

HAWAII HEALTH SYSTEMS
C O R P O R A T I O N

"Quality Healthcare For All"

House Committee on Health
Representative John M. Mizuno, Chair
Representative Bertrand Kobayashi, Vice Chair

March 19, 2019
Conference Room 329
10:00 a.m.
Hawaii State Capitol

Testimony Supporting Senate Bill 911, SD1
Relating to Health
Appropriates funds to improve health care services related to
cardiac care at Hilo Medical Center.

Linda Rosen, M.D., M.P.H.
Chief Executive Officer
Hawaii Health Systems Corporation

On behalf of the Hawaii Health System Corporation (HHSC) Corporate Board of Directors, we are in **strong support** of SB 911, SD1.

This measure seeks assistance with costs for Hilo Medical Center (HMC) to provide interventional cardiology services 24/7. As an emergency physician, I can assure you that having this capability at HMC will be life-saving for some and prevent disability for many more. This is because the treatment that will be available, intervention by a cardiologist to open a blocked blood vessel that is starving the heart of oxygen, can **stop** a heart attack as it is happening. With a team of trained personnel on-call 24/7 they can respond in minutes, in some cases even before the patient reaches the hospital, because ambulance paramedics can transmit abnormal EKGs to activate them.

Other therapies for heart attacks are available at HMC and transport to Oahu does occur, it is just that the therapy that stops the damage quickest is currently not available. Every minute literally counts in terms of survival or how the heart functions afterwards. Treated soon enough, the patient may return to normal function; treated incompletely or too late, means death or living with the disability of a damaged, poorly functioning heart.

Seven different hospitals on Oahu provide this service. The access to life-saving cardiac interventions that Oahu residents enjoy can be cost-effectively delivered at larger neighbor island acute care hospitals. Maui Memorial Medical Center has successfully provided this service to their community and HMC can do so as well. Hawai'i Island has the population size, and Hilo Medical Center has the intensive hospital support services and basic infrastructure to successfully deliver emergency cardiac interventions safely and cost effectively. The Legislature's assistance with funds to build the program will allow HMC to provide this service to their community in a sustainable fashion in the future.

Thank you for the opportunity to testify.

HAWAII HEALTH SYSTEMS CORPORATION

COMMITTEE ON WAYS AND MEANS
Senator Donovan M. Dela Cruz, Chair
Senator Gilbert S.C. Keith-Agaran, Vice Chair

NOTICE OF DECISION MAKING

DATE: Tuesday, February 19, 2019
TIME: 9:30 AM
PLACE: Conference Room 211
State Capitol
415 South Beretania Street

Testimony in Support of SB 911
RELATING TO THE HAWAII.

Appropriates funds to improve health care services related to cardiac care at Hilo Medical Center.

(Name/Title) Terry Larson, Executive Assistant to the East Hawai'i Regional Board

Thank you for the opportunity to provide testimony in **support of SB 911** that appropriates funds to improve health care services related to cardiac care at Hilo Medical Center.

This funding supports Hilo Medical Center's efforts to provide interventional cardiac care for East Hawaii and potentially for all of Hawaii Island. The procedure involved in this advanced level of cardiac care stops heart attacks in progress and reduces long term cardiac disability. The American College of Cardiology recommends interventional cardiac care as a best practice for treating heart attacks in rural areas like Hawaii Island.

Hilo Medical Center is well positioned to provide interventional cardiac care as it already has available cardiac imaging equipment and software, as well as a cardiology clinic that has space for three cardiologists. The hospital's cardiology program is on track to meeting its goal by the end of 2019 to provide interventional cardiology that will save lives and improve the quality of life for cardiac patients. The funding received in the 2018 legislative session was very much appreciated as it was crucial in the hospital's success in recruiting interventional cardiologists. Funding in this second phase is essential for Hilo Medical Center to continue the momentum in advancing heart attack care.

Again, Mahalo for the opportunity to express my **support for SB 911** to improve cardiac care at Hilo Medical Center.

SB-911-SD-1

Submitted on: 3/16/2019 3:23:22 PM

Testimony for HLT on 3/19/2019 10:00:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Elena Cabatu	East Hawaii Region of Hawaii Health Systems Corporation	Support	Yes

Comments:

Thank you for the opportunity to provide testimony in **support of SB 911 SD 1** that appropriates funds to improve health care services related to cardiac care at Hilo Medical Center.

This funding supports Hilo Medical Center's efforts to provide interventional cardiac care for East Hawaii and potentially for all of Hawaii Island. The procedure involved in this advanced level of cardiac care stops heart attacks in progress and reduces long term cardiac disability. The American College of Cardiology recommends interventional cardiac care as a best practice for treating heart attacks in rural areas like Hawaii Island.

Hilo Medical Center is well positioned to provide interventional cardiac care as it already has available cardiac imaging equipment and software, as well as a cardiology clinic that has space for three cardiologists. The hospital's cardiology program is on track to meeting its goal by the end of 2019 to provide interventional cardiology that will save lives and improve the quality of life for cardiac patients. The funding received in the 2018 legislative session was very much appreciated as it was crucial in the hospital's success in recruiting interventional cardiologists. Funding in this second phase is essential for Hilo Medical Center to continue the momentum in advancing heart attack care.

Again, mahalo for the opportunity to express our **support for SB 911 SD1** to improve cardiac care at Hilo Medical Center.

SB-911-SD-1

Submitted on: 3/17/2019 7:03:04 AM

Testimony for HLT on 3/19/2019 10:00:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Jerry Gray, M.D.	Hilo Medical Center	Support	No

Comments:

Interventional cardiology is the standard of care for treatment of heart attack but must be started within 90 minutes of a patients presentation to the effective. Interisland transport takes 3-6 hours....effectively denying Big Island patients this important treatment. The resources granted in this bill will help defray the huge expenses in starting one of these programs. The equipment is in place and the needed specialists have been recruited, but Hilo Medical Center needs your help to support the program until it is generating it own revenue.

My name is Rebecca Moore, and I am the Stroke and STEMI coordinator for Hilo Medical Center.

Seven years ago I began my nursing journey at HMC on the Stroke and Heart attack unit known as the Progressive Care unit. My goal was once to be the Stroke Coordinator and I was honored with that privilege along with the cardiovascular program responsibilities 14 months ago.

In my occupation time and time again i have had to administer the lifesaving medication called TNK, which is a clot busting medication for those who are experiencing a heart attack. Time and time again I've had to tell patients and families to be optimistic, stay positive and pray as we wait hours for the flight team to show up or even hours or days just to receive a bed at a higher level of care facility, which goes against every nursing oath I've ever taken, to do no harm to our patients but doing so because we are unable to provide 24 hour cardiac interventions.

I've had to watch children say their last goodbyes to their parents who are experiencing a heart attack because they knew their parent would not survive and are too unstable to make the flight. Often times patients have to face the unknown alone due to their families' financial constraints of the cost of flying, hotel and car cost all the while taking time off from work.

I come before you today as a Registered Nurse, a community member and a person who has family risk factors for heart attack I am pleading with you to help me help my patients to receive treatment in their community, to stay in their community and to return to their community.

My communities' future is relying on your support of SB911

SB-911-SD-1

Submitted on: 3/18/2019 6:06:18 AM

Testimony for HLT on 3/19/2019 10:00:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Lisa Rantz	Hilo Medical Center Foundation	Support	No

Comments:



UNIVERSITY OF HAWAII SYSTEM

Legislative Testimony

Testimony Presented Before the
House Committee on Health
Tuesday, March 19, 2019 at 10:00 a.m., Rm 329

by
Marcia Sakai
Interim Chancellor
and
Carolyn Ma, PharmD, BCOP
Dean
Daniel K. Inouye College of Pharmacy
University of Hawai'i at Hilo

SB 911 SD1 – RELATING TO HEALTH

Chair Mizuno, Vice Chair Kobayashi, and members of the committee:

My name is Carolyn Ma, and I am the Dean for the UH Hilo Daniel K. Inouye College of Pharmacy (DKICP). The DKICP fully supports this bill to appropriate funds to the Hilo Medical Center (HMC) to help improve cardiac care services.

The Hilo Medical Center is the flagship hospital and is a key partner in training our students in both introductory and advanced experiential practice rotations. We place two full time Pharmacy Practice faculty in residence in HMC to not only teach and mentor our students. Our faculty practice in the intensive care unit and the family medicine patient care floors in multi-disciplinary care teams that include medical students and residents, nurses and psychologists. In order to provide excellent patient care, hospitals need both excellent patient care from these types of medical teams, but also state of the art technology and facilities. In order to provide “best practice” patient care standards, HMC needs a state of the art cardiac facility to address emergency cardiac events and to provide prompt follow up.

Thank you for the opportunity to submit testimony.

HAWAII HEALTH SYSTEMS CORPORATION

COMMITTEE ON HEALTH

Rep. John M. Mizuno, Chair

Rep. Bertrand Kobayashi, Vice Chair

Rep. Della Au Belatti

Rep. Nadine K. Nakamura

Rep. Joy A. San Buenaventura

Rep. Calvin K.Y. Say

Rep. James Kunane Tokioka

Rep. Gene Ward

NOTICE OF HEARING

DATE: Tuesday, March 19, 2019

TIME: 10:00 am

PLACE: Conference Room 329

State Capitol

415 South Beretania Street

Testimony in Support of SB 911 SD1

Relating to health. Appropriates funds to improve health care services related to cardiac care at Hilo Medical Center.

Merilyn Harris, Administrator, Ka'u Hospital

Thank you for the opportunity to provide testimony in **support of SB 911 SD 1** that appropriates funds to improve health care services related to cardiac care at Hilo Medical Center.

This measure is extremely important to the people of Ka'u. Having interventional cardiology available in Hilo means that patients having a 'heart attack' in Ka'u can get the cardiac care they need within the critical time frames that are required to prevent heart damage. Prior to this, our cardiac patients would have to be shipped to Oahu which was both time consuming and costly involving both air and ground transport.

This funding supports Hilo Medical Center's efforts to provide interventional cardiac care for East Hawaii and potentially for all of Hawaii Island. The procedure involved in this advanced level of cardiac care stops heart attacks in progress and reduces long term cardiac disability. The American College of Cardiology recommends interventional cardiac care as a best practice for treating heart attacks in rural areas like Hawaii Island.

Hilo Medical Center is well positioned to provide interventional cardiac care as it already has available cardiac imaging equipment and software, as well as a cardiology clinic that has space for three cardiologists. The hospital's cardiology program is on track to meeting its goal by the end of 2019 to provide interventional cardiology that will save lives and improve the quality of life for cardiac patients. The funding received in the 2018 legislative session was very much appreciated as it was crucial in the hospital's success in recruiting

HAWAII HEALTH SYSTEMS CORPORATION

interventional cardiologists. Funding in this second phase is essential for Hilo Medical Center to continue the momentum in advancing heart attack care.

Again, mahalo for the opportunity to express my **support for SB 911 SD1** to improve cardiac care at Hilo Medical Center.



HAWAII HEALTH SYSTEMS CORPORATION

COMMITTEE ON WAYS AND MEANS

Senator Donovan M. Dela Cruz, Chair
Senator Gilbert S.C. Keith-Agaran, Vice Chair

NOTICE OF DECISION MAKING

DATE: Tuesday, February 19, 2019
TIME: 9:30 AM
PLACE: Conference Room 211
State Capitol
415 South Beretania Street

Testimony in Support of SB 911
RELATING TO THE HAWAII.

Appropriates funds to improve health care services related to cardiac care at Hilo Medical Center.

(Name/Title) JULIE ERCANBRACK

Thank you for the opportunity to provide testimony in support of SB 911 that appropriates funds to improve health care services related to cardiac care at Hilo Medical Center.

This funding supports Hilo Medical Center's efforts to provide interventional cardiac care for East Hawaii and potentially for all of Hawaii Island. The procedure involved in this advanced level of cardiac care stops heart attacks in progress and reduces long term cardiac disability. The American College of Cardiology recommends interventional cardiac care as a best practice for treating heart attacks in rural areas like Hawaii Island.

Hilo Medical Center is well positioned to provide interventional cardiac care as it already has available cardiac imaging equipment and software, as well as a cardiology clinic that has space for three cardiologists. The hospital's cardiology program is on track to meeting its goal by the end of 2019 to provide interventional cardiology that will save lives and improve the quality of life for cardiac patients. The funding received in the 2018 legislative session was very much appreciated as it was crucial in the hospital's success in recruiting interventional cardiologists. Funding in this second phase is essential for Hilo Medical Center to continue the momentum in advancing heart attack care.

Again, mahalo for the opportunity to express my **support for SB 911** to improve cardiac care at Hilo Medical Center.

1190 Waiianuenue Avenue ▪ Hilo, Hawaii 96720 ▪ Phone (808)
932-3101 ▪ Fax (808) 974-4746



COMMITTEE ON WAYS AND MEANS

Senator Donovan M. Dela Cruz, Chair
Senator Gilbert S.C. Keith-Agaran, Vice Chair

NOTICE OF DECISION MAKING

DATE: Tuesday, February 19, 2019
TIME: 9:30 AM
PLACE: Conference Room 211
State Capitol
415 South Beretania Street

**Testimony in Support of SB 911
RELATING TO THE HAWAII.**

Appropriates funds to improve health care services related to cardiac care at Hilo Medical Center.

(Name/Title) AL ERCANBRACK

Thank you for the opportunity to provide testimony in support of SB 911 that appropriates funds to improve health care services related to cardiac care at Hilo Medical Center.

This funding supports Hilo Medical Center's efforts to provide interventional cardiac care for East Hawaii and potentially for all of Hawaii Island. The procedure involved in this advanced level of cardiac care stops heart attacks in progress and reduces long term cardiac disability. The American College of Cardiology recommends interventional cardiac care as a best practice for treating heart attacks in rural areas like Hawaii Island.

Hilo Medical Center is well positioned to provide interventional cardiac care as it already has available cardiac imaging equipment and software, as well as a cardiology clinic that has space for three cardiologists. The hospital's cardiology program is on track to meeting its goal by the end of 2019 to provide interventional cardiology that will save lives and improve the quality of life for cardiac patients. The funding received in the 2018 legislative session was very much appreciated as it was crucial in the hospital's success in recruiting interventional cardiologists. Funding in this second phase is essential for Hilo Medical Center to continue the momentum in advancing heart attack care.

Again, mahalo for the opportunity to express my **support for SB 911** to improve cardiac care at Hilo Medical Center.

1190 Waiuanuenue Avenue ▪ Hilo, Hawaii 96720 ▪ Phone (808)
932-3101 ▪ Fax (808) 974-4746

From: [jennifer.tanouye](#)
To: [HLTtestimony](#)
Subject: SB 911 SD1
Date: Sunday, March 17, 2019 9:33:08 PM

Testimony in Support of SB 911 SD1

Relating to health. Appropriates funds to improve health care services related to cardiac care at Hilo Medical Center.

Jennifer Tanouye/East Hawaii Community Member and Volunteer

Thank you for the opportunity to provide testimony in **support of SB 911 SD 1** that appropriates funds to improve health care services related to cardiac care at Hilo Medical Center.

This funding supports Hilo Medical Center's efforts to provide interventional cardiac care for East Hawaii and potentially for all of Hawaii Island. The procedure involved in this advanced level of cardiac care stops heart attacks in progress and reduces long term cardiac disability. The American College of Cardiology recommends interventional cardiac care as a best practice for treating heart attacks in rural areas like Hawaii Island.

Hilo Medical Center is well positioned to provide interventional cardiac care as it already has available cardiac imaging equipment and software, as well as a cardiology clinic that has space for three cardiologists. The hospital's cardiology program is on track to meeting its goal by the end of 2019 to provide interventional cardiology that will save lives and improve the quality of life for cardiac patients. The funding received in the 2018 legislative session was very much appreciated as it was crucial in the hospital's success in recruiting interventional cardiologists. Funding in this second phase is essential for Hilo Medical Center to continue the momentum in advancing heart attack care.

