



STATE OF HAWAII | KA MOKU'ĀINA 'O HAWAI'I  
OFFICE OF THE DIRECTOR  
DEPARTMENT OF COMMERCE AND CONSUMER AFFAIRS  
KA 'OIHANA PILI KĀLEPA  
335 MERCHANT STREET, ROOM 310  
P.O. BOX 541  
HONOLULU, HAWAII 96809  
Phone Number: (808) 586-2850  
Fax Number: (808) 586-2856  
cca.hawaii.gov

JOSH GREEN, M.D.  
GOVERNOR | KE KIA'ĀINA

SYLVIA LUKE  
LIEUTENANT GOVERNOR | KA HOPE KIA'ĀINA

NADINE Y. ANDO  
DIRECTOR | KA LUNA HO'OKELE

DEAN I. HAZAMA  
DEPUTY DIRECTOR | KA HOPE LUNA HO'OKELE

**Testimony of the Department of Commerce and Consumer Affairs**  
**Before the**  
**House Committee on Health and Homelessness**  
**Wednesday, January 31, 2024**  
**8:30 a.m.**  
**State Capitol, Conference Room 329 and via Video Conferencing**

**On the following measure:**  
**H.B. 1722, RELATING TO HEALTH**

Chair Belatti and Members of the Committee:

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

The purpose of this bill is to prohibit the imposition of cost-sharing requirements for certain diagnostic and supplemental breast examinations.

For the Committee's information, Hawaii Revised Statutes section 23-51 provides, in part, that "[b]efore any legislative measure that mandates health insurance coverage for specific health services, specific diseases, or certain providers of health care services as part of individual or group health insurance policies, [sic] can be considered, there shall be concurrent resolutions passed requesting the auditor to prepare and submit to the legislature a report[.]"

Thank you for the opportunity to testify on this bill.



HOUSE COMMITTEE ON HEALTH AND HOMELESSNESS  
Representative Della Au Belatti, Chair  
Representative Jenna Takenouchi, Vice Chair

Date: January 31, 2024  
From: Hawaii Radiological Society HRS  
M Wiedman MD - HRS Legislative Liaison  
Ven Seguritan MD – President, HRS

**RE HB 1722 Relating to Health** - Health Care; Insurance; Coverage; Breast Cancer Screenings; Breast Examinations; Cost-Sharing; Prohibited  
**Position: Support**

This measure would prohibit the imposition of cost-sharing requirements for certain diagnostic and supplemental breast examinations for breast cancer screening.

Breast cancer is the most common cancer diagnosed in women in Hawaii. According to the University of Hawaii Cancer Center, invasive breast cancer incident rates have increased 1.7% per year over the last 10 years, and the incidence in Hawaii (139.6 per 100,000) was higher than the U.S. overall (126.9 Per 100,000) <sup>1</sup>.

Hawaii patients face significant financial barriers to timely and medically necessary breast imaging. Missed mammograms can lead to more later-stage breast cancer diagnoses, once detected, so it is critically important that Hawaii reduce the financial obstacles associated with screening and diagnostic exams. HRS strongly supports this measure that will reduce out-of-pocket costs and improve access to the medical care that Hawaii patients need.

Thank you for allowing the Hawaii Radiological Society to testify on this issue.

References and Quick Links:

1. Hawaii Cancer At A Glance. Hawaii Tumor Registry.  
<https://www.uhcancercenter.org/research/shared-resources/hawaii-tumor-registry>. Accessed Jan 29, 2024.
2. Sharp Declines in Breast and Cervical Cancer Screening. 2021 June 30. Center for Disease Control and Prevention (CDC). <https://www.cdc.gov/media/releases/2021/p0630-cancer-screenings>.
3. Degroff A et al. COVID-19 impact on screening test volume through the National Breast and Cervical Cancer early detection program. [Prev Med 2021 Oct; 151:106559](https://doi.org/10.1016/j.jpmed.2021.106559). doi: 10.1016/j.jpmed.2021.106559. Epub 2021 Jun 30.

