that, across a range of serious illnesses (cancer, dementia, end-stage renal disease, cardiopulmonary failure), palliative care services improve patients' symptoms and the quality of end of life care, allow patients to avoid hospitalization and to remain safely and adequately cared for at home, lead to better patient and family satisfaction, and significantly reduce prolonged grief and post-traumatic stress disorder among bereaved family members.

We can attest to the power of palliative care through the example of our community-based palliative care program (Kupu Care) which continues to build capacity in large part due to State GIA support (with a current request for GIA funding of \$300,000 for 2018/19 year). In the past 18 months of service, the demand for our program has grown. Data from the second year of service, for Congestive Heart Failure and Cancer patients, showed a 79% overall reduction in ER visits, a 78% overall decrease in hospital admission rates, and a 75% overall decrease in ICU days, when compared to experience before palliative care services. Additionally, our collaboration with East Hawaii Regional Health System to follow patients with complex care needs for 30 days from hospital discharge with the goal of reducing the 30day readmission rate is proving successful.

As the Nation and the state of Hawai'i look at population health, healthcare reform and physician payment reform for high-cost high need individuals – we at Hawai'i Care Choices can confirm that the models and cost-savings found in palliative care are the solutions for the future.

HCR 118 goals to form a workgroup to examine the gaps in coverage for palliative care in Hawaii and to come up with a long-term plan to address these challenges is an essential step to providing more comprehensive care for the communities we serve.

Again, mahalo for the opportunity to express my support for HCR118 relating to Palliative Care.

Respectfully, Brenda S. Ho, MS, RN Chief Executive Officer





March 18, 2018

House Committee on Commerce, Consumer Protection and Health Representative John Mizuno, Chair Rep. Bertrand Kobayashi, Vice Chair

RE: HCR118, RELATING TO PALLIATIVE CARE

Dear Chair Mizuno and other members of the committee,

My name is Jeannette Koijane and I currently serve as the Executive Director of Kōkua Mau, Hawaii's Hospice and Palliative Care Organization. I am writing to express my **STRONG SUPPORT** for HCR118, which would form a palliative care work group.

Kōkua Mau has worked with American Cancer Society Cancer Action Network (ACS-CAN) over the last year on this resolution and we look forward to working together, along with the Department of Health, to convene and carry out the work group. Kōkua Mau is named in the resolution and we are very ready to take on these responsibilities.

We believe that Palliative Care offers tremendous opportunities for people facing serious illness and their loved ones to reduce their unnecessary suffering and find the support and care they need. Palliative care is a team approach that helps the person facing serious illness and their loved ones with a team of professionals to manage the physical, emotional, spiritual and social suffering that they may be facing. Doctors, nurses, social workers, chaplains and other professionals provide an additional level of support that can be provided alongside curative treatments or be the focus of care. Hospice is a kind of palliative care that is offered to people in the last six months of life who have decided to forgo life-prolonging or curative treatments.

Palliative care has grown over the last decade in Hawaii and is now offered in most but not all of our hospitals. In-home palliative care is currently being offered through all of our hospices, primarily because of a Concurrent Care or Supportive Care benefit offered by UHA and HMSA. However these benefits are limited. We need to find ways to offer more palliative care to people in settings outside of the hospital, including long-term care, and this work group will explore how palliative care is currently working and how to expand palliative care offerings.

Kōkua Mau is a network of committed organizations and individuals from across Hawaii. (www.kokuamau.org) Over the past 18 years, Kōkua Mau has brought to the forefront meaningful, thoughtful and sensitive conversations on improving care and support for those with serious illness. We are Hawaii's trusted resource for accurate information on advance care planning as well as hospice and palliative care.



As an organization and network, our goal is to create a community in which these thoughtful, compassionate conversations are widespread. We are fostering a movement to change social norms in Hawaii regarding conversations and decisions around serious illness and end-of-life care, and to provide all individuals and communities with greater choice and control regarding their quality of life. We do not focus on the end of life, but rather the quality of life. Palliative and Hospice Care are important parts of the continuum of care and we see the need to increase how and where that care is offered.

I urge you to support SCR/HCR 118. I am happy to answer any questions. Thank you for your consideration of my testimony.

Mahalo,

Jeannette Koijane, MPH

Executive Director



American Cancer Society Cancer Action Network 2370 Nu`uanu Avenue Honolulu, Hawai`i 96817 808.432.9149 www.acscan.org

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

HCR 118 – REQUESTING THE DEPARTMENT OF HEALTH TO CONVENE A WORKING GROUP TO EXAMINE PALLIATIVE CARE SERVICES AND DEVELOP RECOMMENDATIONS TO EXPAND PALLIATIVE CARE SERVICES IN HAWAII.