Mahalo,

Jennifer Tanouye

HAWAII HEALTH SYSTEMS CORPORATION

COMMITTEE ON HEALTH

Rep. John M. Mizuno, Chair

Rep. Bertrand Kobayashi, Vice Chair

Rep. Della Au Belatti

Rep. Calvin K.Y. Say

Rep. Nadine K. Nakamura

Rep. James Kunane Tokioka

Rep. Joy A. San Buenaventura

Rep. Gene Ward

NOTICE OF HEARING

DATE: Tuesday, March 19, 2019

TIME: 10:00 am

PLACE: Conference Room 329

State Capitol

415 South Beretania Street

Testimony in Support of SB 911 SD1

Relating to health. Appropriates funds to improve health care services related to cardiac care at Hilo Medical Center.

Merilyn Harris, Administrator, Ka'u Hospital

Thank you for the opportunity to provide testimony in **support of SB 911 SD 1** that appropriates funds to improve health care services related to cardiac care at Hilo Medical Center.

This measure is extremely important to the people of Ka'u. Having interventional cardiology available in Hilo means that patients having a 'heart attack' in Ka'u can get the cardiac care they need within the critical time frames that are required to prevent heart damage. Prior to this, our cardiac patients would have to be shipped to Oahu which was both time consuming and costly involving both air and ground transport.

This funding supports Hilo Medical Center's efforts to provide interventional cardiac care for East Hawaii and potentially for all of Hawaii Island. The procedure involved in this advanced level of cardiac care stops heart attacks in progress and reduces long term cardiac disability. The American College of Cardiology recommends interventional cardiac care as a best practice for treating heart attacks in rural areas like Hawaii Island.

Hilo Medical Center is well positioned to provide interventional cardiac care as it already has available cardiac imaging equipment and software, as well as a cardiology clinic that has space for three cardiologists. The hospital's cardiology program is on track to meeting its goal by the end of 2019 to provide interventional cardiology that will save lives and improve the quality of life for cardiac patients. The funding received in the 2018 legislative session was very much appreciated as it was crucial in the hospital's success in recruiting

HAWAII HEALTH SYSTEMS CORPORATION

interventional cardiologists. Funding in this second phase is essential for Hilo Medical Center to continue the momentum in advancing heart attack care.

Again, mahalo for the opportunity to express my **support for SB 911 SD1** to improve cardiac care at Hilo Medical Center.

HAWAII HEALTH SYSTEMS CORPORATION

COMMITTEE ON HEALTH

Rep. John M. Mizuno, Chair
Rep. Bertrand Kobayashi, Vice Chair

Rep. Della Au Belatti
Rep. Nadine K. Nakamura
Rep. Joy A. San Buenaventura
Rep. Calvin K.Y. Say
Rep. James Kunane Tokioka
Rep. Gene Ward

NOTICE OF HEARING

DATE: Tuesday, March 19, 2019
TIME: 10:00 am
PLACE: Conference Room 329
State Capitol
415 South Beretania Street

Testimony in Support of SB 911 SD1

Relating to health. Appropriates funds to improve health care services related to cardiac care at Hilo Medical Center.

(Name/Title) Kelly Okada RN, Progressive Care Unit Nurse Manager

Thank you for the opportunity to provide testimony in support of SB 911 SD 1 that appropriates funds to improve health care services related to cardiac care at Hilo Medical Center.

This funding supports Hilo Medical Center's efforts to provide interventional cardiac care for East Hawaii and potentially for all of Hawaii Island. The procedure involved in this advanced level of cardiac care stops heart attacks in progress and reduces long term cardiac disability. The American College of Cardiology recommends interventional cardiac care as a best practice for treating heart attacks in rural areas like Hawaii Island.

Hilo Medical Center is well positioned to provide interventional cardiac care as it already has available cardiac imaging equipment and software, as well as a cardiology clinic that has space for three cardiologists. The hospital's cardiology program is on track to meeting its goal by the end of 2019 to provide interventional cardiology that will save lives and improve the quality of life for cardiac patients. The funding received in the 2018 legislative session was very much appreciated as it was crucial in the hospital's success in recruiting interventional cardiologists. Funding in this second phase is essential for Hilo Medical Center to continue the momentum in advancing heart attack care.

Again, mahalo for the opportunity to express my **support for SB 911 SD1** to improve cardiac care at Hilo Medical Center.

HAWAII HEALTH SYSTEMS CORPORATION

COMMITTEE ON HEALTH

Rep. John M. Mizuno, Chair

Rep. Bertrand Kobayashi, Vice Chair

Rep. Della Au Belatti

Rep. Calvin K.Y. Say

Rep. Nadine K. Nakamura

Rep. James Kunane Tokioka

Rep. Joy A. San Buenaventura

Rep. Gene Ward

NOTICE OF HEARING

DATE: Tuesday, March 19, 2019

TIME: 10:00 am

PLACE: Conference Room 329

State Capitol

415 South Beretania Street

Testimony in Support of SB 911 SD1

Relating to health. Appropriates funds to improve health care services related to cardiac care at Hilo Medical Center.

(Name/Title) Duc-Anh Nishioaka Med Mgr

Thank you for the opportunity to provide testimony in **support of SB 911 SD 1** that appropriates funds to improve health care services related to cardiac care at Hilo Medical Center.

This funding supports Hilo Medical Center's efforts to provide interventional cardiac care for East Hawaii and potentially for all of Hawaii Island. The procedure involved in this advanced level of cardiac care stops heart attacks in progress and reduces long term cardiac disability. The American College of Cardiology recommends interventional cardiac care as a best practice for treating heart attacks in rural areas like Hawaii Island.

Hilo Medical Center is well positioned to provide interventional cardiac care as it already has available cardiac imaging equipment and software, as well as a cardiology clinic that has space for three cardiologists. The hospital's cardiology program is on track to meeting its goal by the end of 2019 to provide interventional cardiology that will save lives and improve the quality of life for cardiac patients. The funding received in the 2018 legislative session was very much appreciated as it was crucial in the hospital's success in recruiting interventional cardiologists. Funding in this second phase is essential for Hilo Medical Center to continue the momentum in advancing heart attack care.

Again, mahalo for the opportunity to express my **support for SB 911 SD1** to improve cardiac care at Hilo Medical Center.

HAWAII HEALTH SYSTEMS CORPORATION

COMMITTEE ON HEALTH

Rep. John M. Mizuno, Chair

Rep. Bertrand Kobayashi, Vice Chair

Rep. Della Au Belatti

Rep. Calvin K.Y. Say

Rep. Nadine K. Nakamura

Rep. James Kunane Tokioka

Rep. Joy A. San Buenaventura

Rep. Gene Ward

NOTICE OF HEARING

DATE: Tuesday, March 19, 2019

TIME: 10:00 am

PLACE: Conference Room 329

State Capitol

415 South Beretania Street

Testimony in Support of SB 911 SD1

Relating to health. Appropriates funds to improve health care services related to cardiac care at Hilo Medical Center.

(Name/Title) CHRISTINA RANAN, OB Nurse Manager

Thank you for the opportunity to provide testimony in **support of SB 911 SD 1** that appropriates funds to improve health care services related to cardiac care at Hilo Medical Center.

This funding supports Hilo Medical Center's efforts to provide interventional cardiac care for East Hawaii and potentially for all of Hawaii Island. The procedure involved in this advanced level of cardiac care stops heart attacks in progress and reduces long term cardiac disability. The American College of Cardiology recommends interventional cardiac care as a best practice for treating heart attacks in rural areas like Hawaii Island.

Hilo Medical Center is well positioned to provide interventional cardiac care as it already has available cardiac imaging equipment and software, as well as a cardiology clinic that has space for three cardiologists. The hospital's cardiology program is on track to meeting its goal by the end of 2019 to provide interventional cardiology that will save lives and improve the quality of life for cardiac patients. The funding received in the 2018 legislative session was very much appreciated as it was crucial in the hospital's success in recruiting interventional cardiologists. Funding in this second phase is essential for Hilo Medical Center to continue the momentum in advancing heart attack care.

Again, mahalo for the opportunity to express my **support for SB 911 SD1** to improve cardiac care at Hilo Medical Center.

HAWAII HEALTH SYSTEMS CORPORATION

COMMITTEE ON HEALTH

Rep. John M. Mizuno, Chair

Rep. Bertrand Kobayashi, Vice Chair

Rep. Della Au Belatti

Rep. Calvin K.Y. Say

Rep. Nadine K. Nakamura

Rep. James Kunane Tokioka

Rep. Joy A. San Buenaventura

Rep. Gene Ward

NOTICE OF HEARING

DATE: Tuesday, March 19, 2019

TIME: 10:00 am

PLACE: Conference Room 329

State Capitol

415 South Beretania Street

Testimony in Support of SB 911 SD1

Relating to health. Appropriates funds to improve health care services related to cardiac care at Hilo Medical Center.

(Name/Title) Tawyn Vogt, IFSM II

Thank you for the opportunity to provide testimony in **support of SB 911 SD 1** that appropriates funds to improve health care services related to cardiac care at Hilo Medical Center.

This funding supports Hilo Medical Center's efforts to provide interventional cardiac care for East Hawaii and potentially for all of Hawaii Island. The procedure involved in this advanced level of cardiac care stops heart attacks in progress and reduces long term cardiac disability. The American College of Cardiology recommends interventional cardiac care as a best practice for treating heart attacks in rural areas like Hawaii Island.

Hilo Medical Center is well positioned to provide interventional cardiac care as it already has available cardiac imaging equipment and software, as well as a cardiology clinic that has space for three cardiologists. The hospital's cardiology program is on track to meeting its goal by the end of 2019 to provide interventional cardiology that will save lives and improve the quality of life for cardiac patients. The funding received in the 2018 legislative session was very much appreciated as it was crucial in the hospital's success in recruiting interventional cardiologists. Funding in this second phase is essential for Hilo Medical Center to continue the momentum in advancing heart attack care.

Again, mahalo for the opportunity to express my **support for SB 911 SD1** to improve cardiac care at Hilo Medical Center.

HAWAII HEALTH SYSTEMS CORPORATION

COMMITTEE ON HEALTH

Rep. John M. Mizuno, Chair
Rep. Bertrand Kobayashi, Vice Chair

Rep. Della Au Belatti
Rep. Nadine K. Nakamura
Rep. Joy A. San Buenaventura
Rep. Calvin K.Y. Say
Rep. James Kunane Tokioka
Rep. Gene Ward

NOTICE OF HEARING

DATE: Tuesday, March 19, 2019
TIME: 10:00 am
PLACE: Conference Room 329
State Capitol
415 South Beretania Street

Testimony in Support of SB 911 SD1

Relating to health. Appropriates funds to improve health care services related to cardiac care at Hilo Medical Center.

(Name/Title) Manuel Kumimoto RN

Thank you for the opportunity to provide testimony in support of SB 911 SD 1 that appropriates funds to improve health care services related to cardiac care at Hilo Medical Center.

This funding supports Hilo Medical Center's efforts to provide interventional cardiac care for East Hawaii and potentially for all of Hawaii Island. The procedure involved in this advanced level of cardiac care stops heart attacks in progress and reduces long term cardiac disability. The American College of Cardiology recommends interventional cardiac care as a best practice for treating heart attacks in rural areas like Hawaii Island.

Hilo Medical Center is well positioned to provide interventional cardiac care as it already has available cardiac imaging equipment and software, as well as a cardiology clinic that has space for three cardiologists. The hospital's cardiology program is on track to meeting its goal by the end of 2019 to provide interventional cardiology that will save lives and improve the quality of life for cardiac patients. The funding received in the 2018 legislative session was very much appreciated as it was crucial in the hospital's success in recruiting interventional cardiologists. Funding in this second phase is essential for Hilo Medical Center to continue the momentum in advancing heart attack care.

Again, mahalo for the opportunity to express my **support for SB 911 SD1** to improve cardiac care at Hilo Medical Center.

HAWAII HEALTH SYSTEMS CORPORATION

COMMITTEE ON HEALTH

Rep. John M. Mizuno, Chair
Rep. Bertrand Kobayashi, Vice Chair

Rep. Della Au Belatti
Rep. Nadine K. Nakamura
Rep. Joy A. San Buenaventura
Rep. Calvin K.Y. Say
Rep. James Kunane Tokioka
Rep. Gene Ward

NOTICE OF HEARING

DATE: Tuesday, March 19, 2019
TIME: 10:00 am
PLACE: Conference Room 329
State Capitol
415 South Beretania Street

Testimony in Support of SB 911 SD1

Relating to health. Appropriates funds to improve health care services related to cardiac care at Hilo Medical Center.

(Name/Title) TROI MOKUHAII ENJ SUR

Thank you for the opportunity to provide testimony in support of SB 911 SD 1 that appropriates funds to improve health care services related to cardiac care at Hilo Medical Center.

This funding supports Hilo Medical Center's efforts to provide interventional cardiac care for East Hawaii and potentially for all of Hawaii Island. The procedure involved in this advanced level of cardiac care stops heart attacks in progress and reduces long term cardiac disability. The American College of Cardiology recommends interventional cardiac care as a best practice for treating heart attacks in rural areas like Hawaii Island.

Hilo Medical Center is well positioned to provide interventional cardiac care as it already has available cardiac imaging equipment and software, as well as a cardiology clinic that has space for three cardiologists. The hospital's cardiology program is on track to meeting its goal by the end of 2019 to provide interventional cardiology that will save lives and improve the quality of life for cardiac patients. The funding received in the 2018 legislative session was very much appreciated as it was crucial in the hospital's success in recruiting interventional cardiologists. Funding in this second phase is essential for Hilo Medical Center to continue the momentum in advancing heart attack care.

Again, mahalo for the opportunity to express my **support for SB 911 SD1** to improve cardiac care at Hilo Medical Center.

HAWAII HEALTH SYSTEMS CORPORATION

COMMITTEE ON HEALTH

Rep. John M. Mizuno, Chair
Rep. Bertrand Kobayashi, Vice Chair

Rep. Della Au Belatti
Rep. Nadine K. Nakamura
Rep. Joy A. San Buenaventura
Rep. Calvin K.Y. Say
Rep. James Kunane Tokioka
Rep. Gene Ward

NOTICE OF HEARING

DATE: Tuesday, March 19, 2019
TIME: 10:00 am
PLACE: Conference Room 329
State Capitol
415 South Beretania Street

Testimony in Support of SB 911 SD1

Relating to health. Appropriates funds to improve health care services related to cardiac care at Hilo Medical Center.

(Name/Title)

Adelto Papea Jun

Thank you for the opportunity to provide testimony in **support of SB 911 SD 1** that appropriates funds to improve health care services related to cardiac care at Hilo Medical Center.

This funding supports Hilo Medical Center's efforts to provide interventional cardiac care for East Hawaii and potentially for all of Hawaii Island. The procedure involved in this advanced level of cardiac care stops heart attacks in progress and reduces long term cardiac disability. The American College of Cardiology recommends interventional cardiac care as a best practice for treating heart attacks in rural areas like Hawaii Island.

Hilo Medical Center is well positioned to provide interventional cardiac care as it already has available cardiac imaging equipment and software, as well as a cardiology clinic that has space for three cardiologists. The hospital's cardiology program is on track to meeting its goal by the end of 2019 to provide interventional cardiology that will save lives and improve the quality of life for cardiac patients. The funding received in the 2018 legislative session was very much appreciated as it was crucial in the hospital's success in recruiting interventional cardiologists. Funding in this second phase is essential for Hilo Medical Center to continue the momentum in advancing heart attack care.

Again, mahalo for the opportunity to express my **support for SB 911 SD1** to improve cardiac care at Hilo Medical Center.