## Hawaii Radiological Society HRS

The state chapter of the American College of Radiology ACR



4. Loo LWM, Williams M, Hernandez BY. The high and heterogeneous burden of breast cancer in Hawaii: A unique multiethnic U.S. Population. [Cancer Epidemiol. 2019 Feb;58:71-76.](#)
5. Hawaii Radiological Society and American College of Radiology: "Breast Screening Disparities, Diverse Populations and Divergent Guidelines" September 25, 2020. <https://www.youtube.com/watch?v=9o8uMuLxM4k&feature=youtu.be>
6. Sherman R. Mammogram guidelines can put women of color at risk. *Washington Post*. December 8, 2020. <https://www.thelily.com/mammogram-guidelines-can-put-women-of-color-at-risk-these-women-thank-god-they-advocated-for-themselves/>
7. Monticciolo DL, Newell MS, Hendrick RE, Helvie MA, Moy L, Monsees B, et al. Breast Cancer Screening in Women at Higher-Than-Average Risk: Recommendations From the ACR. [J Am Coll Radiol. 2018;15\(3\):408-414.](#)



House Committee on Health and Homelessness  
Representative Della Au Belatti, Chair  
Representative Jenna Takenouchi, Vice Chair

Hearing Date: Wednesday, January 31, 2024

**ACS CAN SUPPORTS HB 1722 – RELATING TO HEALTH.**

Cynthia Au, Government Relations Director – Hawaii Guam  
American Cancer Society Cancer Action Network

Thank you for the opportunity to **SUPPORT** HB 1722: Relating to Health. This bill prohibits the imposition of cost-sharing requirements for certain diagnostic and supplemental breast examinations.

The American Cancer Society Cancer Action Network (ACS CAN), the nonprofit, non-partisan advocacy affiliate of the American Cancer Society advocates for public policies to reduce the cancer burden for everyone. On behalf of our constituents, many of whom have been personally affected by cancer, we urge your support this important bill.

Most individuals now have access to screening mammography, thanks to its inclusion as a free preventive service under federal health care law. However, if the results of that screening mammogram suggest the need for a follow-up imaging test for additional evaluation, individuals may be faced with hundreds to thousands of dollars in out-of-pocket costs. One study found that the out-of-pocket costs for follow-up imaging tests can average \$234 for a diagnostic mammogram and \$1,021 for a breast MRI.<sup>i</sup> As a result, several states have enacted legislation to eliminate cost-sharing for the follow-up imaging needed after an abnormal mammogram.

In Hawaii, 1,440 will be diagnosed with breast cancer in 2024 and 180 will die from the disease.<sup>ii</sup> Despite the fact that breast cancer death rates have been declining for several decades, not all people have benefited equally from the advances in prevention, early detection, and treatment that have helped achieve these lower rates. In Hawai'i, breast cancer is the most common cancer among women and the 2nd leading cause of cancer death.

Costs are a known barrier to health care generally and cancer screening specifically. The elimination of cost-sharing is associated with increased cancer screening. Cost is also a barrier to completion of follow-up tests that are recommended after an abnormal cancer screening. Unexpected and unaffordable costs may cause individuals to delay or forego additional imaging tests to rule out or confirm a breast cancer diagnosis. And delayed follow-up is associated with later stage disease at diagnosis.

The implementation of no-cost preventive services under federal law has paved the way for more people to get regular, age-appropriate cancer screenings. However, cost barriers to completing the continuum of screening are undermining the desired outcome of determining whether the patient has cancer. Without resolution following an abnormal screening test, the promise of cancer screening cannot be realized.

Given the evidence that patient cost-sharing, whatever the source, diminishes the timely uptake of essential cancer care associated with the full continuum of screening, ACS CAN supports legislation to eliminate cost-sharing associated with recommended cancer screening, including supplemental and follow-up testing through the diagnosis of cancer. We urge your support of HB 1722.

Should you have any questions, please do not hesitate to contact Government Relations Director Cynthia Au at 808.460.6109, or [Cynthia.Au@Cancer.org](mailto:Cynthia.Au@Cancer.org).

---

<sup>i</sup> Susan G Komen & Martec. Understanding Cost & Coverage Issues with Diagnostic Breast Imaging. January 2019.