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

Thank you for the opportunity to provide testimony in support of HCR 118, which convenes a working group to examine specific actions to expand palliative care in the State.

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.

Palliative care is specialized medical care for people with serious illness. This type of care is focused on providing patients with relief from the symptoms, pain and stress of a serious illness - from point of diagnosis onward. The goal is to improve quality of life for both the patient and the family.

HCR 118 is a collaboration between ACS CAN and Kokua Mau, Hawaii's state wide palliative care and hospice organization. It is based on model legislation created by the Centers to Advance Palliative Care to establish palliative care advisory councils in each state to make recommendations and serve as a resource to evaluate actions to increase palliative care. The goal of HCR 118 is to provide the legislature with recommendations to advance palliative care specific to Hawaii and our unique and diverse communities.

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



ROMAN CATHOLIC CHURCH IN THE STATE OF HAWAII



Hawaii Catholic Conference The Public Policy Voice of the Roman Catholic Church in the State of Hawaii

Submitted Electronically: March 20, 2018

TO: House Committee on Health & Human Services

Rep. John Mizuno, Chair

Rep. Bertrand Kobayashi, Vice Chair

HEARING: Wednesday, March 21, 2018 @ 8:30 a.m.

SUBMITTED BY: Walter Yoshimitsu, Executive Director

POSITION: SUPPORT FOR HCR 118

The Hawaii Catholic Conference is the official public policy voice for the Roman Catholic Church in the State of Hawaii. The above-referenced bill would establish a death with dignity act under which a terminally ill adult resident may obtain a prescription for a lethal dose to end the patient's life. The Hawaii Catholic Conference **supports** this resolution.

SCR118 requests the Department of Health to convene a working group to examine palliative care services and develop recommendations to expand palliative care services in Hawai'i. We support this because Catholic teaching and practice are based on recognizing the dignity of each person, the gift of human life, the social nature and solidarity of all humankind, and the authentic common good. The Hawaii Catholic Conference believes strongly that legislation should strengthen palliative care and other health care services for the chronically and terminally ill so we support any and all efforts that do this.

Incredible progress has been made in palliative care, but there is a big gap in the training of healthcare professionals, as well as in access. We need to expand palliative care in Hawai'i, and a working group can recommend the best policies to the full Legislature in a time of limited resources.

Palliative care is not just for the dying or those in hospice; it focuses on pain and symptom management for people at all stages of life. Attentive care for the seriously ill and dying is an essential part of the Church's mission. From the beginning of the Church, service to the poor, the hungry, the sick, and the dying has been a mark of the many in the community, and Hawai'i has led the way in many aspects.

Through health care professionals and the care and compassion of all people of goodwill, we will continue to lovingly attend, accompany and care for the terminally ill on their final journey.

Mahalo for the opportunity to testify.



ONLINE SUBMITTAL Submitted on March 20, 2018

HEARING DATE: March 21, 2018

TO: COMMITTEE ON HEALTH

Rep. John Mizuno, Chair

Rep. Bertrand Kobayashi, Vice Chair

FROM: Eva Andrade, President

RE: Strong Support for HCR 118

Hawaii Family Forum is a non-profit, pro-family education organization committed to preserving and strengthening life, family and religious freedom in Hawaii. This year we celebrate 20 years of serving the faith-based community! We support this resolution that requests that the Department of Health convene a working group to examine palliative care services and develop recommendations to expand palliative care services in Hawai'i.

The National Hospice and Palliative Care Organization describes palliative care as "patient and family-centered care that optimizes quality of life by anticipating, preventing, and treating suffering. Palliative care throughout the continuum of illness involves addressing physical, intellectual, emotional, social, and spiritual needs to facilitate patient autonomy, access to information and choices." Palliative care focuses on treating the **person**, as well as the disease, and helps provide support and inclusion for family members.

Palliative care improves quality of life and survival, and creates care efficiencies that curb costs. Although we believe that Hawai'i leads the way in many aspects because of the hard work of groups like Hospice Hawai'i, St. Francis Hospice, Kokua Mau, and others, there are often barriers to getting patients with serious illness access to palliative care. These include:

- Lack of knowledge and understanding about palliative care;
- Variability in access based on geographic location, physician training, and services offered;
- Inadequate workforce to meet the needs of patients and families;
- Insufficient research to guide and measure quality of care.

SCR 118 convenes a working group to make recommendations to examine the services provided in Hawai'i and to develop recommendations to expand service. This effort will ensure that comprehensive and accurate information about palliative care is available to the wider public, and that benefits the entire community. By passing this resolution, Hawai'i legislators will be taking a significant step towards helping our sickest patients get access to the best care for them and their families.

