



DAVID Y. IGE  
GOVERNOR

JOSH GREEN  
LT. GOVERNOR

**STATE OF HAWAII  
OFFICE OF THE DIRECTOR  
DEPARTMENT OF COMMERCE AND CONSUMER AFFAIRS**

335 MERCHANT STREET, ROOM 310  
P.O. BOX 541  
HONOLULU, HAWAII 96809  
Phone Number: 586-2850  
Fax Number: 586-2856  
cca.hawaii.gov

CATHERINE P. AWAKUNI COLÓN  
DIRECTOR

JO ANN M. UCHIDA TAKEUCHI  
DEPUTY DIRECTOR

**Testimony of the Department of Commerce and Consumer Affairs**

**Before the  
Senate Committee on Ways and Means  
Thursday, February 21, 2019  
9:00 a.m.  
State Capitol, Conference Room 211**

**On the following measure:  
S.B. 1034, S.D. 1, RELATING TO INSURANCE**

**WRITTEN TESTIMONY ONLY**

Chair Dela Cruz and Members of the Committee:

My name is Colin Hayashida, and I am the Insurance Commissioner of the Department of Commerce and Consumer Affairs' (Department) Insurance Division. The Department offers comments on this bill.

The purpose of this bill is to clarify that the existing health insurance mandate for coverage of low-dose mammography includes coverage for digital mammography and breast tomosynthesis.

This bill purports to mandate digital mammography and breast tomosynthesis, and this may be viewed as a new mandate. The addition of new mandated coverage may trigger section 1311(d)(3) of the federal Patient Protection and Affordable Care Act (PPACA), which requires states to defray the additional cost of any benefits in excess of the essential health benefits of the State's qualified health plan under the PPACA. Additionally, any proposed mandate providing coverage for care requires the passage

Testimony of DCCA  
S.B. 1034, S.D. 1  
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of a concurrent resolution requesting the State Auditor to prepare and submit a report assessing the social and financial impacts of the proposed mandate, pursuant to Hawaii Revised Statutes section 23-51.

Thank you for the opportunity to testify on this bill.

DAVID Y. IGE  
GOVERNOR



**STATE OF HAWAII**  
**HAWAII EMPLOYER-UNION HEALTH BENEFITS TRUST FUND**

P.O. BOX 2121  
HONOLULU, HAWAII 96805-2121  
Oahu (808) 586-7390  
Toll Free 1(800) 295-0089  
www.eutf.hawaii.gov

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**TESTIMONY BY DEREK MIZUNO**  
**ADMINISTRATOR, HAWAII EMPLOYER-UNION HEALTH BENEFITS TRUST FUND**  
**DEPARTMENT OF BUDGET AND FINANCE**  
**STATE OF HAWAII**  
**TO THE SENATE COMMITTEE ON WAYS AND MEANS**  
**ON SENATE BILL NO. 1034 S.D. 1**

**February 21, 2019**  
**10:00 a.m.**  
**Room 211**

**RELATING TO INSURANCE**

Chair Dela Cruz, Vice Chair Keith-Agaran, and Members of the Committee:

The Hawaii Employer-Union Health Benefits Trust Fund (EUTF) Board of Trustees has not taken a position on this bill. EUTF staff would like to provide estimates of the cost impact.

This bill is to clarify that the existing health mandate for coverage of low-dose mammography include coverage for digital mammography and breast tomosynthesis. If the EUTF plans were enhanced to this benefit level, it would add approximately \$147,000 and \$113,000 in annual claims to the EUTF HMSA employee and retiree plans, respectively. The estimate from the Kaiser plans is not available at this time. It is estimated that such an increase in the HMSA claims to the retiree plans would increase the State and counties unfunded liability by \$2.4 million.

Thank you for the opportunity to testify.

**EUTF's Mission:** We care for the health and well being of our beneficiaries by striving to provide quality benefit plans that are affordable, reliable, and meet their changing needs. We provide informed service that is excellent, courteous, and compassionate.

**SB-1034-SD-1**

Submitted on: 2/20/2019 12:22:12 AM

Testimony for WAM on 2/21/2019 10:00:00 AM

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

Comments:



**LATE**

February 20, 2019

Senate Committee on Ways and Means  
The Honorable Donovan M. Dela Cruz, Chair  
The Honorable Gilbert S.C. Keith-Agaran, Vice Chair

**Senate Bill 1034, SD1 – Relating to Insurance**

Dear Chair Dela Cruz, Vice Chair Keith-Agaran, and Members of the Committee:

The Hawaii Association of Health Plans (HAHP) appreciates the opportunity to testify on SB 1034, SD1 which clarifies that the existing health insurance mandate for coverage of low-dose mammography includes coverage for advancing methodologies of digital mammography and breast tomosynthesis.

HAHP supports early detection and provides coverage for screenings to our members. We follow evidence based guidelines to ensure our members receive care that is safe and efficacious.

We express concerns on this new mandate as it does not follow widely accepted medical guidelines. Also as this would be a new mandated benefit, it is subject to an impact assessment report by the Auditor pursuant to Sections 23-51 and 23-52 of the Hawaii Revised Statutes.

Thank you for allowing us to express concerns on SB 1034, SD1.

Sincerely,

HAHP Public Policy Committee

cc: HAHP Board Members



HAWAII RADIOLOGICAL SOCIETY  
Chapter of the American College of Radiology



LETTER OF SUPPORT

February 21, 2019

To the Honorable Donovan Dela Cruz, the Honorable Gilbert Keith-Agaran and members of the WAM Committee:

WITH REGARD TO **SB 1034** which clarifies that the existing health insurance mandate for coverage of low-dose mammography includes coverage for digital mammography and breast tomosynthesis,

**the Hawaii Radiological Society (HRS) supports this measure.**

A woman in the United States has a one in eight risk, over the course of her lifetime, of being diagnosed with breast cancer. We are sure that the WAM Committee understands the importance of screening to detect breast cancer in women, beginning at age 40.

3D mammography, or digital breast tomosynthesis (DBT), acquires a volumetric picture of the breast such that the Radiologist can scroll through the breast tissue in very thin slices. Because of this technique, the Radiologist can better “see through” dense breast tissue, allowing for detection of at least 2-3 additional cancers per 1000 women screened, and more importantly, recall about 30-50% fewer women for additional imaging from screening for a possible abnormality.

Several studies have shown significant financial savings to the healthcare system when tomosynthesis is incorporated into routine screening, with a recent model showing savings of over \$207,000 per year for a typical state Medicaid plan<sup>1</sup>. As of 2015, Medicare and Medicaid have covered the cost of tomosynthesis. Despite the advantages of increased cancer detection, lower recall rates from screening, and cost savings, it is not universally covered by private insurers. Currently this imaging modality is offered only at a limited number of imaging centers here in Hawaii. In the best interest of our patients, many Hawaii radiology practices have opted to provide the service recognizing that they will likely not get paid; however, this is not sustainable financially nor is it appropriate that patients be denied these proven benefits.

On behalf of Hawaii Radiology physicians and our patients, we ask you to pass this bill, and allow **all** women in Hawaii to gain access to the best care by mandating insurance coverage of breast cancer screening to include Digital Breast Tomosynthesis.

Please contact us with any concerns or questions.  
Mahalo for your thoughtful consideration of these issues.

With Warmest Aloha,

Elizabeth Ann Ignacio MD  
President, Hawaii Radiological Society  
808.250.7058

<sup>1</sup> Miller JD et al, Value analysis of digital breast tomosynthesis for breast cancer screening in a U.S. Medicaid Population. JACR 2017;14:467-474.