<sup>ii</sup> 2024 Cancer Facts and Figures



January 31, 2024

The Honorable Della Au Belatti, Chair  
The Honorable Jenna Takenouchi, Vice Chair  
House Committee on Health & Homelessness

Re: HB 1722 – RELATING TO HEALTH

Dear Chair Belatti, Vice Chair Takenouchi, and Members of the Committee:

Hawaii Medical Service Association (HMSA) appreciates the opportunity to provide comments on HB 1722, which will prohibit the imposition of cost-sharing requirements for certain diagnostic and supplemental breast examinations.

HMSA appreciates the intent of the measure, however, any medical procedure comes with a cost and waving those costs could inadvertently increase costs elsewhere for employers and community members. Currently since the initial breast exam (office visit) is considered preventative there is normally no cost share, along with the subsequent mammogram (preventative at zero cost share). Beyond that, if the screenings turn up any “abnormalities” resulting from initial mammogram, then any follow-up visits with physician would be considered a diagnostic breast exam (including any follow-up diagnostic testing) with the applicable cost sharing applicable.

Since this bill prohibits cost sharing, it would unintentionally pass on those costs-- incurred by providers and health plans-- to the employer groups and potentially the very community members it intends to support.

Thank you for the opportunity to provide comments on this measure.

Sincerely,

Dawn Kurisu  
Assistant Vice President  
Community and Government Relations

Testimony of  
John M. Kirimitsu  
Legal and Government Relations Consultant

Before:  
House Committee on Health & Homelessness  
The Honorable Della Au Belatti, Chair  
The Honorable Jenna Takenouchi, Vice Chair

January 31, 2024  
8:30 am  
Conference Room 329

### **HB 1722 Relating to Health**

Chair, Vice Chair, and committee members, thank you for this opportunity to provide testimony on this measure regarding breast examination coverage.

#### **Kaiser Permanente Hawaii would like to offer comments.**

Kaiser supports the intent of this bill to improve breast cancer detection rates in the State, however Kaiser is concerned that this bill is attempting to mandate coverage beyond the ACA. Procedurally, diagnostic breast exams are not considered preventative since it is provided *after-the-fact*, i.e. a follow-up exam *after* a routine mammogram exam. It is important to recognize that diagnostic mammograms are not the same as preventative mammograms. Preventative mammograms are performed on a regular basis for routine pre-screening in women without any specific breast concerns or symptoms, whereas diagnostic mammograms are conducted to further investigate specific concerns, such as breast lumps, changes in breast size or shape, nipple discharge, or abnormalities detected during a screening mammogram. Unlike preventative mammograms, which are preventative in nature, diagnostic mammograms are considered diagnostic and involve additional procedures such as additional imaging or biopsies, which are not covered by the ACA. During a diagnostic mammogram, healthcare professionals may use additional imaging tests, i.e., ultrasound or magnetic resonance imaging (MRI) to obtain a better view of the breast tissue and any potential abnormalities. Therefore, as a non-preventative service (and non-essential health benefit under the ACA), standard office visit/hospital inpatient cost shares for diagnostic mammogram services would apply.

Furthermore, we are unfamiliar with the term “supplemental breast examination” but it appears to be defined as a diagnostic (versus preventative) procedure since it involves additional MRI and ultrasound testing. As a non-preventative service under the ACA, cost shares would apply.

Thank you for your consideration.



**Written Testimony Supporting HB 1722**  
**Submitted to the House Committee on Health & Homelessness**  
**January 31, 2024**  
**By Susan G. Komen**

---

Chair Belatti, Vice Chair Takenouchi, and Members of the Committee, thank you for the opportunity to provide testimony in support of HB 1722 which relates to coverage of medically necessary breast imaging. My name is Lauren Marquette, and I am the Regional Manager of State Policy at Susan G. Komen®.