Let's work together to make sure those with the most serious illnesses in our community know we're not giving up on them.

HCR-118 Submitted on: 3/21/2018 12:01:55 AM

Testimony for HHS on 3/21/2018 8:30:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Melodie Aduja	Oahu County Committee on Legislative Priorities of the Democratic Party of Hawai'i	Support	No

Comments:

RE: HCR 118 REQUESTING THE DEPARTMENT OF HEALTH TO CONVENE A WORKING GROUP TO EXAMINE PALLIATIVE CARE SERVICES AND DEVELOP RECOMMENDATIONS TO EXPAND PALLIATIVE CARE SERVICES IN HAWAII

Aloha Chair Mizuno and Members of the Committee,

My name is Molly Pierce, and I serve as a volunteer for the American Cancer Society, Cancer Action Network. I would like to submit my testimony in support of HCR 118 REQUESTING THE DEPARTMENT OF HEALTH TO CONVENE A WORKING GROUP TO EXAMINE PALLIATIVE CARE SERVICES AND DEVELOP RECOMMENDATIONS TO EXPAND PALLIATIVE CARE SERVICES IN HAWAII. This resolution would be a great first step in addressing the current shortfalls in treating cancer patients and others suffering from chronic illness not only for their immediate condition but also treating the symptoms that arise as a result.

Palliative care involves treating the whole patient, not just their disease. Ensuring that someone's mental health is as closely monitored as their physical health or treating pain conditions that arise from the treatment of chronic illness can make all the difference in quality of life. It is not solely reserved for those who are at the end of their lives. Palliative care can improve health outcomes for all patients fighting life threatening or chronic illnesses.

Having seen many family members go through cancer treatments, I can attest that those who were fortunate enough to have doctors who fought for them to receive palliative care were far better prepared to fight their cancer battle. Treating the cancer alone didn't treat the pain, the shortness of breath, or the fragility of mental health that come along with facing a life threatening illness. Access to holistic palliative care helped give my mother the strength and piece of mind I truly believe allowed her to survive. Treating her lack of appetite, helping her regain physical strength, and caring for her mental state instead of just focusing on killing her cancer helped give her the motivation to fight.

Please pass HCR 118 to create a palliative care working group. Give Hawaii the chance to improve quality of life for our loved ones fighting life threatening or chronic illnesses.

Mahalo, Molly Pierce

RE: HCR 118 REQUESTING THE DEPARTMENT OF HEALTH TO CONVENE A WORKING GROUP TO EXAMINE PALLIATIVE CARE SERVICES AND DEVELOP RECOMMENDATIONS TO EXPAND PALLIATIVE CARE SERVICES IN HAWAII

Aloha Chair Mizuno and Members of the Committee,

My name is Alberto Rodriguez, and I am writing to express my support for HCR118, which would form a palliative care work group.

I have witnessed a loved one's fight against cancer and I want to make sure that others that go through this fight are able to access the holistic care provided by palliative care.

My aunty passed away from cancer and lacked access to palliative care services that would have allowed for a higher level of care for both herself and our family. I now want to make sure that we do everything we can to promote awareness about palliative care services in our state.

In 2014, my aunt was diagnosed with kidney cancer. At the time, she wasn't sure where to turn to and who we could talk to about the services and care as her disease progressed. We often were forced to travel two hours to see a doctor. The appointment was on a first-come/first-served basis. Long lines outside the doctor's office starting at 4 o'clock in the morning, waiting for the secretary to open the door at 8 o'clock and waiting for the doctor to arrive at 12 o'clock or later.

My aunt's health deteriorated quickly and we were a prisoner of the process and health access. She passed away in less than 6 months after diagnosis.

HCR118 would form a workgroup that would examine the gaps in coverage for palliative care in Hawaii and would aim to come up with a long-term plan to address these challenges. It would help to focus palliative care coverage on chronic diseases and with that, incorporate new stakeholders on this important issue.

I urge you to support HCR118. Thank you for the consideration of my testimony.

Mahalo, Alberto Rodriguez

RE: HCR 118 REQUESTING THE DEPARTMENT OF HEALTH TO CONVENE A WORKING GROUP TO EXAMINE PALLIATIVE CARE SERVICES AND DEVELOP RECOMMENDATIONS TO EXPAND PALLIATIVE CARE SERVICES IN HAWAII

Aloha Chair Mizuno and Members of the Committee,

My name is Chandra Quinlan, and I am writing to express my support for HCR 118, which would form a palliative care work group.

As a breast cancer survivor, I have come to know and love so many fellow survivors who will greatly benefit from its passage.

As a Stage I Breast Cancer Survivor I consider myself very fortunate, but through my journey I have come to know and love many fellow survivors who are faced with the challenges of advanced stages of cancer oftentimes combined with other illnesses - diabetes, arthritis, kidney disease, etc. Many require more home health care and sadly palliative care treatment is no longer an option.

