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ADMINISTRATIVE AND RESEARCH OFFICE
BUDGET, PROGRAM PLANNING AND
MANAGEMENT DIVISION
FINANCIAL ADMINISTRATION DIVISION
OFFICE OF FEDERAL AWARDS MANAGEMENT (OFAM)

WRITTEN ONLY
TESTIMONY BY RODERICK K. BECKER
DIRECTOR, DEPARTMENT OF BUDGET AND FINANCE
TO THE HOUSE COMMITTEE ON HEALTH
ON
HOUSE BILL NO. 586

February 7, 2019
8:30 a.m.
Room 329

RELATING TO THE HAWAII HEALTH AUTHORITY

House Bill No. 586 amends Chapter 322H to: increase the number of seats on the Hawaii Health Authority (HHA) from 9 to 13; change the Executive Director position from a serving HHA member selected by vote to an exempt position hired by HHA; authorize HHA to hire other exempt staff necessary to assist in the performance of HHA's duties and responsibilities; increase the number of HHA members needed to constitute a quorum from five to seven; require HHA to report its yearly expenditures to the Director of Finance and the Legislature prior to each regular session; require HHA to submit an updated comprehensive health plan to the Legislature prior to the Regular Session of 2020; and appropriate undetermined amounts of general funds in FY 20 and FY 21 for HHA staff and other operating expenses.

The Department of Budget and Finance appreciates the intent of the measure but believes that this bill is not necessary at this time given the existence of the Prepaid Health Care Act and the Affordable Care Act. Additionally, there have been no HHA appointees, nor any nominee lists provided since the last appointee terms expired in June of 2015.

Thank you for your consideration of our comments.

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

Re: HB 586 Hawaii Health Authority
Hearing: Thursday, February 7, 2019, 8:30 a.m., Conf. Room 329
Position: Strong Support

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

The Kūpuna Caucus of the Democratic Party of Hawai'i **strongly supports HB 586**, which would revive the Hawaii Health Authority, give it much-needed funding, and set it back on its initial course of providing greatly needed advice to the people of Hawai'i on how to move forward on health care in the foreseeable future.

Our health care system, both in Hawai'i and nationally, is headed for catastrophe. There are reasons that every other advanced country except the US has universal health care, and every single one of them has kept it. Why is the US the only country that is not on board?

Most of you probably missed the Honolulu Star-Advertiser article of January 21, 2018, just a year ago, when the State's then-Insurance Commissioner, Gordon Ito, warned that Hawai'i's "Health care costs [are] heading for eventual catastrophe."

The article stated, in part, "Hawaii health insurance premiums are projected to skyrocket to \$14,000 per person and \$42,500 for a family of four in the next eight years.

"Massive rate increases for Hawaii residents will be unsustainable, with premiums doubling every 10 years and outpacing inflation and wages, Insurance Commissioner Gordon Ito is warning. Health care costs took a 14.7 percent chunk of employee wages in 2015.

"We're at a crisis point and people don't realize it. We've really got to start focusing our attention to bending the cost curve,' Ito said. 'The house is burning. We're on the verge of cardiac arrest. That's something that we really got to take to heart.'"

There's more, but that's the gist of what our former Insurance Commissioner was warning us about.

Ten years ago, this Legislature wisely foresaw that we must plan for a healthcare future in which we no longer let insurers and pharmaceutical companies take 30% or more of our healthcare dollar, both in the State's budget and in household budgets for practically everyone who is not on Medicare or Medicaid. This situation is of course of greatest concern for our Kūpuna, most of whom live on low fixed incomes and have

high healthcare needs. Medicare and Medicaid, as they are currently structured, can only support us so far.

The Hawaii Health Authority was created to be the independent eyes and ears of the people of Hawaii, not influenced by money, to help give us the best guidance possible in these difficult times on these difficult issues. We need to let them get back to doing their job. We need the Hawaii Health Authority. There is no one else who can give us the informed and unbiased insight, independent of conflicts of interest, that we need.

We ask only for one amendment, and that is a requirement that members of the Hawaii Health Authority not have conflicts of interest.

Thank you very much for this opportunity to testify on this very important bill.

Alan B. Burdick

Chair, Kūpuna Caucus
Democratic Party of Hawai'i

Burdick808@gmail.com



February 4, 2019

IN SUPPORT OF HB586 HHA APPROPRIATION

Dear Representatives,

Please note my support in favor of HB586 to fund the Hawaii Health Authority (HHA).