Komen is the world's leading nonprofit breast cancer organization representing the millions of people who have been diagnosed with breast cancer. Komen has an unmatched, comprehensive 360-degree approach to fighting this disease across all fronts—we advocate for patients, drive research breakthroughs, improve access to high quality care, offer direct patient support and empower people with trustworthy information. Komen is committed to supporting those affected by breast cancer today, while tirelessly searching for tomorrow's cures. We advocate on behalf of the estimated 1,440 people in Hawaii who will be diagnosed with breast cancer and the estimated 180 who will die from the disease in 2024 alone.

Widespread access to preventive screening mammography is available to millions of women as a result of the Affordable Care Act (ACA). Unfortunately, most individuals at a higher risk of breast cancer or those requiring follow-up imaging due to an abnormal mammogram result face hundreds to thousands of dollars in patient cost sharing for this required imaging – all before they are even potentially diagnosed with breast cancer. Mammography is only the initial step in the early detection process and is not able to diagnose cancer alone. Early detection of breast cancer is not possible without the medically necessary diagnostic follow-up or additional supplemental imaging required to rule out breast cancer or confirm the need for a biopsy. An estimated 12 percent of women screened with modern digital mammography will require follow-up diagnostic imaging.

A Komen-commissioned study found the out-of-pocket costs for patients to be high, with much variation for diagnostic breast imaging. For example, the average patient cost for a mammogram is \$234, and for a breast MRI, \$1,021. The study also found that the inconsistency in cost and coverage is a recognized concern among patients, and health care providers. Which leads to additional stress and confusion for patients who are already dealing with the daunting possibility of a breast cancer diagnosis. Additionally, a recent study published in *Radiology* found that 1 in 5 patients said they would not go in for recommended follow-up imaging if they had to pay a deductible.

Unfortunately, we often receive calls and emails from individuals who are unable to afford the out-of-pocket costs for their recommended follow-up breast imaging. Without assistance, many will simply delay or forego these medically necessary tests. This delay can mean that patients will not seek care until the cancer has spread making it much deadlier and much more costly to treat. Breast cancer can be up to five times more expensive to treat when it has spread beyond the breast to other parts of the body.

As committed partners in the fight against breast cancer, we know how deeply important it is for all cancer patients to have fair and equitable access to breast imaging that may save their lives. Susan G. Komen encourages you to support HB 1722, which will eliminate cost-sharing for medically necessary breast imaging services. We hope Hawaii will join Nevada, New Mexico, Oregon, Washington, as well as sixteen other states that have passed this vital legislation.

**Thank you for your consideration.**



**HB-1722**

Submitted on: 1/29/2024 10:08:58 PM

Testimony for HLT on 1/31/2024 8:30:00 AM

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Testify</b>
Cheryl K. Okuma	Individual	Support	Written Testimony Only

Comments:

To:

Rep. Della Au Belatti, Chair, COMMITTEE ON HEALTH & HOMELESSNESS

Rep. Jenna Takenouchi, Vice Chair, COMMITTEE ON HEALTH & HOMELESSNESS

RE: Strong Support of HB 1722 – RELATING TO HEALTH.

Hrg: Wednesday, January 31, 2024 at 8:30 am

Representatives Chair Della Au Belatti, Vice-Chair Jenna Takenouchi, and committee members:

My name is Cheryl K. Okuma and I am in STRONG SUPPORT of HB 1722 – RELATING TO HEALTH.

In Hawai‘i, 1,440 will be diagnosed with breast cancer in 2024 and 180 will die from the disease. Breast cancer is the most common cancer among women and the second leading cause of cancer death in the state.

I am a volunteer of the American Cancer Society Cancer Action Network, and am a breast cancer survivor. Cancer screening and early detection is vital for those of us diagnosed with cancer. Cost is a barrier, and removing cost-sharing will save lives. It will encourage people to get early testing and screening, and provide opportunity for detection and diagnostic examination for treatment.

Costs are a known barrier to health care generally and cancer screening specifically. The elimination of cost-sharing is associated with increased cancer screening and may save lives.

I humbly ask for your SUPPORT and pass HB 1722 – RELATING TO HEALTH to reduce cost sharing burdens for people.