I recall a phone conversation a few months ago I had with "Rose" who's metastatic breast cancer had spread to her brain. After a horrific experience with gamma-radiation, she chose to end all treatment and opted for in home hospice.

HCR 118 would form a workgroup that would examine the gaps in coverage for palliative care in Hawaii and would aim to come up with a long-term plan to address these challenges. It would help to focus palliative care coverage on chronic diseases such as cancer and with that, incorporate new stakeholders on this important issue.

I urge you to support HCR 118. Thank you for the consideration of my testimony.

Mahalo, Chandra Quinlan

RE: HCR 118 REQUESTING THE DEPARTMENT OF HEALTH TO CONVENE A WORKING GROUP TO EXAMINE PALLIATIVE CARE SERVICES AND DEVELOP RECOMMENDATIONS TO EXPAND PALLIATIVE CARE SERVICES IN HAWAII

Aloha Chair Mizuno and Members of the Committee,

My name is Chelsey Stewart, and I am writing to express my support for HCR 118, which would form a palliative care work group.

I have witnessed a loved one's fight against Alzheimer's and I want to make sure that others that go through this fight are able to access the holistic care.

Although I am grateful for the twelve years that I had with my great-grandfather, I did not get the chance to "really" know him. For as long as I remember, he was suffering from Alzheimer's and always had to be reminded who I was each time I saw him.

During the last few years of his life, I watched my family work around the clock to provide the care & support he deserved. The emotional toll grew so much and everyone suffered a great amount of stress because he needed 24 hour supervision. My family did their best to make sure he was comfortable but the price my relatives paid included extreme emotional, mental, & financial hardships.

HCR 118 would form a workgroup that would examine the gaps in coverage for palliative care in Hawaii and would aim to come up with a long-term plan to address these challenges. It would help to focus palliative care coverage on chronic diseases such as Alzheimer's and with that, incorporate new stakeholders on this important issue.

I urge you to support HCR 118. Thank you for the consideration of my testimony.

Mahalo, Chelsey Stewart

RE: HCR 118 REQUESTING THE DEPARTMENT OF HEALTH TO CONVENE A WORKING GROUP TO EXAMINE PALLIATIVE CARE SERVICES AND DEVELOP RECOMMENDATIONS TO EXPAND PALLIATIVE CARE SERVICES IN HAWAII

Aloha Chair Mizuno and Members of the Committee,

My name is Dawn Eicher, and I am writing to express my support for HCR 118, which would form a palliative care work group.

Palliative care is crucial to the quality of life during the most difficult times of a person's life. Many don't understand how this is a critical and necessary service and I hope to explain just how important this is for a large group of constituents and family members.

The importance of palliative care has touched me in several ways. The first would be my own personal experience as a Stage IV cancer survivor. I was diagnosed at the early age of 36 with metastatic colon cancer. I suffered through years of grueling treatments and utilized the services of palliative care during the worst days of my life. Palliative care is not just utilized by the terminal patients, but also those going through temporary pain and suffering.

I have also had many friends with cancer affected by extreme pain and mental anguish during their last months, and these services were crucial to making their final moments comfortable and so much easier.

We need the support to help find funding for these services. Just as Hospice helps with end of life transition, Palliative care can assist those with transitioning towards health and recovery or towards the end of options/treatment phase before hospice enters the picture. There is a huge gap in this area.

HCR 118 would form a workgroup that would examine the gaps in coverage for palliative care in Hawaii and would aim to come up with a long-term plan to address these challenges. It would help to focus palliative care coverage on chronic diseases and with that, incorporate new stakeholders on this important issue.

I urge you to support HCR 118. Thank you for the consideration of my testimony.

Mahalo, Dawn Eicher

RE: HCR 118 REQUESTING THE DEPARTMENT OF HEALTH TO CONVENE A WORKING GROUP TO EXAMINE PALLIATIVE CARE SERVICES AND DEVELOP RECOMMENDATIONS TO EXPAND PALLIATIVE CARE SERVICES IN HAWAII

Aloha Chair Mizuno and Members of the Committee,

My name is Gay Okada, and I am writing to express my support for HCR 118, which would form a palliative care work group.

Living in Kona, on the island of Hawaii, health care and palliative care is at the none existence level in some areas.

To form a palliative care work group would help my friends with rheumatoid arthritis and bone cancer. One friend with rheumatoid arthritis (severe) had moved to Kentucky to live with her brother and passed away already. We desperately need your help with this situation.