HAWAII HEALTH SYSTEMS CORPORATION

COMMITTEE ON HEALTH

Rep. John M. Mizuno, Chair
Rep. Bertrand Kobayashi, Vice Chair

Rep. Della Au Belatti
Rep. Nadine K. Nakamura
Rep. Joy A. San Buenaventura
Rep. Calvin K.Y. Say
Rep. James Kunane Tokioka
Rep. Gene Ward

NOTICE OF HEARING

DATE: Tuesday, March 19, 2019
TIME: 10:00 am
PLACE: Conference Room 329
State Capitol
415 South Beretania Street

Testimony in Support of SB 911 SD1

Relating to health. Appropriates funds to improve health care services related to cardiac care at Hilo Medical Center.

(Name/Title) ARTHUR SAMPAO CNO

Thank you for the opportunity to provide testimony in support of SB 911 SD 1 that appropriates funds to improve health care services related to cardiac care at Hilo Medical Center.

This funding supports Hilo Medical Center's efforts to provide interventional cardiac care for East Hawaii and potentially for all of Hawaii Island. The procedure involved in this advanced level of cardiac care stops heart attacks in progress and reduces long term cardiac disability. The American College of Cardiology recommends interventional cardiac care as a best practice for treating heart attacks in rural areas like Hawaii Island.

Hilo Medical Center is well positioned to provide interventional cardiac care as it already has available cardiac imaging equipment and software, as well as a cardiology clinic that has space for three cardiologists. The hospital's cardiology program is on track to meeting its goal by the end of 2019 to provide interventional cardiology that will save lives and improve the quality of life for cardiac patients. The funding received in the 2018 legislative session was very much appreciated as it was crucial in the hospital's success in recruiting interventional cardiologists. Funding in this second phase is essential for Hilo Medical Center to continue the momentum in advancing heart attack care.

Again, mahalo for the opportunity to express my **support for SB 911 SD1** to improve cardiac care at Hilo Medical Center.

HAWAII HEALTH SYSTEMS CORPORATION

COMMITTEE ON HEALTH

Rep. John M. Mizuno, Chair

Rep. Bertrand Kobayashi, Vice Chair

Rep. Della Au Belatti

Rep. Nadine K. Nakamura

Rep. Joy A. San Buenaventura

Rep. Calvin K.Y. Say

Rep. James Kunane Tokioka

Rep. Gene Ward

NOTICE OF HEARING

DATE: Tuesday, March 19, 2019

TIME: 10:00 am

PLACE: Conference Room 329

State Capitol

415 South Beretania Street

Testimony in Support of SB 911 SD1

Relating to health. Appropriates funds to improve health care services related to cardiac care at Hilo Medical Center.

(Name/Title) Nelson Nako / Nelson Nako Dir of Pharmacy

Thank you for the opportunity to provide testimony in **support of SB 911 SD 1** that appropriates funds to improve health care services related to cardiac care at Hilo Medical Center.

This funding supports Hilo Medical Center's efforts to provide interventional cardiac care for East Hawaii and potentially for all of Hawaii Island. The procedure involved in this advanced level of cardiac care stops heart attacks in progress and reduces long term cardiac disability. The American College of Cardiology recommends interventional cardiac care as a best practice for treating heart attacks in rural areas like Hawaii Island.

Hilo Medical Center is well positioned to provide interventional cardiac care as it already has available cardiac imaging equipment and software, as well as a cardiology clinic that has space for three cardiologists. The hospital's cardiology program is on track to meeting its goal by the end of 2019 to provide interventional cardiology that will save lives and improve the quality of life for cardiac patients. The funding received in the 2018 legislative session was very much appreciated as it was crucial in the hospital's success in recruiting interventional cardiologists. Funding in this second phase is essential for Hilo Medical Center to continue the momentum in advancing heart attack care.

Again, mahalo for the opportunity to express my **support for SB 911 SD1** to improve cardiac care at Hilo Medical Center.

HAWAII HEALTH SYSTEMS CORPORATION

COMMITTEE ON HEALTH

Rep. John M. Mizuno, Chair
Rep. Bertrand Kobayashi, Vice Chair

Rep. Della Au Belatti
Rep. Nadine K. Nakamura
Rep. Joy A. San Buenaventura
Rep. Calvin K.Y. Say
Rep. James Kunane Tokioka
Rep. Gene Ward

NOTICE OF HEARING

DATE: Tuesday, March 19, 2019
TIME: 10:00 am
PLACE: Conference Room 329
State Capitol
415 South Beretania Street

Testimony in Support of SB 911 SD1

Relating to health. Appropriates funds to improve health care services related to cardiac care at Hilo Medical Center.

(Name/Title) Trudy Erca, RN CR

Thank you for the opportunity to provide testimony in **support of SB 911 SD 1** that appropriates funds to improve health care services related to cardiac care at Hilo Medical Center.

This funding supports Hilo Medical Center's efforts to provide interventional cardiac care for East Hawaii and potentially for all of Hawaii Island. The procedure involved in this advanced level of cardiac care stops heart attacks in progress and reduces long term cardiac disability. The American College of Cardiology recommends interventional cardiac care as a best practice for treating heart attacks in rural areas like Hawaii Island.

Hilo Medical Center is well positioned to provide interventional cardiac care as it already has available cardiac imaging equipment and software, as well as a cardiology clinic that has space for three cardiologists. The hospital's cardiology program is on track to meeting its goal by the end of 2019 to provide interventional cardiology that will save lives and improve the quality of life for cardiac patients. The funding received in the 2018 legislative session was very much appreciated as it was crucial in the hospital's success in recruiting interventional cardiologists. Funding in this second phase is essential for Hilo Medical Center to continue the momentum in advancing heart attack care.

Again, mahalo for the opportunity to express my **support for SB 911 SD1** to improve cardiac care at Hilo Medical Center.

HAWAII HEALTH SYSTEMS CORPORATION

COMMITTEE ON HEALTH

Rep. John M. Mizuno, Chair

Rep. Bertrand Kobayashi, Vice Chair

Rep. Della Au Belatti

Rep. Calvin K.Y. Say

Rep. Nadine K. Nakamura

Rep. James Kunane Tokioka

Rep. Joy A. San Buenaventura

Rep. Gene Ward

NOTICE OF HEARING

DATE: Tuesday, March 19, 2019

TIME: 10:00 am

PLACE: Conference Room 329

State Capitol

415 South Beretania Street

Testimony in Support of SB 911 SD1

Relating to health. Appropriates funds to improve health care services related to cardiac care at Hilo Medical Center.

(Name/Title) Gayle Sato - Lab Manager - Hilo Med Ctr

Thank you for the opportunity to provide testimony in **support of SB 911 SD 1** that appropriates funds to improve health care services related to cardiac care at Hilo Medical Center.

This funding supports Hilo Medical Center's efforts to provide interventional cardiac care for East Hawaii and potentially for all of Hawaii Island. The procedure involved in this advanced level of cardiac care stops heart attacks in progress and reduces long term cardiac disability. The American College of Cardiology recommends interventional cardiac care as a best practice for treating heart attacks in rural areas like Hawaii Island.

Hilo Medical Center is well positioned to provide interventional cardiac care as it already has available cardiac imaging equipment and software, as well as a cardiology clinic that has space for three cardiologists. The hospital's cardiology program is on track to meeting its goal by the end of 2019 to provide interventional cardiology that will save lives and improve the quality of life for cardiac patients. The funding received in the 2018 legislative session was very much appreciated as it was crucial in the hospital's success in recruiting interventional cardiologists. Funding in this second phase is essential for Hilo Medical Center to continue the momentum in advancing heart attack care.

Again, mahalo for the opportunity to express my **support for SB 911 SD1** to improve cardiac care at Hilo Medical Center.

HAWAII HEALTH SYSTEMS CORPORATION

COMMITTEE ON HEALTH

Rep. John M. Mizuno, Chair
Rep. Bertrand Kobayashi, Vice Chair

Rep. Della Au Belatti
Rep. Nadine K. Nakamura
Rep. Joy A. San Buenaventura
Rep. Calvin K.Y. Say
Rep. James Kunane Tokioka
Rep. Gene Ward

NOTICE OF HEARING

DATE: Tuesday, March 19, 2019
TIME: 10:00 am
PLACE: Conference Room 329
State Capitol
415 South Beretania Street

Testimony in Support of SB 911 SD1

Relating to health. Appropriates funds to improve health care services related to cardiac care at Hilo Medical Center.

(Name/Title) CHRISTINE McMAHON RR-CC-TA

Thank you for the opportunity to provide testimony in **support of SB 911 SD 1** that appropriates funds to improve health care services related to cardiac care at Hilo Medical Center.

This funding supports Hilo Medical Center's efforts to provide interventional cardiac care for East Hawaii and potentially for all of Hawaii Island. The procedure involved in this advanced level of cardiac care stops heart attacks in progress and reduces long term cardiac disability. The American College of Cardiology recommends interventional cardiac care as a best practice for treating heart attacks in rural areas like Hawaii Island.

Hilo Medical Center is well positioned to provide interventional cardiac care as it already has available cardiac imaging equipment and software, as well as a cardiology clinic that has space for three cardiologists. The hospital's cardiology program is on track to meeting its goal by the end of 2019 to provide interventional cardiology that will save lives and improve the quality of life for cardiac patients. The funding received in the 2018 legislative session was very much appreciated as it was crucial in the hospital's success in recruiting interventional cardiologists. Funding in this second phase is essential for Hilo Medical Center to continue the momentum in advancing heart attack care.

Again, mahalo for the opportunity to express my **support for SB 911 SD1** to improve cardiac care at Hilo Medical Center.

HAWAII HEALTH SYSTEMS CORPORATION

COMMITTEE ON HEALTH

Rep. John M. Mizuno, Chair

Rep. Bertrand Kobayashi, Vice Chair

Rep. Della Au Belatti

Rep. Calvin K.Y. Say

Rep. Nadine K. Nakamura

Rep. James Kunane Tokioka

Rep. Joy A. San Buenaventura

Rep. Gene Ward

NOTICE OF HEARING

DATE: Tuesday, March 19, 2019

TIME: 10:00 am

PLACE: Conference Room 329

State Capitol

415 South Beretania Street

Testimony in Support of SB 911 SD1

Relating to health. Appropriates funds to improve health care services related to cardiac care at Hilo Medical Center.

Dan Brinkman, East Hawaii Regional CEO of Hawaii Health Systems Corporation

Thank you for the opportunity to provide testimony in **support of SB 911 SD 1** that appropriates funds to improve health care services related to cardiac care at Hilo Medical Center.

This funding supports Hilo Medical Center's efforts to provide interventional cardiac care for East Hawaii and potentially for all of Hawaii Island. The procedure involved in this advanced level of cardiac care stops heart attacks in progress and reduces long term cardiac disability. The American College of Cardiology recommends interventional cardiac care as a best practice for treating heart attacks in rural areas like Hawaii Island.

Hilo Medical Center is well positioned to provide interventional cardiac care as it already has available cardiac imaging equipment and software, as well as a cardiology clinic that has space for three cardiologists. The hospital's cardiology program is on track to meeting its goal by the end of 2019 to provide interventional cardiology that will save lives and improve the quality of life for cardiac patients. The funding received in the 2018 legislative session was very much appreciated as it was crucial in the hospital's success in recruiting interventional cardiologists. Funding in this second phase is essential for Hilo Medical Center to continue the momentum in advancing heart attack care.

Again, mahalo for the opportunity to express my **support for SB 911 SD1** to improve cardiac care at Hilo Medical Center.

HAWAII HEALTH SYSTEMS CORPORATION

COMMITTEE ON HEALTH

Rep. John M. Mizuno, Chair

Rep. Bertrand Kobayashi, Vice Chair

Rep. Della Au Belatti

Rep. Calvin K.Y. Say

Rep. Nadine K. Nakamura

Rep. James Kunane Tokioka

Rep. Joy A. San Buenaventura

Rep. Gene Ward

NOTICE OF HEARING

DATE: Tuesday, March 19, 2019

TIME: 10:00 am

PLACE: Conference Room 329

State Capitol

415 South Beretania Street

Testimony in Support of SB 911 SD1

Relating to health. Appropriates funds to improve health care services related to cardiac care at Hilo Medical Center.

(Name/Title) Elena Cabatu, Director of Legislative Affairs

Thank you for the opportunity to provide testimony in **support of SB 911 SD 1** that appropriates funds to improve health care services related to cardiac care at Hilo Medical Center.

This funding supports Hilo Medical Center's efforts to provide interventional cardiac care for East Hawaii and potentially for all of Hawaii Island. The procedure involved in this advanced level of cardiac care stops heart attacks in progress and reduces long term cardiac disability. The American College of Cardiology recommends interventional cardiac care as a best practice for treating heart attacks in rural areas like Hawaii Island.

Hilo Medical Center is well positioned to provide interventional cardiac care as it already has available cardiac imaging equipment and software, as well as a cardiology clinic that has space for three cardiologists. The hospital's cardiology program is on track to meeting its goal by the end of 2019 to provide interventional cardiology that will save lives and improve the quality of life for cardiac patients. The funding received in the 2018 legislative session was very much appreciated as it was crucial in the hospital's success in recruiting interventional cardiologists. Funding in this second phase is essential for Hilo Medical Center to continue the momentum in advancing heart attack care.

Again, mahalo for the opportunity to express my **support for SB 911 SD1** to improve cardiac care at Hilo Medical Center.

HAWAII HEALTH SYSTEMS CORPORATION

COMMITTEE ON HEALTH

Rep. John M. Mizuno, Chair

Rep. Bertrand Kobayashi, Vice Chair

Rep. Della Au Belatti

Rep. Calvin K.Y. Say

Rep. Nadine K. Nakamura

Rep. James Kunane Tokioka

Rep. Joy A. San Buenaventura

Rep. Gene Ward

NOTICE OF HEARING

DATE: Tuesday, March 19, 2019

TIME: 10:00 am

PLACE: Conference Room 329

State Capitol

415 South Beretania Street

Testimony in Support of SB 911 SD1

Relating to health. Appropriates funds to improve health care services related to cardiac care at Hilo Medical Center.

(Name/Title) Jonu Murak, HMC Clinical Nursing

Thank you for the opportunity to provide testimony in support of SB 911 SD 1 that Director appropriates funds to improve health care services related to cardiac care at Hilo Medical Center.

This funding supports Hilo Medical Center's efforts to provide interventional cardiac care for East Hawaii and potentially for all of Hawaii Island. The procedure involved in this advanced level of cardiac care stops heart attacks in progress and reduces long term cardiac disability. The American College of Cardiology recommends interventional cardiac care as a best practice for treating heart attacks in rural areas like Hawaii Island.

Hilo Medical Center is well positioned to provide interventional cardiac care as it already has available cardiac imaging equipment and software, as well as a cardiology clinic that has space for three cardiologists. The hospital's cardiology program is on track to meeting its goal by the end of 2019 to provide interventional cardiology that will save lives and improve the quality of life for cardiac patients. The funding received in the 2018 legislative session was very much appreciated as it was crucial in the hospital's success in recruiting interventional cardiologists. Funding in this second phase is essential for Hilo Medical Center to continue the momentum in advancing heart attack care.

Again, mahalo for the opportunity to express my **support for SB 911 SD1** to improve cardiac care at Hilo Medical Center.

HAWAII HEALTH SYSTEMS CORPORATION

COMMITTEE ON HEALTH

Rep. John M. Mizuno, Chair

Rep. Bertrand Kobayashi, Vice Chair

Rep. Della Au Belatti

Rep. Calvin K.Y. Say

Rep. Nadine K. Nakamura

Rep. James Kunane Tokioka

Rep. Joy A. San Buenaventura

Rep. Gene Ward

NOTICE OF HEARING

DATE: Tuesday, March 19, 2019

TIME: 10:00 am

PLACE: Conference Room 329

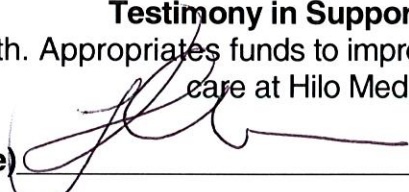
State Capitol

415 South Beretania Street

Testimony in Support of SB 911 SD1

Relating to health. Appropriates funds to improve health care services related to cardiac care at Hilo Medical Center.

