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GOVERNOR



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STATE OF HAWAII
DEPARTMENT OF DEFENSE
OFFICE OF THE ADJUTANT GENERAL
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TESTIMONY ON SENATE BILL 266 SD1 HD1
A BILL RELATING TO THE CORONAVIRUS 2019 PANDEMIC

PRESENTATION TO
THE HOUSE COMMITTEE ON FINANCE

BY
MAJOR GENERAL KENNETH S. HARA
ADJUTANT GENERAL AND DIRECTOR OF STATE EMERGENCY MANAGEMENT AGENCY

March 15, 2021

Chair Sylvia Luke, Vice Chair Ty J.K. Cullen and Members of the House Committee on Finance.

I am Major General Kenneth S. Hara, State Adjutant General and the Director of the Hawaii Emergency Management Agency. I am testifying in **SUPPORT** of Senate Bill 266 SD2 HD1.

Thank you for the opportunity to provide written testimony on behalf of the Department of Defense which supports SB266 SD2 HD1, Making Appropriations to the Department of Defense Relating to COVID-19 Expenditures.

Highlights of the Emergency Appropriation request will fund the State's Safe Travels Program, Call Center Operations, and procurement, storage and distribution of personal protective equipment.

The Department of Defense request an additional \$36,054,196 for state fiscal year 2022, assuming current levels of support are required for the States Safe Travels Program and assuming Soldiers and Airman will continue to be federally funded.

Thank you for the opportunity to support SB266 SD2 HD1.

If you have any questions or need additional information to our response, please contact our Administrative Services Officer, Rusty Spray at (808) 330-7744 or at rusty.spray@hawaii.gov



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David Y. Ige
Governor

John De Fries
President and Chief Executive Officer

Statement of
JOHN DE FRIES

Hawai'i Tourism Authority
before the
HOUSE COMMITTEE ON FINANCE

Wednesday, March 31, 2021
1:30 PM
State Capitol, Conference Room #308
via videoconference

In consideration of
SENATE BILL NO. 266, SD2, HD1
RELATING TO THE CORONAVIRUS 2019 PANDEMIC

Chair Luke, Vice Chair Cullen, and members of the House Committee on Finance: the Hawai'i Tourism Authority (HTA) is **providing comments** on Senate Bill 266, SD2, HD1, which, in addition to allocating funds to various COVID-related operations, exempts any person from the post-arrival mandatory self-quarantine if the person receives a negative test result prior to arrival. It allows the governor to establish statewide conditions for exemption.

This bill would standardize the protocols across the state for all travelers to Hawai'i and between the counties, which would help to make it less confusing for everyone. There are different protocols for trans-Pacific travelers and interisland travelers, which have been a challenge to communicate, navigate and understand. A consistent statewide policy for trans-Pacific and interisland travel that is based on protecting the people and communities of Hawai'i is a prudent approach.

Currently, trans-Pacific travelers must have their negative test results before they depart to Hawai'i. This bill would instead require the results upon arrival, giving travelers several extra hours to receive their test results. This bill would also allow those who don't get their negative test result by the time they arrive to take another test upon arrival in Hawai'i. Currently, there is no post-arrival testing option, and sometimes, the travelers have delayed results through no fault of their own. This bill would also create standardized quarantine exemption requirements across the state and counties.

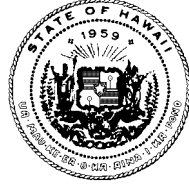
March 31, 2021

Page 2

Hawai'i's comparatively low COVID-19 case count, since October 2020, shows that the Safe Travels pre-travel testing program works as an extra layer of safety while also allowing travelers to fly to Hawai'i without having to quarantine. According to the Department of Health, only 3-4% of the COVID-19 cases since October have been related to non-resident travel. Standardized protocols for the Safe Travels program would also allow for the creation of uniformity and consistency in messaging. In addition, the program has proven to serve as an effective tool in keeping our community safe and re-opening our visitor industry.

We appreciate this opportunity to provide comments on SB266, SD2, HD1.

DAVID Y. IGE
GOVERNOR



CATHY BETTS
DIRECTOR

JOSEPH CAMPOS II
DEPUTY DIRECTOR

STATE OF HAWAII
DEPARTMENT OF HUMAN SERVICES

P. O. Box 339
Honolulu, Hawaii 96809-0339

March 30, 2021

TO: The Honorable Representative Sylvia Luke, Chair
House Committee on Finance

FROM: Cathy Betts, Director

SUBJECT: **SB 266 SD2 HD1 – RELATING TO CORONAVIRUS 2019 PANDEMIC.**

Hearing: March 31, 2021, 1:30 p.m.
Via Videoconference, State Capitol

DEPARTMENT'S POSITION: The Department of Human Services (DHS) supports this measure. At the time of preparation of similar administration measures SB1088 and HB934, DHS projected requiring an additional \$1,000,000 general fund appropriation for State Fiscal Year 2022 for operations to maintain the level of benefits and services at pandemic levels.

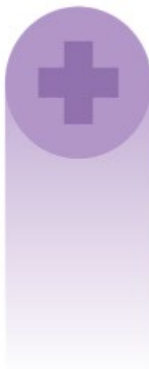
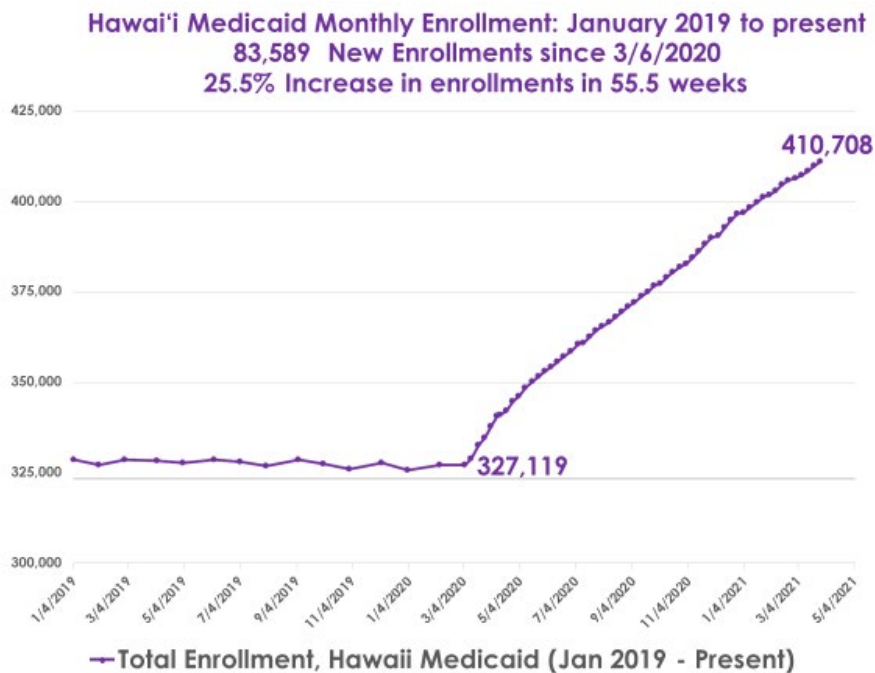
We continue to work with FEMA to secure partial reimbursement for emergency related expenses incurred in response to the health and safety measure brought on by the pandemic. We project additional COVID-19 related expenditures for SFY 2022 and SFY 2023. We are discussing these additional expenditures with the Department of Budget & Finance and will update the Legislature as to the additional amounts as this measure progresses.

DHS appreciates the amendments of the Senate Committee on Health that replaced the contents of the measure with the contents of SB1088. The Senate Committee on Ways and Means made technical amendments.

The House Committee on Pandemic & Disaster Preparedness amended the measure by
(1) Inserting the contents of House Bill No. 1286, H.D. 2, Regular Session of 2021;

- (2) Requiring that should any project or program related to COVID-19 response efforts paid for by state funds later become eligible for federal reimbursement, those federal funds shall be deposited into the general fund;
- (3) Lapsing funds from the Major Disaster Fund to the general fund on July 1, 2021; and
- (4) Making technical, nonsubstantive amendments for the purposes of clarity, consistency, and style.

PURPOSE: Appropriates moneys. Exempts any person from the post-arrival mandatory self-quarantine if the person receives a negative test result prior to arrival. Allows the governor to establish statewide conditions for exemption. Requires certain COVID-19 tests for travelers who do not have a test result upon arrival to avoid mandatory self-quarantine. Requires any person who does not obtain a negative test result for COVID-19 pre-arrival to be responsible for all costs associated with that person's mandatory self-quarantine. Prohibits the suspension of the quarantine requirements except by legislative approval via a concurrent resolution. Repeals quarantine requirements on 12/31/2021. Requires that should any project or program related to COVID-19 response efforts paid for by state funds later become eligible for federal reimbursement, those federal funds shall be deposited into the general fund. Lapses funds from the major disaster fund to the general fund on 7/1/2021. Effective 7/1/2020. (HD1)

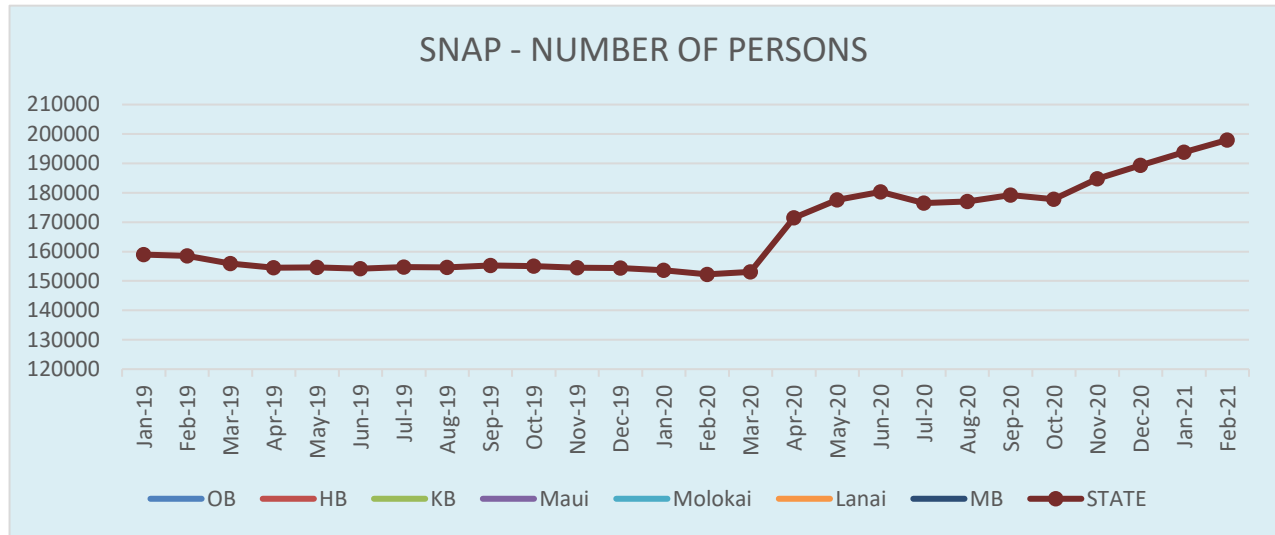


Since the onset of the Covid-19 pandemic, the caseloads of all major public benefits programs have dramatically increased. The table above illustrates the primary example that shows as of March 29, 2021, Med-QUEST enrollees exceed 410,000 Hawaii residents, a **25.5%** increase since March 2020.

Similarly, since February 2020 through January 2021, all financial program caseloads increased as follows:

Program	TANF	TAONF	AABD	GA
Description	Assistance for families with minor children	Assistance for families with minor children/mixed citizenship households	Assistance for aged (65+), blind & disabled, not eligible for SSA benefits	Temporary disability for adults without dependent minor children
February	9473	1785	917	5201
March	9814	1826	903	5472
April	12297	3056	949	5977
May	13649	3985	973	6647
June	14150	4406	1000	7015
July	14400	4667	1027	7094
August	14606	4820	1016	6946
September	14919	5007	1006	6802
October	15488	5243	981	6814
November	15990	5683	1001	6732
December	16143	5890	1024	6765
January 2021	16106	5967	1018	6626
Percent Increase	70%	234%	11%	27%

The number of individuals now receiving Supplemental Nutrition Assistance Benefits (SNAP) now exceeds 197,000 residents, a **26.11%** increase since January 2020. The table below shows the change in case load since January 2019 through January 2021:



In 2020 and 2021, to process the surge of applications, maintain these caseloads, and establish new processes to distribute existing and new pandemic related benefits and programs, we incurred overtime and other operational costs to maintain access to services and benefits. With the continuing uncertainties regarding the pandemic and Hawaii's economic recovery, we anticipate that through SFY 2021 and likely through the biennium, we will maintain these caseloads, with little to no change in staffing levels.

These case load increases are also influenced by numerous programmatic waivers approved by federal agencies. As pandemic related waivers recede and regular program rules are reinstated, we anticipate additional administrative expenses as eligibility redeterminations and other program integrity measures return. We also anticipate with eligibility re-determinations, there will likely be an increase in requests for administrative review and fair hearings.

With CARES Act funds we added IT capabilities to process on-line applications, distribute pandemic-EBT benefits to eligible school children, and to support staff's ability to continue to telework safely, securely, and with appropriate equipment.

We are expecting significant amounts of additional federal funding from the Consolidated Appropriations Act of 2021 and the American Recovery Plan of 2021. To distribute these funds, timely and accurately, while maintaining our regular programming, we will need to make additional system modifications, revise or draft program rules, as well as hire new staff and train staff on the new programming and processes. We are also receiving and being tasked with a range of cross sector data sharing and analytics and require staff and system resources to provide project management, and address data governance issues.

DHS continues to collaborate and innovate during the pandemic to make access to benefits and services easier for Hawaii's residents and to provide our workforce with better tools and capabilities, while maintaining our priority to adhere to health and safety protocols. As we all look forward to emerging from these pandemic conditions, DHS needs the Legislature's continued support of DHS staff and the fiscal resources to provide timely access to benefits and services to Hawaii's residents.

Thank you for the opportunity to provide testimony in support of this measure.



The Waikiki Neighborhood Board supports the concept of the following bill: HB1286 (Deferred)/SB266 SD 2

At the February 9, 2021 Regular Meeting of the Waikiki Neighborhood Board (WNB) the Board voted in favor of the concept of this HB1286 which is very similar to SB266 SD 2.

Currently the Waikiki Visitor Industry is in terrible shape. Many of our Landmark businesses have closed forever and thousands of our Industry Associates are living on Unemployment Insurance or help from Family. This bill creates funding and authority for continued support for vaccination, testing and enforcement of pandemic procedures.

Following the 9/11 attack the Waikiki Economy fell and thousands of our residents were put on Unemployment and businesses fell. That was nothing compared to the current pandemic and this bill would provide the resources to prevent or respond to any further recurrence of this spread of the virus in Waikiki.

Robert J. Finley
Robert J. Finley
Chair

Council Chair
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Vice-Chair
Keani N.W. Rawlins-Fernandez

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Yuki Lei K. Sugimura



Director of Council Services
Traci N. T. Fujita, Esq.

COUNTY COUNCIL
COUNTY OF MAUI
200 S. HIGH STREET
WAILUKU, MAUI, HAWAII 96793
www.MauiCounty.us

March 30, 2021

TO: Honorable Silvia Luke, Chair
House Committee on Finance

FROM: Councilmember Kelly Takaya King

SUBJECT: **OPPOSITION TO PART II OF SB266 SD2 HD1, RELATING TO THE
CORONAVIRUS 2019 PANDEMIC**

Thank you for the opportunity to testify in **opposition** to Part II of this important measure. The purpose of Part II of this measure is to exempt any person from the post-arrival mandatory self-quarantine if the person receives a negative test result prior to arrival.

I am providing this testimony in my capacity as an individual member of the Maui County Council.

I oppose Part II of this measure for the following reasons:

1. State policy should set the minimum health standards while allowing the counties the flexibility to set the appropriate, stronger safety thresholds above that to reflect the unique capacity and needs of the individual islands even within a county.
2. This measure deprives the counties of self-rule and fails to appreciate the different challenges facing the different counties. It also fails protect rural communities, such as Hana, and their limited capacity to deal with surge cases.
3. While I appreciate and acknowledge the hardships the pandemic has caused everyone in Hawai'i, especially the tourism industry and small businesses, the current system is working and allows counties to react to the needs of their relative communities.
4. The Maui County Council voted to oppose legislation with a similar purpose (HB1286) by adopting **Resolution 21-21 Opposing State House Bill 1286 (2021), Relating to Travel** on Friday, February 19, 2021,

For the foregoing reasons, **I OPPOSE** this measure.



**Testimony to House Committee on Finance
Wednesday, March 31, 2021 at 1:30 P.M.
Via Videoconference**

RE: SB 266, SD 2, HD 1, RELATING TO THE CORONAVIRUS 2019 PANDEMIC

Chairs Luke, Vice Chair Cullen and Members of the Committee:

The Chamber of Commerce Hawaii ("The Chamber") **supports** SB 266, SD 2, HD 1 which establishes a statewide approach to the safe travels program.

The Chamber is Hawaii's leading statewide business advocacy organization, representing 2,000+ businesses. Approximately 80% of our members are small businesses with less than 20 employees. As the "Voice of Business" in Hawaii, the organization works on behalf of members and the entire business community to improve the state's economic climate and to foster positive action on issues of common concern.

Given Hawaii's reliance on tourism, we must find a way to bring people back to our state and breathe life back to our local businesses. As Hawaii continues to stay on track to administer 900,000 vaccines by May 1 and nationally reaching millions more, we appreciate the opportunity to ease travel restrictions for not only arrivals with negative tests but also for travelers that have completed their vaccinations.

As such, given the optimistic progress of vaccination deployment, we respectfully ask that the Committee consider the ability to ease domestic and interisland travelers that have completed their COVID-19 vaccines. This could be accomplished through an exemption from the post-arrival mandatory self-quarantine requirement for travelers who have completed the COVID-19 vaccination; thus, would directly help to streamline the arrival process for domestic and interisland travelers when they arrive in Hawaii.

Finally, as a high-level overview on the state of the small business economy, we would like to highlight facets of our recent Pulse of Business survey¹ conducted in partnership with Omnitrak and with the support of Central Pacific Bank Foundation, the Hawaii Chamber of Commerce Foundation.

¹ Survey finds Hawaii businesses reeling from lost revenue, cutting jobs, and expecting a long road to recovery <https://www.staradvertiser.com/2021/02/02/breaking-news/survey-finds-hawaii-businesses-reeling-from-lost-revenue-cutting-jobs-and-expecting-a-long-road-to-recovery/>



The Pulse of Business results are not surprising as small businesses continue to suffer from the economic impact of the COVID-19 pandemic.