HCR 118would form a workgroup that would examine the gaps in coverage for palliative care in Hawaii and would aim to come up with a long-term plan to address these challenges. It would help to focus palliative care coverage on chronic diseases and with that, incorporate new stakeholders on this important issue.

I urge you to support HCR 118. Thank you for the consideration of my testimony.

Mahalo, Gay Okada

RE: HCR118, REQUESTING THE DEPARTMENT OF HEALTH TO CONVENE A WORKING GROUP TO EXAMINE PALLIATIVE CARE SERVICES AND DEVELOP RECOMMENDATIONS TO EXPAND PALLIATIVE CARE SERVICES IN HAWAII.

Dear Chair Mizuno, Vice-Chair Kobayashi and Other Members of this Committee,

My name is Jenny Hausler, and I am writing to express my support for HCR118, which would form a palliative care work group.

My sister Lucy was diagnosed with Stage 4 breast cancer at 58 and passed away at age 63. During the course of her disease she suffered much pain and stress and at the end of her life, especially fear. Had coordinated palliative care been available at the time, her cancer journey and passing would have been eased so much.

Her one wish would be that no one would ever have to go through the pain and suffering she did. This is one of the main reasons I support HCR118.

HCR118 would form a workgroup that would examine the gaps in coverage for palliative care in Hawaii and would aim to come up with a long-term plan to address these challenges. It would help to focus palliative care coverage on chronic diseases such as cancer and Alzheimer's and with that, incorporate new stakeholders on this important issue.

I urge you to support HCR118. Thank you for the consideration of my testimony.

Mahalo, Jenny Hausler

RE: HCR118, REQUESTING THE DEPARTMENT OF HEALTH TO CONVENE A WORKING GROUP TO EXAMINE PALLIATIVE CARE SERVICES AND DEVELOP RECOMMENDATIONS TO EXPAND PALLIATIVE CARE SERVICES IN HAWAII.

Dear Chair Mizuno, Vice-Chair Kobayashi and Other Members of this Committee,

My name is Karen Segi, and I am writing to express my support for HCR118, which would form a palliative care work group.

I am writing to express my support for HCR118 I believe all cancer patients should have access to palliative care and this work group will lead to effective solutions for accomplishing this.

I am a single mom working and taking care of my 5 year old child when I was diagnosed with thymus cancer in 2016. My body shut down very quickly and I was hospitalized and could no longer take care of myself or my child. I am very grateful that my family was able to come from out of state and country to come to my aid but it put an enormous strain on them.

HCR118 would form a workgroup that would examine the gaps in coverage for palliative care in Hawaii and would aim to come up with a long-term plan to address these challenges. It would help to focus palliative care coverage on chronic diseases—such as Alzheimer's and with that, incorporate new stakeholders on this important issue.

I urge you to support HCR118. Thank you for the consideration of my testimony.

Mahalo, Karen Segi

RE: HCR118, REQUESTING THE DEPARTMENT OF HEALTH TO CONVENE A WORKING GROUP TO EXAMINE PALLIATIVE CARE SERVICES AND DEVELOP RECOMMENDATIONS TO EXPAND PALLIATIVE CARE SERVICES IN HAWAII.

Dear Chair Mizuno, Vice-Chair Kobayashi and Other Members of this Committee,

My name is Katie Post, and I am writing to express my support for HCR118, which would form a palliative care work group. As a cancer survivor, I believe that all cancer patients should have access to palliative care.

In April, 2013 I was diagnosed with Breast Cancer. I went though all of the treatment, scared, & am now in remission. When I moved to Hawaii to attend Pharmacy School, I became part of my local cancer support group, Malama Ka Pili Pa'a. In my support group I have made many friends, and seen many people suffer from their cancer. One of my good friends, Paula, has unfortunately passed away. Paula's treatment was progressing well, but then hit a snag, was stopped and never resumed, so her cancer progressed.

Paula is now in Hospice care living out the rest of her days. Paula was able to use palliative care before entering hospice, which helped immensely. Palliative care should be available and more easy to access. Watching my friend die is very painful. She is not the only one going through this. Please consider this when deciding whether to support this bill.

HCR118 would form a workgroup that would examine the gaps in coverage for palliative care in Hawaii and would aim to come up with a long-term plan to address these challenges. It would help to focus palliative care coverage on chronic diseases and with that, incorporate new stakeholders on this important issue.

I urge you to support HCR118. Thank you for the consideration of my testimony.

Mahalo, Katie Post

RE: HCR118, REQUESTING THE DEPARTMENT OF HEALTH TO CONVENE A WORKING GROUP TO EXAMINE PALLIATIVE CARE SERVICES AND DEVELOP RECOMMENDATIONS TO EXPAND PALLIATIVE CARE SERVICES IN HAWAII.