(Name/Title)

 , Kris Wilson, Director of Information Systems

Thank you for the opportunity to provide testimony in **support of SB 911 SD 1** that appropriates funds to improve health care services related to cardiac care at Hilo Medical Center.

This funding supports Hilo Medical Center's efforts to provide interventional cardiac care for East Hawaii and potentially for all of Hawaii Island. The procedure involved in this advanced level of cardiac care stops heart attacks in progress and reduces long term cardiac disability. The American College of Cardiology recommends interventional cardiac care as a best practice for treating heart attacks in rural areas like Hawaii Island.

Hilo Medical Center is well positioned to provide interventional cardiac care as it already has available cardiac imaging equipment and software, as well as a cardiology clinic that has space for three cardiologists. The hospital's cardiology program is on track to meeting its goal by the end of 2019 to provide interventional cardiology that will save lives and improve the quality of life for cardiac patients. The funding received in the 2018 legislative session was very much appreciated as it was crucial in the hospital's success in recruiting interventional cardiologists. Funding in this second phase is essential for Hilo Medical Center to continue the momentum in advancing heart attack care.

Again, mahalo for the opportunity to express my **support for SB 911 SD1** to improve cardiac care at Hilo Medical Center.

HAWAII HEALTH SYSTEMS CORPORATION

COMMITTEE ON HEALTH

Rep. John M. Mizuno, Chair

Rep. Bertrand Kobayashi, Vice Chair

Rep. Della Au Belatti

Rep. Nadine K. Nakamura

Rep. Joy A. San Buenaventura

Rep. Calvin K.Y. Say

Rep. James Kunane Tokioka

Rep. Gene Ward

NOTICE OF HEARING

DATE: Tuesday, March 19, 2019

TIME: 10:00 am

PLACE: Conference Room 329

State Capitol

415 South Beretania Street

Testimony in Support of SB 911

RELATING TO THE HAWAII.

Appropriates funds to improve health care services related to cardiac care at Hilo Medical Center.

(Name/Title)____Sandy Sato, RN Case Management_____

Thank you for the opportunity to provide testimony in **support of SB 911** that appropriates funds to improve health care services related to cardiac care at Hilo Medical Center.

This funding supports Hilo Medical Center's efforts to provide interventional cardiac care for East Hawaii and potentially for all of Hawaii Island. The procedure involved in this advanced level of cardiac care stops heart attacks in progress and reduces long term cardiac disability. The American College of Cardiology recommends interventional cardiac care as a best practice for treating heart attacks in rural areas like Hawaii Island.

Hilo Medical Center is well positioned to provide interventional cardiac care as it already has available cardiac imaging equipment and software, as well as a cardiology clinic that has space for three cardiologists. The hospital's cardiology program is on track to meeting its goal by the end of 2019 to provide interventional cardiology that will save lives and improve the quality of life for cardiac patients. The funding received in the 2018 legislative session was very much appreciated as it was crucial in the hospital's success in recruiting interventional cardiologists. Funding in this second phase is essential for Hilo Medical Center to continue the momentum in advancing heart attack care.

Again, mahalo for the opportunity to express my **support for SB 911** to improve cardiac care at Hilo Medical Center.

kobayashi1 - Melvia

From: mak221@aol.com
Sent: Saturday, March 16, 2019 7:34 PM
To: HLTtestimony
Subject: WRITING IN STRONG SUPPORT OF SB911 SD 1

Categories: Red Category

Testimony in Support of SB 911 SD1

Relating to health. Appropriates funds to improve health care services related to cardiac care at Hilo Medical Center.

(Name/Title)_____Mark Koppel, 31-392 Lepoloa Rd. Ninole
HI_____

Thank you for the opportunity to provide testimony in **support of SB 911 SD 1** that appropriates funds to improve health care services related to cardiac care at Hilo Medical Center.

This funding supports Hilo Medical Center's efforts to provide interventional cardiac care for East Hawaii and potentially for all of Hawaii Island. The procedure involved in this advanced level of cardiac care stops heart attacks in progress and reduces long term cardiac disability. The American College of Cardiology recommends interventional cardiac care as a best practice for treating heart attacks in rural areas like Hawaii Island.

Hilo Medical Center is well positioned to provide interventional cardiac care as it already has available cardiac imaging equipment and software, as well as a cardiology clinic that has space for three cardiologists. The hospital's cardiology program is on track to meeting its goal by the end of 2019 to provide interventional cardiology that will save lives and improve the quality of life for cardiac patients. The funding received in the 2018 legislative session was very much appreciated as it was crucial in the hospital's success in recruiting interventional cardiologists. Funding in this second phase is essential for Hilo Medical Center to continue the momentum in advancing heart attack care.

Mahalo,

Mark A. Koppel

kobayashi1 - Melvia

From: Marilyn Harris <mharris@hhsc.org>
Sent: Monday, March 18, 2019 8:42 AM
To: HLTtestimony
Subject: Ka'u Hospital Support for SB 911 SD1
Attachments: Ka'u Hospital Support for SB911 Cardiac Care at HMC.docx

Please find the attached testimony in SUPPORT of SB 911 SD1. Thank you.

Marilyn Harris
Administrator, Ka'u Hospital
1 Kamani Street, PO box 40
Pahala Hawaii, 96777
PH: 808 932-4370
FAX 808 928-8980

kobayashi1 - Melvia

From: jaercanbrack1@twc.com
Sent: Sunday, March 17, 2019 3:52 PM
To: HLTtestimony
Subject: Testimony in support of SB911 SD1
Attachments: Scan_0002.pdf

Categories: Red category

Attached is my testimony in support of SB911 SD1.

Thank you for this opportunity.

Regards,
Julie Ercanbrack

jaercanbrack1@twc.com

kobayashi1 - Melvia

From: aercanbrack@twc.com
Sent: Sunday, March 17, 2019 3:46 PM
To: HLTtestimony
Subject: Testimony in support of SB911 SD1
Attachments: Scan_0001.pdf

Categories: Red category

Attached you will find my testimony in support of SB911 SD1.

Thank you

Regards,

Al Ercanbrack
Aercanbrack@twc.com



Hilo Medical Center
We Care for Our Community

HAWAII HEALTH SYSTEMS CORPORATION

COMMITTEE ON WAYS AND MEANS

Senator Donovan M. Dela Cruz, Chair
Senator Gilbert S.C. Keith-Agaran, Vice Chair

LATE

NOTICE OF DECISION MAKING

DATE: Tuesday, February 19, 2019
TIME: 9:30 AM
PLACE: Conference Room 211
State Capitol
415 South Beretania Street

**Testimony in Support of SB 911
RELATING TO THE HAWAII.**

Appropriates funds to improve health care services related to cardiac care at Hilo Medical Center.

(Name/Title) Julie Ercanbrack

Thank you for the opportunity to provide testimony in **support of SB 911** that appropriates funds to improve health care services related to cardiac care at Hilo Medical Center.

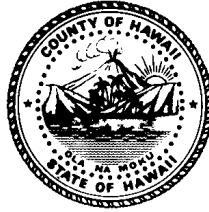
This funding supports Hilo Medical Center's efforts to provide interventional cardiac care for East Hawaii and potentially for all of Hawaii Island. The procedure involved in this advanced level of cardiac care stops heart attacks in progress and reduces long term cardiac disability. The American College of Cardiology recommends interventional cardiac care as a best practice for treating heart attacks in rural areas like Hawaii Island.

Hilo Medical Center is well positioned to provide interventional cardiac care as it already has available cardiac imaging equipment and software, as well as a cardiology clinic that has space for three cardiologists. The hospital's cardiology program is on track to meeting its goal by the end of 2019 to provide interventional cardiology that will save lives and improve the quality of life for cardiac patients. The funding received in the 2018 legislative session was very much appreciated as it was crucial in the hospital's success in recruiting interventional cardiologists. Funding in this second phase is essential for Hilo Medical Center to continue the momentum in advancing heart attack care.

Again, mahalo for the opportunity to express my **support for SB 911** to improve cardiac care at Hilo Medical Center.

1190 Waiuanuenue Avenue ▪ Hilo, Hawaii 96720 ▪ Phone (808)
932-3101 ▪ Fax (808) 974-4746

Harry Kim
Mayor



Wil Okabe
Managing Director

Barbara J. Kossow
Deputy Managing Director

County of Hawai'i Office of the Mayor

25 Aupuni Street, Suite 2603 • Hilo, Hawai'i 96720 • (808) 961-8211 • Fax (808) 961-6553
KONA: 74-5044 Ane Keohokālole Hwy., Bldg C • Kailua-Kona, Hawai'i 96740
(808) 323-4444 • Fax (808) 323-4440

March 18, 2019

Representative John M. Mizuno, Chair
Representative Bertrand Kobayashi, Vice Chair
Committee on Health

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

RE: SB 911, SD1 Relating to Health (HMC Cardiac Care)

Thank you for this opportunity to support the improvement of cardiac care services at Hilo Medical Center (HMC).

For better or worse, over the past few years, I have developed an ongoing and personal relationship with HMC and a number of other medical institutions. HMC has given me excellent service, and Hawai'i should be very pleased with the quality of care it provides. However, HMC could do so much more if more resources were available, and better cardiac care has been identified as a priority.

Please act favorably on SB 911, SD1, and please provide funding for cardiac care in your budget recommendations to Finance.

Respectfully Submitted,


Harry Kim
MAYOR

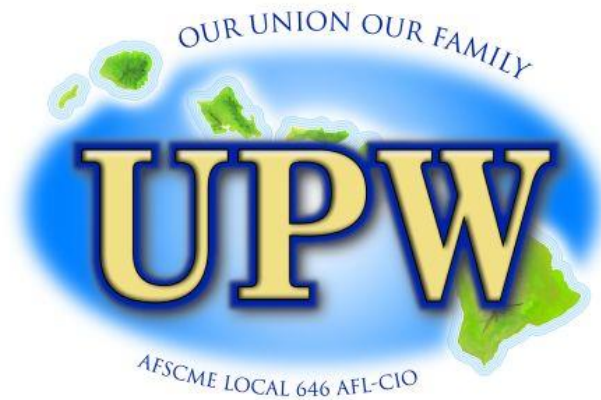
SB-911-SD-1

Submitted on: 3/17/2019 2:43:54 PM

Testimony for HLT on 3/19/2019 10:00:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Jessanie Marques	Non Profit organization	Support	No

Comments:



HAWAII STATE HOUSE OF REPRESENTATIVES

The Thirtieth Legislature
Regular Session of 2019

COMMITTEE ON HEALTH

Representative John Mizuno, Chair
Representative Bertrand Kobayashi, Vice Chair

Date of Hearing: Tuesday, March 19 2019
Time of Hearing: 10:00 a.m.
Place of Hearing: Conference Room 329

TESTIMONY ON SB911, SD1 RELATING TO HEALTH

By DAYTON M. NAKANELUA,
State Director of the United Public Workers,
AFSCME Local 646, AFL-CIO ("UPW")

My name is Dayton M. Nakanelua and I am the State Director of the United Public Workers, AFSCME, Local 646, AFL-CIO (UPW). The UPW is the exclusive bargaining representative for approximately 14,000 public employees, which include blue collar, non-supervisory employees in Bargaining Unit 01 and institutional, health and correctional employees in Bargaining Unit 10, in the State of Hawaii and four counties. The UPW also represents about 1,500 members in the private sector.

SB911, SD1 appropriates funds to improve health care services related to cardiac care at Hilo Medical Center. The UPW **supports** this measure.

Thank you for the opportunity to submit this testimony.



COMMITTEE ON WAYS AND MEANS

Senator Donovan M. Dela Cruz, Chair
Senator Gilbert S.C. Keith-Agaran, Vice Chair

NOTICE OF DECISION MAKING

DATE: Tuesday, February 19, 2019
TIME: 9:30 AM
PLACE: Conference Room 211
State Capitol
415 South Beretania Street

**Testimony in Support of SB 911
RELATING TO THE HAWAII.**

Appropriates funds to improve health care services related to cardiac care at Hilo Medical Center.

(Name/Title) AL ERCANBRACK

Thank you for the opportunity to provide testimony in support of SB 911 that appropriates funds to improve health care services related to cardiac care at Hilo Medical Center.

This funding supports Hilo Medical Center's efforts to provide interventional cardiac care for East Hawaii and potentially for all of Hawaii Island. The procedure involved in this advanced level of cardiac care stops heart attacks in progress and reduces long term cardiac disability. The American College of Cardiology recommends interventional cardiac care as a best practice for treating heart attacks in rural areas like Hawaii Island.

Hilo Medical Center is well positioned to provide interventional cardiac care as it already has available cardiac imaging equipment and software, as well as a cardiology clinic that has space for three cardiologists. The hospital's cardiology program is on track to meeting its goal by the end of 2019 to provide interventional cardiology that will save lives and improve the quality of life for cardiac patients. The funding received in the 2018 legislative session was very much appreciated as it was crucial in the hospital's success in recruiting interventional cardiologists. Funding in this second phase is essential for Hilo Medical Center to continue the momentum in advancing heart attack care.

Again, mahalo for the opportunity to express my **support for SB 911** to improve cardiac care at Hilo Medical Center.

1190 Waiuanuenue Avenue ▪ Hilo, Hawaii 96720 ▪ Phone (808)
932-3101 ▪ Fax (808) 974-4746



March 17, 2019

**Testimony in Support of SB 911 SD1
RELATING TO HEALTH**

Appropriates funds to improve health care services related to cardiac care at Hilo Medical Center

The Hawaii State Rural Health Association (HSRHA) respectfully submits written testimony in support of SB 911 SD1.

Hawaii's island geography results in an inequitable distribution of the healthcare across the state. The majority of providers, facilities, services and programs continue to be located on the island of Oahu due to the fact that this is where the majority of the state population resides.

This leads to rural communities having decreased access to quality health services. It is important for the Hawaii State Rural Health Association (HSRHA) to advocate for increases in capacity and infrastructure that meets ongoing needs and ensures the widest array of health care services remains available and accessible to all rural communities in Hawaii.

The Board of Directors at the HSRHA strongly supports efforts for Hilo Medical Center to receive the needed resources to expand its offering of interventional cardiology for heart attack treatment, and thereby continue to save lives and improve the quality of life for cardiac patients. All residents in Hawaii should be able to receive culturally appropriate and timely healthcare where they reside.

Hawaii State Rural Health Association
4442 Hardy Street, Suite 205
Lihue, HI 96766
email: hsrhacoordinator@gmail.com
website: hawaiistateruralhealth.org

Established in 1994, the Hawaii State Rural Health Association (HSRHA) is a 501(C) 3 non-profit organization dedicated to addressing rural health needs across our island state.

~ Working Together To Promote Healthy Rural Communities ~

Facebook @hawaiiruralhealth

Instagram @hawaiiruralhealth

Twitter @HawaiiRural

From: [Jennifer Walker, MD](#)
To: [HLTtestimony](#)
Subject: Testimony in Support of SB 911 SD1
Date: Monday, March 18, 2019 9:51:57 AM
Attachments: [image001.png](#)

Aloha and Good Morning

Thank you for the opportunity to provide testimony in **support of SB 911 SD 1** that appropriates funds to improve health care services related to cardiac care at Hilo Medical Center.

This funding supports Hilo Medical Center's efforts to provide interventional cardiac care for East Hawaii and potentially for all of Hawaii Island. The procedure involved in this advanced level of cardiac care stops heart attacks in progress and reduces long term cardiac disability. The American College of Cardiology recommends interventional cardiac care as a best practice for treating heart attacks in rural areas like Hawaii Island.

Hilo Medical Center is well positioned to provide interventional cardiac care as it already has available cardiac imaging equipment and software, as well as a cardiology clinic that has space for three cardiologists. The hospital's cardiology program is on track to meeting its goal by the end of 2019 to provide interventional cardiology that will save lives and improve the quality of life for cardiac patients. The funding received in the 2018 legislative session was very much appreciated as it was crucial in the hospital's success in recruiting interventional cardiologists. Funding in this second phase is essential for Hilo Medical Center to continue the momentum in advancing heart attack care.