The Pulse of Business survey found that:

- Eighty percent of the businesses that participated in the survey are small businesses with 20 or fewer employees.
- Island companies face a long road to recovery that they expect will extend into April 2022.
- Revenues fell an average of 45% from 2019 to 2020, with no significant differences between Oahu and neighbor isles.
- Almost half (45%) reduced their workforce. The percentage would have been higher (63%) if businesses had not received federal Paycheck Protection Program funds.
- Businesses that had to cut jobs laid off a median of one in three workers in 2020. On neighbor isles, cuts were even greater, with five in nine employees laid off due to the pandemic.
- Many local businesses attributed a drastic drop in revenue to waning tourism, even if they were not directly involved in the visitor industry. A drop in visitor arrivals was the single most important factor impacting employee cutbacks.

Hawaii's business community is at a critical point and asking for government policies that offers them the relief to stay in business and keep employees working. As such, we support this measure and respectfully ask the Committee's consideration of a travel passport for travelers who have completed their vaccines.

Thank you for this opportunity to provide testimony.



Attention members of the Hawai'i House Finance Committee,

SB266 was intended to be a COVID19 appropriations bill and HB1286 should never have been improperly added to SB266 (which was intended solely purposed for appropriating monies).

This bill was sent by the senate as an appropriations bill and trying to force unpopular legislation into a spending bill is morally and ethically wrong. This action is likely unconstitutional and definitely degrades public trust. Please remove the amendment that adds the language and intent of HB1286 from this appropriations bill.

Oahu and Maui are experiencing very concerning upticks in cases, many of which are being attributed to Variants of Concern. Removing the ability to pivot by moving emergency executive actions to the legislative branch is incredibly foolish.

The amendment to SB266 inserts the language of HB1286 and it's intent. This, while well intentioned, would have huge unintended consequences.

- 1) We have new more contagious variants now in our state. At least one of these variants is the cause of almost all of Maui's cases. As these variants continue to spread and increase like they have elsewhere, we may need to quickly pivot and change our travel protocols if our communities and hospitals become overwhelmed. Codifying the safe travels plan into law will hinder our ability to act quickly if our communities get inundated with these new more dangerous variants.
- 2) This bill treats all islands as if they are equal. This is unfair to the neighbor islands. All the neighbor islands have different levels of available medical infrastructure, different amounts of tourism, different budgets, and different school situations. I am on the island of Maui and am very concerned.
 - a) Since October Maui schools have moved from green on DOH school metrics (full in person school allowed) to purple (learning from home recommended). We need a plan that gets our cases lower so our keiki can safely go to school and so parents can work.
 - b) Maui's cases per population is now equal to many places on the mainland. The Safe Travels program is NOT working well for Maui.
 - c) Maui hospital is often strained and full. It can quickly be completely overwhelmed which increase medical errors and potentially cause people to die unnecessarily. This program can completely devastate our island if our hospital gets overwhelmed because there is no way to put on the breaks.
 - d) Maui has more visitors per capita than any other island.. The airport departure study done by Dr. Hou and Dr. Lorrin Pang showed 7/1000 visitors who participated in Safe Travels were actually positive (false negative). There have now been several days where Maui has had over 10,000 arrivals in a single

day. This means there are many new COVID19 cases being seeded into the community daily. Taking away our island's ability to pull the emergency break is morally and ethically wrong and irresponsible. If you vote to pass this bill and things get really bad then you will be partially responsible for putting our island in such a precarious position.

3) There are other plans that could allow tourism and keep residents safer. I would be happy to send some to you. If the whole state is going to adopt a plan it should be one that all the counties would be glad to adopt. The neighbor counties have all rejected the current program which is why there are different requirements. The Safe Travel program is not considered safe enough for counties with limited resources. It is not right to force a less safe plan onto counties without their consent. It is very Oahu-centric and very oppressive towards "neighbor" islands. This plan does not have aloha and is not very neighborly.

a) One plan that is widely supported as a better protocol by many renowned experts in Hawaii is the "Safer Travel" plan.

It can be found here: www.halehawaii.cc/safertravels (I would be more than happy to explain it.)

b) Maybe this or a similar Safer program would be more acceptable to neighbor counties and would be voluntarily adopted.

c) Please consider the message this bill sends to neighbor counties. It sends a loud and clear message to residents in neighboring counties that our voices do not matter. This bill's purpose is to take apart plans and protocols that were painstakingly put together by counties despite opposition on all sides of the COVID-19 debate. The Safe Travels plan was considered and rejected by neighboring counties. To force more cases of COVID-19 onto the neighboring counties removing the ability to locally put on the brakes is very authoritarian and unethical. It will cause division and non-reversible resentment towards visitors and Oahu. Forcing counties to follow a plan that is already failing in Maui and widely rejected in Kauai and Hawai'i is not pono.

d) Our county Mayors and local DOH representatives can see what is happening on the ground here in real time and need to be able to respond to it quickly.

Mahalo,

Cara Flores

HALE Hawai'i

Included is a copy the OGG airport departure study and it's findings

EVALUATING METHOD FOR COVID-19 PRE-TRAVEL PROGRAMS

1

A Rapid Method to Evaluate Pre-Travel Programs for COVID-19: A Study in Hawaii

Amy T. Hou, MD¹, Genevieve C. Pang, PhD², Kristin M. Mills, MS², Krizhna L. Bayudan¹,
Dayna M. Moore, BSN¹, Luz P. Medina, MD³, Lorrin W. Pang, MD²

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¹ Hawaii State Department of Health, Medical Reserve Corps, Maui District Health Office, 54 South High Street # 301, Wailuku, HI, USA 96793

² Hawaii State Department of Health, Maui District Health Office, 54 South High Street # 301 Wailuku, HI, USA 96793

³ Maui County Medical Society, P.O. Box 2091, Wailuku, HI, USA 96793

EVALUATING METHOD FOR COVID-19 PRE-TRAVEL PROGRAMS

2

Abstract

Background

Pre-travel testing programs are being implemented around the world to curb COVID-19 and its variants from incoming travelers. A common approach is a single pre-travel test, 72 hours before departure, such as in Hawaii; however this raises concerns for those who are incubating or those infected after pre-travel testing or during transit. We need a rapid method to assess the effectiveness of pre-travel testing programs, and we use Hawaii as our case study.

Methods

We invited travelers departing from Kahului main airport at the end of their visit to Maui (major tourist destination among the Hawaiian islands) and performed COVID-19 PCR testing. Eligible participants needed a negative pre-travel test and a Hawaiian stay ≤ 14 days. We designed for anonymous testing at the end of travel so that travel plans would be unaffected, and we aimed for $\geq 70\%$ study participation.

Results

Among consecutive eligible travelers, 282 consented and 111 declined to participate, leading to a 72% (67-76%, 95% confidence interval) participation rate. Among 281 tested participants, two were positive with COVID-19, with an estimated positivity rate of 7 cases per 1,000 travelers. The top states of residence are California (58%) and Washington (21%). The mean length of stay was 7.7 ± 0.2 days. Regarding pre-travel testing, 87% had non-nasopharyngeal tests and 66% had self-administered tests.

Conclusions

This positivity rate leads to an estimated 17-30 infected travelers arriving daily to Maui in November-December 2020, and an estimated 52-70 infected travelers arriving daily to Hawaii during the same period. These counts surpass the Maui District Health Office's projected ability to accommodate 10 infected visitors daily in Maui; therefore, an additional mitigation layer for travelers is recommended. This rapid field study can be replicated widely in airports to assess effectiveness of pre-travel programs and can be expanded to evaluate COVID-19 importation and its variants.

EVALUATING METHOD FOR COVID-19 PRE-TRAVEL PROGRAMS

3

Manuscript

Introduction

Communities face the challenge of regulating travel and tourism during COVID-19. Destinations with a high economic reliance on tourism have strategized to limit viral importation with health screens, quarantines, pre-travel testing, and post-arrival testing. At the start of the pandemic, Hawaii implemented universal 14-day quarantine for all travelers, resulting in a massive decline of visitors and the third lowest COVID-19 rate among the states.^{1,2} However, given its dependence on tourism, Hawaii established the Safe-Travels Program (STP) in October 2020 whereby travelers could submit a negative polymerase chain reaction (PCR) test by a trusted partner within 72 hours to bypass quarantine.³

A single pre-travel test raises some concerns: 1) travelers who were incubating SARS-CoV-2 and escaped detection at the time of testing, and 2) travelers who were infected by SARS-CoV-2 after pre-travel testing or during transit. Furthermore, it would allow the entry of travelers infected up to 3 days prior to pre-travel testing, given that the prepatent period for SARS-CoV-2 virus is estimated at 3 days, based on studies showing a median incubation of 5 days and peak viral shedding at 2 days prior to symptoms onset.⁴⁻⁸ Given this prepatency, the STP guidelines may still permit such travelers to enter and transmit the virus within the community.

In an effort to assess Hawaii's STP program, a study was initially conducted and reported a COVID-19 positivity rate of 0.65 cases per 1,000 travelers,⁹ however, it had less than 10% participation rate and its methodology had concerns for self-deselection and distortion bias. Reviewers critiqued its validity and projected a revised positivity rate as high as 7-15 per 1,000 travelers.¹⁰ We adapted and improved our approach towards more robust sampling with randomized, consecutive solicitation followed by high participation rates (>65-70%),¹¹ estimating an appropriate sample size and limiting detracting factors.

The effectiveness of a single pre-travel test is still uncertain. Some propose the addition of a post-arrival test with or without quarantine; while others propose a return to universal quarantine. Mathematical models can be used to predict the impact of various mitigation towards COVID-19; such as: risk reduction by 37-61% with departure-day testing, 97-100% with a 14-day quarantine after arrival, or 95-99% with a 7-day quarantine after arrival and post-arrival test on day 3-4.¹² Worldwide, a rapid field method is needed to validate models and evaluate pre-travel testing programs, particularly with the emerging variants.

Prior to the study, focus groups were conducted to optimize participation. Eight groups of 15-20 mainland arrivals at Maui Kahului airport (OGG) helped to determine that the best time for the study was at the end of travel to avoid impact on travel plans, to test at airport departure gates (rather than clinics or hotels), and that positive results would not be reported to home states. It was important to them that accurate tests were used, and that results would be made known to them within days.

EVALUATING METHOD FOR COVID-19 PRE-TRAVEL PROGRAMS

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Methods

The Maui District Health Office (Department of Health), Department of Transportation, and Maui County Medical Society partnered to conduct the study and enrolled participants from November 20-30, 2020 at five departure gates in Maui Kahului airport. Individuals were invited to participate if they had a primary residence outside of Hawaii, traveled from a location other than Hawaii, had a negative pre-travel PCR test 72 hours before departure, and stayed in Hawaii for up to 14 days. Participants were recruited in an active, sequential manner, and participation was limited to one person per household or travel group. Persons who had a primary residence in Hawaii or stayed greater than 14 days were excluded. Individuals who were interested but had inadequate time before boarding were also excluded. Study participants answered a brief survey with mandatory questions (state of residency and any locations visited 14 days prior to Hawaii) and several optional questions for contact tracing, including lodging, restaurants and any COVID-19 symptoms.

Each study participant underwent a nasopharyngeal (NP) PCR test, performed by a medical staff, and then was given a complimentary Hawaiian-designed face mask. On study day 5, investigators added data collection at the time of the NP swab regarding the pre-travel PCR testing: NP or non-NP (i.e. nasal, oropharyngeal and salivary) swabbing; and whether it was self-administered. The COVID-19 test was provided free to participants, with results available in 24-72 hours, were anonymous/confidential, were not to affect travel plans and not reported to home states or airlines. Each participant was given a random, unique study number. Results were posted on a website with a coded positive or negative result only decipherable by the participant, in order to assure confidentiality of each result and the aggregate positivity rate. Participants also had the option to receive results via text messaging.

Using the Clopper-Pearson (CP) Method¹³ and our goal of at least 70% participation, we estimated the target number of eligible individuals to solicit for the study and to detect positive COVID-19 cases (Table 1 and 2). For analysis, the positivity rates would be multiplied by the number of daily arriving visitors (obtained from Hawaii tourism data from the Department of Transportation) to estimate the number of infections entering on a daily basis.

This study has been reviewed by the Institutional Review Board of the Hawaii State Department of Health, which approved that the study met the criteria for public health surveillance based on 45 CFR 46.102 (1)(2) of the Department of Health and Human Services.

Results

Among 577 individuals screened during the study period, 184 were excluded, 282 agreed to participate and 111 declined, as described by Figure 1. Of those eligible, the participation rate was 72% (67-76%, 95% confidence interval [CI]).

Table 3 describes the demographic characteristics of the study participants. The top primary states of residence for study participants were California (58%), Washington (21%) and Colorado (8%), reflecting the departure gates assigned to this study. The mean length of stay was 7.7 ± 0.2 days. The distribution of the lengths of stay is displayed in Figure 2 clustering between

EVALUATING METHOD FOR COVID-19 PRE-TRAVEL PROGRAMS

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5-10 days, which was preferred to increase the chances of capturing travelers that had incubating or prepatent periods.

Among participants who answered questions regarding accommodations, the most frequently reported were hotels (64%) and condominiums/timeshares (26%), located in the popular areas of West and South Maui. Only 14 participants traveled elsewhere within the two weeks before arrival to Hawaii, and only four reported going to Oahu before Maui for a mean stay of three days. One participant reported gastrointestinal symptoms that could be compatible with COVID-19 but tested negative for COVID-19. Among participants, 96% answered optional questions, and 62% provided phone numbers for results, therefore the additional questions did not appear to deter participation.

Two subjects tested positive and 279 negative for COVID-19, resulting in a positivity rate of 7 cases (1-24, 95% CI) per 1,000 visitors. One positive asymptomatic case traveled from California, had a negative pre-travel test 3 days prior to arriving in Maui, and stayed at a hotel for 7 days. The second positive asymptomatic case traveled from Wisconsin with a 1-day stay in California, had a negative pre-travel test 3 days prior to arriving to Maui, and stayed on Maui for only one day (unclear if this case was departing to another Hawaiian island). One enrolled participant's sample leaked before diagnostic testing, and the test was discarded. Table 4 illustrates data collected on the pre-travel testing from participants.

Discussion

Our rapid assessment of Hawaii's STP and the COVID-19 positivity rate among travelers incorporated representative sampling with active, randomized, sequential recruitment, combined with a high 72% participation rate. Our data suggested a positivity rate of 7 cases per 1,000 travelers. Applying this positivity rate to the available tourism data derives an estimate of 17-30 infected travelers arriving daily to Maui in November-December 2020, and an estimate of 52-70 infected travelers arriving daily to Hawaii state in the same period.³ These counts surpass the Maui District Health Office's projected ability to care for 10 infected visitors per day in Maui, based on its low community incidence and hospital capacity. Since December 2020, the rising number of visitors and increased transmission on the mainland is likely associated with an even higher number of cases currently entering Hawaii.

The other Hawaii travel study (Miller) described a significantly lower positivity rate of 0.65 cases per 1,000 travelers; it was conducted from mid-October to November 2020 on several islands: Maui, Oahu, Kauai and Big Island.⁹ However, its validity has been challenged due to several factors: 1) it notified 10% of arriving passengers via online email, inviting voluntary participation in post-arrival testing 2) it allowed for the less-accurate rapid antigen testing; and 3) it reported results to health officials who imposed a 10-day isolation period on those testing positive and a 14-day quarantine on their close contacts, plus a no-fly notification to airlines that was devastating to travel plans. The methodology was associated with a low participation rate (<10% of those invited) challenged by self-deselection and a distortion bias that cannot be compensated, even by enrolling high numbers of study participants. Our study design aimed to mitigate these observed disincentives and improve participation.

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The two positive cases identified in our study were most likely infected in their primary residential states of California and Wisconsin; since, during the study period, COVID-19 case rates were 14-fold higher in California and 8-fold higher in Wisconsin, than for Hawaii state,² and even higher compared to Maui, a lower transmission district at the time.¹⁴ It is plausible for the first positive case to have been exposed in Maui rather than California given the median incubation period of 5 days and this case's stay of 7 days; however, rates were far higher in California.

It is important for Hawaii to acknowledge the estimated introduction of 7 COVID-19 cases per 1,000 incoming mainland travelers. Given the potential COVID-19 spread to the local community and our limited hospital capacity, we recommend another layer of mitigation to the STP for incoming travelers, such as scientifically-based post-arrival testing with shortened quarantine.¹² The Kauai COVID-19 Discussion Group has suggested adding a second test after 6 days of quarantine to attempt decreasing travelers' positivity rate to <5 per 10,000.

For the pre-travel testing required by Hawaii, the majority of our participants (87%) did not undergo NP testing and many (66%) were self-administered, which may introduce the potential insensitivity of pre-travel COVID-19 testing.^{15,16} It is plausible that travelers opted for more convenient tests (i.e. self-administered) or more comfortable tests (i.e. non-NP). We did not pair the pre-travel test to each participant, therefore the types of pre-travel testing for the two positive cases were unknown. In future studies, collecting these details may help to determine the sensitivity among the many pre-travel tests.

Our study was limited in size: future studies could be performed with larger numbers to further tighten the confidence interval around point estimates, which for our purposes focused on participation rates to be about 70%. Our sample included mainly travelers from California and Washington, due to the departure gates where our study was stationed; this may potentially add some selection bias. We sought minimal information from participants in order to achieve high participation. We selected one member from each travel group to maximize sampling from different travel groups, but inclusion of other members of the two positive cases may help to investigate additional cases. There is a discrepancy in the total data collected for the lengths of Hawaii stays (mandatory question) due to incomplete data entries from the study day 1. We may have missed infections in participants who were infected but produced a negative result by the time of our study's testing (particularly for those who stayed 10-14 days in Hawaii). However, the positivity rates estimated for travelers staying 0-14 days may be extrapolated to the entire traveler group, regardless of length of stay. Finally, we did not perform genomic analysis, which could establish molecular-level relatedness, and should be implemented in the future for detecting and measuring the rate of incoming COVID-19 variants.

This simple, rapid field study has implications for all pre-travel testing programs that aim to estimate the importation of COVID-19. For destinations with relatively low prevalence of a target, such as a specific variant, our approach can assess the positivity rate of the target in travelers. To estimate the introduction of COVID-19 variants, genomic testing will be needed, ideally multiple variant genomic testing on a single sample. In future studies, Hawaii can conduct this study at the main airports in Maui and Oahu, and add genomic testing, to track the positivity rate of COVID-19 and its variants into Hawaii. Recently, the CDC has called for a

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single pre-travel test in all travelers entering the United States;¹⁷ thus, this study can be readily utilized to assess positivity rates of travelers at a broader scale in our country. It would be useful to repeat this simple study periodically (such as every two to three months) at airports worldwide, to evaluate the efficacy of travel control programs in the face of rising COVID-19 infections and variants. This tool can assist communities in evaluating whether the travelers' positivity rates exceed their health-system's capacities to care for additional incoming cases, and whether to consider adding additional layers of mitigation for travelers.

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Conflict of Interest/Disclosure

The authors have declared no conflicts of interest.