Dear Chair Mizuno, Vice-Chair Kobayashi and Other Members of this Committee,

I have witnessed many loved ones fight against chronic diseases like cancer and diabetes and I want to make sure that others who go through this fight are able to access the holistic care provided by palliative care.

Both of my great-grandmothers died of a chronic disease. One of Alzheimers, and the other of cancer. Their names were violet & Louise. During one of the most trying times for the my family, I believed that we lacked palliative care opportunities, which could have greatly helped us. That is why, today, I want to promote awareness about palliative care services in Hawaii.

When both of my great-grandmothers got diagnosed, although it was at separate times, the doctors came to the consensus: That there wasn't much we could do. Not having dealt with instances like this before, we were left clueless. Luckily, we had each other, but that is all we had, and we could have greatly benefited from palliative care & all the wonderful services they have to offer.

As one could assume, their deaths came fast and our family had trouble adjusting. At such a vulnerable time for any family, it is essential to provide/offer services to our community & their families. HCR118 would form a workgroup that would examine the gaps in coverage for palliative care in Hawaii and would aim to come up with a long-term plan to address these challenges. It would help to focus palliative care coverage on chronic diseases and with that, incorporate new stakeholders on this important issue.

I urge you to support HCR118. Thank you for the consideration of my testimony.

Mahalo, Kaylee Decambra

RE: HCR118, REQUESTING THE DEPARTMENT OF HEALTH TO CONVENE A WORKING GROUP TO EXAMINE PALLIATIVE CARE SERVICES AND DEVELOP RECOMMENDATIONS TO EXPAND PALLIATIVE CARE SERVICES IN HAWAII.

Dear Chair Mizuno, Vice-Chair Kobayashi and Other Members of this Committee,

My name is Lauren Finley, and I am writing to express my support for HCR118, which would form a palliative care work group.

I stood by my grandmother during her fight against colon cancer and feel adamantly that no one else in this fight should have to go through it without holistic care provided by palliative care.

The summer before I moved back to Hawaii for college in 2011, I stayed with my grandmother in Honolulu. She had been fighting colon cancer for over 5 years at that point and her pain was too much to manage for her to leave the house or even move from the bed to her chair. She had been a Punahou art teacher for over 40 years and fought tooth and nail not to retire; it was only the last year of her life that she finally had to say goodbye to the kids because she couldn't physically be there for them.

My dad, her son, died from a stroke in 2002. It had always been really hard on her --no parent should have to bury their child. Once she lost her art students, her
loneliness overwhelmed her. I cherish the summer I got to spend with her, as she died
4 months later full of pain, a few days after she was admitted into hospice. I think of
my last phone calls with her and how miserable she was and kept thinking that there
has be a better way for her to cope with this.

HCR118 would form a workgroup that would examine the gaps in coverage for palliative care in Hawaii and would aim to come up with a long-term plan to address these challenges. It would help to focus palliative care coverage on chronic diseases and with that, incorporate new stakeholders on this important issue.

I urge you to support HCR118. Thank you for the consideration of my testimony.

Mahalo, Lauren Finley

RE: HCR118, REQUESTING THE DEPARTMENT OF HEALTH TO CONVENE A WORKING GROUP TO EXAMINE PALLIATIVE CARE SERVICES AND DEVELOP RECOMMENDATIONS TO EXPAND PALLIATIVE CARE SERVICES IN HAWAII.

Dear Chair Mizuno, Vice-Chair Kobayashi and Other Members of this Committee,

My name is Logan Kostur, and I am writing to express my support for HCR118, which would form a palliative care work group. As a cancer provider this bill represents a clinically meaningful step for patients as they move through the final stage of their life.

As a healthcare provider working on the Big Island I have personally witnessed the impact that palliative care has on patients and their families. Patients who can afford things like hospice care, specialty medications, or nursing visits place much less burden on their families and pass on with much more dignity than their counterparts who cannot afford what is now considered specialized care.

Having a palliative care program in Hawaii truly would set in stone it as the Aloha state, where families and patients are treated with dignity and respect.

HCR118 would form a workgroup that would examine the gaps in coverage for palliative care in Hawaii and would aim to come up with a long-term plan to address these challenges. It would help to focus palliative care coverage on chronic diseases and with that, incorporate new stakeholders on this important issue.

I urge you to support HCR118. Thank you for the consideration of my testimony.

Mahalo, Logan Kostur

RE: HCR118, REQUESTING THE DEPARTMENT OF HEALTH TO CONVENE A WORKING GROUP TO EXAMINE PALLIATIVE CARE SERVICES AND DEVELOP RECOMMENDATIONS TO EXPAND PALLIATIVE CARE SERVICES IN HAWAII.