Again, mahalo for the opportunity to express my **support for SB 911 SD1** to improve cardiac care at Hilo Medical Center.

Jennifer J. Walker, MD, MPH, FAAFP
Medical Director, Hawaii Island Family Health Center
Acting Program Director, Hawaii Island Family Medicine Residency
1190 Waianuenu Ave, Hilo, HI 96720
Phone: (808) 932-3186





American Heart Association testimony in support of SB 911, SD1 "Relating to Health"

Chairman of the Board

Mark Yamakawa

President

Kahealani Rivera, MD

Board Members

Rick Bruno, MD, FACEP
Brandt Farias
Mimi Harris
David Honma
Glen Kaneshige
Brandon Kurisu
Howard Lee
Michael Lui, MD
Kazuma Nakagawa, MD,
FAAN, FAHA
Barbara Petrus
Andrew Rosen
Dave Underriner
Elisa Yadao

Serving Hawaii since 1948

Mission Statement:

"To be a relentless force for a world of longer, healthier lives."

For more information on the AHA's educational or research programs, visit www.heart.org or contact your nearest AHA office.

Office: (808) 377-6630

Fax: (808) 524-0556

Neighbor Islands:
Serviced by the Oahu office

Of the 865,000 heart attacks that occur annually in the United States, approximately 400,000 of them are STEMI heart attacks. A STEMI heart attack carries a substantial risk of death and disability and calls for a quick response on many fronts.

For STEMI patients, each passing minute equals more heart-muscle damage. Rapid diagnosis and Percutaneous Coronary Intervention (PCI) dramatically increase a patient's chance for survival.

According to the American Heart Association (AHA), approximately 400,000 people suffer STEMI annually. But in hospitals with cath labs, only 40 percent of these patients receive appropriate treatment within the 90-minute door-to-balloon (D2B) time recommended by the AHA and the American College of Cardiology (ACC).

Delays in treating this most lethal type of heart attack can cause catastrophic heart damage and death.

Reperfusion therapy is used to open the blocked artery for STEMI patients. Reperfusion therapy is either a clot-busting drug therapy or the artery-opening procedure known as angioplasty. Among patients who receive either therapy in the United States, less than half are treated within the recommended time frames.

- 30 minutes for clot-busting drugs
- 90 minutes for angioplasty

For many living on Hawaii's neighbor islands, the treatment time for angioplasty has not been accessible because of the lack of catheter labs in neighbor island hospitals, and the time needed to transport a patient by air to Oahu where most larger hospitals have catheter labs.

SB 911 would potentially change that for many Big Island STEMI patients by providing funds to establish a full-time catheterization laboratory, including the specialized staffing needs, at the Hilo Medical Center.

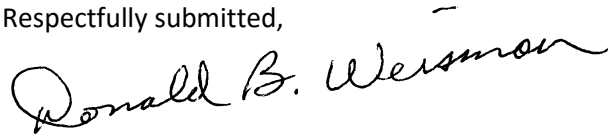
Half of all STEMI patients drive themselves (or are driven by a family member) to the closest hospital. As a result, 30% of STEMI patients do not receive any reperfusion therapy, and of the patients who do receive reperfusion therapy, half of them do not receive it within the recommended time frame.

With an effective STEMI system in place, a patient (or person witnessing the STEMI) would call 9-1-1, Emergency Medical Services using 12-lead ECG machines can transmit

the patient's ECG to the closest hospital capable of providing the best care possible. The AHA recommends that the State also invest in community awareness education of the need to use 9-1-1 for medical emergencies. EMS staff can begin treatment when they arrive — up to an hour sooner than if someone gets to the hospital by car. Patients with chest pain who arrive by ambulance usually receive faster treatment at the hospital, too. Community education may need to focus on overcoming public norms that result in a reluctance to use ambulance services, and education on why calling 9-1-1 improves a patient's chance of having a better health outcome.

Establishing a 24/7 catheterization lab at Hilo Medical Center would be a first step to giving Big Island STEMI patients hope for a better health outcome. Please support SB 911, SD1.

Respectfully submitted,

A handwritten signature in black ink that reads "Donald B. Weisman". The signature is written in a cursive style with a horizontal line above the name.

Don Weisman

Hawaii Government Relations/Communications Director

SB-911-SD-1

Submitted on: 3/16/2019 5:50:48 PM

Testimony for HLT on 3/19/2019 10:00:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Jeanne Yagi	Individual	Support	No

Comments:

[COMMITTEE ON WAYS AND MEANS](#)

Senator Donovan M. Dela Cruz, Chair

Senator Gilbert S.C. Keith-Agaran, Vice Chair

NOTICE OF DECISION MAKING

DATE: Tuesday, February 19, 2019

TIME: 9:30 AM
Conference Room 211

PLACE: State Capitol

415 South Beretania Street

Testimony in Support of SB 911

RELATING TO THE HAWAII.

Appropriates funds to improve health care services related to cardiac care at Hilo Medical Center.

From Jimmy and Jeanne Yagi

Thank you for the opportunity to provide testimony in **support of SB 911** that appropriates funds to improve health care services related to cardiac care at Hilo Medical Center.

This funding supports Hilo Medical Center's efforts to provide interventional cardiac care for East Hawaii and potentially for all of Hawaii Island. The procedure involved in this advanced level of cardiac care stops heart attacks in progress and reduces long term cardiac disability. The American College of Cardiology recommends interventional

cardiac care as a best practice for treating heart attacks in rural areas like Hawaii Island.

Hilo Medical Center is well positioned to provide interventional cardiac care as it already has available cardiac imaging equipment and software, as well as a cardiology clinic that has space for three cardiologists. The hospital's cardiology program is on track to meeting its goal by the end of 2019 to provide interventional cardiology that will save lives and improve the quality of life for cardiac patients. The funding received in the 2018 legislative session was very much appreciated as it was crucial in the hospital's success in recruiting interventional cardiologists. Funding in this second phase is essential for Hilo Medical Center to continue the momentum in advancing heart attack care.

Again, mahalo for the opportunity to express our **support for SB 911** to improve cardiac care at Hilo Medical Center.

Signed: Jimmy and Jeanne Yagi

SB-911-SD-1

Submitted on: 3/16/2019 8:58:02 PM

Testimony for HLT on 3/19/2019 10:00:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
BREEANI LEE	Individual	Support	No

Comments:

Date: March 16, 2019

To: The Honorable John M. Mizuno, Chair
The Honorable Bertrand Kobayashi, Vice Chair
Members of the House Committee on Health

Re: **Strong Support of SB911 SD1**, Relating to Health

Hrg: March 19, 2019 at 10:00 AM at Conference Room 329

Aloha House Committee Health,

I am writing in **strong support of SB911 SD1**, that appropriates funds to improve health care services related to cardiac care at Hilo Medical Center.

This funding supports Hilo Medical Center's efforts to provide interventional cardiac care for East Hawai'i and potentially for all of Hawai'i Island. The procedure involved in this advanced level of cardiac care stops heart attacks in progress and reduces long-term cardiac disability. The American College of Cardiology recommends interventional cardiac care as a best practice for treating heart attacks in rural areas like Hawai'i Island.

Hilo Medical Center is well positioned to provide interventional cardiac care as it already has available cardiac imaging equipment and software, as well as a cardiology clinic that has space for three cardiologists. The hospital's cardiology program is on track to meeting its goal by the end of 2019 to provide interventional cardiology that will save lives and improve the quality of life for cardiac patients.

The funding received in the 2018 legislative session is greatly appreciated and was crucial to the hospital's success in recruiting interventional cardiologists. Funding in this second phase is essential for Hilo Medical Center to continue the momentum in advancing heart attack care and saving lives on Hawai'i Island.

I **strongly support SB911 SD1** and respectfully ask you to pass this bill out of committee.

Many thanks for your consideration,

Forrest Batz, PharmD
Keaau, HI

Support Testimony For Hilo Medical Center's Cardiac Intervention Capacity

My name is Charlene Iboshi from Hawaii Island. I support the expansion of the Cardiac Cath Lab for East Hawaii. Unfortunately, as a "baby boomer" at high risk of a heart-attack or stroke, I understand the real problem of living on Hawaii Island. Personally, my mom and I were caregivers for my dad, who had several heart attacks, and eventually, a debilitating stroke.

Three factors support the expansion of the Cardiac Cath Lab and expansion of services on our island: 1) Fastest growing state population is in the Puna District, despite the Lava disaster in 2018; 2) Hilo district has the largest elder population proportionally in the state, almost 30 % over 60; 3) the distance for emergency response time in our super-rural environment –impacts any emergency intervention of "the golden hour."

I am involved with a community collaboration that is involved with Recruitment and Retention of Physicians through a non-profit, Community First, the EH Independent Physicians Association and the Hilo Medical Center, and HMC Foundation. There are many improvements with the expansion of the HMC's Cardiac Care Imaging. We are thankful for the past legislative support for cardiac imaging process. Now, to save more lives, the final step of interventional cardiologists and the required supports are requested to complete the continuum of care.

Our community is working on prevention of cardiac disease through the Blue Zones Project and "Hui Pono" Ornish Program at the Hilo Medical Center. Post-cardiac, rehabilitation services always have been good in the community.

Please support funding of the needed cardiac services for Hawaii Island. Thank you for the opportunity to testify.

SB-911-SD-1

Submitted on: 3/17/2019 7:57:54 AM

Testimony for HLT on 3/19/2019 10:00:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Edward Johnston	Individual	Support	No

Comments:

COMMITTEE ON HEALTH

Rep. John M. Mizuno, Chair
Rep. Bertrand Kobayashi, Vice Chair

Rep. Della Au Belatti	Rep. Calvin K.Y. Say
Rep. Nadine K. Nakamura	Rep. James Kunane Tokioka
Rep. Joy A. San Buenaventura	Rep. Gene Ward

NOTICE OF HEARING

DATE: Tuesday, March 19, 2019
TIME: 10:00 am
PLACE: Conference Room 329
State Capitol
415 South Beretania Street

Testimony in Support of SB 911 SD1

Relating to health. Appropriates funds to improve health care services related to cardiac care at Hilo Medical Center.

(Name/Title)____Frederick C. Holschuh, M.D.

Thank you for the opportunity to provide testimony in **support of SB 911 SD 1** that appropriates funds to improve health care services related to cardiac care at Hilo Medical Center.

This funding supports Hilo Medical Center's efforts to provide interventional cardiac care for East Hawaii and potentially for all of Hawaii Island. The procedure involved in this advanced level of cardiac care stops heart attacks in progress and reduces long term cardiac disability. The American College of Cardiology recommends interventional cardiac care as a best practice for treating heart attacks in rural areas like Hawaii Island.

Hilo Medical Center is well positioned to provide interventional cardiac care as it already has available cardiac imaging equipment and software, as well as a cardiology clinic that has space for three cardiologists. The hospital's cardiology program is on track to meeting its goal by the end of 2019 to provide interventional cardiology that will save lives and improve the quality of life for cardiac patients. The funding received in the 2018 legislative session was very much appreciated as it was crucial in the hospital's success in recruiting interventional cardiologists. Funding in this second phase is essential for Hilo Medical Center to continue the momentum in advancing heart attack care.

Attachments area

SB-911-SD-1

Submitted on: 3/17/2019 9:01:02 AM

Testimony for HLT on 3/19/2019 10:00:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Clarysse Kami Nunokawa	Individual	Support	No

Comments:

SB-911-SD-1

Submitted on: 3/17/2019 1:02:50 PM

Testimony for HLT on 3/19/2019 10:00:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Karen	Individual	Support	No

Comments:

Thank you for the opportunity to provide testimony in **support of SB 911** that appropriates funds to improve health care services related to cardiac care at Hilo Medical Center.

This funding supports Hilo Medical Center's efforts to provide interventional cardiac care for East Hawaii and potentially for all of Hawaii Island. The procedure involved in this advanced level of cardiac care stops heart attacks in progress and reduces long term cardiac disability. The American College of Cardiology recommends interventional cardiac care as a best practice for treating heart attacks in rural areas like Hawaii Island.

Hilo Medical Center is well positioned to provide interventional cardiac care as it already has available cardiac imaging equipment and software, as well as a cardiology clinic that has space for three cardiologists. The hospital's cardiology program is on track to meeting its goal by the end of 2019 to provide interventional cardiology that will save lives and improve the quality of life for cardiac patients. The funding received in the 2018 legislative session was very much appreciated as it was crucial in the hospital's success in recruiting interventional cardiologists. Funding in this second phase is essential for Hilo Medical Center to continue the momentum in advancing heart attack care.

Again, mahalo for the opportunity to express my **support for SB 911** to improve cardiac care at Hilo Medical Center.

SB-911-SD-1

Submitted on: 3/16/2019 6:21:11 PM

Testimony for HLT on 3/19/2019 10:00:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Joseph Borer,M.D.	Individual	Support	No

Comments:

Aloha, I am a emergency physician on the Big Island and have seen the consequences of not being able to care for our patients with heart attack. Having a fully functioning, full time cardiac cath lab is lifesaving. In the setting of heart attack, we say 'time is muscle', meaning the longer the time for definitive treatment, the more damage to the heart. There are financial costs to not having this capability on the Big Island as well. The cost of Lifelight, the cost of a patient with a damaged heart, all are hidden costs to our community that can be prevented.

Please support this initiative to bring quality cardiac care to our Hawaiians on the Big Island. You will be saving lives and money.

From: mak221@aol.com
To: [HLTtestimony](#)
Subject: WRITING IN STRONG SUPPORT OF SB911 SD 1
Date: Saturday, March 16, 2019 7:34:23 PM

Testimony in Support of SB 911 SD1

Relating to health. Appropriates funds to improve health care services related to cardiac care at Hilo Medical Center.

(Name/Title) _____ Mark Koppel, 31-392 Lepoloa Rd. Ninole
HI _____

Thank you for the opportunity to provide testimony in **support of SB 911 SD 1** that appropriates funds to improve health care services related to cardiac care at Hilo Medical Center.

This funding supports Hilo Medical Center's efforts to provide interventional cardiac care for East Hawaii and potentially for all of Hawaii Island. The procedure involved in this advanced level of cardiac care stops heart attacks in progress and reduces long term cardiac disability. The American College of Cardiology recommends interventional cardiac care as a best practice for treating heart attacks in rural areas like Hawaii Island.

Hilo Medical Center is well positioned to provide interventional cardiac care as it already has available cardiac imaging equipment and software, as well as a cardiology clinic that has space for three cardiologists. The hospital's cardiology program is on track to meeting its goal by the end of 2019 to provide interventional cardiology that will save lives and improve the quality of life for cardiac patients. The funding received in the 2018 legislative session was very much appreciated as it was crucial in the hospital's success in recruiting interventional cardiologists. Funding in this second phase is essential for Hilo Medical Center to continue the momentum in advancing heart attack care.

Mahalo,

Mark A. Koppel

SB-911-SD-1

Submitted on: 3/17/2019 1:21:10 PM

Testimony for HLT on 3/19/2019 10:00:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
James McCully	Individual	Support	No

Comments:

Hilo needs a well developed, well financed Cardiac Care unit. Your support is critical for the health and welfare of our community since the lives of our affected citizens are dependent on your willingness to prioritize and pass this bill. Please support SB 911

SB-911-SD-1

Submitted on: 3/17/2019 5:23:09 PM

Testimony for HLT on 3/19/2019 10:00:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Christine	Individual	Support	No

Comments:

SB-911-SD-1

Submitted on: 3/17/2019 7:55:40 PM

Testimony for HLT on 3/19/2019 10:00:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Jennifer Zelko	Individual	Support	Yes

Comments:

Thank you for the opportunity to provide testimony in **support of SB 911 SD 1** that appropriates funds to improve health care services related to cardiac care at Hilo Medical Center.