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Table 1. Point Estimates of Participation Rates Using a Total of 400 Solicited Individuals with Varying Number of Participants Who Enroll

# of Participants Who Enroll into Study	Point Estimate of Participation Rate	95% CI of Participation Rate
360	90%	(87% - 93%)
320	80%	(76% - 85%)
280	70%	(65% - 74%)
240	60%	(55% - 65%)
200	50%	(45% - 55%)

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Table 2. Point Estimates for a Valid Representative Population Using Study Size of N = 300

# Positive PCR Tests in Sample Study	Point Estimate of Overall Covid Cases (per 1000)	95% CI (per 1000)
0	0	(0 - 17)
1	3	(0.1 - 18)
2	6	(0.8 - 24)
3	9	(2 - 30)
5	16	(5 - 38)
7	23	(9 - 38)
10	33	(16 - 60)

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Table 3. Demographic Characteristics of Study Participants

Mandatory Questions	Study Group
State of residence (N=281) — no. (%)	
California	164 (58)
Washington	58 (21)
Oregon	22 (8)
Colorado	4 (1)
Nevada	4 (1)
Arizona	2 (1)
Arkansas	2 (1)
Wisconsin	2 (1)
Other	23 (8)
Number of days in Hawaii (N = 272)	
Range (days)	0 - 14
Mean (days)	7.7 ± 0.2
Optional Questions	
Answered any optional question — no. (%)	270 (96)
Provided phone number for results — no. (%)	173 (62)
Negative pre-travel test (N = 218) — no. (%)	
3 days prior to departure	165 (76)
2 days prior to departure	47 (21)
1 day prior to departure	6 (3)
Any travel prior to arriving in Hawaii? (N =270) — no. (%)	
Yes	14 (5)
No	256 (95)
Those who traveled to Oahu before Maui (N = 4)	
Mean stay in Oahu (days)	3
Lodging in Maui (N = 233) — no. (%)	
Hotel	149 (64)
Condo/timeshare	61 (26)
House	23 (10)
Did excursion tour, no.	50

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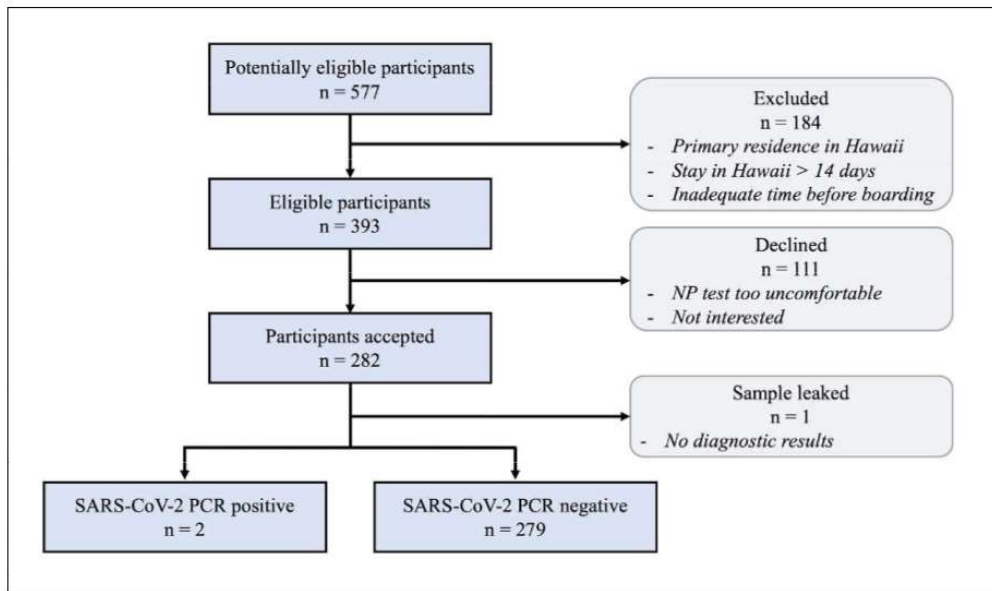
Table 4. Pre-Travel COVID-19 Testing Characteristics

	Nasopharyngeal	Not Nasopharyngeal
Self-Administered	3	132
Not Self-Administered	22	48

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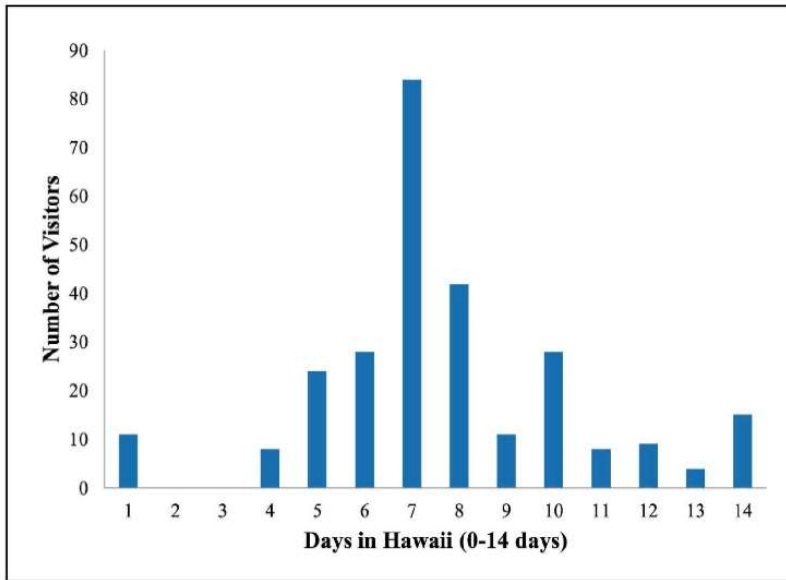
Figure 1. Flow Diagram of Study Participants.



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Figure 2. Distribution of Visitors by Lengths of Stay in Hawaii (N = 272)





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March 29, 2021

Honorable Chair Sylvia Luke, Vice Chair Ty Cullen, and
& Members of the House Committee on Finance

Re: Testimony in Support of SB 266 SD2 HD1

Chair Luke, Vice Chair Cullen, and Members of the House Committee on Finance:

Roberts Hawaii *strongly* supports Senate Bill 266 SD2 HD1, which sets forth requirements to be applied across the state and counties for pre-arrival and post-arrival testing and mandatory quarantine, along with circumstances upon which travelers may be exempt.

As an organization that directly engages with the visitors and the travel industry in Hawaii, we believe a uniform and consistent approach needs to be applied across the State. Such an approach would ensure that safeguards could be effectively implemented, while at the same time helping our visitors and residents to be able to understand and to comply with the requirements.

Due to the varying approaches that have been applied to date, we believe a consistent standard seems appropriate, because COVID-19 is a statewide concern and visitors will travel between islands. Although we are not commenting on the specific requirements of the bill, we respectfully suggest the final language of the bill should take into consideration input from the counties to ensure the testing requirements are appropriate statewide.

Thank you for the opportunity to testify on this measure.

Sincerely,

Roy Pfund
President & Chief Executive Officer
Roberts Hawaii



MAUI

CHAMBER OF COMMERCE
VOICE OF BUSINESS

**HEARING BEFORE THE HOUSE COMMITTEE ON FINANCE
HAWAII STATE CAPITOL, HOUSE CONFERENCE ROOM 308
WEDNESDAY, MARCH 31, 2021 AT 1:30 P.M.**

To The Honorable Sylvia Luke, Chair;
The Honorable Ty J.K. Cullen, Vice Chair; and
Members of the Committee on Finance,

OPPOSE SB266 SD2 HD1 RELATING TO THE CORONAVIRUS 2019 PANDEMIC

Aloha, my name is Pamela Tumpap. I am the President of the Maui Chamber of Commerce, in the county most impacted by the COVID-19 pandemic in terms of our dependence on the visitor industry and corresponding rate of unemployment. I am writing share our opposition to SB266 SD2 HD1.

We understand the benefits of this bill and believe there is value in a statewide system. We have the utmost respect for Speaker Saiki and his intents and efforts on this issue. It is hard for us to be in a different position as we support our sister island chambers, but feel there must be a way where we can come together without making this law.

Flexibility has been critical for Maui County and Mayor Victorino has worked with the Chamber and business community to be as flexible as possible, while still balancing health and economic concerns. This flexibility has been especially important to Maui County as a tri-island county. Therefore, to best meet our mission on advocating for our members and our community, we must oppose this bill.

We hope to see continued dialogue between the Governor and Mayors to find workable solutions and unify where possible.

Mahalo for your consideration of our testimony.

Sincerely,

Pamela Tumpap
President

To advance and promote a healthy economic environment for business, advocating for a responsive government and quality education, while preserving Maui's unique community characteristics.



**Testimony to the House Committee on Finance
Wednesday, March 31, 2021; 1:30 p.m.
State Capitol, Conference Room 308
Via Videoconference**

**RE: SENATE BILL NO. 0266, SENATE DRAFT 2, HOUSE DRAFT 1, RELATED TO THE
CORONAVIRUS 2019 PANDEMIC.**

Chair Luke, Vice Chair Cullen, and Members of the Committee:

The Hawaii Primary Care Association (HPCA) is a 501(c)(3) organization established to advocate for, expand access to, and sustain high quality care through the statewide network of Community Health Centers throughout the State of Hawaii. The HPCA **SUPPORTS** Part I of Senate Bill No. 0266, Senate Draft 2, House Draft 1, RELATED TO THE CORONAVIRUS 2019 PANDEMIC.

The bill, as received by your Committee, Part I. of this bill would appropriate general funds for fiscal year 2021-2022, to the Departments of Defense, Health, Human Services, and Public Safety, and the Hawaii Health Systems Corporation, to supplement the continuation of various COVID-19 related response, relief, and mitigation programs and activities.

To facilitate further discussion, this bill would take effect on July 1, 2020.

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

Ever since COVID-19 hit Hawaii's shores, FQHCs have worked with our partner health care providers and the State Department of Health, the Counties of Hawaii, Kauai, and Maui, and the City and County of Honolulu to plan and implement the enormous task of immunizing Hawaii's citizens. The federal government has helped enormously by fast-tracking the vaccine and paying for the hundreds of millions of doses that will need to be distributed throughout our Nation.

Testimony on Senate Bill No. 0266, Senate Draft 2, House Draft 1
Wednesday, March 31, 2021; 1:30 p.m.
Page 2

However, the federal government is not paying for the administrative costs of delivering this medication to citizens. This includes, among other things, the purchase of needles, syringes, personal protection equipment, as well as the time of health care professionals away from their normal duties to perform this added responsibility.

Because these costs were not previously budgeted, the Administration has had to scramble to find resources within existing budgets to, among other things, start the immunizations of first responders and health care providers. That they had gotten us this far, the Administration should be commended for their creativity and willingness to work with the providers.

The immunization plan is just one example of how COVID has had a profound systemic impact on all government services provided by the State of Hawaii. There are many more issues just like this that the Administration has had to address immediately and decisively, including those related to civil defense, transportation, human services, health and public safety just to name a few.

For this reason, the HPCA urges your favorable consideration of this important measure.

Thank you for the opportunity to testify. Should you have any questions, please do not hesitate to contact Public Affairs and Policy Director Erik K. Abe at 536-8442, or eabe@hawaiiipca.net.



HAWAII HEALTH SYSTEMS

C O R P O R A T I O N

Quality Healthcare For All

HOUSE COMMITTEE ON FINANCE

March 31, 2021

1:30 p.m.

Via Videoconference

Testimony in Strong Support of Senate Bill 266, S.D. 2, H.D. 1 RELATING TO THE CORONAVIRUS 2019 PANDEMIC.

Appropriates moneys. Exempts any person from the post-arrival mandatory self-quarantine if the person receives a negative test result prior to arrival. Allows the governor to establish statewide conditions for exemption. Requires certain COVID-19 tests for travelers who do not have a test result upon arrival to avoid mandatory self-quarantine. Requires any person who does not obtain a negative test result for COVID-19 pre-arrival to be responsible for all costs associated with that person's mandatory self-quarantine. Prohibits the suspension of the quarantine requirements except by legislative approval via a concurrent resolution. Repeals quarantine requirements on 12/31/2021. Requires that should any project or program related to COVID-19 response efforts paid for by state funds later become eligible for federal reimbursement, those federal funds shall be deposited into the general fund. Lapses funds from the major disaster fund to the general fund on 7/1/2021. Effective 7/1/2050. (HD1)

Linda Rosen, M.D., M.P.H.

Chief Executive Officer

Hawaii Health Systems Corporation

On behalf of the Hawaii Health Systems Corporation (HHSC) Corporate Board of Directors, thank you for the opportunity to present testimony **in strong support of S.B. 266, S.D. 2, H.D. 1.**

We respectfully request the committee's consideration that Section 17 of this bill provide general fund appropriations of \$31,900,000 to HHSC for fiscal year 2022 to be used as a cash infusion to offset revenue shortfalls of the regional facilities of the corporation located in the counties of Oahu, Hawaii, and Kauai due to the COVID-19 pandemic. HHSC's base general fund appropriation request for fiscal years 2022 and 2023 is \$100,709,000 and \$98,036,000, respectively. The vast majority of that request is to fund approximately \$63,800,000 each year in projected lost revenues as a result of the impact of COVID-19. As the true impact on the operating revenues of HHSC's hospitals is still unknown depending on the status of getting Hawaii residents vaccinated and achieving herd immunity as well as the timing and extent of opening up the State to tourism, HHSC projected that inpatient revenues will reach a maximum of 90% of pre-COVID-19 levels, with outpatient and Emergency Department revenues remaining at approximately 60% to 90% of pre-COVID-19 levels. This is consistent with what HHSC has experienced since the height of the COVID-19 pandemic in April 2020.

Thank you for the opportunity to testify before this committee **in strong support** of this measure.

3675 KILAUEA AVENUE • HONOLULU, HAWAII 96816 • PHONE: (808) 733-4020 • FAX: (808) 733-4028



March 30, 2021

House's Committees on Finance
Hawai'i State Capitol
415 South Beretania Street
Honolulu, HI 96813

RE: Senate Bill 266 - RELATING TO THE CORONAVIRUS 2019 PANDEMIC

Aloha Chairs Luke, Vice Chair Cullen, and Committees' Members,

I am writing in OPPOSITION to the insertion of House Bill 1286 into Senate Bill 266 following HD 1 amendments on behalf of the LGBT Caucus of the Democratic Party of Hawai'i, Hawaii's oldest and largest policy and political LGBTQIA+ focused organization. We oppose this insertion because HB 1286 HD 2 seeks to exempt any person from the post-arrival mandatory self-quarantine if the person receives a negative test result prior to arrival. Allows the governor to establish statewide conditions for exemption. Requires certain COVID-19 tests for travelers who do not have a test result upon arrival to avoid mandatory self-quarantine. Requires any person who does not obtain a negative test result for COVID-19 pre-arrival to be responsible for all costs associated with that person's mandatory self-quarantine. Prohibits the suspension of this Act except by legislative approval via a concurrent resolution.

While the LGBT Caucus realizes we are living in unique times while dealing with the COVID-19 pandemic, we feel strongly that each county should be able to take the lead to take care of their own communities. Each county is different and has different needs. During this pandemic each mayor has acted differently in order to protect and respond accordingly to their respective community's needs.

Setting one standard across the state of Hawai'i is not prudent. Instead the LGBT Caucus supports each county's Mayor to work with their staff; the Director of the State of Hawaii's Department of Health; the Governor, and other appropriate State and Federal agencies to make decisions that fit their county's needs in face of this pandemic.

The LGBT Caucus believes this bill appears to be an O'ahu-centric power grab from the neighbor islands. If certain counties want to put in place stronger rules to protect their communities, they should be able to do so. For these reasons the LGBT Caucus opposes this legislation.

Please note that the LGBT Caucus supports the other portions of this important piece of legislation.

Mahalo nui loa for your time and consideration,

Michael Golojuch, Jr.
Chair
LGBT Caucus of the Democratic Party of Hawai'i

I am writing to strongly **oppose** the passage of SB266 unless the Senate first **removes** the amendment adding the substance of HB1286 as “Part II” of SB266.

For the following two reasons, which are elaborated below, the language in the current version of SB266 that was taken from HB1286 (I will refer to this language as “HB1286”) **must be removed** from SB266:

- First, the amendment adding HB1286’s language to SB266 was **improperly adopted**, in violation of the Hawai’i Constitution.
- Second, HB1286 proposes a **dangerous and potentially deadly** abridgment of the emergency powers not only of the mayors but also of the Governor.

I. The House acted improperly and unconstitutionally in adding HB1286 to SB266

Article III, section 14 of the Hawai’i Constitution provides that “No law shall be passed except by bill. **Each law shall embrace but one subject**, which shall be expressed in its title.” (Emphasis added.) The current version of the bill (SB266 SD2 HD1) **blatantly** violates that constitutional mandate.

As originally introduced, SB266 was strictly an appropriations bill. As it emerged from the Senate (SD2), it provided that “the purpose of this Act is **to appropriate funds** for the purpose of COVID-19 response activities and provide transparency and accountability for the use of those funds.” (Emphasis added.) The remaining language in the bill consisted solely of appropriations for specific categories of COVID-19 related costs for the 2021-2022 fiscal year. The SD2 version of the bill passed its third reading in the Senate with no opposition on March 9.

When SB266 SD2 was transmitted to the House, it was referred to the Committee on Pandemic & Disaster Preparedness (PDP), where it was set for hearing on March 16. The hearing notice for that date describes SB266 SD 2 as follows: “RELATING TO THE CORONAVIRUS 2019 PANDEMIC. **Appropriates moneys.**”

(https://www.capitol.hawaii.gov/session2021/hearingnotices/HEARING_PDP_03-16-21_.HTM, emphasis added.) The hearing notice gave **no indication whatsoever** that in considering SB266, PDP would be discussing or acting on anything other than COVID-19 related appropriations.

Not only was there no notice, there also was **no testimony or discussion of the subject matter of HB1286 at the March 16 PDP hearing**. Nonetheless, under the guise of “technical and non-substantive amendments,” PDP voted to label the existing bill “Part I,” and to add the entire text of HB1286 as “Part II.” As a result, the bill now addresses **two entirely different subjects**: (1) the appropriation of funds to cover the costs of responding to the COVID-19 pandemic; and (2) the conditions under which travelers will be permitted to enter the state without undergoing quarantine, **including elimination of the Governor’s emergency powers** to respond to a public health crisis.

In short, PDP’s amendment adding HB1286 to SB266 was a cynical effort to make an end run around the Senate’s sensible decision that HB1286 is not worthy of passage, and the Governor’s indication he would veto it – all accomplished without public notice, without

discussion, improperly disguised as a “nonsubstantive amendment,” and in violation of the Hawai'i Constitution's single subject rule.

This is exactly what the constitutional rule was intended to prevent.

Moreover, the addition of a major, substantive section to the bill as passed by the Senate means that SB266, as it currently stands in the House, **did not pass three readings in the Senate**, as the Constitution also requires (Art. III, sec. 15). **Passing SB266 with the added HB1286 language will render the bill subject to legal challenge in the courts, thus delaying state agencies' receipt of the badly needed funding it appropriates.**

II. Enacting HB1286 would be both dangerous and pointless, as it would risk residents' health and lives without increasing the State's tourism revenue

HB1286 is based on a number of implicit, unstated assumptions, none of which are supported by any data, and many of which are **provably false**.