Dear Chair Mizuno, Vice-Chair Kobayashi and Other Members of this Committee,

My name is Maria Beralas, and I am writing to express my support for HCR118, which would form a palliative care work group.

I have witnessed many of my family members that have lost their battle fighting cancer. While fighting the care & treatment have not made it the easiest as well as encouragement to continue fighting. I feel that palliative care services can alleviate the rigorous fight as well as provide encouragement to those fighting such a disease.

The past year I have lost 2 members fighting colon & breast cancer. Just recently my mother-in-law was diagnosed with Stage 2 breast cancer. My aunty who I lost on New Years Day went from Stage 1 to Stage 4 in the span of 6 months. I think more care or specifically palliative care could have detected such a jump and possibly prevented the cancer spreading so vigorously. Being with her and being notified of having a couple weeks left was emotionally traumatizing as well as heart breaking.

The emotional instability can be provided by the care from the family but also can be obtain through services from the hospital. I felt that this was not really provided as she was just another patient dying or losing the battle from cancer. I could tell that she was in a lot of pain and medication was not much of alleviating such pain. Therefore, I feel that a push in providing substantial palliative care would provide anyone going through sickness an ease in emotion and physical stability.

HCR118 would form a workgroup that would examine the gaps in coverage for palliative care in Hawaii and would aim to come up with a long-term plan to address these challenges. It would help to focus palliative care coverage on chronic diseases and with that, incorporate new stakeholders on this important issue.

I urge you to support HCR118. Thank you for the consideration of my testimony.

Mahalo, Maria Carmela Beralas

RE: HCR118, REQUESTING THE DEPARTMENT OF HEALTH TO CONVENE A WORKING GROUP TO EXAMINE PALLIATIVE CARE SERVICES AND DEVELOP RECOMMENDATIONS TO EXPAND PALLIATIVE CARE SERVICES IN HAWAII.

Dear Chair Mizuno, Vice-Chair Kobayashi and Other Members of this Committee,

My name is Megan Tabata, and I am writing to express my support for HCR118, which would form a palliative care work group.

I have witnessed my grandmother's fight against kidney cancer and I want to make sure others who go through chronic diseases have access to palliative care in our community.

Throughout my childhood my maternal grandmother was my best friend. When she was diagnosed with kidney cancer, my mother became her primary caregiver having to take off of work and adjust her own lifestyle to care for her mother. I watched both of my strong female role models hurt with exhaustion and pain.

My grandmother eventually passed away in 2008. However, my mother still suffered the mental, physical, and emotional strain on top of losing her mother to cancer. I wish our family could have had a person or group to help us coordinate the care for my grandmother.

HCR118 would form a workgroup that would examine the gaps in coverage for palliative care in Hawaii and would aim to come up with a long-term plan to address these challenges. It would help to focus palliative care coverage on chronic diseases and with that, incorporate new stakeholders on this important issue.

I urge you to support HCR118. Thank you for the consideration of my testimony.

Mahalo, Megan Tabata

RE: HCR118, REQUESTING THE DEPARTMENT OF HEALTH TO CONVENE A WORKING GROUP TO EXAMINE PALLIATIVE CARE SERVICES AND DEVELOP RECOMMENDATIONS TO EXPAND PALLIATIVE CARE SERVICES IN HAWAII.

Dear Chair Mizuno, Vice-Chair Kobayashi and Other Members of this Committee,

My name is Misty Figuera, and I am writing to express my support for HCR118, which would form a palliative care work group.

As a young twenty-one-year-old student who has a chronic disease and has been caregiver for the father figure in my life who has cancer, I see the benefits of Palliative care clearly.

Life doesn't stop when cancer and chronic illness comes knocking on the door. Bills still need to be paid, children still have volleyball games that need to be attended, and term papers still need to be written by a due date. Life is stressful in the first place – being sick only makes it worse. For those of us with busy schedules struggling to make it financially, being sick is just not the icing of the top of stress made cake; Suddenly, your schedule becomes filled by trying to find the write doctors, paying to see the wrong ones, and being exhausted physically and mentally. This is why palliative care is so important.

Palliative care is about improving life for cancer patients and those who live with chronic illnesses. When you are given the news that you are very sick, your life changes. Life becomes harder – for you AND especially your loved ones – after all, they are the ones who watch over you and take care of you. It becomes easy to give up to want to die, because that would be easier.

Palliative care is not only needed and extremely beneficial, but it is NECESSARY. It makes life easier, better, and makes it enjoyable again. What makes Hawaii a great state is the aloha we share – through our daily interactions, through giving our time, and through palliative care. HCR118 would form a workgroup that would examine the gaps in coverage for palliative care in Hawaii and would aim to come up with a long-term plan to address these challenges. It would help to focus palliative care coverage on chronic diseases and with that, incorporate new stakeholders on this important issue.