As a primary care physician on the Big Island, I continue to see a frightening number of people suffer from an inability to access medical care, an inability to afford medical care and therefore inability to maintain their health. Without good health, these patients are unable to maintain meaningful employment, leaving them unable to support their families or themselves.

Sadly, I see our healthcare providers leaving our communities, even more so in the last two years. These physicians are not leaving because they don't want to be here, they are leaving to seek employment opportunities that allow them to pay the bills. Our insurance environment has regressed to the point where physicians literally lose money when they see a patient, forcing doctors to retire earlier than planned, find alternative forms of income or leave the islands altogether.

Health care expenditures are rising, but not due to the physician costs. Primary care is only 4-8% of health care spending, yet it remains the primary, if not only, focus of HMSA's cost savings plan, Payment Transformation. Given that health care consumes 30% of our state budget (up from 22% ten years ago), it is imperative that Hawaii not rely on the poor planning from the insurance companies to save our fiscal development.

The insurance companies answer to no one except the shareholders. Please fund the HHA in order to allow for real collaboration and change that actually improves the health of our people while achieving financial savings.

Mahalo for your service and time,

Michelle Mitchell, M.D.
Serving Hilo since 2008



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

From: The Health Committee of the Democratic Party of Hawaii

RE: HB 586, Relating to the Hawaii Health Authority -SUPPORT with amendments

Thank you for the opportunity to testify on this important measure. The members of the Health Committee of the Democratic Party of Hawaii strongly support empowering the Hawaii Health Authority (HHA) to fulfill its mission as stated in Hawaii law, HRS 322H. Members of the HHA serve without pay, but this bill improves HRS 322H by enabling the HHA to hire an executive director for administrative support, and establishing a budget for consultants and research, such as economic studies of proposals developed by the HHA.

As a friendly amendment, we would like to point out that section 26-34 regulating boards and commissions requires that boards be appointed by the Governor. Therefore, we suggest returning to the original language in section 2(b) of the law requiring the authority to be appointed by the Governor, but with the expanded membership to include 4 or 5 members from a list of nominees submitted by the Speaker of the House and 4 or 5 members from a list submitted by the Senate President, with the rest appointed directly by the Governor.

According to data on the Hawaii budget presented by Blake Oshiro of Capitol Consultants of Hawaii at the recent "State of Reform" conference, health care is eating up a rising share of the state budget, from 22% in 2009 up to about 30% now. Medicaid costs are rising at a rate of \$54.9 million per year, and health care costs for state and county employees and retirees are rising at a rate of \$39.4 million per year. State revenues are not projected to keep up with rising health care costs.

Hawaii's Prepaid Health Care Act put Hawaii in the national lead for cost-effective health care, proving that broad coverage and good access to care actually reduces cost. The success of Prepaid depended on comprehensive benefits, broad coverage of the population due to the employer mandate, and low patient cost-sharing to assure good access to care. Additional factors contributing to its success include broad participation by almost all practicing doctors, who were paid with fee-for-service, with fees controlled by the dominant payer, HMSA. This payment model carried low administrative cost for both HMSA and for doctors, enabling Hawaii to have

among the lowest commercial health insurance premiums in the country despite our comprehensive benefits and high cost of living. We also had the lowest per-capita Medicare spending in the country.

In the past decade, Hawaii has been pursuing health care reform driven by a mainland rationale promoted by the health insurance industry and Centers for Medicare and Medicaid Services: that high health care cost is largely due to unnecessary care driven by fee-for-service incentives to provide more “volume” of care. This was never true in Hawaii, especially in primary care. The reform model is called, “value-based” payment, replacing fee-for-service with capitation for primary care, bundled payments, pay-for-performance, and with variable capitation rates and payment depending on performance metrics and risk adjustment. All of this requires much higher administrative overhead for both payers (HMSA, Medicare) and for doctors and hospitals, who must hire extra staff and purchase advanced computer systems for detailed documentation and data reporting required by the payment model. So far, no troves of unnecessary care have been found that can be eliminated without harming quality of care, and no net savings have been achieved when administrative costs are included. Hawaii’s total health care costs continue to rise much faster than inflation.

Unintended side effects of this transformation in physician payment include widespread demoralization of doctors, destruction of independent physician practice and driving doctors into employment by hospitals (who can charge payers more than independent practices) or out of practice, and a worsening physician shortage across all specialties, worse on the neighbor islands. Patient access to care is becoming a serious problem as more and more practices close to new patients, starting with Medicaid and Medicare. This compromises quality of care for the whole community, forcing many patients without access to primary care to rely on urgent care centers and emergency rooms for care, driving up cost.