- (1) **ASSUMPTION:** Visitor numbers and revenue would be higher if potential travelers were not “confused” by different county travel protocols.

REBUTTAL:

- a. The primary reason that visitor numbers are down is that people who care about public health are heeding the advice of the CDC and refraining from nonessential travel at this time. Another reason for the drop in visitor numbers is that many people do not have the money to travel due to loss of income during the pandemic. Per-visitor revenue is down because many of the visitors who are choosing to travel here despite the pandemic are doing only because they can take advantage of bargain airfare and hotel rates. International visitor levels are down because many countries are restricting travel by their residents. Nothing in this bill would do anything to address any of these issues, which are entirely outside the State's control. **The proponents of this bill have provided NO data-based evidence indicating that enacting it would actually result in a significant rise in tourism revenue.**
- b. Kauai's current hotel occupancy rates are roughly comparable to Maui's, so there is no evidence that stricter County rules, or confusion about different rules, is affecting visitor numbers. **Pre-travel testing and mask-wearing requirements may be deterring some visitors, but those rules are already in effect statewide, and this bill would not change that.**
- c. Even if “confusion” is contributing to some extent to lower visitor numbers, this bill is the wrong remedy. **Permanently reducing Hawai'i's ability to protect itself during the pandemic is not the right remedy for “visitor confusion.”** The right remedy would be to create and consistently, timely update a single, central website clearly detailing all state and county travel rules; to link all other official state and county websites to this central website; and to strongly encourage all travel booking sites, airlines, hotels, and Hawai'i-related social media sites to link to the official site, rather than repeating information that may become outdated before it is viewed.

- (2) **ASSUMPTION:** The current pandemic situation will not change rapidly or significantly, so it makes sense to codify our current “Safe Travels” program, as there will never be a need to adjust it quickly.

REBUTTAL:

- a. The COVID-19 virus situation changes constantly and rapidly. New variants arise and are dispersed to new locations; the availability and accuracy of tests changes over time; vaccine availability and vaccination rates are rapidly rising; levels of infection in a given community may rise and fall quickly and unexpectedly. In addition, there are many unknowns: Do the vaccines work as effectively against the new variants? What is the likelihood that vaccinated people can still transmit the virus? **Codifying Hawaii’s current “Safe Travels” protocol into a statute would make it impossible for the State to further strengthen its travel policies in order to respond to a significantly more virulent, more infectious, or vaccine-resistant variant, or to loosen them if it appears safe to do so** based on resident and visitor vaccination status, or the discovery of new, highly effective treatment modalities. The addition of the new Section 3 in the HD2 version of HB1286, which was carried forward into the version inserted into SB266, made this even worse, by entirely **removing the Governor’s ability to adopt emergency rules** in response to a sudden change in the situation, such as a rapid rise in infections with a more contagious or vaccine-resistant variant.
 - b. Our current “Safe Travels” program has proven to be inadequate to protect against introduction of the virus by visitors. The difference in the rate of new infections experienced by Maui and Kauai since the start of “Safe Travels” on October 15 establishes that. **If future events, such as an outbreak of a vaccine-resistant variant, convince our Governor that further protections, such as those currently in place on Kauai, must be adopted statewide in order to protect residents’ lives and health, this bill would prevent him from doing so** without the delay and expense of a special session of the Legislature. Conversely, if future developments suggest that residents and visitors would be equally or better protected by measures less burdensome than pre-travel testing, this bill would prevent the Governor from responding to that change.
- (3) **ASSUMPTION:** All counties in Hawai’i have the same population demographics, the same per capita level of tourism, and the same per capita level of health care resources, so there is no reason to allow different counties to adopt different travel rules.

REBUTTAL:

- a. This is obviously untrue. The neighbor islands have only one or two hospitals each. Maui County includes three separate islands, two of which have only minimal health care facilities. Maui County and Hawai’i County both have pockets of very isolated rural populations, including many Native Hawaiians, that have limited access to health care. Maui island’s level of tourism, relative to full-time resident population, is higher than that of any other island. **Every island is different; we are not a one-size-fits-all state!**

- b. Allowing Hawai'i County to require visitors to test upon arrival, and allowing Kauai to adopt more restrictive rules, has enabled the State to essentially conduct field experiments regarding the effectiveness of different travel rules. **This bill would preclude both the State and the Counties from conducting pilot programs to enable the Department of Health to gather data on the effectiveness of different methods of making pandemic-era travel safer for both visitors and residents.**

(4) **ASSUMPTION:** Uniform statewide travel rules are needed to ensure the State has adequate revenue to perform its functions, and to revive the State's economy.

REBUTTAL:

- a. Tourism is not the only economic activity in the State. Given the possibility of further disruption in global travel patterns, due to future pandemics, climate change, or other unanticipated issues, the time has come for Hawai'i to reduce its economic dependence on tourism and diversify its economy. **In the long run, diversification will do more for the State's economy than any measure that purports to facilitate increased tourism as this bill does.**
- b. Federal aid to state and local governments is forthcoming; some has already arrived. Tourism revenue is already increasing, and will continue to do so as vaccinations increase on the mainland. This potentially harmful legislation should not be enacted based on the assumption that federal aid and increased tourism will not be sufficient to resolve Hawai'i's fiscal problems. In any event, **the proponents of this bill have provided NO evidence that enacting it would significantly increase the State's 2021 tax revenue** (see Rebuttal to Assumption (1)).



HAWAI'I LODGING & TOURISM
A S S O C I A T I O N

Testimony of
Mufi Hannemann
President & CEO
Hawai'i Lodging & Tourism Association

House Committee on Finance
Senate Bill 266, SD2, HD1: Relating to the Coronavirus 2019 Pandemic

The Hawai'i Lodging & Tourism Association—nearly 700 members strong, representing more than 50,000 hotel rooms and nearly 40,000 lodging workers — supports this measure that would appropriate funds to the departments, agencies, and initiatives that have been tasked with combatting and addressing the COVID-19 pandemic as well as codify statewide travel rules as they pertain to the COVID-19 pandemic and the Safe Travels program.

Our organization has consistently advocated for a clear, uniform statewide travel policy as it would make travel to Hawai'i hassle-free for healthy, tested visitors and returning residents. Moreover, HLTA would also support the inclusion of further language that would establish a “vaccine passport” that would allow fully vaccinated travelers to be exempted from the mandatory quarantine requirements. We feel strongly that this program should begin solely at the interisland level before growing to include Trans-Pacific and international travelers. Beginning with inter-county travel would have the added benefit of easy and convenient options for local residents to visit their ‘ohana and loved ones on each of the islands sooner rather than later. Their being able to do so would represent more than just tourism’s recovery. More than anything, it would signal a return to the routine lives that we’ve always known.

To date, more than 147 million doses of the COVID-19 vaccine have been administered in the United States with more than 610,000 doses having been given out in our state alone. Setting forth a clear, statewide policy that would exempt vaccinated travelers would not only allow these healthy, vaccinated individuals to travel to Hawai'i with ease, but would also encourage more potential visitors to seek out vaccination, bringing us closer to herd immunity and a return to normalcy. It is time that we look forward, and this requires that we develop clear policies that would allow for vaccinated people to easily travel in and around our state.

All these things being said, we understand that there will still be individuals who will opt not to get vaccinated. For this reason, our support for the pre-arrival testing program remains steadfast. We likewise support the proposed alteration listed in this measure that would provide a rapid test upon arrival for incoming travelers who took a test but did not receive their results prior to departure. These protocols in tandem with a vaccine passport would provide the layers of safety necessary to keep our community safe.

For these reasons, HLTA supports Senate Bill 266, Senate Draft 2, House Draft 1 and encourages the Legislature to consider the establishment of a vaccine passport.

Thank you for the opportunity to offer this testimony.



March 31, 2021

The Honorable Sylvia Luke, Chair
The Honorable Ty J.K. Cullen, Vice Chair
House Committee on Finance

Re: SB 266 SD2 HD1 – Relating to the Coronavirus 2019 Pandemic

Dear Chair Luke, Vice Chair Cullen, and Committee Members:

Hawaii Medical Service Association (HMSA) appreciates the opportunity to testify on SB 266, SD2, HD1, which appropriates moneys. Exempts any person from the post-arrival mandatory self-quarantine if the person receives a negative test result prior to arrival. Allows the governor to establish statewide conditions for exemption. Requires certain COVID-19 tests for travelers who do not have a test result upon arrival to avoid mandatory self-quarantine. Requires any person who does not obtain a negative test result for COVID-19 pre-arrival to be responsible for all costs associated with that person's mandatory self-quarantine. Prohibits the suspension of the quarantine requirements except by legislative approval via a concurrent resolution. Repeals quarantine requirements on 12/31/2021. Requires that should any project or program related to COVID-19 response efforts paid for by state funds later become eligible for federal reimbursement, those federal funds shall be deposited into the general fund. Lapses funds from the major disaster fund to the general fund on 7/1/2021. Effective 7/1/2050.

HMSA appreciates the intent of this measure and we are supportive of efforts to safely allow for the reopening of Hawaii's economy. The efforts of this bill will contribute to the collaborative efforts within our State to continue the recovery of public health.

Thank you for allowing us to testify on SB 266 SD2 HD1. Your consideration of our comments is appreciated.

Sincerely,

Matthew W. Sasaki
Director, Government Relations



Airlines for America®

We Connect the World

LATE

SB 266, SD2, HD1
Testimony in SUPPORT

COMMITTEE ON FINANCE

Rep. Sylvia Luke, Chair
Rep. Ty J.K. Cullen, Vice Chair

Thank you for allowing us the opportunity to provide industry testimony in support of Part 2 of SB 266, SD2, HD1 (as contemplated in HB 1286) with additional comments.

Airlines for America® (A4A) is the principal trade and service organization of the U.S. airline industry.¹ A4A members have gone to extensive lengths to protect the wellbeing and safety of our employees, customers and the communities in which we live, work and serve. U.S. airlines have relied on science throughout this crisis, and have undertaken hundreds of safety measures aimed at preventing virus transmission onboard aircraft. U.S. airlines began strictly enforcing face covering requirements in April 2020, long before the federal mandate. The layers of measures implemented by carriers also include pre-flight health acknowledgement forms, electrostatic and enhanced cleaning of aircraft and hospital-grade ventilation systems.

We are encouraged that rigorous scientific studies continue to confirm that the extensive layers of measures airlines have implemented effectively reduce the risk of transmission onboard aircraft. Studies by both the Harvard T.H. Chan School of Public Health's Aviation Initiative (APHI) and US TRANSCOM found that the risk of onboard transmission of COVID is very low. In fact, the research from Harvard concluded that being on an airplane as safe – if not safer than – other routine activities, such as grocery shopping or going to a restaurant. Similarly, a recent study in Canada found that travel was the smallest contributor to new COVID-19 infections and has remained extremely low throughout the crisis.

Despite these efforts, U.S. airlines have endured a barrage of constantly changing restrictions and regulations regarding travel to and from destinations across the globe. In

¹ The members of the association are Alaska Airlines, Inc.; American Airlines Group, Inc.; Atlas Air, Inc.; Delta Air Lines, Inc.; Federal Express Corporation; Hawaiian Airlines; JetBlue; Southwest Airlines Co.; United Airlines Holdings, Inc.; and United Parcel Service Co. Air Canada is an associate member.

Hawaii, the challenge has not simply been the ever-evolving requirements for travel to and around the islands, but navigating changes that vary island-to-island. This has ultimately resulted in a patchwork of requirements that are difficult to navigate both for visitors and residents alike and as such is compounding the economic toll the pandemic has had on the State.

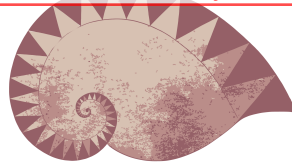
The industry remains committed to supporting risk-based, scientific approaches to contagion mitigation. A statewide policy such as this that does not allow for differing local standards depending on what island you are on is welcomed, and allows those traveling to and within Hawai'i the opportunity to adhere to uniform policies. This will let the private market find solutions that work; it helps the airline and travel industry partners to communicate clearly to travelers about what to expect and how to arrive travel-ready; and it helps travelers plan future travel without having to worry about last-minute policy changes.

While we are optimistic the sunset date will be the actual repeal of this measure, we recognize that this pandemic remains hard to predict. We remain hopeful the state will find a mechanism for vaccinations as a method to forgo testing in the near term. We are confident that it will continue to allow us dialogue with this body in hopes of removing some of the impediments to air travel, while ensuring Hawai'i remains safe both for residents and for visitors, who are the lifeblood of our economy.

Sincerely,

A handwritten signature in blue ink, appearing to read 'Sean Williams', is positioned below the closing salutation.

Sean Williams
VP, State & Local Government Affairs
swilliams@airlines.org



Pono Hawai'i Initiative

LATE

Patrick Shea - Treasurer • Lena Mochimaru - Secretary
Nelson Ho • Summer Starr

Tuesday, March 30, 2021

SB266 SD2 HD1 Relating to the Coronavirus 2019 Pandemic
Testifying in Opposition

Aloha Chair and members of the committee,

The Pono Hawai'i Initiative (PHI) **Opposes and requests amendments to SB266 SD2 HD1 Part 2 of Relating to the Coronavirus 2019 Pandemic.** We request that the measure be returned to its SD2 version.

PHI strongly opposing the language added to Part 2 of the measure based off its substance and constitutionality. This language appears to be HB1286 HD2, a measure that the Senate has heard and deferred. SB266 has been substantially amended without any public notice and based off the testimony provided by the previous Committee, no individual or organization requested the change. Based off the State Constitution, Article II, Section 14. No law shall be passed except by bill. Each law shall embrace but one subject. PHI believes that HB266 SD2 HD1 clearly embraces more than one subject. Part 1 and Part 2 of the bill seem to also cover very different subject matters, Part 1 have direct impact on the State Budget and Part 2 determining how individuals can travel to the State.

Beyond how Part 2 came to be and the constitutionality of the measure in its current form, the language in Part 2/HB1286 removes the ability of individual County's to establish their own COVID travel rules. State law and rules should represent a floor and not a ceiling. If a County due to its own particular circumstances wants to be more protective and have stricter rules and regulations, they should not be prevented from doing so. Legislating emergency rules governing a pandemic freezes the law creating a situation that should remain fluid so that we can rapidly adapt to changing conditions.

For these reasons, we urge the Committee to **Oppose Part 2 of SB266 SD2 HD1.**

Mahalo for the opportunity to testify,

Gary Hooser
Executive Director
Pono Hawai'i Initiative

LATE

SB-266-HD-1

Submitted on: 3/30/2021 6:23:38 PM

Testimony for FIN on 3/31/2021 1:30:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
Vince Kana`i Dodge	`Ai Pohaku	Oppose	No

Comments:

Aloha legislators, representatives of the people- not special interest groups,

We- my ohana and I strongly recommend that You remove the language of HB1286, a bill that was killed in the state senate, from SB266. We have seen this type of "end run" maneuver in the past and we are sick of it! It is manipulative dishonest disgraceful and disgusting. Play a clean game. You represent a democratic process.

WHAT! SPECIAL INTERESTS MORE IMPORTANT THAN DEMOCRATIC PROCESS!?!

YOU SWORE AN OATH WHEN YOU ENTERED INTO PUBLIC SERVICE- THAT OATH WAS NOT TO SPECIAL INTEREST GROUPS.

IT IS ESSENTIAL FOR THE COUNTIES TO HAVE JURISDICTION AND POWER TO ADJUST COVID RESTRICTIONS AS IT PROTECTS THEIR PEOPLE.

COVID IS A NOVEL VIRUS. YOU THINK YOU KNOW HOW TO BEST DEAL WITH IT?! YOU THINK THE SPECIAL INTERESTS KNOW WHATS BEST?!

Remove the language of Hb1286 from Hb266. Restore the original version of Sb266 with the 1st amendment in February.

Furiously!

Vincent Kana'i Dodge and ohana



LATE

**TESTIMONY OF TINA YAMAKI, PRESIDENT
RETAIL MERCHANTS OF HAWAII
March 31, 2021**

Re: SB 266 SD2 HD1 RELATING TO THE CORONA VIRUS 2019 PANDEMIC

Good afternoon Chair Like and members of the House Committee on Finance. I am Tina Yamaki, President of the Retail Merchants of Hawaii and I appreciate this opportunity to testify.

The Retail Merchants of Hawaii was founded in 1901, RMH is a statewide, not for profit trade organization committed to the growth and development of the retail industry in Hawaii. Our membership represents small mom & pop stores, large box stores, resellers, luxury retail, department stores, shopping malls, local, national, and international retailers, chains, and everyone in between.

We **SUPPORT SB 266 SD2 HD1 RELATING TO THE CORONA VIRUS 2019 PANDEMIC**. This measure appropriates moneys; exempts any person from the post-arrival mandatory self-quarantine if the person receives a negative test result prior to arrival; allows the governor to establish statewide conditions for exemption. Requires certain COVID-19 tests for travelers who do not have a test result upon arrival to avoid mandatory self-quarantine; requires any person who does not obtain a negative test result for COVID-19 pre-arrival to be responsible for all costs associated with that person's mandatory self-quarantine; prohibits the suspension of the quarantine requirements except by legislative approval via a concurrent resolution; repeals quarantine requirements on 12/31/2021; requires that should any project or program related to COVID-19 response efforts paid for by state funds later become eligible for federal reimbursement, those federal funds shall be deposited into the general fund; lapses funds from the major disaster fund to the general fund on 7/1/2021 and is effective 7/1/2050.

Hawaii's economy depends on tourism. It is the story of the \$20 bill – Visitor comes to Hawaii and pays for their hotel stay with at \$20. The hotel uses that \$20 to pay the hotel employee. The hotel employee purchases a plate lunch with that \$20. The plate lunch wagon owner purchases vegetables from the local farmer with that \$20. The local farmer pays the truck driver to deliver his vegetables to the grocery stores. The truck driver by shoes for his children with that \$20. If there is a break in the link of the \$20, Hawaii's economy will take an excruciating time to recover – and each week we see more and more retailers shutting their doors for good because they can no longer afford to do business in Hawaii without their customer base.

Retailers continue to be concerned about health and safety of not only our community and our employees, but our visitors coming to our islands as well. We have seen the devastation this pandemic has had on not only the community but on business as well. Hawaii's businesses and the community has been instrumental in ensuring that the health and safety by wearing masks, social distancing, constantly cleaning high touch areas and more since March 2020. We continue to support keeping Hawaii safe and we believe that programs like Hawaii Safe Travels, testing before coming to our islands or mandatory quarantine if there is no testing done is working.