I urge you to support HCR118. Thank you for the consideration of my testimony.

Mahalo, Misty Figuera

RE: HCR118, REQUESTING THE DEPARTMENT OF HEALTH TO CONVENE A WORKING GROUP TO EXAMINE PALLIATIVE CARE SERVICES AND DEVELOP RECOMMENDATIONS TO EXPAND PALLIATIVE CARE SERVICES IN HAWAII.

Dear Chair Mizuno, Vice-Chair Kobayashi and Other Members of this Committee,

My name is Uri Martos, and I am writing to express my support for HCR118, which would form a palliative care work group.

As a recent breast cancer survivor, I can tell you first hand how important palliative care is. HCR118 will make palliative care more available to people like me who need this special care to help them through their health conditions.

Currently there are no palliative care groups who bring the industry together to work on issues & trainings concerning palliative care.

Palliative care was essential to my success in completing treatment with a more positive state of mind. The special care that I received made such a difference and I want all cancer & those suffering chronic illnesses to also have this special care.

Please support HCR118 and help others in our community receive this same care. HCR118 would form a workgroup that would examine the gaps in coverage for palliative care in Hawaii and would aim to come up with a long-term plan to address these challenges. It would help to focus palliative care coverage on chronic diseases and with that, incorporate new stakeholders on this important issue.

I urge you to support HCR118. Thank you for the consideration of my testimony.

Mahalo, Uri Martos

RE: HCR118, REQUESTING THE DEPARTMENT OF HEALTH TO CONVENE A WORKING GROUP TO EXAMINE PALLIATIVE CARE SERVICES AND DEVELOP RECOMMENDATIONS TO EXPAND PALLIATIVE CARE SERVICES IN HAWAII.

Dear Chair Mizuno, Vice-Chair Kobayashi and Other Members of this Committee,

My name is Valerie Toro, and I am writing to express my support for HCR118, which would form a palliative care work group.

I have personally witnessed loved ones and close friends battle with cancer and I am hoping for more awareness and assistance to help improve the quality of life for patients to allow them to focus on reliving (?) the path, stress and symptoms that may lead to other chronic diseases such as chronic respiratory disease, diabetes, kidney failure, etc.

My father was diagnosed with leiomyosacoma almost 30 years ago. This was the first time I ever was introduced to cancer. Watching his health fail and at the same time, trying to act as if he was fine, was very difficult. My father always raised us to be part of the solution.

HCR118 would form a workgroup that would examine the gaps in coverage for palliative care in Hawaii and would aim to come up with a long-term plan to address these challenges. It would help to focus palliative care coverage on chronic diseases such as Alzheimer's and with that, incorporate new stakeholders on this important issue.

I urge you to support HCR118. Thank you for the consideration of my testimony.

Mahalo, Valerie Toro House Committee on Health and Human Services Representative John Mizuno, Chair Representative Bert Kobayashi, Vice-Chair

FROM: Gary Tanimitsu

RE: HCR 118, RELATING TO PALLIATIVE CARE

Dear Chair Mizuno, Vice Chair Kobayashi and other members of the committee,

My name is Gary Tanimitsu, and I am writing to express my support for HCR 118. I believe this bill would lessen a patient's pain and suffering, especially for those who are terminally ill. It would also reduce the stress on the patient's family knowing that their loved one's comfort and pain management is a priority for the medical staff.

It would've helped my uncle, my father's oldest brother, who in the 1980's and 1990's successfully lived with cancer for many years. When he got older he eventually needed to be hospitalized and languished in Queen's Medical Center, suffering painfully every day. When my father and I went to visit him, he spoke to my father and said "Shinitai", which is Japanese for "I want to die."

As soon a bed opened up at a Skilled Nursing Facility, he was transferred to Kahuku Hospital where they had five (5) long term care beds. When I last visited him, he was not conscious and remained that way until he finally and mercifully passed away.

HCR 118 would have introduced compassion and patient comfort into my uncle's experience. As it was, it seemed that the only focus and concern was for my uncle's physical needs. At best, this kept his body alive but completely ignored his emotional and spiritual needs as he drifted closer and closer to his eventual transition.

There is also a personal stake in this for me. I'm a Boomer, a member of the largest demographic group in the United States. I'm no longer the cocky, invincible young man who thought he would live forever. I'm older now and facing my mortality with a sober realization that I, too, could have an experience similar to that of my uncle.

HCR 118 is a step in the right direction for many reasons. Death is a universal experience. We are all going to die. Since no one gets out alive, let's see what we can do to make it less scary and painful. We all deserve to have our need for a dignified and respectful transition addressed.

Thank you, Gary Tanimitsu