This funding supports Hilo Medical Center's efforts to provide interventional cardiac care for East Hawaii and potentially for all of Hawaii Island. The procedure involved in this advanced level of cardiac care stops heart attacks in progress and reduces long term cardiac disability. The American College of Cardiology recommends interventional cardiac care as a best practice for treating heart attacks in rural areas like Hawaii Island.

Hilo Medical Center is well positioned to provide interventional cardiac care as it already has available cardiac imaging equipment and software, as well as a cardiology clinic that has space for three cardiologists. The hospital's cardiology program is on track to meeting its goal by the end of 2019 to provide interventional cardiology that will save lives and improve the quality of life for cardiac patients. The funding received in the 2018 legislative session was very much appreciated as it was crucial in the hospital's success in recruiting interventional cardiologists. Funding in this second phase is essential for Hilo Medical Center to continue the momentum in advancing heart attack care.

My father John Zelko died in 1999 of a massive heart attack on his way home from work. The more the hospital can do, the more we will save lives and improve the quality of life for cardiac patients.

Testimony for SB911 SD1

To: K. KAHELE, S. CHANG, KANUHA, RUDERMAN, KIM, NISHIHARA,
SHIMABUKURO, WAKAI

Date: March 19, 2019

Time: 10:00 AM

Place: Conference Room 329

Re: Support of SB911 relating to Health

Aloha Legislators,

My name is David Nakao and I am a resident of Hawaii from Mililani. I am currently a Master's student of the Myron B. Thompson School of Social Work at the University of Hawaii at Manoa. I am here to show my personal support for SB911.

I am in support of SB911 because I believe that adding cardiologist specialists to the Hilo Medical Center team will contribute to its growth and its transformational effects of providing local healthcare for this community. I believe that specialized providers should not be exclusive to Oahu and should be available to Hilo and other outer island communities. The high costs and challenges transporting patients not only place them at more risk, but may discourage others to seek healthcare and untreated conditions. On 3/17/2019, I visited Hilo Medical Center on a tour with my group of future healthcare providers and experienced the importance of available specialists in any medical center. When visiting the center we overheard the speaker call for cardiologists and staff to respond to an incoming patient on an ambulance. This served as a reminder to everyone how sudden tragedy can happen to those in life and emphasizes the importance of available health specialists accessible to everyone, especially those in complex rural geographical environments.

Respectfully Submitted,

David Nakao. davidnakao@yahoo.com.

SB-911-SD-1

Submitted on: 3/18/2019 6:36:25 AM

Testimony for HLT on 3/19/2019 10:00:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Tracy S. Aruga	Individual	Support	No

Comments:

[COMMITTEE ON HEALTH](#)

Rep. John M. Mizuno, Chair

Rep. Bertrand Kobayashi, Vice Chair

Rep. Della Au Belatti

Rep. Nadine K. Nakamura

Rep. Joy A. San Buenaventura

Rep. Calvin K.Y. Say

Rep. James Kunane Tokioka

Rep. Gene Ward

NOTICE OF HEARING

DATE: Tuesday, March 19, 2019

TIME: 10:00 am

Conference Room 329

PLACE: State Capitol

415 South Beretania Street

Testimony in Support of SB 911 SD1

Relating to health. Appropriates funds to improve health care services related to cardiac care at Hilo Medical Center.

Tracy S. Aruga, Safety Officer

Thank you for the opportunity to provide testimony in **support of SB 911 SD 1** that appropriates funds to improve health care services related to cardiac care at Hilo Medical Center.

This funding supports Hilo Medical Center's efforts to provide interventional cardiac care for East Hawaii and potentially for all of Hawaii Island. The procedure involved in this advanced level of cardiac care stops heart attacks in progress and reduces long term cardiac disability. The American College of Cardiology recommends interventional cardiac care as a best practice for treating heart attacks in rural areas like Hawaii Island.

Hilo Medical Center is well positioned to provide interventional cardiac care as it already has available cardiac imaging equipment and software, as well as a cardiology clinic that has space for three cardiologists. The hospital's cardiology program is on track to meeting its goal by the end of 2019 to provide interventional cardiology that will save lives and improve the quality of life for cardiac patients. The funding received in the 2018 legislative session was very much appreciated as it was crucial in the hospital's success in recruiting interventional cardiologists. Funding in this second phase is essential for Hilo Medical Center to continue the momentum in advancing heart attack care.

Again, mahalo for the opportunity to express my **support for SB 911 SD1** to improve cardiac care at Hilo Medical Center.

COMMITTEE ON HEALTH

Rep. John M. Mizuno, Chair
Rep. Bertrand Kobayashi, Vice Chair

Rep. Della Au Belatti Rep. Calvin K.Y. Say
Rep. Nadine K. Nakamura Rep. James Kunane Tokioka
Rep. Joy A. San Buenaventura Rep. Gene Ward

NOTICE OF HEARING

DATE: Tuesday, March 19, 2019

TIME: 10:00 am

PLACE: Conference Room 329
State Capitol

415 South Beretania Street

Testimony in Support of SB 911 SD1

Relating to health. Appropriates funds to improve health care services related to cardiac care at Hilo Medical Center.

Nicole Ward, RN

Thank you for the opportunity to provide testimony in support of SB 911 SD 1 that appropriates funds to improve health care services related to cardiac care at Hilo Medical Center.

This funding supports Hilo Medical Center's efforts to provide interventional cardiac care for East Hawaii and potentially for all of Hawaii Island. The procedure involved in this advanced level of cardiac care stops heart attacks in progress and reduces long term cardiac disability. The American College of Cardiology recommends interventional cardiac care as a best practice for treating heart attacks in rural areas like Hawaii Island.

Hilo Medical Center is well positioned to provide interventional cardiac care as it already has available cardiac imaging equipment and software, as well as a cardiology clinic that has space for three cardiologists. The hospital's cardiology program is on track to meeting its goal by the end of 2019 to provide interventional cardiology that will save lives and improve the quality of life for cardiac patients. The funding received in the 2018 legislative session was very much appreciated as it was crucial in the hospital's success in recruiting interventional cardiologists. Funding in this second phase is essential for Hilo Medical Center to continue the momentum in advancing heart attack care.

Again, mahalo for the opportunity to express my support for SB 911 SD1 to improve cardiac care at Hilo Medical Center.

SB-911-SD-1

Submitted on: 3/18/2019 6:54:06 AM

Testimony for HLT on 3/19/2019 10:00:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Brett C Kodish	Individual	Support	No

Comments:

My name is Brett Kodish, I am an emergency physician practicing at multiple hospitals on the Big Island including Hilo Medical Center. I also practice at North Hawaii Community Hospital, Hale Ho'ola Hamakua, Kona Community Hospital and Molokai General Hospital. I have been practicing in the state of Hawaii for nearly 2 years. **I am fully in support of Senate Bill 911 SD1**, 2 appropriate additional funds to Hilo Medical Center for the support of comprehensive invasive/interventional cardiology care.

In my time practicing on the Big Island, I have cared for innumerable patients suffering multiple degrees of "heart attacks". Our residents are receiving substandard care in the second-largest city in our state. This is a *disgrace*. I have watched many fathers, mothers, husbands, wives, aunties, uncles and grandparents die unnecessarily awaiting for transfer to higher level of care on another island. The vast majority of these patients, if interventional cardiology were available to them at their own hospital or even on a hospital in the same island they reside, would have survived with a *good quality of life*.

I have watched my hospital administrators flight tooth and nail for every dollar to try to establish an interventional cardiology practice for our Big Island Ohana. Please support us and our patients who are desperately in need of standard of care in a high population area. Establishing a reliable practice at Hilo Medical Center will not only serve the population of Hilo, but the entire county of Hawaii, decreasing the need to transfer patients from Kamuela/Kona/Ka'u/Kohala/Honokaa hospitals to Honolulu or Maui. This will save an immense amount of money spent on transfers and will save lives and improve outcomes.

When I moved to Hawaii Island, all of my colleagues told me that we are practicing medicine 20 years behind the mainland. They were not wrong. We are doing everything that we can as providers to advance healthcare in our somewhat austere setting. **Please support our efforts to bring healthcare in Hawaii into the modern area.**

SB-911-SD-1

Submitted on: 3/17/2019 4:28:52 PM

Testimony for HLT on 3/19/2019 10:00:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Gordon Takaki	Individual	Support	No

Comments:

Thank you for the opportunity to provide testimony in **support of SB 911** that appropriates funds to improve health care services related to cardiac care at Hilo Medical Center.

This funding supports Hilo Medical Center's efforts to provide interventional cardiac care for East Hawaii and potentially for all of Hawaii Island. The procedure involved in this advanced level of cardiac care stops heart attacks in progress and reduces long term cardiac disability. The American College of Cardiology recommends interventional cardiac care as a best practice for treating heart attacks in rural areas like Hawaii Island.

Hilo Medical Center is well positioned to provide interventional cardiac care as it already has available cardiac imaging equipment and software, as well as a cardiology clinic that has space for three cardiologists. The hospital's cardiology program is on track to meeting its goal by the end of 2019 to provide interventional cardiology that will save lives and improve the quality of life for cardiac patients. The funding received in the 2018 legislative session was very much appreciated as it was crucial in the hospital's success in recruiting interventional cardiologists. Funding in this second phase is essential for Hilo Medical Center to continue the momentum in advancing heart attack care.

Again, mahalo for the opportunity to express my **support for SB 911** to improve cardiac care at Hilo Medical Center.

SB-911-SD-1

Submitted on: 3/18/2019 7:19:10 AM

Testimony for HLT on 3/19/2019 10:00:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Carl Juneau	Individual	Support	No

Comments:

Thank you for the opportunity to provide testimony in **support of SB 911 SD1**.

My name is Carl Juneau. I am an interventional cardiologist and have recently joined Hilo Medical Center's cardiology program.

Let me update my previous letters of support (2019/01/28, 2019/02/17) for the bills HB527 and HB527 HD1 SP922, presented to fund the Cardiac Cath Lab at Hilo Medical Center:

I first heard of the need for interventional cardiology on the Big Island from one of my patients in Nevada. He told me that he is hesitant to visit the island because, having had a previous stent placement, he knows there is no such intervention should he experience a cardiac emergency. After being contacted by the team at HMC, my wife and I flew for a visit. While on the Hawaiian Airlines plane, my wife struck up a conversation with the lady in the next seat. This woman was so excited to have us visit her home island. She told us that her mother had died of a heart attack because she hadn't wanted to be taken from her home to receive care in Honolulu. Later that day, while checking in at the bed and breakfast, our hostess cried and hugged me when I told her the reason for our visit. Our realtor's husband has a good friend who died after a heart attack while on a transport plane. Since our arrival here, we have heard countless stories from people who have lost family members or friends to heart attacks. These are the people that this program will help.

I am an experienced cardiologist who has performed this procedure thousands of times on the mainland. While in Nevada, I was instrumental in establishing a new interventional program and, over the years, saw a great benefit to the community. This type of program requires an entire team. The goal is to establish a solid foundation that will grow with the community's needs and be sustainable in the long run. So far, I see that the budget has been well-spent. They have attracted qualified and experienced personnel and have respected the national average for salaries. The future outlook is so promising. There is a second full-time interventional cardiologist coming on board this summer and they are in the process of hiring a third permanent cardiologist to consolidate the team.

As an update, at this point, we have now performed 13 coronary angioplasties. This includes a patient who presented from home with an evolving heart attack. She was emergently treated at Hilo Medical Center with coronary angioplasty and stents, and returned home within a few days with completely normal heart function. Another patient had critical coronary artery blockages and became too unstable for transfer. She underwent life-saving complex coronary angioplasty using state-of -the-art equipment including: drug eluting stents, intravascular ultrasound, and intra-aortic balloon pump. The outcome has been favorable in every case and the Cardiac Cath lab team did rise to the challenge, demonstrating invaluable knowledge and experience. In the next few months, we plan to expand elective services as well as continue urgent life-saving care. This summer, when additional interventional cardiologists join the team, 24/7 treatment will be implemented.

Every morning my wife and I wake up grateful for the opportunity to become part of this wonderful community. Thank you for listening and for your consideration.

Carl Juneau MD FACC

Interventional Cardiology

SB-911-SD-1

Submitted on: 3/18/2019 7:46:42 AM

Testimony for HLT on 3/19/2019 10:00:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Daniel H Belcher	Individual	Support	No

Comments:

SB-911-SD-1

Submitted on: 3/18/2019 8:00:51 AM

Testimony for HLT on 3/19/2019 10:00:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Douglass Adams	Individual	Support	No

Comments:

SB-911-SD-1

Submitted on: 3/18/2019 7:55:10 AM

Testimony for HLT on 3/19/2019 10:00:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Nadya Castilan	Individual	Support	No

Comments:

Thank you for the opportunity to provide testimony in **support of SB 911 SD 1** that appropriates funds to improve health care services related to cardiac care at Hilo Medical Center.

This funding supports Hilo Medical Center's efforts to provide interventional cardiac care for East Hawaii and potentially for all of Hawaii Island. The procedure involved in this advanced level of cardiac care stops heart attacks in progress and reduces long term cardiac disability. The American College of Cardiology recommends interventional cardiac care as a best practice for treating heart attacks in rural areas like Hawaii Island.

Hilo Medical Center is well positioned to provide interventional cardiac care as it already has available cardiac imaging equipment and software, as well as a cardiology clinic that has space for three cardiologists. The hospital's cardiology program is on track to meeting its goal by the end of 2019 to provide interventional cardiology that will save lives and improve the quality of life for cardiac patients. The funding received in the 2018 legislative session was very much appreciated as it was crucial in the hospital's success in recruiting interventional cardiologists. Funding in this second phase is essential for Hilo Medical Center to continue the momentum in advancing heart attack care.

Again, mahalo for the opportunity to express my **support for SB 911 SD1** to improve cardiac care at Hilo Medical Center.

SB-911-SD-1

Submitted on: 3/18/2019 8:04:04 AM

Testimony for HLT on 3/19/2019 10:00:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Karen Teshima	Individual	Support	No

Comments:

Thank you for the opportunity to provide testimony in **support of SB 911** that appropriates funds to improve health care services related to cardiac care at Hilo Medical Center.

This funding supports Hilo Medical Center's efforts to provide interventional cardiac care for East Hawaii and potentially for all of Hawaii Island. The procedure involved in this advanced level of cardiac care stops heart attacks in progress and reduces long term cardiac disability. The American College of Cardiology recommends interventional cardiac care as a best practice for treating heart attacks in rural areas like Hawaii Island.

Hilo Medical Center is well positioned to provide interventional cardiac care as it already has available cardiac imaging equipment and software, as well as a cardiology clinic that has space for three cardiologists. The hospital's cardiology program is on track to meeting its goal by the end of 2019 to provide interventional cardiology that will save lives and improve the quality of life for cardiac patients. The funding received in the 2018 legislative session was very much appreciated as it was crucial in the hospital's success in recruiting interventional cardiologists. Funding in this second phase is essential for Hilo Medical Center to continue the momentum in advancing heart attack care.

Again, mahalo for the opportunity to express my **support for SB 911** to improve cardiac care at Hilo Medical Center.

SB-911-SD-1

Submitted on: 3/18/2019 8:57:41 AM

Testimony for HLT on 3/19/2019 10:00:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Mike Sayama, PhD	Community First	Support	No

Comments:

Thank you for the opportunity to provide testimony in **support of SB 911 SD 1** that appropriates funds to improve health care services related to cardiac care at Hilo Medical Center.

This funding supports Hilo Medical Center's efforts to provide interventional cardiac care for East Hawaii and potentially for all of Hawaii Island. The procedure involved in this advanced level of cardiac care stops heart attacks in progress and reduces long term cardiac disability. The American College of Cardiology recommends interventional cardiac care as a best practice for treating heart attacks in rural areas like Hawaii Island.

Hilo Medical Center is well positioned to provide interventional cardiac care as it already has available cardiac imaging equipment and software, as well as a cardiology clinic that has space for three cardiologists. The hospital's cardiology program is on track to meeting its goal by the end of 2019 to provide interventional cardiology that will save lives and improve the quality of life for cardiac patients. The funding received in the 2018 legislative session was very much appreciated as it was crucial in the hospital's success in recruiting interventional cardiologists. Funding in this second phase is essential for Hilo Medical Center to continue the momentum in advancing heart attack care.