Having a statewide rule will alleviate much of the confusion surrounding travel to Hawaii. We have seen that every time a county changes its travel orders to stricter rules, the entire state suffers. Visitors view these county changes as being statewide or will be implemented shortly on all islands and therefore often cancel or postpone their travel plans. Some are unsure exactly what the rules are to come to Hawaii. And while Hawaii has seen large clusters due to COVID-19, it is our understanding that the clusters were NOT due to visitors, but by social gatherings for family gatherings and funerals, in care home and in our prison system.

Furthermore, we are seeing more countries ramping up and more people around the world being vaccinated. The increase in people coming to Hawaii who are fully vaccinated will make Hawaii an even safer place. **We would like to request for consideration language in the bill that would include if travelers have completed their COVID-19 vaccinations and can show proof when they arrive to our state, that they will be allowed to arrive without the self-quarantine.**

Mahalo again for this opportunity to testify.

LATE

SB-266-HD-1

Submitted on: 3/31/2021 1:47:03 AM

Testimony for FIN on 3/31/2021 1:30:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
Miguel (Micco) Godinez	Kayak Kaua'i	Oppose	No

Comments:

Counties should retain autonomy in these kind of decisions.

Stay well.

Miguel D Godinez

SB-266-HD-1

Submitted on: 3/31/2021 7:20:51 AM

Testimony for FIN on 3/31/2021 1:30:00 PM



Submitted By	Organization	Testifier Position	Present at Hearing
Mike Moran	Kihei Community Association (KCA)	Oppose	No

Comments:

Aloha Chair and Committee members.

Our Non profit all volunteer membership org opposes this measure.

Mike Moran President , Kihei Community Assoc (KCA) www.gokihei.org

SB-266-HD-1

Submitted on: 3/29/2021 11:57:01 AM

Testimony for FIN on 3/31/2021 1:30:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
James E Raymond	Individual	Oppose	No

Comments:

Aloha Chair Luke, Vice-Chair Cullen, and Committee Members,

Re: The Insertion of HB1286 into SB266 creates an unconstitutional budgetary proviso.

Introduction

My name is James Raymond – until January of last year, I served as a Deputy Attorney General for the State of Hawai`i, but I am now retired and speak only as a concerned citizen in strong opposition to Senate Bill No. 266, S.D. 2, H.D. 1 entitled: "A BILL FOR AN ACT RELATING TO THE CORONAVIRUS 2019 PANDEMIC."

As a retired Deputy Attorney General, I can tell you that **Part 2** of this bill, which consists of the entire text of HB1286 H.D. 2 (which the Senate deferred), has significant flaws:

1. The insertion of Part 2 (HB1286) creates an unconstitutional budgetary proviso – I believe that this is a fatal flaw; additionally,
2. Part 2 guts the primary purpose of Chapter 127A, Emergency Management, and removes the authority of the Governor to act **quickly** on travel related issues – the legislature will have to meet in Special Session to make required changes – this changes reaction time from **hours/days** to **weeks/months** – this is especially worrisome when the impact of multiple COVID-19 variants, which, due to their higher rates of transmission, require quicker response (see References below); and
3. Part 2 has a secondary impact that is not well understood – it does not implement the Safe Travels program as it currently is deployed. So, to the extent that the Safe Travels program has been successful (which, with 450+ deaths is debatable), the changes required under Part 2 will make it even less effective.

For more detail on the substantive shortcomings of Part 2 of SB266 S.D. 2, H.D. 1, I direct your attention to my written and Zoom testimony submitted for HB1286. The balance of my current testimony focuses on the procedural problem created by the insertion of Part 2 in SB266.

Unconstitutional Budgetary Proviso

I believe there is a fatal, constitutional flaw with trying to force HB1286 through the legislature by inserting it into the COVID-19 budgetary appropriation bill.

Forgive me if I am restating what you already know, but in my experience, inserting invalid provisos in appropriation bills is a fairly common error – these provisos wind up either being removed or determined to be unenforceable.

The issue with Part 2 of SB266 S.D. 2, H.D. 1, is that it conflicts with or seeks to amend existing law – it also violates the single subject rule. This version of SB266 could not achieve the purpose of HB1286 without conflicting with or seeking to amend existing law -- the whole purpose of HB1286 is to override the Governor's powers under existing law, Chapter 127A. For authoritative support of my conclusion, I direct your attention to the Attorney General's Opinion No. 86-8, which is commonly referenced in discussions regarding budget provisos.

Before too much more time and political capital is wasted on this fatally-flawed version, I suggest that the Committee request review by the Attorney General for legality, especially as regards budgetary provisos and violations of the single subject rule.

Conclusion

HB1286 in and of itself represents the worst kind of special-interest driven, micro-management by the House – and the Senate was correct in deferring it into oblivion. However, the insertion of HB1286 into SB266 takes legislative chutzpah to a previously unknown level. Fortunately, because in my opinion, it creates an unconstitutional budgetary proviso, it will not stand.

Respectfully,

/s/ James Raymond

(retired) Deputy Attorney General

References: Experts Local to Hawaii – Published Articles (in chronological order):

1. Economist Paul Brewbaker discusses Hawaii's outlook on the Star-Advertiser's Spotlight Hawaii, interview by Ryan Kalei Tsuji and Yunji de Nies, Special to the Star-Advertiser, Aug. 5, 2020:

"It's pretty basic, everybody. The epidemiological problem is the economic problem. You don't solve the economic problem until the epidemiological problem is solved, until we mitigate and contain spread of the novel coronavirus."

<https://www.staradvertiser.com/2020/08/05/breaking-news/watch-live-paul-brewbaker-economist-at-tz-economics-joins-honolulu-star-advertisers-spotlight-hawaii/>

2. Dr. Darragh O'Carroll, Nov. 23, 2020 Medium article: How Hawaii Can Get Coronavirus Right In Twelve Steps:

<https://link.medium.com/Xi2aoseVLbb>

3. Dr. Janet Berreman, the Kauai District Health Officer, Nov. 24, 2020 Star Advertiser letter to the Editor: To be safe, reimpose travel quarantine through December:

https://staradvertiser-hi.newsmemory.com/?publink=1a05f93fb_13438c8

4. Prof. Monique Chyba and Prof. Victoria Fan, HiPAM (Hawaii Pandemic Applied Modeling workgroup), Jan. 15, 2021 Civil Beat article: How COVID-19 Could Be Much Worse In 2021:

<https://www.civilbeat.org/2021/01/how-covid-19-could-be-much-worse-in-2021/>

5. Monique Chyba et al. COVID-19 Heterogeneity in Islands Chain Environment, preprint, Cornell Univ., Feb. 12, 2021, from abstract: “. . . In this paper, we examine the data and compare the COVID-19 spread statistics between the counties of Hawai'i as well as examine several locations with similar properties to Hawai'i.”

<https://arxiv.org/abs/2102.07646>

6. Prof. Lee Altenberg, written opposition testimony submitted to the Hawaii House of Representatives, Committee on Judiciary & Hawaiian Affairs Feb. 17, 2021 Hearing for HB1286 (Spkr. Saiki's Travel bill), (page 499 of pdf file):

https://www.capitol.hawaii.gov/Session2021/Testimony/HB1286_HD1_TESTIMONY_JHA_02-17-21_.PDF

7. Hawai'i Doctors Pandemic Advisory Committee, written opposition testimony submitted to the Hawaii House of Representatives, Finance Committee's Hearing for HB1286 (Spkr. Saiki's Travel bill), Feb. 25, 2021 – signed by nine medical/science experts (page 16 of pdf file):

https://www.capitol.hawaii.gov/Session2021/Testimony/HB1286_HD2_TESTIMONY_FIN_02-25-21_.PDF

8. JoAnn Yokimura et al., Column: House bill would handcuff emergency management in state, Star Advertiser, Mar. 18, 2021:

<https://www.staradvertiser.com/2021/03/18/editorial/island-voices/column-house-bill-would-handcuff-emergency-management-in-state/?fbclid=IwAR3nBHae5zey6w9ofWlaybhv8UvkvryZ1IXpeduv4tROQclcug0UqK3r2Yw>

end of testimony

SB-266-HD-1

Submitted on: 3/29/2021 12:29:23 PM

Testimony for FIN on 3/31/2021 1:30:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
Ruby Pap	Individual	Oppose	No

Comments:

Aloha-

This bill is proposed to be amended by inserting the contents of HB 1286 regarding quarantine and pre-travel testing. While I am not against quarantine and pre-tests, I do not believe it is appropriate to legislate this. We have learned so much from this pandemic, most of which we need to be flexible and able to react and change quickly to new information. Having a law is very rigid and difficult to change. More importantly, it does not allow the individual Counties to decide what the best program should be for their community. I am from Kauai and we have done very well and kept our virus cases low by keeping mandatory quarantine requirements instead of going with the Governor's safe travels program. If we had been required to stick with the Governor's program, we would have had more cases and more deaths, because of the problems and inaccuracies with Covid testing. The Mayor has already announced that we will be rejoining safe travels now that it is safe to do so. That was his decision to make and I support it. Local counties need the flexibility to do what is best. Please remove the provisions of HB 1286 from this bill so that the State can better react to the health needs of the state, rather than being stuck with a program that would be a part of the law and would need a legislative process to change. Thank you, -Ruby Pap

SB-266-HD-1

Submitted on: 3/29/2021 3:45:52 PM

Testimony for FIN on 3/31/2021 1:30:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
Emily Claspell	Individual	Oppose	No

Comments:

SB266 was intended to be a COVID19 appropriations bill and HB1286 should never have been improperly added to SB266 (which was intended solely purposed for appropriating monies).

This bill was sent by the senate as an appropriations bill and trying to force unpopular legislation into a spending bill is morally and ethically wrong. This action is likely unconstitutional and definitely degrades public trust. Please remove the amendment that adds the language and intent of HB1286 from this appropriations bill.

Oahu and Maui are experiencing very concerning upticks in cases, many of which are being attributed to Variants of Concern. Removing the ability to pivot by moving emergency executive actions to the legislative branch is incredibly foolish.

The amendment to SB266 inserts the language of HB1286 and it's intent. This, while well intentioned, would have huge unintended consequences.

1) We have new more contagious variants now in our state. At least one of these variants is the cause of almost all of Maui's cases. As these variants continue to spread and increase like they have elsewhere, we may need to quickly pivot and change our travel protocols if our communities and hospitals become overwhelmed. Codifying the safe travels plan into law will hinder our ability to act quickly if our communities get inundated with these new more dangerous variants.

2) This bill treats all islands as if they are equal. This is unfair to the neighbor islands. All the neighbor islands have different levels of available medical infrastructure, different amounts of tourism, different budgets, and different school situations. I am on the island of Maui and am very concerned.

3) There are other plans that could allow tourism and keep residents safer. I would be happy to send some to you. If the whole state is going to adopt a plan it should be one that all the counties would be glad to adopt. The neighbor counties have all rejected the current program which is why there are different requirements. The Safe Travel program is not considered safe enough for counties with limited resources. It is not right to force a less safe plan onto counties without their consent. It is very Oahu-centric and very

oppressive towards "neighbor" islands. This plan does not have aloha and is not very neighborly.

a) One plan that is widely supported as a better protocol by many renowned experts in Hawaii is the "Safer Travel" plan.

It can be found here: www.halehawaii.cc/safertravels (I would be more than happy to explain it.)

b) Maybe this or a similar Safer program would be more acceptable to neighbor counties and would be voluntarily adopted.

c) Please consider the message this bill sends to neighbor counties. It sends a loud and clear message to residents in neighboring counties that our voices do not matter. This bill's purpose is to take apart plans and protocols that were painstakingly put together by counties despite opposition on all sides of the COVID-19 debate. The Safe Travels plan was considered and rejected by neighboring counties. To force more cases of COVID-19 onto the neighboring counties removing the ability to locally put on the brakes is very authoritarian and unethical. It will cause division and non-reversible resentment towards visitors and Oahu. Forcing counties to follow a plan that is already failing in Maui and widely rejected in Kauai and Hawai'i is not pono.

d) Our county Mayors and local DOH representatives can see what is happening on the ground here in real time and need to be able to respond to it quickly.

SB-266-HD-1

Submitted on: 3/29/2021 3:50:27 PM

Testimony for FIN on 3/31/2021 1:30:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
Terez Amato Lindsey	Individual	Oppose	No

Comments:

Do not vote to take neighbor island autonomy and ability to govern independently away in the middle of a pandemic. Please vote to oppose this measure for the health and wellbeing of our communities.

Thank you,

Terez Amato

SB-266-HD-1

Submitted on: 3/29/2021 4:01:22 PM

Testimony for FIN on 3/31/2021 1:30:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
heidi kreul	Individual	Oppose	No

Comments:

Aloha,

thank you for taking my testimony opposing SB266. I believe that each island should be able to govern health, safty and travel precautions. The Mayors of each county were elected by their constiuates. These elected officials know the resources of their communities and are best to make these decisions.

im also concerned about the lack of transparency. When SB1286 died this bill was then hidden in another bill to deceive the public.

please put the health and safety of the communities first and foremost.

Mahalo nui loa, malama pono Kakou

SB-266-HD-1

Submitted on: 3/29/2021 4:01:32 PM

Testimony for FIN on 3/31/2021 1:30:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
Ana Kahoopii	Individual	Oppose	No

Comments:

I oppose this legislation in its current corrupted form.

SB266 was intended to be a COVID19 appropriations bill and HB1286 should never have been improperly added to SB266 (which was intended solely purposed for appropriating monies).

This bill was sent by the senate as an appropriations bill and trying to force unpopular legislation into a spending bill is morally and ethically wrong. This action is likely unconstitutional and definitely degrades public trust. Please remove the amendment that adds the language and intent of HB1286 from this appropriations bill.

SB-266-HD-1

Submitted on: 3/29/2021 4:03:13 PM

Testimony for FIN on 3/31/2021 1:30:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
Joy Kaaz	Individual	Oppose	No

Comments:

Aloha

I am writing to oppose this bill. I am opposing this bill because the language of HB1286 to which I remain strongly opposed was inappropriately and likely unconstitutionally added to the bill. This language significantly disadvantages the neighbor islands whose healthcare resources and infrastructure makes us much less able to manage the consequences of a surge in covid cases. It also prevents the state of Hawai'i from quickly responding to upcoming changes by putting into law that which should be up to the counties to determine.

Nobody can foresee the future, and there is a strong and concerning possibility that we will at some point not only experience a surge of covid cases, but that a stronger variant will emerge that is capable of vaccine escape. If this happens we will need to respond quickly and emergently without calling the legislature back into session. As we can see with Maui's current surge, driven by the California variant, the need to move swiftly and relatively autonomously is of great importance.

Creating another layer of bureaucracy and forcing all the islands to follow the same policy and law is not only shortsighted and foolish, but dangerous. A yes vote on this bill containing the HB1286 language is morally and ethically wrong, and could result in severe and disabling illness for your constituents up to and including death. Do you really want to be responsible for this simply in order to make it a simpler process for tourists to travel here to the state? While I support and recognize the necessity to reopen our economy, there are better and safer ways in which to do so.

Thank you for your consideration. Please vote no on this bill unless and until the HB1286 language is removed.

SB-266-HD-1

Submitted on: 3/29/2021 5:51:17 PM

Testimony for FIN on 3/31/2021 1:30:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
Maria Hacker	Individual	Oppose	No

Comments:

Ī»ġġ»ġ Aloha, I was very happy and relieved to learn that Bill HB1286 which removes the ability of individual County's to establish COVID travel rules in order to protect their constituents was recently "deferred" in the Senate. However now it's come to my attention that on March 16, Representative Ichiyama, ironically the Chair of the House Pandemic & Disaster Preparedness Committee, "inserted the contents of HB1286 into a new Part 2 of SB266." without public notice or public testimony. ***Is this even legal? It seems pretty underhanded to me!*** Speaker Saiki, Vice Speaker John Mizuno, Majority Leader Della Au Belatti and the and Majority Floor Leader Dee Morikawa are up to no good it seems, protecting the tourism industry instead of the health of Hawaii residents. It is appalling on so many levels. Do you honestly think these actions are in the best interest of protecting the health of Kauai? But it's not only Kauai but our entire state that is being placed in jeopardy and on top of that, using the risk of losing federal money as political blackmail. If we are forced to shut down due to new variants but won't be able to because of the language of this Bill, that would force our hand in staying open so as not to lose federal funds. Very sneaky. And stupid. With half the USA now spiking including Hawaii that's now in the Red Zone, this potential disaster is all playing out in real time. Not only does the ***CDC say not to travel*** but the CDC is also saying it's a mistake in opening up too soon but that's exactly what Hawaii as well as other states are doing. This Bill would hinder not protect us. Our hands would be tied. Kauai is aware of this new twist and are not impressed. Maui has had over 80 cases in just two days- things are not looking good for Kauai. It is my understanding that Maui, Lanai and Molokai are very concerned about this Bill and the inevitable repercussions. Please do the right thing and vote NO to this very bad Bill. This Bill should go no further. Kill this Bill.

Mahalo, Maria Hacker. [808-651-7783](tel:808-651-7783)

March 29, 2021

Testimony in opposition to part II of SB 266 SD 2 HD1, Relating to the Coronavirus 2019 Pandemic

Honorable Chair Luke and members of the Committee:

I am writing in opposition to part II of SB 266 SD2 HD1 that incorporates the provisions of the former HB 1286. I ask that SB 266 be amended to delete those provisions.

The part II provisions would codify practices, which do not align with our Department of Health travel recommendations and even now, do not reflect the best guidance for safe travel. Please see for example, the CDC guidance at <https://www.cdc.gov/coronavirus/2019-ncov/travelers/testing-air-travel.html>.

However, more concerning are the sweeping provisions of section 23(a) of the bill that provide that the travel protocols in this bill precede and preempt all other laws, ordinances, rules, orders, or proclamations. This limits our state's ability to address COVID-19 infections through the Safe Travels program in the future.

The provisions limit emergency powers and make it difficult for state leaders to quickly address a changing landscape. When people look to their government, one of the roles that is most important is the ability of that government to act in ways to protect and support its people in times of emergency. The provisions will curtail the State's ability to fulfill this role. Other than the ability to create exemptions to requirements, the provisions preempt the governor's powers, including emergency powers, to adjust the travel protocols. A concurrent resolution by each house is required to suspend the terms of this bill, which means a delayed response to an emergency.

It is critical to maintain the ability to respond quickly to address the transmission of COVID-19 and to be able to adjust the travel protocols as needed. Our understanding of COVID-19 and how to protect against its transmission has been evolving over time. The virus itself is changing and new variants, including the highly contagious UK and other variants, have come into the state **through travel**. This week, Dr. Walensky of the CDC spoke of fears of impending doom with rising COVID-19 cases. Last week, Dr. Jill Green of Queens Medical Center noted that we are in a vulnerable time. With this virus, we

have found that we cannot predict the future and it would be unwise to limit our ability to respond.