Meanwhile, our Medicaid managed care system has fragmented and privatized Medicaid, inserting a layer of managers between patients and their doctors. Hawaii has witnessed a dramatic reduction in physician participation in Medicaid in the past decade, worst for psychiatry and with primary care not far behind. Our Medicaid costs since introduction of managed care have been increasing around 3% faster than the national average, with an increasing share going to administrative costs, and declining patient access to out-patient care driving up ER and hospital care.

Hawaii can no longer afford health care reform driven by the health insurance industry, with total health care cost increasing 5-10% or more per year and failing to achieve any of the goals of reform.

The Hawaii Health Authority met from 2011 to 2014 and sent two reports to the governor and legislature, that have so far been ignored. The HHA proposed reforms that would simplify and standardize how doctors and hospitals are paid, reduce administrative costs and burdens, markedly increase physician participation in Medicaid, improve access to care for all who need it in the most cost-effective settings, and restore the viability of independent physician practice, making Hawaii an attractive place to practice medicine again so that we can recruit and retain the doctors we need.

We urgently need planning for reforms that can actually achieve the goals of reform – improved care, improved population health, improved physician morale, and reduced cost. This means

returning to the principles that made our Prepaid law a success, including simplified, standardized payment of doctors and hospitals, low administrative costs and burdens for both payers and providers of care, removing barriers to independent physician practice and to participation in Medicaid, and markedly improving access to care for those who need it in the most cost-effective settings. If the HHA proposals could be fully implemented, economic projections indicate potential savings of 10-20% of Hawaii's total health care costs. This is achievable and would be a huge boon to the state budget and for Hawaii businesses, and for the health and quality of life of all residents of Hawaii.

We are asking the legislature to empower the Hawaii Health Authority to perform the role intended in HRS 322H, with the enhancements in HB 586 that would allow it to function effectively.

Mahalo for your consideration,

Marion Poirier
Vice Chair, Health Committee,
Democratic Party of Hawai'i

HB-586

Submitted on: 2/6/2019 7:49:58 AM

Testimony for HLT on 2/7/2019 8:30:00 AM

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

Comments:

LATE

HB-586

Submitted on: 2/6/2019 7:42:53 PM

Testimony for HLT on 2/7/2019 8:30:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Dylan P. Armstrong	Oahu County Democrats	Support	No

Comments:

Aloha Chair Mizuno, and members of the Health Committee,

I write in support of House Bill 586. This measure expands the membership of the Hawaii Health Authority (HHA), and tasks the HHA to come up with a plan for Hawaii comprehensive healthcare.

Hawaii leads the nation in having forward-thinking healthcare access (e.g., The Prepaid Healthcare Act of 1974), yet we have major loopholes where our most vulnerable are concerned--such as our homeless. Those loopholes drive up costs and impact our shared quality of life. If we want everyone to receive access as a right and not an income-based privilege, I suggest that we as Democrats and like-minded people follow our Platform:

"Access to health care is a basic human need. Our citizens and visitors have an inherent right to high quality, high standard health care. The state legislature and the federal government should take all appropriate steps to create and support a health care system of public, for profit, and nonprofit hospitals and other medical facilities that follow best practices to enhance and protect and preserve life."

Expanding the HHA seems to be a practical course to improve the functionality of the HHA, as organizations with low membership struggle to maintain quorum and productivity. The Oahu County Democrats has no objections to the increased input from the branches of government on this issue. Personally, I hope that this change may lend to greater discussion and support for the purpose of the HHA.

By becoming the repository of a broad-base of public-serving, subject matter experts on healthcare, my hope is that the plan tasked to the HHA will fulfill the intention of this measure and thereby lead to significant health improvement for the people of Hawaii.

My mahalo to you, Chair Mizuno, for this measure, and to the members of the Committee. Please do the right thing and work together on this.

Aloha pumehana,
Dylan P. Armstrong, Vice Chairman
O'ahu County Democrats

HB-586

Submitted on: 2/5/2019 9:28:08 AM

Testimony for HLT on 2/7/2019 8:30:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Arcelita Imasa	Individual	Support	No

Comments:

Dear Representatives,

My name is Arcelita Imasa, and I strongly support the HB586 to get the Hawaii Health Authority (HHA) funded. I believe that healthcare is a human right, and that getting the HHA reactivated by funding it will create a system in Hawaii that will serve the best interest of the people of Hawaii.