Again, mahalo for the opportunity to express my **support for SB 911 SD1** to improve cardiac care at Hilo Medical Center.

COMMITTEE ON HEALTH

Rep. John M. Mizuno, Chair
Rep. Bertrand Kobayashi, Vice Chair

Rep. Della Au Belatti	Rep. Calvin K.Y. Say
Rep. Nadine K. Nakamura	Rep. James Kunane Tokioka
Rep. Joy A. San Buenaventura	Rep. Gene Ward

NOTICE OF HEARING

DATE: Tuesday, March 19, 2019
TIME: 10:00 am
PLACE: Conference Room 329
State Capitol
415 South Beretania Street

Testimony in Support of SB 911 SD1

Relating to health. Appropriates funds to improve health care services related to cardiac care at Hilo Medical Center.

(Name/Title) ANDREA KEPANO, CLINIC RECEPTIONIST

Thank you for the opportunity to provide testimony in **support of SB 911 SD 1** that appropriates funds to improve health care services related to cardiac care at Hilo Medical Center.

This funding supports Hilo Medical Center's efforts to provide interventional cardiac care for East Hawaii and potentially for all of Hawaii Island. The procedure involved in this advanced level of cardiac care stops heart attacks in progress and reduces long term cardiac disability. The American College of Cardiology recommends interventional cardiac care as a best practice for treating heart attacks in rural areas like Hawaii Island.

Hilo Medical Center is well positioned to provide interventional cardiac care as it already has available cardiac imaging equipment and software, as well as a cardiology clinic that has space for three cardiologists. The hospital's cardiology program is on track to meeting its goal by the end of 2019 to provide interventional cardiology that will save lives and improve the quality of life for cardiac patients. The funding received in the 2018 legislative session was very much appreciated as it was crucial in the hospital's success in recruiting interventional cardiologists. Funding in this second phase is essential for Hilo Medical Center to continue the momentum in advancing heart attack care.

Again, mahalo for the opportunity to express my **support for SB 911 SD1** to improve cardiac care at Hilo Medical Center.

SB-911-SD-1

Submitted on: 3/18/2019 9:22:23 AM

Testimony for HLT on 3/19/2019 10:00:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Julie Leach	Individual	Support	No

Comments:

Aloha,

I respectfully request your consideration of this important bill. I look at this from a perspective of a fairly new resident. I have lived here nearly 6 years and am so proud to call this home. I am also a nurse of 38 years. My husband and I thoughtfully made the move knowing there was a lack of medical services on Hawaii Island, but we are in good health and took the risk. We also know that Hilo Medical Center is vastly trying to improve this situation. It seems that basic cardiac care on this island should be a no-brainer. I understand the need to fund so many things, but it is always hard to understand certain, road project and new airport fences being more important when it comes to our precious tax dollars.

Furthermore, since Hilo Medical Center has made the effort to become a top hospital in Hawaii and in the nation as noted by their ratings and continued move to excellence, what better time to fully embrace a cardiac program that saves money, time & lives.

Respectfully, Julie Leach MSN, RN, OCN

From: patnsteve@hawaiiintel.net
To: [HLTtestimony](#)
Subject: SB911 SD1 Support
Date: Monday, March 18, 2019 8:33:35 AM

COMMITTEE ON HEALTH

Rep. John M. Mizuno, Chair

Rep. Bertrand Kobayashi, Vice Chair

Rep. Della Au Belatti

Rep. Calvin K.Y. Say

Rep. Nadine K. Nakamura

Rep. James Kunane Tokioka

Rep. Joy A. San Buenaventura

Rep. Gene Ward

NOTICE OF HEARING

DATE: Tuesday, March 19, 2019

TIME: 10:00 am

PLACE: Conference Room 329

State Capitol

415 South Beretania Street

Testimony in Support of SB 911 SD1

Relating to health. Appropriates funds to improve health care services related to cardiac care at Hilo Medical Center.

Steve Godzsak, Hilo resident n cardiac survivor, thank you for the opportunity to provide testimony in support of SB 911 SD 1 that appropriates funds to improve health care services related to cardiac care at Hilo Medical Center.

This funding supports Hilo Medical Center's efforts to provide interventional cardiac care for East Hawaii and potentially for all of Hawaii Island. The procedure involved in this advanced level of cardiac care stops heart attacks in progress and reduces long term cardiac disability. The American College of Cardiology recommends interventional cardiac care as a best practice for treating heart attacks in rural areas like Hawaii Island.

Hilo Medical Center is well positioned to provide interventional cardiac care as it already has available cardiac imaging equipment and software, as well as a cardiology clinic that has space for three cardiologists. The hospital's cardiology program is on track to meeting its goal by the end of 2019 to provide interventional cardiology that will save lives and improve the quality of life for cardiac patients. The funding received in the 2018 legislative session was very much appreciated as it was crucial in the hospital's success in recruiting interventional cardiologists. Funding in this second phase is essential for Hilo Medical Center to continue the momentum in advancing heart attack care.

SB-911-SD-1

Submitted on: 3/18/2019 12:04:24 PM

Testimony for HLT on 3/19/2019 10:00:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Julie Tulang	Individual	Support	No

Comments:

SB-911-SD-1

Submitted on: 3/18/2019 3:28:44 PM

Testimony for HLT on 3/19/2019 10:00:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Cyd L. Hoffeld	Individual	Support	No

Comments:

Aloha Legislators,

Please support SB911 SD1 to fund the advancement of cardiac care on Hawaii Island. As our populations continue to age it is imperative for Hawaii Island residence to have a medical facility where we can access cardiac care as soon as possible and not have to fly to another island for it. Not only are we looking at the high cost of medical care, we are also saddled by the astronomical cost of air ambulance services as well as travel and accommodation costs for family members when visiting the patient off-island.

Please join me and many others on Hawaii Island in our support of SB911 SD1.


Mahalo,

Cyd L. Hoffeld

Kalapana on Hawaii Island

From: Amy Monroe <noreply@jotform.com>
Sent: Monday, March 18, 2019 2:37 PM
To: HLTtestimony
Subject: Testimony in OPPOSITION to SB 1033



 **OPPOSE SB 1033 ! Requiring licensure of midwives**

Name	Amy Monroe
Email	amym_02@hotmail.com
Type a question	<p>Aloha House HLT Chair Mizuno, Vice Chair Kobayashi, and committee members,</p> <p>I am testifying in STRONG OPPOSITION to SB 1033 which would require licensure of midwives.</p> <p>This is an extremely problematic measure that very seriously threatens health and safety of mothers, babies and cultural practices. Here is why:</p> <ul style="list-style-type: none">• The costs alone are prohibitive. According to the DCCA, “The costs associated with licensing approximately 13 midwives would be \$203,000.” Because State licensing law requires licensure to pay for itself, those 13 eligible midwives would bear a cost burden of \$15,615 each per year, which would be passed directly on to the families they serve. These costs would be greatly increased if a hearing were to take place, a lawsuit or criminal action occurred, or other incidental expenses were incurred for any reason.• ONLY Midwives trained outside of Hawaii are eligible. This alone should stop this measure in its tracks. It creates a sharp dividing line, which almost all local midwives are on the wrong side of. Good training routes of many kinds already exist in Hawai’i, but these are sidelined or criminalized by this measure.❓• The requirement that a traditional midwife “provides the required disclosures to clients that the individual is practicing midwifery in this State without a license to practice midwifery” is both offensive and legally unsound. This measure defines a legally exempted category of practitioner, and then, in the same sentence, forces them to state that they are

practicing without a license to practice. The legal mess this is likely to create (and that the legislators passing such terrible language would be liable for), along with the potential for serious consequences or even death, is enormous. ❖

- Transfer delays are increased when mothers fear persecution of their “unlicensed” midwife, or persecution of themselves for choosing one, after consenting to give birth with an unlicensed midwife (per this bill’s requirement). This increases actual danger substantially, particularly with consideration of the well-founded fear of unfounded systemic persecution through the CWS based on discrimination that might use this as a basis for child removal or criminalization of the mother if that child is born in a hospital after an attempted birth with as “unlicensed” practitioner, despite the fact that the same complication could have happened anywhere.

- Kanaka Maoli traditional practices are not protected. Papa Ola Lokahi does not currently have any mechanism to extend protection to traditional midwives or other birth-related practitioners as such (its mandates are currently strictly for laau lapaau, lomilomi, hooponopono and laau kahea). While this could potentially be developed in the future, at this time such protection would be entirely speculative. Law cannot be based on speculation.

- This measure is full of legal gray areas; gray areas are what lawsuits are made of.

- The entire term “traditional practice” is externally defined, which goes directly against culture and traditions, which must be internally defined in order to be considered bona fide. See quote from Papa Ola Lokahi-convened Kahuna Statement to the Legislature, 1998:

The Kahuna Statement written for the legislature by the leading healers convened by Papa Ola Lokahi on October 31, 1998 (upon which the naming of POL in this bill is based) says clearly that government licensure is inappropriate in the context of Kanaka Maoli healing: ❖

“...LICENSURE, AND CERTIFICATION ISSUES RAISED IN THE LEGISLATION ARE INAPPROPRIATE AND CULTURALLY UNACCEPTABLE FOR GOVERNMENT TO ASCERTAIN. ❖ THESE ARE THE KULEANA OF THE HAWAIIAN COMMUNITY ITSELF THROUGH KUPUNA WHO ARE PERPETUATING THESE PRACTICES.”

<http://www.papaolalokahi.org/images/CHRONOLOGY-of-EVENTS-RELATED-TO-TRADITIONAL-HEALING-2015-Dec.pdf>

-
- There is no reasonable licensure pathway for Hawai'i clinical midwives who are not CPMs. It is against the Hawai'i Regulatory Licensing Reform Act to offer a licensure pathway to a part of a profession, but not all of it, especially as NARM Certification is practically logistically impossible for Hawai'i midwives (thus shifting the recognized practice entirely to those trained outside of Hawai'i). The costs involved in licensing such a tiny cohort also need to be assessed prior to structuring legislation, as this Act also requires licensees to bear the full cost of issuance and administration. For a small cohort with complex needs, this could potentially be astronomical.
- The exemptions do not actually exempt anyone currently practicing traditional midwifery. For this reason, great damage and endangerment would result in our community.
- Consumers are not helped by this measure, which would limit choices, raise prices, and provide no measurable safety benefits .

It must be remembered that ALL regulation of traditional midwifery limits, alters, and otherwise adversely impacts traditional Native Hawaiian healing, because the central traditional practice in question is BIRTH, not midwifery.

Traditional midwives who are not Hawaiian and do not qualify under SB 1033 are extremely important in the traditions that Hawaiian families are reviving from a nearly decimated cultural past. Many young Kanaka Maoli have the oral history of their grandparents to go on, but not much more. Non-Hawaiian traditional midwives play a crucial support role for ensuring safety, confidence and well-being as these traditions are brought back into being. Without them, the practices would still come back, but slower, with more loss and much less safety and support.

What is needed is COMMUNICATION, not regulation of something the State simply cannot understand.

My recommendation is to hold this bill, and instead consider the creation of a body that could effectively bring all concerned parties (DOH, cultural practitioners, traditional birth attendants, CPMs,

student midwives, OBGYN/ER doctors, etc) together to build the needed comprehensive solutions to address real consumer protection and safety.

Although I appreciate the good intent of this measure and its amendments, it still is highly problematic and I must oppose it strongly.

From: Misha Kassel MD <noreply@jotform.com>
Sent: Monday, March 18, 2019 2:23 PM
To: HLTtestimony
Subject: Testimony in OPPOSITION to SB 1033



OPPOSE SB 1033 ! Requiring licensure of midwives

Name	Misha Kassel MD
Email	mkassel137@yahoo.com
Type a question	<p>Aloha House HLT Chair Mizuno, Vice Chair Kobayashi, and committee members,</p> <p>I am testifying in STRONG OPPOSITION to SB 1033 which would require licensure of midwives.</p> <p>This is an extremely problematic measure that very seriously threatens health and safety of mothers, babies and cultural practices. Here is why:</p> <ul style="list-style-type: none">• The costs alone are prohibitive. According to the DCCA, “The costs associated with licensing approximately 13 midwives would be \$203,000.” Because State licensing law requires licensure to pay for itself, those 13 eligible midwives would bear a cost burden of \$15,615 each per year, which would be passed directly on to the families they serve. These costs would be greatly increased if a hearing were to take place, a lawsuit or criminal action occurred, or other incidental expenses were incurred for any reason.• ONLY Midwives trained outside of Hawaii are eligible. This alone should stop this measure in its tracks. It creates a sharp dividing line, which almost all local midwives are on the wrong side of. Good training routes of many kinds already exist in Hawai’i, but these are sidelined or criminalized by this measure.❓• The requirement that a traditional midwife “provides the required disclosures to clients that the individual is practicing midwifery in this State without a license to practice midwifery” is both offensive and legally unsound. This measure defines a legally exempted category of practitioner, and then, in the same sentence, forces them to state that they are

practicing without a license to practice. The legal mess this is likely to create (and that the legislators passing such terrible language would be liable for), along with the potential for serious consequences or even death, is enormous. ❖

- Transfer delays are increased when mothers fear persecution of their “unlicensed” midwife, or persecution of themselves for choosing one, after consenting to give birth with an unlicensed midwife (per this bill’s requirement). This increases actual danger substantially, particularly with consideration of the well-founded fear of unfounded systemic persecution through the CWS based on discrimination that might use this as a basis for child removal or criminalization of the mother if that child is born in a hospital after an attempted birth with as “unlicensed” practitioner, despite the fact that the same complication could have happened anywhere.

- Kanaka Maoli traditional practices are not protected. Papa Ola Lokahi does not currently have any mechanism to extend protection to traditional midwives or other birth-related practitioners as such (its mandates are currently strictly for laau lapaau, lomilomi, hooponopono and laau kahea). While this could potentially be developed in the future, at this time such protection would be entirely speculative. Law cannot be based on speculation.

- This measure is full of legal gray areas; gray areas are what lawsuits are made of.

- The entire term “traditional practice” is externally defined, which goes directly against culture and traditions, which must be internally defined in order to be considered bona fide. See quote from Papa Ola Lokahi-convened Kahuna Statement to the Legislature, 1998:

The Kahuna Statement written for the legislature by the leading healers convened by Papa Ola Lokahi on October 31, 1998 (upon which the naming of POL in this bill is based) says clearly that government licensure is inappropriate in the context of Kanaka Maoli healing: ❖

“...LICENSURE, AND CERTIFICATION ISSUES RAISED IN THE LEGISLATION ARE INAPPROPRIATE AND CULTURALLY UNACCEPTABLE FOR GOVERNMENT TO ASCERTAIN. ❖ THESE ARE THE KULEANA OF THE HAWAIIAN COMMUNITY ITSELF THROUGH KUPUNA WHO ARE PERPETUATING THESE PRACTICES.”

<http://www.papaolalokahi.org/images/CHRONOLOGY-of-EVENTS-RELATED-TO-TRADITIONAL-HEALING-2015-Dec.pdf>

-
- There is no reasonable licensure pathway for Hawai'i clinical midwives who are not CPMs. It is against the Hawai'i Regulatory Licensing Reform Act to offer a licensure pathway to a part of a profession, but not all of it, especially as NARM Certification is practically logistically impossible for Hawai'i midwives (thus shifting the recognized practice entirely to those trained outside of Hawai'i). The costs involved in licensing such a tiny cohort also need to be assessed prior to structuring legislation, as this Act also requires licensees to bear the full cost of issuance and administration. For a small cohort with complex needs, this could potentially be astronomical.
- The exemptions do not actually exempt anyone currently practicing traditional midwifery. For this reason, great damage and endangerment would result in our community.
- Consumers are not helped by this measure, which would limit choices, raise prices, and provide no measurable safety benefits .