Sincerely,

Cheryl K. Okuma

Wailuku, Maui, 96793

**HB-1722**

Submitted on: 1/30/2024 12:31:30 AM

Testimony for HLT on 1/31/2024 8:30:00 AM

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Testify</b>
Uri Lyne Martos	Individual	Support	Written Testimony Only

Comments:

To:

Rep. Della Au Belatti, Chair, COMMITTEE ON HEALTH & HOMELESSNESS

Rep. Jenna Takenouchi, Vice Chair, COMMITTEE ON HEALTH & HOMELESSNESS

RE: Strong Support of HB 1722 – RELATING TO HEALTH.

Hrg: Wednesday, January 31, 2024 at 8:30 am

Representatives Chair Della Au Belatti, Vice-Chair Jenna Takenouchi, and committee members:

My name is Uri Martos, a current breast cancer survivor and I am in **STRONG SUPPORT** of HB 1722 – RELATING TO HEALTH.

In Hawai‘i, 1,440 will be diagnosed with breast cancer in 2024 and 180 will die from the disease. Breast cancer is the most common cancer among women and the second leading cause of cancer death in the state.

I know firsthand how breast cancer can change your life. I battled it for the first time in 2015 and won. In 2021 it came back in my liver and now I have been fighting it for the past 2 years. Even with good health insurance, I have had very high medical bills and my health has not been optimal. We need to end this disease once and for all.

Costs are a known barrier to health care generally and cancer screening specifically. The elimination of cost-sharing is associated with increased cancer screening and may save lives. The first time I had cancer it was found at my second mammogram. I know that screening saved my life the first time.

I humbly ask for your **SUPPORT** and pass HB 1722 – RELATING TO HEALTH to reduce cost sharing burdens for those who are the neediest.

Sincerely,

Uri Martos

Lihue, 96766

**HB-1722**

Submitted on: 1/30/2024 9:16:25 AM

Testimony for HLT on 1/31/2024 8:30:00 AM

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Testify</b>
Chelsea Gonzales	Individual	Support	Written Testimony Only

Comments:

My name is Chelsea Gonzales and I am in **STRONG SUPPORT** of HB 1722 – RELATING TO HEALTH.

In Hawai‘i, 1,440 will be diagnosed with breast cancer in 2024 and 180 will die from the disease. Breast cancer is the most common cancer among women and the second leading cause of cancer death in the state.

Costs are a known barrier to health care generally and cancer screening specifically. The elimination of cost-sharing is associated with increased cancer screening and may save lives.

I volunteer with the American Cancer Society, Cancer Action Network and I hear so many stories of patients, parents, and survivors who encourage early screenings. Early detection saves lives, but so many families in our state fear the costs associated with these appointments and would rather avoid the doctor's office in general.

I humbly ask for your **SUPPORT** and pass HB 1722 – RELATING TO HEALTH to reduce cost sharing burdens for certain diagnostic and supplemental breast examinations .

Sincerely,

Chelsea Gonzales

Kakaako Resident

**HB-1722**

Submitted on: 1/30/2024 5:41:27 PM

Testimony for HLT on 1/31/2024 8:30:00 AM

Submitted By	Organization	Testifier Position	Testify
Jennifer Hausler	Individual	Support	Written Testimony Only

Comments:

Representatives Chair Della Au Belatti, Vice-Chair Jenna Takenouchi, and committee members:

My name is Jennifer Hausler and I am in **STRONG SUPPORT** of HB 1722 – RELATING TO HEALTH.

In Hawai‘i, 1,440 will be diagnosed with breast cancer in 2024 and 180 will die from the disease. Breast cancer is the most common cancer among women and the second leading cause of cancer death in the state.

My late sister Lucy Brower Molloy passed away from breast cancer at age 63 along with many other friends and relatives. As a volunteer of the American Cancer Society Cancer Action Network, I strongly believe that passing this bill will make a big difference in breast cancer deaths. .

Costs are a known barrier to health care generally and cancer screening specifically. The elimination of cost-sharing is associated with increased cancer screening and may save lives.

I humbly ask for your **SUPPORT** to pass HB 1722 – RELATING TO HEALTH to reduce cost sharing burdens.

Sincerely,

Jennifer Hausler

Pearl City, 96782

I