Thank you!

HB-586

Submitted on: 2/5/2019 9:45:15 AM

Testimony for HLT on 2/7/2019 8:30:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Jennifer Mather	Individual	Support	No

Comments:

To: Representative. John Mizuno, Chair, House Health Committee
Representative Bertrand Kobayashi, Vice-Chair
and Members of the Committee

Re: **HB 586, Relating to the Hawaii Health Authority**

Hearing: Thursday, February 7th, 2019, 9:00 am, Conference Room 329

Position: **SUPPORT**, Please vote **“YES”**

I support HB 586 because it would encourage private practice and save money.

Since my husband and I moved to Maui 24 years ago, I have lost my primary care doctor and my cardiologist and my dermatologist. I no longer have access to doctors who specialize in orthopedic surgery, pulmonology, gastroenterology, or orthopedic surgery.

I was in private practice for 30 years before we moved here and I sadly quit because of managed care here in Hawaii.

I am a teacher and mentor to young physicians and psychiatrists in Hawaii and they are afraid of the intrusions and burdens of our current health care financing system here in Hawaii and many are considering leaving the state.

The Health Committee of the Democratic Party of Hawaii strongly supports re-activating the Hawaii Health Authority (HHA) to fulfill its mission as stated in Hawaii law, HRS 322H. Members of the HHA serve without pay, but HB 586 improves HRS 322H by enabling the HHA to hire an executive director for administrative support, and establishing a budget for consultants and research, such as economic studies of proposals developed by the HHA.

Regarding HB 586, please expand the number of members appointed by the Governor from a list of nominees submitted by the Speaker of the House from 3 to 4 or 5. The same for the list submitted by the Senate President. The rest being appointed directly by the Governor.

Health care reform in Hawai'i has been driven by ideas from the mainland, private health insurance companies and the Centers for Medicare and Medicaid Services (CMS). They say that high health care costs are due to unnecessary care driven by fee-for-service incentives to provide more "volume" of care. This was never true in Hawaii. Alternative payment models (APMs) and so-called "value-based" payment (VBP) require much higher administrative overhead for both payers and providers with no savings having been achieved. Hawaii's health care costs continue to rise much faster than inflation.

Unintended consequences of our current system include demoralization and burnout of doctors which is driving doctors out of independent practice into employed positions.

Access to care is getting worse and patients are going to emergency rooms which cost more.

Privatized Medicaid managed care is fragmented with different private insurance companies coming and going and offering different services, eg transportation, redundant case managers. Doctors are increasingly not taking Medicaid and our Medicaid costs are increasing faster than the national average.

The legislature passed the Hawaii Health Authority (HHA) which proposed reforms which would increase doctor participation in Medicaid, reduce costs, restore independent private practice and make Hawaii better able to attract and retrain doctors.

Please empower the Hawaii Health Authority to perform the role intended in HRS 322H with the enhancements which would let it function well.

We need real reform like the principles that made our PrePaid law successful, eg standardized payment, low administrative costs, encouraging independent physician practice, increasing the number of doctors who take Medicaid and increasing access for those who need it the most. Here in Hawaii we could save 10-20% of our health care costs.

Thank you.

Leslie Hartley Gise MD
Clinical Professor, Department of Psychiatry, John A Burns School of Medicine
Staff physician, Maui Hospital (Maui Health Systems)

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

Re: HB 586; Hawaii Health Authority

Hearing: Thursday, February 7, 2019, 8:30 a.m., Conf. Room 329

Position: Strong Support (with recommended Amendment)

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

I am a member of the Health Committee of the Democratic Party of Hawaii, which has submitted testimony in strong support of this measure. I am providing this testimony additionally, as my individual and personal perspective, to advance the goal of universal healthcare in Hawaii via re-activating the statutory mandate of the Hawaii Health Authority (HHA), per the stipulations of this bill.

Nearly 30 years ago, I developed a debilitating autoimmune disorder, which forced me to file for federal permanent disability. As a result, I began receiving Social Security and SSI benefits, and along with those, Medicare and Medicaid. One would think that would put me in an advantageous situation of guaranteed healthcare, which many people aren't fortunate enough to have, but here is why that is false: anything I might earn would jeopardize my benefits, particularly Medicaid, which pays a substantial portion of my medical bills. In fact, a special needs lawyer told me that one thing I must never do in order to keep my medical benefits is to re-enter the work force. While my doctor has told me that I probably will never be able to seek employment with a conventional employer again, it is possible that if my condition improves, I might consider working at my own pace, in an independent contractor capacity. Tragically, *the very real fear and threat of losing my medical benefits if I took this aspirational step, thus having to pay for a plan in the commercial insurance market which I can't afford*, prevents me from advancing any hopes and skills I have. And consequently – like millions of people on disability – I remain stuck in a cycle of poverty that breeds continuing poverty. Our current demoralizing status quo disincentivizes people from reaching their potential, which is to say, prevents their valuable contribution to the economy and healthier, wealthier communities.