In addition, these provisions eliminate counties' flexibility to adjust travel protocols to better protect their communities, and the provisions take away the ability to develop and implement more creative and finely tuned approaches that balance travel and public health. Kauai's travel requirements provided an example of what could be done to provide more protection while allowing for enhanced travel experiences through resort bubbles. This allowed Kauai to stay at relatively low rates of infection and limit community spread. In contrast, Maui has gone from relatively few cases prior to October 15, to consistently higher numbers and infection rates since then.

These part II provisions are not needed. A justification for these provisions has been confusion about different requirements by island. However, Kauai is rejoining the Safe Travels program. Most of the concerns regarding confusion about travel requirements can be addressed through better messaging and communication.

In this changing landscape, it is not good policy to lock ourselves into specific provisions that we might later need to change. And as these issues can be addressed through other means, the part II provisions are not worth the risk they present. Please amend SB 266 by deleting part II.

Sincerely,
Lynn Otaguro
Oahu, Hawaii

SB-266-HD-1

Submitted on: 3/29/2021 9:19:45 PM

Testimony for FIN on 3/31/2021 1:30:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
Brandi Chanthathap	Individual	Oppose	No

Comments:

SB266 was intended to be a COVID19 appropriations bill and HB1286 should never have been improperly added to SB266 (which was intended solely purposed for appropriating monies).

This bill was sent by the senate as an appropriations bill and trying to force unpopular legislation into a spending bill is morally and ethically wrong. This action is likely unconstitutional and definitely degrades public trust. Please remove the amendment that adds the language and intent of HB1286 from this appropriations bill.

Oahu and Maui are experiencing very concerning upticks in cases, many of which are being attributed to Variants of Concern. Removing the ability to pivot by moving emergency executive actions to the legislative branch is incredibly foolish.

The amendment to SB266 inserts the language of HB1286 and it's intent. This, while well intentioned, would have huge unintended consequences.

1) We have new more contagious variants now in our state. At least one of these variants is the cause of almost all of Maui's cases. As these variants continue to spread and increase like they have elsewhere, we may need to quickly pivot and change our travel protocols if our communities and hospitals become overwhelmed. Codifying the safe travels plan into law will hinder our ability to act quickly if our communities get inundated with these new more dangerous variants.

2) This bill treats all islands as if they are equal. This is unfair to the neighbor islands. All the neighbor islands have different levels of available medical infrastructure, different amounts of tourism, different budgets, and different school situations. I am on the island of Maui and am very concerned.

a) Since October Maui schools have moved from green on DOH school metrics (full in person school allowed) to purple (learning from home recommended). We need a plan that gets our cases lower so our keiki can safely go to school and so parents can work.

b) Maui's cases per population is now equal to many places on the mainland. The Safe Travels program is NOT working well for Maui.

c) Maui hospital is often strained and full. It can quickly be completely overwhelmed which increase medical errors and potentially cause people to die unnecessarily. This program can completely devastate our island if our hospital gets overwhelmed because there is no way to put on the breaks.

d) Maui has more visitors per capita than any other island.. The airport departure study done by Dr. Hou and Dr. Lorrin Pang showed 7/1000 visitors who participated in Safe Travels were actually positive (false negative). There have now been several days where Maui has had over 10,000 arrivals in a single day. This means there are many new COVID19 cases being seeded into the community daily. Taking away our island's ability to pull the emergency break is morally and ethically wrong and irresponsible. If you vote to pass this bill and things get really bad then you will be partially responsible for putting our island in such a precarious position.

3) There are other plans that could allow tourism and keep residents safer. I would be happy to send some to you. If the whole state is going to adopt a plan it should be one that all the counties would be glad to adopt. The neighbor counties have all rejected the current program which is why there are different requirements. The Safe Travel program is not considered safe enough for counties with limited resources. It is not right to force a less safe plan onto counties without their consent. It is very Oahu-centric and very oppressive towards "neighbor" islands. This plan does not have aloha and is not very neighborly.

a) One plan that is widely supported as a better protocol by many renowned experts in Hawaii is the "Safer Travel" plan.

It can be found here: www.halehawaii.cc/safertravels (I would be more than happy to explain it.)

b) Maybe this or a similar Safer program would be more acceptable to neighbor counties and would be voluntarily adopted.

c) Please consider the message this bill sends to neighbor counties. It sends a loud and clear message to residents in neighboring counties that our voices do not matter. This bill's purpose is to take apart plans and protocols that were painstakingly put together by counties despite opposition on all sides of the COVID-19 debate. The Safe Travels plan was considered and rejected by neighboring counties. To force more cases of COVID-19 onto the neighboring counties removing the ability to locally put on the brakes is very authoritarian and unethical. It will cause division and non-reversible resentment towards visitors and Oahu. Forcing counties to follow a plan that is already failing in Maui and widely rejected in Kauai and Hawai'i is not pono.

d) Our county Mayors and local DOH representatives can see what is happening on the ground here in real time and need to be able to respond to it quickly.

SB-266-HD-1

Submitted on: 3/29/2021 10:18:56 PM

Testimony for FIN on 3/31/2021 1:30:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
Chad Taniguchi	Individual	Oppose	No

Comments:

I oppose the non-appropriation sections of SB266SD2HD1, now that HB1286 has been inserted into SB266.

The Governor and Mayors, elected to their executive leadership positions, are in the best position to make emergency health decisions for their counties, subject to the Governor's approval.

Kaua'i Mayor Derek Kawakami, supported by the Kaua'i County Council, and the vast majority of its citizens, chose to prioritize health of Kaua'i's citizens first, much like New Zealand, Australia, Fiji, Taiwan, and other places of note. Kaua's excellent and enviable Covid-19 rate speaks for itself. Far fewer people per capita have been infected, hospitalized and killed on Kaua'i by Covid-19 compared with other places.

After nearly a year of specially safeguarding Kaua'i, Kaua'i's vaccination rates lead the state and the Mayor has decided now to join the overall state program. The HB1286 language in this bill is unnecessary and unduly handcuffs tailored emergency responses.

The 76 members of the state legislature should not substitute the cumbersome committee structure and judgments based on a myriad of unstated factors, for that of the Governor and Mayors. Conditions change rapidly, depending on Covid-19 variants, vaccines, test availability, protective equipment, and the behavior of so many people.

The Mayors, supported by their health and economic experts, are accountable to those who elected them in their County. The Governor provides a unifying hand when needed.

Even as our country, state and counties have made tremendous progress in vaccinations under President Biden, there are still dangers in states and counties that call for targeted responses by local leaders.

Please delete the non-appropriation sections of this bill.

SB-266-HD-1

Submitted on: 3/29/2021 10:24:37 PM

Testimony for FIN on 3/31/2021 1:30:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
Susan Pcola_Davis	Individual	Oppose	No

Comments:

SB266 SD2 HD1 (AKA HB1286)

Prior to my testimony, I'd like to state that adding HB1286 into SB266 was a political dance called " LOGROLLING." Having a hearing, testimonies, discussion and then during decision making Chair Ichiyama adds HB1286 as Section 2 is a form of deception. At no time did any of the testimonies for that bill during that hearing mention ANYTHING about Safe Travels. How could anyone, this was added after the hearing had public testimony and discussion.

How does logrolling occur?

Logrolling occurs frequently when lawmakers, unencumbered by pressure from party leaders, push through a bill that benefits their constituencies, but is financed by all taxpayers.

I am writing to strongly oppose SB266 SD2 HD1 (AKA HB1286).

"New study says testing similar to Safe Travels may detect nearly 90% of travelers with coronavirus" by: Nikki Schenfeld (KHON NEWS)

Posted: Mar 27, 2021 / 06:18 PM HST / Updated: Mar 27, 2021 / 06:18 PM HST

In this article, Ms. Schenfeld referred to the Lancet Infectious Disease Journal" recently published a study on March 22, 2021.

To which, Lt. Governor Green suggested that this study is indicating that Hawaii's Safe Travels Program is following science. However, if you read the whole study, he leaves important information out.

Titled "Routine asymptomatic testing strategies for airline travel during the COVID-19 pandemic: a simulation study."

Mathew V Kiang, ScD, Elizabeth T Chin, BS, Benjamin Q Huynh, BS, Lloyd A C Chapman, PhD, Isabel Rodríguez-Barraquer, MD, Bryan Greenhouse, MD et al.

From the Lancet Study

Discussion:

We found that test-and-travel strategies for SARS-CoV-2 infection that apply routine

viral testing around airline travel can reduce both the passenger risk of infection and population-level transmission risk of SARS-CoV-2 during travel.

We found that both pre-travel testing with a rapid antigen test on the day of travel or PCR testing within 3 days before departure could reduce the risk of SARS-CoV-2 transmission during travel, with the majority of benefit being seen in other travellers who might otherwise have become infected.

(Left out)

!!!!!!We found that the addition of post-travel testing and abbreviated quarantine of 5 days could provide further benefit at the public health level by reducing importation and ongoing transmission in the destination city, especially if travelling from high to low incidence settings. !!!!!!!

Overall, our findings support that a test-and-travel strategy for SARS-CoV-2 infection will likely improve the safety of airline travel and could be incorporated into national policy as a public health tool during the COVID-19 pandemic, alongside physical distancing, universal wearing of facemasks, and other infection control measures during travel.

Interpretation:

Routine asymptomatic testing for SARS-CoV-2 before travel can be an effective strategy to reduce passenger risk of infection during travel, although abbreviated quarantine with post-travel testing is probably needed to reduce population-level transmission due to importation of infection when travelling from a high to low incidence setting.

Social Media post:

Here is the moment the state House of Representatives BETRAYED public trust and decided to sneak legislation into the COVID19 appropriations bill SB266 (video). They did not have a public hearing or any opportunity for public testimony. They claimed these were "TECHNICAL AND NON SUBSTANTIVE AMENDMENTS" and voted on it as such.

How is removing the Governor's emergency powers while permanently and substantially changing travel protocols NOT SUBSTANTIAL?

How is adding a new law that is expansive and effects the entire state into a bill that originally dealt with budgets/appropriations a technical and non substantive amendment? This was extremely sneaky and unethical.

Our HOUSE OF REPRESENTATIVES owes the people of Hawai'i a good explanation of this. It clearly violates commons practices and procedures, it is clearly unethical, very likely illegal and unconstitutional.

Why is it not being covered by every news station in Hawaii??

Another post:

Absolutely every single legislator who supported this should be voted out! Excellent cite. Have a Hawaii attorney check this out - possibly could use multi subject argument to successfully challenge it if it is approved.

In summary:

IT'S JUST A HYPOTHESIS WITHOUT DATA: Uniform statewide travel rules are needed to ensure the State has adequate revenue to perform its functions, and to revive the State's economy.

RABBIT HOLE:

Hawaii's reliance on tourism has been our downfall. Ten years ago Hawaii knew this. We trudged through it, didn't change anything/ diversify, and we struggled out of the slump. It was a pre-warning.

We learned nothing from the past and now we are repeating history.

SB-266-HD-1

Submitted on: 3/29/2021 11:01:01 PM

Testimony for FIN on 3/31/2021 1:30:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
Ania Ananda Wood	Individual	Oppose	No

Comments:

I am writing to oppose this bill. I am opposing this bill because the language of HB1286 to which I remain strongly opposed was inappropriately and likely unconstitutionally added to the bill. This language significantly disadvantages the neighbor islands whose healthcare resources and infrastructure makes us much less able to manage the consequences of a surge in covid cases. It also prevents all the islands and the state of Hawai'i from quickly responding to upcoming pandemic events by putting into law that which should be up to the counties to determine.

Nobody can foresee the future, and there is a strong and concerning possibility that we will at some point not only experience a surge of covid cases, but that a stronger variant will emerge that is capable of vaccine escape. If this happens we will need to respond quickly and emergently without calling the legislature back into session. As we can see with Maui's current surge, driven by the California variant, the need to move swiftly and relatively autonomously is of great importance.

Creating another layer of bureaucracy and forcing all the islands to follow the same policy and law is not only shortsighted and foolish, but dangerous. A yes vote on this bill containing the HB1286 language is morally and ethically wrong, and could result in severe and disabling illness of your constituents up to and including death. Do you really want to be responsible for this simply in order to make it a simpler process for tourists to travel here to the state? While I support and recognize the necessity to reopen our economy, there are better and safer ways in which to do so.

Thank you for your consideration. Please vote no on this bill unless and until the HB1286 language is removed.

SB-266-HD-1

Submitted on: 3/30/2021 12:06:34 AM

Testimony for FIN on 3/31/2021 1:30:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
Vijak Ayasanonda	Individual	Oppose	No

Comments:

As a practicing Board Certified Emergency Medicine physician on Maui with very limited resources, we are seeing a significant increase in COVID-19 related cases that currently includes individuals who have previously pre-tested negative. I have personally seen, diagnosed and treated multiple individuals who claim to have been "negative" but developed symptoms as of arrival and are now utilizing significant amount of our limited services. Do NOT allow any persons to arrive without a pretest. Even our current system is inadequate to stop the spread of COVID-19 and the new variants should be all of our concern. I have already come across 3 people who received immunizations and became sick enough to utilize our Emergency Department resources. Until a much higher percentage of our local citizens receive vaccinations, we should be STOPPING the significant amount of tourists. There are no mask mandate enforcement occurring. We are on the verge of another significant outbreak here that can overwhelm our hospitals again. Do NOT let up on our restrictions at this time.

Additionally, I need to remind you that all islands are different and there should not be any universal decisions made that forces Oahu ideas onto outer islands. Oahu has so many resources and hospitals compared to Maui that has only 1. Oahu has been and remains reluctant to provide many necessary support services and by imposing some idea that would force Maui and other islands to allow any additional visitors would be a grave mistake.

SB-266-HD-1

Submitted on: 3/30/2021 12:57:08 AM

Testimony for FIN on 3/31/2021 1:30:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
Carrie Martinez	Individual	Oppose	No

Comments:

SB266 was intended to be a COVID19 appropriations bill and HB1286 should never have been improperly added to SB266 (which was intended solely purposed for appropriating monies.)

Trying to force unpopular legislation into a spending bill is morally and ethically wrong. This action is likely unconstitutional and definitely degrades public trust.

Please remove the amendment that adds the language and intent of HB1286 from this appropriations bill.

The islands, and counties, all have varying healthcare capabilities, and need to remain autonomous, to be able to respond in real-time to increases in Covid cases. This is in the best interest of public safety.

Removing the ability to pivot by moving emergency executive actions to the legislative branch is incredibly foolish.

This bill's purpose is to take apart plans and protocols that were painstakingly put together by counties despite opposition on all sides of the COVID-19 debate. And while it may be well intentioned, this will have negative unintended consequences.

This bill treats all islands as if they are equal. They are not. Maui serves as an example of this, with disproportionately high numbers of visitors, but only one small hospital for persons needing acute care. And since reopening, Maui has been experiencing increasing numbers of covid cases per resident, while vaccinating locals still remains a challenge.

Because of these challenges our community may need to implement protocols quickly.

It is not in the public's best interest to make residents, of any county, have to "wait" for legislation to decide on policies that could be life saving.

Also, the Safe Travels plan was considered and rejected by neighboring counties. But, there is a "Safer Travel" plan. It can be found here: www.halehawaii.cc/safertravels

Maybe this, or a similar “safer” program would be more acceptable to neighbor counties and would be voluntarily adopted.

Ultimately, this bill sends a loud and clear message to residents in neighboring counties that our voices do not matter.

And forcing more cases of COVID-19 onto the neighboring counties by removing the ability to locally put on the brakes is very authoritarian and unethical. It may work to cause additional division and non-reversible resentment towards visitors, and towards Oahu.

Forcing counties to follow a plan that is already failing in Maui and widely rejected in Kauai and Hawai'i is just not pono.

In closing, it is important to remember that Kauai has provided a great example, where continued autonomy has worked very well to keep Covid cases low, and deaths lower.

SB-266-HD-1

Submitted on: 3/30/2021 2:43:03 AM

Testimony for FIN on 3/31/2021 1:30:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
ANDREW ISODA	Individual	Oppose	No

Comments:

THIS IS A TERRIBLE BILL. DO NOT VOTE IN FAVOR!

SB-266-HD-1

Submitted on: 3/30/2021 11:15:31 AM

Testimony for FIN on 3/31/2021 1:30:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
George White	Individual	Oppose	No

Comments:

Aloha Chair Luke, Vice-Chair Cullen and Members -

I write in OPPOSITION to the insertion of the contents of HB1286 (SafeTravels Statewide mandate) as a Part II to SB266, SD2, HD1. I do support the originally intended funding appropriations contained within SB266, SD2.

HB1286 (now Part II of SB266), had one express purpose, to preempt the existing authority of each county Mayor to opt-out of the existing "Safe Travels" program, while hamstringing the Governor from expeditiously exercising his existing emergency power in the future. State policy in this situation should set the minimum standards - the floor not the ceiling - as to what counties are able to do to protect and promote their communities.

Many experts have provided testimony regarding the pernicious imperfect nature of the existing "Safe Travels" program. The comparison between Kauai, Maui, and other counties' approach to regulation of arriving travelers is invaluable and indicative of how premature it is to mandate loosening restrictions or implementing flawed statewide standards, related to incoming travelers to our shores. Balancing the need to protect public health while pushing to jumpstart our state's economy is a tenuous and unenviable task. It is important however, to not upend a system that has worked better than it hasn't, and continue to take a measured rational approach based in science and data, and by the guidance of experts...not politicians.

CDC guidance currently discourages travel and explicitly recommends stricter protocols than our current "Safe Travels" program provides for. As this ever-evolving response to COVID-19 has shown, travel policies regulating the influx of virus vectors into Hawaii should not be legislatively 'set in stone' as proposed in Part II of this bill. Even HI-EMA, the State agency that has skillfully coordinated the entirety of our emergency response to COVID-19, has testified that such a legislative enactment is not needed. Many have also opined that the current situation is a "fluid" one, necessitating for greater flexibility in response (not less), especially given the arrival and presence of more worrisome variants, the current undeniable surge in cases, as well as our evolving progress with vaccinations.

We are at a critical juncture in our response to this crisis, and it is a heavy burden for you as policymakers to help steer us towards a safe and revitalized Hawaii. This bill with its "poison pill" insertion of HB1286 as Part II, however, is a distraction and deflection from your critical work. Please remove the new Part II from SB266 and move this critical appropriations measure forward, as originally intended.

Mahalo for this opportunity to provide testimony.

Respectfully -
George White



March 30, 2021

RE: S.B. 266 H.D. 1 (oppose adding in language from HB 1286)

Aloha Representatives,

We are writing as a part of HALE Hawai'i to oppose something that was done that frankly shocks us. H.B. 1286 was a bill that received a great deal of support from the business/tourism community but was doomed to fail for several reasons. It was very bad for neighbor islands; it took authority away from the Mayors to be able to protect the vulnerable neighbor islands and did not take into account Maui's much higher COVID numbers per capita and the huge resource difference between the neighbor islands and O'ahu. It did not take into account the higher tourism load that Maui carries, and therefore the higher level of exposure. It did not have the support of the Lt. Gov or Governor and would have been vetoed. Those in opposition to it were relieved to hear that it died in Committee.