It must be remembered that ALL regulation of traditional midwifery limits, alters, and otherwise adversely impacts traditional Native Hawaiian healing, because the central traditional practice in question is BIRTH, not midwifery.

Traditional midwives who are not Hawaiian and do not qualify under SB 1033 are extremely important in the traditions that Hawaiian families are reviving from a nearly decimated cultural past. Many young Kanaka Maoli have the oral history of their grandparents to go on, but not much more. Non-Hawaiian traditional midwives play a crucial support role for ensuring safety, confidence and well-being as these traditions are brought back into being. Without them, the practices would still come back, but slower, with more loss and much less safety and support.

What is needed is COMMUNICATION, not regulation of something the State simply cannot understand.

My recommendation is to hold this bill, and instead consider the creation of a body that could effectively bring all concerned parties (DOH, cultural practitioners, traditional birth attendants, CPMs,

student midwives, OBGYN/ER doctors, etc) together to build the needed comprehensive solutions to address real consumer protection and safety.

Although I appreciate the good intent of this measure and its amendments, it still is highly problematic and I must oppose it strongly.

As an emergency physician my greatest fear is this bill will cause a dead mother or baby as it will lead to unattended home births and if something goes wrong there is nobody there trained to help. Please show some caution and common sense. Thanks for your time.

Misha kassel, emergency medicine physician in Honolulu

kobayashi1 - Melvia

From: Susan Wurtzburg <jfsurmcvvywtgfg@ujoin.co>
Sent: Monday, March 18, 2019 2:19 PM
To: HLTtestimony
Subject: Support SB 467, SD1 - restoring dental to medicaid

From: susan.wurtzburg@gmail.com <Susan Wurtzburg>

Message:

Dental health is important for overall health, and it should be included. Hawaii has many families on Medicaid, and this should be included in their plans. The long-term costs are much greater, if people lose teeth, gum health, and results in expensive jaw issues.

Aloha Chairwoman San Buenaventura, Chairman Mizuno and members of the Committees on Human Services & Homelessness and Health,

I write in support of S.B. 467 which makes an appropriation to the department of human services to restore adult dental benefits to medicaid enrollees. Requires federal matching funds.

It is widely acknowledged that the behavior of parents, and in particular mothers, affects their children's health.

Oral health has an important role in the general well-being of individuals. Since oral health behaviors can affect the oral health, attempting to construct good oral health behaviors can affect the general health of individuals. Indeed, the adoption of good oral health habits in childhood often takes place with parents, especially with mothers.

The foundation for healthy permanent teeth in children and teenagers is laid during the first years of life. Poor diet, poor habits of food intake and inadequate toothbrushing habits during the first 2 years of life have been shown in several studies to be related to tooth decay in children. The development of caries in primary teeth further increases the risk of developing caries in permanent teeth.

Therefore it is essential to establish a proper oral hygiene routine early in life to help ensure the development of strong and healthy teeth. Parents, as consistent role models, are key for setting a daily routine and to making their children understand the importance of oral hygiene. Toothbrushing should be presented as a habit and an integral part of the daily hygiene routine. Children are very sensitive to social stimuli such as praise and affection, and learn best by imitating their parents. Physiological and mental development affects the oral care of children.

Therefore, making sure that adults have access to dental benefits, helps improve the oral health of our keiki.

For these reasons, I respectfully requests that the committee pass S.B. 467.

Susan Wurtzburg

Kailua

Hawaii

From: Jordan Freeman <noreply@jotform.com>
Sent: Monday, March 18, 2019 2:13 PM
To: HLTtestimony
Subject: Testimony in OPPOSITION to SB 1033



OPPOSE SB 1033 ! Requiring licensure of midwives

Name	Jordan Freeman
Email	jordanfreeman@outlook.com
Type a question	<p>Aloha House HLT Chair Mizuno, Vice Chair Kobayashi, and committee members,</p> <p>I am testifying in STRONG OPPOSITION to SB 1033 which would require licensure of midwives.</p> <p>This is an extremely problematic measure that very seriously threatens health and safety of mothers, babies and cultural practices. Here is why:</p> <ul style="list-style-type: none">• The costs alone are prohibitive. According to the DCCA, “The costs associated with licensing approximately 13 midwives would be \$203,000.” Because State licensing law requires licensure to pay for itself, those 13 eligible midwives would bear a cost burden of \$15,615 each per year, which would be passed directly on to the families they serve. These costs would be greatly increased if a hearing were to take place, a lawsuit or criminal action occurred, or other incidental expenses were incurred for any reason.• ONLY Midwives trained outside of Hawaii are eligible. This alone should stop this measure in its tracks. It creates a sharp dividing line, which almost all local midwives are on the wrong side of. Good training routes of many kinds already exist in Hawai’i, but these are sidelined or criminalized by this measure.❓• The requirement that a traditional midwife “provides the required disclosures to clients that the individual is practicing midwifery in this State without a license to practice midwifery” is both offensive and legally unsound. This measure defines a legally exempted category of practitioner, and then, in the same sentence, forces them to state that they are

practicing without a license to practice. The legal mess this is likely to create (and that the legislators passing such terrible language would be liable for), along with the potential for serious consequences or even death, is enormous. ❖

- Transfer delays are increased when mothers fear persecution of their “unlicensed” midwife, or persecution of themselves for choosing one, after consenting to give birth with an unlicensed midwife (per this bill’s requirement). This increases actual danger substantially, particularly with consideration of the well-founded fear of unfounded systemic persecution through the CWS based on discrimination that might use this as a basis for child removal or criminalization of the mother if that child is born in a hospital after an attempted birth with as “unlicensed” practitioner, despite the fact that the same complication could have happened anywhere.

- Kanaka Maoli traditional practices are not protected. Papa Ola Lokahi does not currently have any mechanism to extend protection to traditional midwives or other birth-related practitioners as such (its mandates are currently strictly for laau lapaau, lomilomi, hooponopono and laau kahea). While this could potentially be developed in the future, at this time such protection would be entirely speculative. Law cannot be based on speculation.

- This measure is full of legal gray areas; gray areas are what lawsuits are made of.

- The entire term “traditional practice” is externally defined, which goes directly against culture and traditions, which must be internally defined in order to be considered bona fide. See quote from Papa Ola Lokahi-convened Kahuna Statement to the Legislature, 1998:

The Kahuna Statement written for the legislature by the leading healers convened by Papa Ola Lokahi on October 31, 1998 (upon which the naming of POL in this bill is based) says clearly that government licensure is inappropriate in the context of Kanaka Maoli healing: ❖

“...LICENSURE, AND CERTIFICATION ISSUES RAISED IN THE LEGISLATION ARE INAPPROPRIATE AND CULTURALLY UNACCEPTABLE FOR GOVERNMENT TO ASCERTAIN. ❖ THESE ARE THE KULEANA OF THE HAWAIIAN COMMUNITY ITSELF THROUGH KUPUNA WHO ARE PERPETUATING THESE PRACTICES.”

<http://www.papaolalokahi.org/images/CHRONOLOGY-of-EVENTS-RELATED-TO-TRADITIONAL-HEALING-2015-Dec.pdf>

-
- There is no reasonable licensure pathway for Hawai'i clinical midwives who are not CPMs. It is against the Hawai'i Regulatory Licensing Reform Act to offer a licensure pathway to a part of a profession, but not all of it, especially as NARM Certification is practically logistically impossible for Hawai'i midwives (thus shifting the recognized practice entirely to those trained outside of Hawai'i). The costs involved in licensing such a tiny cohort also need to be assessed prior to structuring legislation, as this Act also requires licensees to bear the full cost of issuance and administration. For a small cohort with complex needs, this could potentially be astronomical.
- The exemptions do not actually exempt anyone currently practicing traditional midwifery. For this reason, great damage and endangerment would result in our community.
- Consumers are not helped by this measure, which would limit choices, raise prices, and provide no measurable safety benefits .

It must be remembered that ALL regulation of traditional midwifery limits, alters, and otherwise adversely impacts traditional Native Hawaiian healing, because the central traditional practice in question is BIRTH, not midwifery.

Traditional midwives who are not Hawaiian and do not qualify under SB 1033 are extremely important in the traditions that Hawaiian families are reviving from a nearly decimated cultural past. Many young Kanaka Maoli have the oral history of their grandparents to go on, but not much more. Non-Hawaiian traditional midwives play a crucial support role for ensuring safety, confidence and well-being as these traditions are brought back into being. Without them, the practices would still come back, but slower, with more loss and much less safety and support.

What is needed is COMMUNICATION, not regulation of something the State simply cannot understand.

My recommendation is to hold this bill, and instead consider the creation of a body that could effectively bring all concerned parties (DOH, cultural practitioners, traditional birth attendants, CPMs,

student midwives, OBGYN/ER doctors, etc) together to build the needed comprehensive solutions to address real consumer protection and safety.

Although I appreciate the good intent of this measure and its amendments, it still is highly problematic and I must oppose it strongly.

From: Amanda Allender <noreply@jotform.com>
Sent: Monday, March 18, 2019 2:07 PM
To: HLTtestimony
Subject: Testimony in OPPOSITION to SB 1033



OPPOSE SB 1033 ! Requiring licensure of midwives

Name	Amanda Allender
Email	mandy.allender@gmail.com
Type a question	<p>Aloha House HLT Chair Mizuno, Vice Chair Kobayashi, and committee members,</p> <p>I am testifying in STRONG OPPOSITION to SB 1033 which would require licensure of midwives.</p> <p>This is an extremely problematic measure that very seriously threatens health and safety of mothers, babies and cultural practices. Here is why:</p> <ul style="list-style-type: none">• The costs alone are prohibitive. According to the DCCA, “The costs associated with licensing approximately 13 midwives would be \$203,000.” Because State licensing law requires licensure to pay for itself, those 13 eligible midwives would bear a cost burden of \$15,615 each per year, which would be passed directly on to the families they serve. These costs would be greatly increased if a hearing were to take place, a lawsuit or criminal action occurred, or other incidental expenses were incurred for any reason.• ONLY Midwives trained outside of Hawaii are eligible. This alone should stop this measure in its tracks. It creates a sharp dividing line, which almost all local midwives are on the wrong side of. Good training routes of many kinds already exist in Hawai’i, but these are sidelined or criminalized by this measure.❓• The requirement that a traditional midwife “provides the required disclosures to clients that the individual is practicing midwifery in this State without a license to practice midwifery” is both offensive and legally unsound. This measure defines a legally exempted category of practitioner, and then, in the same sentence, forces them to state that they are

practicing without a license to practice. The legal mess this is likely to create (and that the legislators passing such terrible language would be liable for), along with the potential for serious consequences or even death, is enormous. ❖

- Transfer delays are increased when mothers fear persecution of their “unlicensed” midwife, or persecution of themselves for choosing one, after consenting to give birth with an unlicensed midwife (per this bill’s requirement). This increases actual danger substantially, particularly with consideration of the well-founded fear of unfounded systemic persecution through the CWS based on discrimination that might use this as a basis for child removal or criminalization of the mother if that child is born in a hospital after an attempted birth with as “unlicensed” practitioner, despite the fact that the same complication could have happened anywhere.

- Kanaka Maoli traditional practices are not protected. Papa Ola Lokahi does not currently have any mechanism to extend protection to traditional midwives or other birth-related practitioners as such (its mandates are currently strictly for laau lapaau, lomilomi, hooponopono and laau kahea). While this could potentially be developed in the future, at this time such protection would be entirely speculative. Law cannot be based on speculation.

- This measure is full of legal gray areas; gray areas are what lawsuits are made of.

- The entire term “traditional practice” is externally defined, which goes directly against culture and traditions, which must be internally defined in order to be considered bona fide. See quote from Papa Ola Lokahi-convened Kahuna Statement to the Legislature, 1998:

The Kahuna Statement written for the legislature by the leading healers convened by Papa Ola Lokahi on October 31, 1998 (upon which the naming of POL in this bill is based) says clearly that government licensure is inappropriate in the context of Kanaka Maoli healing: ❖

“...LICENSURE, AND CERTIFICATION ISSUES RAISED IN THE LEGISLATION ARE INAPPROPRIATE AND CULTURALLY UNACCEPTABLE FOR GOVERNMENT TO ASCERTAIN. ❖ THESE ARE THE KULEANA OF THE HAWAIIAN COMMUNITY ITSELF THROUGH KUPUNA WHO ARE PERPETUATING THESE PRACTICES.”

<http://www.papaolalokahi.org/images/CHRONOLOGY-of-EVENTS-RELATED-TO-TRADITIONAL-HEALING-2015-Dec.pdf>

-
- There is no reasonable licensure pathway for Hawai'i clinical midwives who are not CPMs. It is against the Hawai'i Regulatory Licensing Reform Act to offer a licensure pathway to a part of a profession, but not all of it, especially as NARM Certification is practically logistically impossible for Hawai'i midwives (thus shifting the recognized practice entirely to those trained outside of Hawai'i). The costs involved in licensing such a tiny cohort also need to be assessed prior to structuring legislation, as this Act also requires licensees to bear the full cost of issuance and administration. For a small cohort with complex needs, this could potentially be astronomical.
- The exemptions do not actually exempt anyone currently practicing traditional midwifery. For this reason, great damage and endangerment would result in our community.
- Consumers are not helped by this measure, which would limit choices, raise prices, and provide no measurable safety benefits .

It must be remembered that ALL regulation of traditional midwifery limits, alters, and otherwise adversely impacts traditional Native Hawaiian healing, because the central traditional practice in question is BIRTH, not midwifery.

Traditional midwives who are not Hawaiian and do not qualify under SB 1033 are extremely important in the traditions that Hawaiian families are reviving from a nearly decimated cultural past. Many young Kanaka Maoli have the oral history of their grandparents to go on, but not much more. Non-Hawaiian traditional midwives play a crucial support role for ensuring safety, confidence and well-being as these traditions are brought back into being. Without them, the practices would still come back, but slower, with more loss and much less safety and support.

What is needed is COMMUNICATION, not regulation of something the State simply cannot understand.

My recommendation is to hold this bill, and instead consider the creation of a body that could effectively bring all concerned parties (DOH, cultural practitioners, traditional birth attendants, CPMs,

student midwives, OBGYN/ER doctors, etc) together to build the needed comprehensive solutions to address real consumer protection and safety.

Although I appreciate the good intent of this measure and its amendments, it still is highly problematic and I must oppose it strongly.

kobayashi1 - Melvia

From: mak221@aol.com
Sent: Saturday, March 16, 2019 7:34 PM
To: HLTtestimony
Subject: WRITING IN STRONG SUPPORT OF SB911 SD 1

Categories: Red Category



Testimony in Support of SB 911 SD1

Relating to health. Appropriates funds to improve health care services related to cardiac care at Hilo Medical Center.

(Name/Title) _____ Mark Koppel, 31-392 Lepoloa Rd. Ninole
HI _____

Thank you for the opportunity to provide testimony in **support of SB 911 SD 1** that appropriates funds to improve health care services related to cardiac care at Hilo Medical Center.

This funding supports Hilo Medical Center’s efforts to provide interventional cardiac care for East Hawaii and potentially for all of Hawaii Island. The procedure involved in this advanced level of cardiac care stops heart attacks in progress and reduces long term cardiac disability. The American College of Cardiology recommends interventional cardiac care as a best practice for treating heart attacks in rural areas like Hawaii Island.

Hilo Medical Center is well positioned to provide interventional cardiac care as it already has available cardiac imaging equipment and software, as well as a cardiology clinic that has space for three cardiologists. The hospital’s cardiology program is on track to meeting its goal by the end of 2019 to provide interventional cardiology that will save lives and improve the quality of life for cardiac patients. The funding received in the 2018 legislative session was very much appreciated as it was crucial in the hospital’s success in recruiting interventional cardiologists. Funding in this second phase is essential for Hilo Medical Center to continue the momentum in advancing heart attack care.

Mahalo,

Mark A. Koppel