This problem would cease to exist if the state of Hawaii (and eventually, the nation) were to guarantee my healthcare, regardless of my benefits, income status, disability status, and employer status. We are the only country in the world that peculiarly couples employment with ability to afford, access, and receive medical care. This cumbersome and compromising system must end, so everyone is afforded healthcare *as a most basic service and right*, not to be denied under any circumstance. It is a moral imperative, but also an economic

one. Who benefits from universal, unconditional care? Employers who are freed of the burden of covering their employees, self-employed or partially employed citizens, whether able-bodied or disabled, the State which no longer shoulders emergency care costs of the uninsured, and doctors who no longer stagger under skyrocketing administrative overhead, which drives them out of the market entirely, and especially programs like Medicare and Medicaid. In short, everyone stands to gain by adopting an “all in, no one left out” streamlined universal system of healthcare delivery.

The only party benefiting from the current model is the for-profit insurance industry, which is solely responsible for driving up healthcare costs and allowing many folks, myself included, to fall through the cracks in the process.

Hawaii stands at the progressive vanguard to change this shameful state of affairs by funding the HHA and fully supporting its staffing, as this bill's language provides. **I also strongly recommend that language be added/amended to explicitly protect the HHA's membership from the intrusion of any conflict of interest entities, so that it remains a politically and economically neutral agency.**

Hawaii has already spoken, in statute, for the HHA. Let's finally honor that mandate of the people!

Thank you for this opportunity to testify on this most important and timely measure.

Daria A. Fand
Healthcare, Disabilities and Patient Advocate

HB-586

Submitted on: 2/5/2019 6:01:54 PM

Testimony for HLT on 2/7/2019 8:30:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Nash Witten	Individual	Support	No

Comments:

HB-586

Submitted on: 2/5/2019 8:18:33 PM

Testimony for HLT on 2/7/2019 8:30:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Lois Langham	Individual	Support	No

Comments:

Access to health care is a basic human need. Our citizens and visitors have an inherent right to high quality, high standard health care. The state legislature and the federal government should take all appropriate steps to create and support a health care system of public, for profit, and nonprofit hospitals and other medical facilities that follow best practices to enhance and protect and preserve life.

HB-586

Submitted on: 2/5/2019 10:35:22 PM

Testimony for HLT on 2/7/2019 8:30:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Maya Maxym	Individual	Support	No

Comments:

The HHA has existed in limbo for years; now is the time to fund the HHA and to dedicate resources to fiscally responsible, equitable provision of appropriate and necessary healthcare to all the residents of our state. As a physician who cares for children who are sick enough to be admitted to the hospital, I see on a daily basis the struggles that children and families face to access care. Moreover, I see frequently that these obstacles result in unnecessary hospitalizations, worse illness for our keiki, and increased costs to the family and/or the State. The HHA provides a framework to alleviate backlogs, support marginalized populations, and increase the overall health of the people of our State. With appropriate economic tools and calculations in place, and with removal of the many administrative hurdles that make us less productive as physicians, the HHA would not only be the morally right choice, but also an economically viable one. Please vote to support all the people of our State. Fund the HHA. Thank you.

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February 6, 2019

House Committee on Health

John M. Mizuno (Chair)

Bertrand Kobayashi (Vice Chair)

Della Au Belatti

Nadine K. Nakamura

Joy A. San Buenaventura

Calvin K.Y. Say

James Kunane Tokioka

Gene Ward

Hawaii State Capitol

415 South Beretania St.

Re: HB586

Hearing: February 7, 2019, 8:30 am, Rm. 329

Dear Rep. John Mizuno (Chairman) and Rep. Bertrand Kobayashi (Vice Chairman) and members of the Health Committee:

Thank you for the opportunity to testify on this bill.

I am Sylvia K.S. Ching and I strongly support HB 586. The Hawaii Health Authority should be adequately funded to carry out its duties and responsibilities.