What happened next was a travesty and was illegal and unethical. Rather than let it die, the language for it was added to an Appropriations Bill. It was inserted as a "Technical and Nonsubstantive Amendment," and it is most certainly does not fit the definition of "Technical" or "Nonsubstantive". It was inserted into the Appropriations Bill to prevent the Governor from being able to veto it without causing the state much financial harm.

The language from H.B. 1286 would set in concrete in law something that should be part of an Emergency Order, as Emergency Orders are meant to be changeable. This pandemic has been anything but predictable, and losing the ability to pivot to adapt to changes can literally kill people. For example, we do not know what variants will do to us. Already, some of the variants reduce vaccine effectiveness. What happens if there is a new wave of infections that do not respond to the vaccine? Children will not be vaccinated for some time. We have already heard how Michigan children have become very infected. What happens if a variant that targets children hits the islands? People don't seem to care much about losing the over 60 crowd, but no one likes to lose children. Can you imagine the devastation if we are required to keep the state open with just one test that we know will not protect us (look at Maui's numbers since mid-October)? No change could be made until the next legislative session, which would cause so much unnecessary loss of life. Do you really want to be responsible for that?

Please refuse to approve S.B. 266 until the language from H.B. 1286 is removed. Thank you!

Sincerely,

Kai Duponte

Kai Duponte, MSW (retired)

www.Halehawaii.cc

Joy Kaaz

Joy Kazz, RN (retired)

SB-266-HD-1

Submitted on: 3/30/2021 12:13:10 PM

Testimony for FIN on 3/31/2021 1:30:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
Shannon Rudolph	Individual	Oppose	No

Comments:

OPPOSE!

The old bait & switch. We see what's happened to this bill. #grrrrr

Testimony on S.B. 266-SD2-HD1 “Relating To The Coronavirus 2019 Pandemic”

Lee Altenberg, Ph.D.

Graduate Faculty of Ecology, Evolution, and Conservation Biology

Adj Full Professor of Mathematics

Adj Full Professor of Information and Computer Sciences

University of Hawai‘i at Mānoa

Member of the Hawai‘i Applied Pandemic Modeling Work Group

Member, Models of Infectious Disease Agent Study (MIDAS Network)

TESTIFYING AS AN INDIVIDUAL

March 30, 2021

I am one of two theoretical population geneticists in the state of Hawai‘i and I feel a professional obligation to apply this expertise toward evaluation of epidemiological consequences of policy options in dealing with the SARS-CoV-2 pandemic. I oppose SB266-SD2-HD1 for the inclusion of the text of H.B. 1286, which the Senate tabled in its joint committee meeting. If SB266-SB2-HD1 is amended to remove the text from HB1286, I would support it.

The danger of HB1286 is that it removes the ability of the Governor and Mayors to respond to emerging threats from the pandemic. None of the testimony in favor of HB1286 demonstrates any understanding whatsoever of these threats. The language from HB1286 should be removed from SB266-SD2-HD1 for the following reasons:

1. It places within an appropriations bill a contravention of the existing Emergency Powers (HRS 127A), which makes it is an unconstitutional proviso under Article III Section 14 of the Hawai‘i Constitution. The Committee should request a formal opinion on the constitutionality from the Attorney General.
2. A March 22 research paper in *Lancet Infectious Diseases* (Kiang et al., 2021) finds that the Safe Travels protocol is expected to reduce Hawai‘i residents’ exposure to COVID infected travelers by only 36%, a number far below expectations stated by the State leadership. It further finds that “abbreviated quarantine with post-travel testing is probably

needed to reduce population-level transmission due to importation of infection when travelling from a high to low incidence setting.” HB1286 outlaws this recommended quarantine and second test.

3. Since March, Hawaii’s COVID-19 case numbers have been increasing—except on Kaua’i—with a doubling time of 19 days, caused by one or more of:
 - (a) an influx of infected travelers not prevented by Safe Travels,
 - (b) increased infectivity of the B.1.429 and B.1.1.7 variants that have penetrated the pre-travel test, or
 - (c) relaxation of mitigation efforts of the residents.

This negative outcome for counties adopting the Safe Travels protocol is *prima facie* evidence against making it a legislative mandate as HB1286 does through December.

Moreover, the B.1.1.7 variant is so transmissible that it has the potential to overwhelm the rate of vaccination and produce a large surge in cases, as I have explained in previous testimony on HB1286-HD1. There is not enough data yet to exclude the possibility that Hawai’i has already been committed to such a surge by the penetration of B.1.1.7 through the Safe Travels program.

4. An international survey¹ of epidemiologists released this week gives a scientific consensus that variants which *render our current vaccines useless* will evolve within a year, and some 1/3 of respondents expect one will arise by December, 2021. The State must retain its power to cope with this potential threat through full use of its emergency quarantine powers.
5. The Center for Disease Control has made emphatic warnings against relaxing mitigation measures now before vaccination has brought us to herd immunity.

1 An Unconstitutional Proviso

I draw from the March 6, 1986 opinion of Deputy Attorney General Lila B. LeDuc transmitted to Rep. Russell Blair.

Article III Section 14 of the Hawai’i Constitution states, “Each law shall embrace but one subject, which shall be expressed in its title.”

SB266-SB2-HD1 describes itself as an appropriations act: “The purpose of this measure is to appropriate funds for COVID-19 response programs and activities.” But the language inserted from HB1286 is a contravention of existing law, namely HRS 127A: Emergency Management [13], which states:

¹<https://reliefweb.int/report/world/two-thirds-epidemiologists-warn-mutations-could-render-current-covid-vaccines>

Additional powers in an emergency period (1) Provide for and require the quarantine or segregation of persons who are affected with or believed to have been exposed to any infectious, communicable, or other disease that is, in the governor’s opinion, dangerous to the public health and safety, or persons who are the source of other contamination, in any case where, in the governor’s opinion, the existing laws are not adequate to assure the public health and safety;

Deputy Attorney General Lila B. LeDuc states:

As stated in 1A N. Singer, Sutherland Statutory Construction S 23.16.50 (C. Sands 4th ed. rev. 1985): State constitutional provisions which prohibit an act from embracing more than one subject may **prevent changes in substantive law from being made in appropriation acts.** [my emphasis]

This opinion should be verified for SB266-SD2-HD1 by a formal opinion on the constitutionality from the Attorney General.

2 Study Finds Safe Travels Protocol Reduces Transmission by Only 36%

The paper by Kiang et al. (2021) published only March 22 in the prestigious *Lancet Infectious Diseases*, “Routine asymptomatic testing strategies for airline travel during the COVID-19 pandemic: a simulation study,” finds that a single PCR test within 3 days of travel reduces the exposure of the destination population by only 36%. From the study:

For our first strategy, we estimated that anterior nasal PCR testing within 3 days of departure would reduce the total number of infectious days in the cohort by 36% (29–41) to 5401 (3917–8677) infectious days over the travel period (figure 1), and 2460 positive travellers (2247–2687; defined as having any positive test) would be identified in our cohort. In this strategy, the number of actively infectious individuals identified on the day of travel would be 569 (95% UI 459–749), corresponding to identification of 88% (76–92) of all infectious travellers.

The latter figure of 88% reduction refers to passengers who are actively infectious *on the flight*. But many infected passengers will test negative and not become infectious until they are at their destination, so the reduction of exposure to the destination population is only 36%.

Recent local coverage of this paper confuses the two measures when it states “New study says testing similar to Safe Travels may detect nearly 90% of travelers with coronavirus”². Pre-travel testing detects 88% of passengers

²KHON2, Mar 27, 2021 / 06:18 PM HST <https://www.khon2.com/coronavirus/new-study-says-testing-similar-to-safe-travels-may-detect-nearly-90-of-travelers-with-coronavirus/>

who are infectious *on the day of travel*, thus protecting airline passengers from exposure, but misses 64% of travelers who become infectious later at their destination.

The study also examines a strategy of (a) pre-travel tests followed by (b) 5 days of quarantine and a second test. This strategy shows a reduction in the exposure of the population by 70%. For this reason, the study concludes:

We found that the addition of post-travel testing and abbreviated quarantine of 5 days could provide further benefit at the public health level by reducing importation and ongoing transmission in the destination city, especially if travelling from high to low incidence settings.

This protocol of 5-day quarantine and a 2nd test, recommended by Kiang et al. (2021), would be prohibited by the language from HB1286.

References

Kiang, M. V., Chin, E. T., Huynh, B. Q., Chapman, L. A., Rodríguez-Barraquer, I., Greenhouse, B., Rutherford, G. W., Bibbins-Domingo, K., Havlir, D., Basu, S., et al. 2021. Routine asymptomatic testing strategies for airline travel during the COVID-19 pandemic: a simulation study. *The Lancet Infectious Diseases*, pages [https://www.thelancet.com/journals/laninf/article/PIIS1473-3099\(21\)00134-1/fulltext](https://www.thelancet.com/journals/laninf/article/PIIS1473-3099(21)00134-1/fulltext).

SB-266-HD-1

Submitted on: 3/30/2021 1:12:03 PM

Testimony for FIN on 3/31/2021 1:30:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
Pam Murphy	Individual	Oppose	No

Comments:

I strongly oppose taking the decision on how best to handle quarantines or other emergencies out of the hands of our Mayors. It is the job of each Mayor to do what is best for their island. Please do not pass SB266.

SB-266-HD-1

Submitted on: 3/30/2021 1:21:09 PM

Testimony for FIN on 3/31/2021 1:30:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
Anmarie Mabbutt	Individual	Oppose	No

Comments:

Anmarie Mabbutt

115 Mahola Street

Makawao, HI. 96768

acu@umich.edu

RE: Opposition Testimony to SB266

Inclusion of language of HB1286 into SB266 Bill was illegal, improper and unethical

Aloha State Legislators,
2021

March 30,

Please vote to oppose SB266 in its current amended form.

SB266 was originally drafted and intended as an appropriations bill. It is not a bill regarding statewide travel mandates yet this past week it was amended to include the language of HB1286.

Hundreds of residents and state officials including Governor Ige and Lieutenant Governor Green expressed their overwhelming opposition to HB1286. In light of the extensive public opposition, the House Committee did not approve HB1286. It died in Committee.

HB1286 was a misguided, ill-advised bill that endangered the lives of the residents of the neighboring islands. HB1286 proposed a statewide mandate regarding travel guidelines that would have stripped the Mayors' of their emergency authority to impose county specific travel restrictions. This emergency authority is an essential and critical element of the Mayors' ability to safeguard the health and wellbeing of their Counties' residents. Health metrics and COVID19 infections can change drastically within just a few days time. Moreover, each island is unique in terms of population size, tourism rates and medical infrastructure. Travel restrictions may be appropriate and safe for one island but dangerous if not deadly for others.

I am a Maui resident, a California attorney and most importantly the wife and mother of two Maui residents who have pre-existing health conditions. Do you really want their blood or the blood of any Hawaii resident on your hands because you failed to oppose SB266 in its amended form?

Please vote to oppose any and all versions of SB266 that include the language of HB1286.

Thank you for your time.

Sincerely,

Anmarie Mabbutt

CA State Bar #158060

Testimony Re SB266
Before the House Finance Committee
By JoAnn A. Yukimura
March 31, 2020

Chair Luke, Vice Chair Cullen, and Committee Members:

My name is JoAnn Yukimura. I speak today as a concerned citizen of the State of Hawai'i from my home island of Kaua'i.

With three times the population of Hawai'i, New Zealand has had a total of 2,500 COVID-19 cases, and 26 deaths, while Hawaii has had 29,600 cases and 460 deaths (using rounded figures).

	<u>New Zealand</u> (pop: 3.8 mil)	<u>Hawai'i</u> (pop: 1.4 mil)
Total COVID Cases:	2495	29,626
No. of COVID RelatedDeaths	26	459

The important question is this: In superbly protecting its citizens, what kind of economy has New Zealand's science-based elimination strategy¹ wrought? In December, 2020, after essentially eliminating community spread, New Zealand achieved [a dramatic V-shaped recovery](#), including a 14% surge in GNP, and a 0.4 expansion of the economy instead of the predicted 1.8% decline.

Through similar efforts, three other countries in the world--Taiwan, China and Ireland---have also achieved full economic recovery. Like New Zealand, they imposed strict rules to control the virus, thus laying the groundwork for economic rejuvenation. These four examples validate the [admonition](#) by Hawaii economist, Paul Brewbaker that "you don't solve the economic problem until you solve the epidemiological problem."

If Hawai'i wants economic recovery, we must find a safe way to welcome visitors back. The State's one-test plan is not it! It did not stop various variants from

¹ <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7436486/> New Zealand's COVID Elimination Strategy

coming into Hawai'i. Now, the California variant has become the dominant variant on Maui. Forty percent more contagious than the original SARS-COV-2 virus, it is fanning the dramatic and dangerous surge on Maui. (conversation with DOH District Director, Loren Pang, 3/4/21).

On Kauai, where we are keeping careful track of the COVID cases, we have not had any instance of community spread since January 16, 2021. All the cases since January 16, 2021, have been travel related- (8 returning residents and 15 visitors) showing that even with a second test in a resort bubble, travel and travelers are fueling the infections on Kaua'i.

To force a county to follow an unsafe plan is unconscionable. While Mayor Kawakami has announced Kaua'i's rejoining of the State's plan as of April 5th, he, and any other mayor, should have the right to change policies, with concurrence of the Governor, if circumstances change and the health and safety of residents require it.

To tie the executive emergency decision-making of the mayors and the Governor to a cumbersome legislative process, with the Legislature in session for only for 3 months of the year under normal conditions, is egregious public policy.

We want tourism back -- but only if a system is set up to keep it safe.

Please demonstrate your courage and professionalism as public decision-makers and remove the text of HB 1286 from SB 266 or hold SB 266 in committee.

Mahalo nui loa.

SB-266-HD-1

Submitted on: 3/30/2021 1:29:15 PM

Testimony for FIN on 3/31/2021 1:30:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
Mary Lacques	Individual	Oppose	No

Comments:

In STRONG opposition, especially to the insertion of HB1286 as a Part II to the measure.

LATE

SB-266-HD-1

Submitted on: 3/30/2021 1:32:33 PM

Testimony for FIN on 3/31/2021 1:30:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
Ingrid Peterson	Individual	Oppose	No

Comments:

I oppose this this bill for two reasons:

First I oppose that HB 1286 was snuck inside SB266 without proper hearing on a different subject from the main bill. I oppose the state being able to impose its Covid rules statewide in a way that doesn't allow some counties to choose stricter rules to protect the people of their own county, each of which has a different situation. People's health, not tourism must come first and mayors should be allowed to make their own stricter rules.

Second, I oppose allowing travelers into Hawaii before they have a negative Covid test downloaded. Otherwise it is too risky that people who are contagious with arrive. This is especially important with the more contagious and more dangerous variants here.

Mahalo for your consideration!

LATE

SB-266-HD-1

Submitted on: 3/30/2021 2:49:03 PM

Testimony for FIN on 3/31/2021 1:30:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
pamela burrell	Individual	Oppose	No

Comments:

Aloha Senators,

Once again I am submitting testimony opposing a one size fits all islands jurisdiction over the handling of pandemic response. Every island has its own unique set of circumstances and should be able to respond swiftly to it's needs.

Health is wealth.

pamela burrell, Kalihiwai, Kaua'i

SB-266-HD-1

Submitted on: 3/30/2021 3:23:31 PM

Testimony for FIN on 3/31/2021 1:30:00 PM



Submitted By	Organization	Testifier Position	Present at Hearing
Art Ignacio	Individual	Oppose	No

Comments:

I have previously submitted testimony against HB1286. I had been following that bill, last seeing that Senate EET, PSM, and HTH committees had deferred the measure. I was recently surprise to see HB1286 contents inserted into this Bill (SB266_HD1_HSCR1353). If this is as it appears and as as stated in this Bill's description:

"Prohibits the suspension of the quarantine requirements except by legislative approval via a concurrent resolution."

I am opposed to its inclusion in this Bill. We are entering into a critical time for the pandemic, where all the sacrifices to this point and the great progress made on vaccinations could quickly be undone if the Governor and Mayors are not allowed to respond quickly. This holds especially true for Kauai which has put the health and safety of our population as primary, as it should, and paid the economic price that we accept in trade.

I do not have faith in a legislative timely response even as a concurrent resolution should the need arise, in no small part by watching how votes fell and from what areas in the committees for HB1286.

SB-266-HD-1

Submitted on: 3/30/2021 4:05:57 PM

Testimony for FIN on 3/31/2021 1:30:00 PM

LATE

Submitted By	Organization	Testifier Position	Present at Hearing
Dr. Irene Sherman	Individual	Oppose	No

Comments:

I am in total opposition to this bill. If passed, this it will disenfranchise outer island citizens. If we are unhappy with the decisions our elected officials make, we can vote them out at the next election. We DO NOT HAVE THE OPPORTUNITY to vote for their equivalents on Oahu. Including HB 1286 in SB266 is a blatant power grab and a disgraceful suppression of voting rights. One size does NOT fit all. Each island is unique. Our Mayors and County Council members know local conditions and act accordingly. Please don't take our votes away.

Dr. Irene R. Sherman

Kauai

SB-266-HD-1

Submitted on: 3/30/2021 4:13:03 PM

Testimony for FIN on 3/31/2021 1:30:00 PM



Submitted By	Organization	Testifier Position	Present at Hearing
Deborah Sevy	Individual	Oppose	No

Comments:

County's should be able to decide for themselves on covid travel rules.

Thanks!

SB-266-HD-1

Submitted on: 3/30/2021 4:59:19 PM

Testimony for FIN on 3/31/2021 1:30:00 PM



Submitted By	Organization	Testifier Position	Present at Hearing
Anita Cook	Individual	Oppose	No

Comments:

This bill would remove the option for any other Mayor that decides to opt out of the unSafe Travels program. The bill represents the worst kind of special interest micromanaging by the legislature and ruins the ability of the Governor to react quickly and decisively to the pandemic - please kill this bill.

with respect

anita and tommy cook

LATE

SB-266-HD-1

Submitted on: 3/30/2021 5:59:18 PM

Testimony for FIN on 3/31/2021 1:30:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
Robert W McHenry	Individual	Oppose	No

Comments:

I am writing from my home on Kauai. I do not think this bill with it's amendment adding basically everything in HB1286 is constitutionally sound. HB1286 did not pass it's three required hearings in the house chamber. Now it is being added as an amendment and makes SB266 which started as an covid appropriations bill, to include covid travel rules. These are 2 separate subjects and should be handled as such, as 2 separate bills.

Please govern by the rules set in our state constitution.

Sincerely,

Robert McHenry

Princeville, Kauai



SB-266-HD-1

Submitted on: 3/30/2021 6:08:58 PM

Testimony for FIN on 3/31/2021 1:30:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
Marion McHenry	Individual	Oppose	No

Comments:

I am writing to you from Kauai. I do not approve of this bill and how it has been changed.