HB-586

Submitted on: 2/6/2019 6:02:14 AM

Testimony for HLT on 2/7/2019 8:30:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Martha Nakajima	Individual	Support	No

Comments:

I support this bill because in light of the political instability in Washington, the state must do something to assure affordable health care to the citizens of HI.

I endorse the testimony from the Democratic Party Health Committee and Kapuna Caucus.

Thank you. Martha Nakajima

HB-586

Submitted on: 2/6/2019 7:54:46 AM

Testimony for HLT on 2/7/2019 8:30:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Celina Hayashi	Individual	Support	No

Comments:

RE: in strong SUPPORT of HB586

Dear Chair Mizuno, Vice Chair Kobayashi, and members of the House Committee on Health:

My name is Celina Hayashi and I am a medical student at the University of Hawai'i and my views reflect my own and are not necessarily representative of the University of Hawai'i.

I **strongly support HB586** to provide funding for the Hawaii Health Authority.

I am very concerned about the future of healthcare for our entire community. Healthcare disparities and limited access to care puts a tremendous burden on everyone in our society. Personally, I am also concerned for the most vulnerable members of my community.

Once I become a practicing physician, who will my patients be? How will they be able to afford to visit me? I do not believe that healthcare is only for those who can afford it.

No one should have to choose between food, housing and healthcare but these are choices that many people in Hawaii face daily. Our current healthcare system exacerbates these issues.

Through medical school, I have realized that there is not much we can do as doctors for people just within the confines of hospitals and clinics, and this impact diminishes as more and more barriers are put up between healthcare and the people that need it.

I decided to become a doctor so that I could help people live healthier lives. I come from a family of immigrants who worked in plantations. I attended public school in a rural area of Maui, my childhood was enriched by growing up alongside families of different ethnicities and socioeconomic backgrounds. My special community that raised me has helped me become who I am today. When my dad got very sick and could not longer work, it was my community that helped us be able to survive. My mom had to fight with everything she had because the insurance company would not cover my dad's very

expensive medications. Limitations to my dad's access to coverage and healthcare nearly destroyed our family. No one should have to undergo such hardship.

We spend more per capita than any other industrialized nation for healthcare, but many of these funds are not actually used to provide medical care but instead goes towards marketing, insurance and pharmaceutical companies.

My medical education has not prepared me to practice in this multi-payer, multi-tiered, business of medicine. My time and energy would be better spent serving and treating patients, not spending more hours doing administrative tasks such as paperwork, billing, prior authorizations and working but usually fighting with insurance company bureaucracies.

With the best interest of the health of everyone in Hawai'i and healthcare providers in mind, I therefore urge our legislators to support the Hawaii Health Authority as the most inclusive and cost-efficient way forward for our country.

We cannot lower the mountain, therefore we must step up.

I believe that we can do better. Please join me in creating a healthier and more just future by supporting HB586.

Mahalo,

Celina Hayashi

M.D. Candidate | Class of 2019

John A. Burns School of Medicine

University of Hawai'i at Mānoa

HB-586

Submitted on: 2/5/2019 8:12:10 PM

Testimony for HLT on 2/7/2019 8:30:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Frank DeGiacomo	Individual	Support	No

Comments:

HB-586

Submitted on: 2/6/2019 12:21:09 PM

Testimony for HLT on 2/7/2019 8:30:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Javier Mendez-Alvarez	Individual	Support	No

Comments:

LATE

HB-586

Submitted on: 2/6/2019 8:09:45 PM

Testimony for HLT on 2/7/2019 8:30:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Emily Jones	Individual	Support	No

Comments:

I strongly support HB586 to fund the HHA. As a medical student about to enter the physician workforce, I feel that the HHA will represent my interests in making healthcare in Hawai'i accessible, affordable, and equitable.

Based on the DPH Health Committee's testimony, Hawaii's healthcare is eating up a rising share of the state budget, from 22% in 2009 to about 30% now. The HHA proposes reforms that would simplify and standardize how doctors and hospitals are paid, reduce administrative costs and burdens, markedly increase physician participation in Medicaid, improve access to care for all who need it in the most cost-effective settings, and restore the viability of independent physician practice, making Hawaii an attractive place to practice medicine again so that we can recruit and retain the doctors we need.

If the HHA proposals could be fully implemented, economic projections indicate potential savings of 10-20% of Hawaii's total health care costs. This is achievable and would be a huge boon to the state budget and for Hawaii businesses, and for the health and quality of life of all residents of Hawaii.

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