To make a long story short, back on March 16th, when no one was looking Representative Linda Ichiyama, Chair of the House Pandemic & Disaster Preparedness Committee, “inserted the contents of HB1286 into a new Part 2 of SB266.” With no public notice, no public testimony, and no public discussion whatsoever, Representative Ichiyama supported by House Leadership, did an “end around” circumventing the normal legislative process.

The contents of HB1286 removes the ability of individual County’s to establish their own COVID travel rules. HB1286 was recently deferred in the Senate after a triple/joint committee hearing. This normally means it’s “dead” and a pretty strong signal that the Senate wants no part of

In summary, HB1286 was killed in the State Senate and resurrected by the House via a back door maneuver in the form of an amendment to SB266.

This is unconstitutional. The public is paying attention and does care about how our lawmakers create our laws and who they are serving. SB266 started as an appropriations bill. It needs to stay that way. The admendment deals with travel rules and should be a separate bill.

I strongly oppose this bill and urge you to oppose it in it's current form.

Sincerely,

Marion McHenry

Princeville, Kauai.

SB-266-HD-1

Submitted on: 3/30/2021 6:25:27 PM

Testimony for FIN on 3/31/2021 1:30:00 PM



Submitted By	Organization	Testifier Position	Present at Hearing
Marie Javkson	Individual	Oppose	No

Comments:

RE: S.B. 266 H.D. 1 (oppose adding in language from HB 1286)

Aloha Representatives,

I am writing as a part of HALE Hawai'i to oppose something that was done that frankly shocks me. H.B. 1286 was a bill that received a great deal of support from the business/tourism community but was doomed to fail for several reasons. It was very bad for neighbor islands; it took authority away from the Mayors to be able to protect the vulnerable neighbor islands and did not take into account Maui's much higher numbers per capita and the huge resource difference between the neighbor islands and O'ahu. It did not take into account the higher tourism load that Maui carries, and therefore the higher level of exposure. It did not have the support of the Lt. Gov or Governor and would have been vetoed. Those in opposition to it were relieved to hear that it died in Committee.

What happened next was a travesty and was illegal and unethical. Rather than let it die, the language for it was added to an Appropriations Bill. It was inserted as a "Technical and Nonsubstantive Amendment," and it is most certainly does not fit the definition of "Technical" or "Nonsubstantive". It was inserted into the Appropriations Bill to prevent the Governor from being able to veto it without causing the state much financial harm.

The language from H.B. 1286 would set in concrete in law something that should be part of an Emergency Order, as Emergency Orders are meant to be changeable. This pandemic has been anything but predictable, and losing the ability to pivot to adapt to changes can literally kill people. For example, we do not know what variants will do to us. Already, some of the variants escape the vaccines. What happens if there is a new wave of infections that do not respond to the vaccine? Children will not be vaccinated for some time. We have already heard how Michigan children have become very infected. What happens if a variant that targets children hits the islands? People don't seem to care much about losing the over 60 crowd, but no one likes to lose children. Can you imagine the devastation if we are required to keep the state open with just one test that we know will not protect us (look at Maui's numbers since mid-

October)? No change could be made until the next legislative session, which would cause so much unnecessary loss of life. Do you really want to be responsible for that?

Please refuse to approve S.B. 266 until the language from H.B. 1286 is removed. Thank you!

Marie Jackson, RN

SB-266-HD-1

Submitted on: 3/30/2021 7:42:36 PM

Testimony for FIN on 3/31/2021 1:30:00 PM



Submitted By	Organization	Testifier Position	Present at Hearing
Catherine Clement	Individual	Oppose	No

Comments:

I oppose SB266 because it denies each County's right to set its own rules regarding Covid-19. Each County is different and requires different Covid-19 considerations and rules. I strongly oppose giving the State the right to impose the same Covid-19 rules on all the Counties in the state.

SB-266-HD-1

Submitted on: 3/30/2021 9:55:43 PM

Testimony for FIN on 3/31/2021 1:30:00 PM



Submitted By	Organization	Testifier Position	Present at Hearing
Stephanie Austin	Individual	Oppose	No

Comments:

It is inexcusable to have added, without notice or public review, the separate bill which gave COVID regulations to Oahu: and disenfranchised mayors on the very different neighbor islands from have say over the health and safety of their islands. This Oahu centric provision was REJECTED, and now Saiki and he cohorts sneakily - and one hopes illegally, have tried to put it back in. INEXCUSABLE! Remove it at once!

SB-266-HD-1

Submitted on: 3/30/2021 10:08:28 PM

Testimony for FIN on 3/31/2021 1:30:00 PM



Submitted By	Organization	Testifier Position	Present at Hearing
Lisa Crampton	Individual	Oppose	No

Comments:

Dear Committee Members,

I opposed HB1286, and I oppose inclusion of key provisions of this tabled in bill in SB266. These provisions would remove much needed local power and flexibility to respond to the COVID-19 crisis given each island's unique needs and resources. SB266 needs to remain focused on appropriations to provide relief to those individuals and businesses most affected by the pandemic, not meddle in governance issues.

I firmly believe that the island's individual policies regarding travel are not a huge obstacle to travel and our economic recovery; any savvy traveler realizes that local jurisdictions always have their own policies that must be researched and respected. The biggest obstacle to travel is COVID-19 itself, with many individuals not willing to expose themselves to crowded airplanes and airports while vaccination levels are still low, cases on the mainland plateauing at higher-than-desirable levels, and unknown complications engendered by the new variants. In some states, cases are on the rise again. Here on Kaua'i, with our "bubble" resort system, we are catching more cases recently with our second test program, likely due to the variants and mainland uptick.

However, given Mayor Kawakami's recent plans to rejoin the state Safe Travel program, there is no need to included these types of provisions in SB266. We will already have a unified state policy. Tourism is already at 50% of pre-pandemic levels and estimates that within a few months, it will be at 75%. The current system is working and we do not need legislation to "fix" anything. In fact it dangerously undermines the State's capacity to rapidly respond to new infections emerging from the variants and sets unfortunate precedents for other legitimate uses of executive power.

The State Legislature and the legislative process are not suited to making the quick, well-informed decisions that the ever-changing COVID-19 landscape requires. This power must be retained by the Governor and the Mayors to allow us to respond appropriately to new challenges.

Best regards and mahalo,

Dr. Lisa Crampton

3794 Nanakai Rd, Kalaheo HI 96741

LATE

SB-266-HD-1

Submitted on: 3/31/2021 1:27:21 AM

Testimony for FIN on 3/31/2021 1:30:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
Maria Maitino	Individual	Oppose	No

Comments:

To House Representative,

I oppose HB266, relating to the pandemic for many reasons.

It is not in the best interest of the state of Hawaii's people to have the legislature decide what is best for each island when it comes to the coronavirus pandemic. Each island must maintain the right to make decisions for their island. I am a resident of Kauai and Kauai has done extremely well in regards to keeping residents safe, We have had extremely low case counts, and when cases started rising after we opened up, we changed strategies, and our numbers when down. Each island is very different, and has different needs. The mayor and health department should be able to make decisions based on recent data and changing conditions.

In addition, this bill does not follow the State Constitution Article II. Firstly it deals with more than one subject, secondly, this bill is supposed to receive a required 3 readings in the Senate, and it has not. Thirdly, the Committee Report issued by Chair Rep Ichiyama states "Your Committee further finds...Your Committee believes that having a uniform law regarding mandatory self-quarantine will allow the State to welcome more people, thereby stimulating the economy and improving the quality of life for its citizens..."

How can Rep. Ichiyama claim, "Your Committee further finds..." when there was no testimony, no discussion, and no mention of COVID travel rules whatsoever during the Committee hearing?

This bill should not even be considered at this point. It did not follow constitutional law, and should be thrown out.

Thank you,

Maria Maitino

LATE

SB-266-HD-1

Submitted on: 3/31/2021 7:10:08 AM

Testimony for FIN on 3/31/2021 1:30:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
No Boddame	Individual	Oppose	No

Comments:

We are island/counties, each with its own demographics and preferences!

It is imperative for islander health safety that each county's right to set and enforce their own "pandemic mitigation" options and preferences be preserved and permitted under Hawaii law. do NOT pass this bill!

LATE

SB-266-HD-1

Submitted on: 3/31/2021 7:23:57 AM

Testimony for FIN on 3/31/2021 1:30:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
Russell J. Maeda	Individual	Oppose	No

Comments:

My name is Russell J. Maeda, and I'm oppose to SB266 and also HB1286. I urge you vote NO on both these bills. Much Aloha.

Sincerely, Russell J. Maeda

364 Likeke Place

Kapaa, Hi. 96746

Cellular: 808-652-4802

SB-266-HD-1

Submitted on: 3/31/2021 7:25:05 AM

Testimony for FIN on 3/31/2021 1:30:00 PM

LATE

Submitted By	Organization	Testifier Position	Present at Hearing
Suzanne Kashiwaeda	Individual	Comments	No

Comments:

I am 70 years old and live on Kauai, the county that has the lowest rate of COVID-19 infections and deaths. The reputation as one of the safest places to live is due to our Mayor's stricter and quicker response to the pandemic as well as the compliance and support of my island community. I am upset and opposed to the legislature's attempt to deny home rule by incorporating HB1286 into a budget bill. To have "sneaked" that provision into an otherwise important funding bill is deceitful and untenable.

LATE

SB-266-HD-1

Submitted on: 3/31/2021 7:31:30 AM

Testimony for FIN on 3/31/2021 1:30:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
Nana-Honua Manuela	Individual	Oppose	No

Comments:

Please do not override our Mayors abilities to address our COVID travel rules according to our individual needs. Do not give that power to the Governor. We need our autonomy in protecting our islands which does not fall under a "one size fits all" format. I am on Big Island and feel that our island as well as others have fared better during pandemic due to our Mayors allegiance to our islands rather than to the overall State as is the interest of the Governor. Mahalo,.

SB-266-HD-1

Submitted on: 3/31/2021 8:24:18 AM

Testimony for FIN on 3/31/2021 1:30:00 PM

LATE

Submitted By	Organization	Testifier Position	Present at Hearing
Terrie Hayes	Individual	Oppose	No

Comments:

LATE

SB-266-HD-1

Submitted on: 3/31/2021 8:37:52 AM

Testimony for FIN on 3/31/2021 1:30:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
teresa tico	Individual	Oppose	No

Comments:

I am OPPOSED to this bill as the addition of the second section is a backdoor maneuver, lacks transparency, and attempts to thwart home rule. If passed and not vetoed by the governor, it will not be upheld by a court of law due to the manner in which the second section was tacked onto it, with no notice and no public testimony. The section I refer to removes the ability of individual counties to establish their own COVID travel rules. This part of the bill was tacked on after HB1286, containing the same language, was deferred in the Senate. Rep. Ichiyama, in a duplicitous maneuver, tacked it onto SB266 which, on the surface, is a bill for covid relief. She should be ashamed. This is the reason why only 20% of the public trusts government, according to the Pew Research Center. Remove the section that prevents counties from establishing their own travel rules, or do not vote for this bill. Sincerely, Teresa Tico

LATE

SB-266-HD-1

Submitted on: 3/31/2021 8:51:51 AM

Testimony for FIN on 3/31/2021 1:30:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
Roberta Williams	Individual	Oppose	No

Comments:

I am writing in opposition to SB266. I live on Kauai. Our island should be allowed to make decisions that affect our specific population. We are a small island with limited resources and should not be forced into a situation that impacts our community adversely.

We need the flexibility to put safety protocols and measures in place to keep our population safe. I have heard it said that we are one island state and resources are shared. But in reality, even if these resources are shared, the anguish, separation and restrictions put on families when a person is sent to Oahu for care is very prohibitive.

The expenses include travel, cost of housing while on another island, ground transportation and the overall stress a family and patient must go through while they are now removed from their support system and home. Therefore, the answer is to keep our population safe and within the capabilities of our health care system on island...not farm us out to larger islands with more resources. Think about the people affected when you make decisions and don't make decisions based on economic and monetary needs. I understand the complexity of the situation and know that it is a delicate balance. But putting all islands under one "rule" is not going to help, it will put a tremendous stress on our less resourced islands.

It should be the county's responsibility to monitor and decide what is best for our community. What is good for Oahu is not necessarily good for Kauai. I am very tired of Oahu politicians making decisions that affect all of us when they are based on what is in the State's best interest. Is it really? Do we really need to have one overall rule because it's easier, less confusing and will bring more tourist to Hawaii. I think we need the ability and flexibility to do what is best for each island's health and safety and that should be the priority.

Please do not support SB266 where we will lose the ability to make good decisions for our island.

Thank you for allowing me to express my concerns.

Roberta Willilams

LATE

SB-266-HD-1

Submitted on: 3/31/2021 9:00:17 AM

Testimony for FIN on 3/31/2021 1:30:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
Ruta Jordans	Individual	Comments	No

Comments:

This bill in its current format is unconstitutional and irrational. Please remove amendment that all counties must comply to the same travel rules. Because in Hawaii each county is a separate island, we can and should protect each island from Covid appropriate to our needs.

State Constitution Article II, Section 14: No law shall be passed except by bill. Each law shall embrace but one subject.

NOTE: HB266 clearly embraces more than one subject. For 2/3 of the process it deals only with COVID appropriations. Then it's amended to include another subject which relates to COVID travel rules and county authority.

Please remove the unconstitutional, improperly inserted amendment!!!

LATE

SB-266-HD-1

Submitted on: 3/31/2021 9:19:57 AM

Testimony for FIN on 3/31/2021 1:30:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
Valerie Weiss	Individual	Oppose	No

Comments:

Aloha.

Please vote no.

I am so disappointed to find that Rep. Linda Ichiyama, chair of the House Pandemic & Disaster Preparedness Committee, “inserted the contents of HB1286 into a new Part 2 of SB266 with no public notice and no transparency.

HB1286 was killed in the state Senate (led by Kaua‘i’s own Senate President Ronald Kouchi) and resurrected by the House via a back-door maneuver in the form of an amendment to SB266.

As I citizen of Kauai I am ashamed of President Kouchi and the rest of you responsible for this. **Kauai has taken a different direction in opening tourism and has demanded more restrictions than the state prefers. This has allowed us to have a very low COVID case count.**

LATE

SB-266-HD-1

Submitted on: 3/31/2021 10:21:13 AM

Testimony for FIN on 3/31/2021 1:30:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
Christine Heath	Individual	Oppose	No

Comments:

I am writing against this bill as I feel that each county needs to decide what is right for the county based on the resources it has and not what is good for Oahu.

SB-266-HD-1

Submitted on: 3/31/2021 10:47:45 AM

Testimony for FIN on 3/31/2021 1:30:00 PM

LATE

Submitted By	Organization	Testifier Position	Present at Hearing
Gary Hipp	Individual	Oppose	No

Comments:

I believe this measure to be unconstitutional and an infrngement on individual liberty.

SB-266-HD-1

Submitted on: 3/31/2021 10:51:34 AM

Testimony for FIN on 3/31/2021 1:30:00 PM

LATE

Submitted By	Organization	Testifier Position	Present at Hearing
SHERI J MACAYA	Individual	Oppose	No

Comments:

I oppose SB266 because it has Section 15 attached to it. It hasn't had 3 readings in each house on separate days and so isn't valid. I oppose this mainly because I believe individual counties should be able to decide for itself what rules and restrictions to put in place to best protect it's own special needs and circumstances. Do not pass SB266 with Section 15 attached to it!

thank you for considering this,

Sheri Macaya

LATE

SB-266-HD-1

Submitted on: 3/31/2021 10:52:38 AM
Testimony for FIN on 3/31/2021 1:30:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
Dr. Carl J. Berg	Individual	Oppose	No

Comments:

I am opposed to the taking of my County's right to self governance in matters relating to public safety during the pandemic. Kauai showed the rest of islands how to appropriately manage the pandemic, in spite of Department of Health bungling.

LATE

SB-266-HD-1

Submitted on: 3/31/2021 11:10:09 AM
Testimony for FIN on 3/31/2021 1:30:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
Robert MACAYA	Individual	Oppose	No

Comments:

I oppose Section 15 being part of HB266. Each county should have some say over its restrictions depending on it's special circumstances. This should have been read(after Section 15 was added) 3 times in each house and hasn't been.

Robert Macaya

LATE

SB-266-HD-1

Submitted on: 3/31/2021 11:25:05 AM

Testimony for FIN on 3/31/2021 1:30:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
Maria Walker	Individual	Oppose	No

Comments:

Aloha to the Finance Committee,

I am writing to ask you to please remove the inserted provision into this bill to prevent the counties from choosing their own methods for quarantine and dealing with the pandemic. I am not opposed to the major portion of the bill but to the recently inserted addition of the contents of former HB1286 into this measure. I live on Kaua'i and have seen how the measures we have taken in our county has led us to have by far the lowest rate of infection and deaths in the state. It is entirely reasonable for each county to assess their individual needs and act accordingly. Any Hawai'i resident will tell you that each island is very different from the others, with needs, situations, and infrastructure that make each one unique. Only the elected officials of each county have a full grasp of what is needed for their constituency, while state officials may have little or no direct experience with the island in question.

Please remove this provision, inserted late in the process, well after the Senate deferred HB1286.

Mahalo for hearing my testimony

Maria Walker

1728 Hulu Rd.

Kapa'a, HI 96746

(808) 821-0732

LATE

SB-266-HD-1

Submitted on: 3/31/2021 11:31:26 AM

Testimony for FIN on 3/31/2021 1:30:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
William Hackett	Individual	Oppose	No

Comments:

This is a bad bill in its present form. It includes a sneaky attempt to include the contents of HB1286 into a new Part 2 of SB266. HB1286 has been effectively killed in the state Senate, and now resurrected by the House via a back door maneuver in the form of an amendment to SB266. This amendment must be removed!

Mahalo,

William Hackett

LATE

SB-266-HD-1

Submitted on: 3/31/2021 11:40:53 AM

Testimony for FIN on 3/31/2021 1:30:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
Eliel Starbright	Individual	Oppose	No

Comments:

HB266 containing its true substantive content **has not received its required three readings in the Senate.**

This move by the State House, represents bad policy, bad politics, and bad process.

SB-266-HD-1

Submitted on: 3/31/2021 12:07:54 PM

Testimony for FIN on 3/31/2021 1:30:00 PM



Submitted By	Organization	Testifier Position	Present at Hearing
Sheryl Harris	Individual	Oppose	No

Comments:

I am distressed about the way in which this bill is being handled. the 1st part deals with Covid appropriations BUT also now includes Covid travel rules and county authority. I have just returned from out of the state and despite a negative covid-19 test, I am quarantining for 10 days. I am happy to do it. Kaua'i has maintained the safest island in all of the Hawaiian islands. We'd like to keep it that way. Until test is affordable coming and going, we quarantine. So schools and locals and visitors can enjoy Kaua'i in a safe and healthy way. This sneaky, not-by-the- rules addition of the latter part of this bill is appalling. I voted for Dee. I do not want to see this pass and I am watching and talking to Kaua'i citizens, my working-class friends. PLEASE deny this bill!

Sheryl Harris