



HAWAI‘I CIVIL RIGHTS COMMISSION

830 PUNCHBOWL STREET, ROOM 411 HONOLULU, HI 96813 · PHONE: 586-8636 FAX: 586-8655 TDD: 568-8692

March 24, 2021
2:00 p.m.
Rm. 329, Videoconference

To: The Honorable Aaron Ling Johanson Chair
The Honorable Lisa Kitagawa, Vice Chair
Members of the House Committee on Consumer Protection & Commerce

From: Liann Ebesugawa, Chair
and Commissioners of the Hawai‘i Civil Rights Commission

Re: S.B. No. 1285, S.D.2, H.D.1

The Hawai‘i Civil Rights Commission (HCRC) has enforcement jurisdiction over Hawai‘i’s laws prohibiting discrimination in employment, housing, public accommodations, and access to state and state funded services. The HCRC carries out the Hawai‘i constitutional mandate that no person shall be discriminated against in the exercise of their civil rights. Art. I, Sec. 5.

S.B. No. 1285, S.D.2, H.D.1, requires any Hawaii Health Systems Corporation hospital in a county with an area greater than four thousand square miles that serves Compact of Free Association benefit recipients to establish diversity and inclusion training for all staff, and to hire interpreters and community health care workers as necessary to bridge the language and cultural divide with the community. The measure also requires the Hawaii Health Systems Corporation (HHSC) to provide oversight and enforcement, and to provide a report to the legislature.

The HCRC supports the intent of S.B. No. 1285, S.D.2, H.D.1. The HCRC understands that the bill is intended to provide for equitable access to health services for COFA community members and other limited English proficient (LEP) persons and communities that

currently face challenges and barriers to access to health services, specifically starting with HHSC hospitals in Hawai'i County. Section 2, (a)(2) of S.B. 1285, S.D.2, H.D. 1, also requires *hiring* of interpreters. Hospitals that receive federal funds, not just HHSC hospitals, are already required to provide language access (interpretation services) for LEP persons under federal law, Title VI and Executive Order 13166. This bill goes beyond these minimum federal legal requirements, recognizing that multi-lingual staffing and diversity/cultural staff training can be affirmative steps towards providing equitable access to health services in Hawai'i.

The HCRC supports the intent of S.B. No. 1285, S.D.2, H.D. 1.



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

"Quality Healthcare For All"

HOUSE COMMITTEE ON CONSUMER PROTECTION & COMMERCE

March 24, 2021
2:00 p.m.
Hawaii State Capitol
Via Videoconference

S.B. 1285, S.D.2, H.D.1
Testimony in Opposition

Requires any Hawaii health systems corporation hospital in a county with an area greater than four thousand square miles that serves Compact of Free Association benefit recipients to establish diversity and inclusion training for all staff, and to hire interpreters and community health care workers as necessary to bridge the language and cultural divide with the community. Requires the Hawaii health systems corporation to provide oversight and enforcement. Requires the Hawaii health systems corporation to provide a report to the legislature. Effective 7/1/2060

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 on this measure. While we support the intent of this measure that seeks to bridge the language and cultural divide with the community experienced by individuals with limited language proficiency, including those who are recipients of benefits under the Compact of Free Association (COFA), we must oppose this measure as written and respectfully submit that HHSC is not an appropriate entity to take on these responsibilities.

This measure requires inclusion and diversity training for all staff and the hiring of interpreters and community health workers "as necessary to bridge the language and cultural divide with the community". Such a broad mandate requires expertise and resources that HHSC does not have.

HHSC supports competent and meaningful language access to individuals with Limited English Proficiency (LEP) as an essential component in all health services provided at its facilities. However, *HHSC provides language access through specialized contracted services and does not employ or train interpreters*. HHSC facilities are in compliance with Section 1557 of the Affordable Care Act and 45 C.F.R., Part 92 (2016), and Chapter 321C, Hawaii Revised Statutes, providing required interpretation services from contracted providers. These are generally provided by telephonic services or through

MARTII services. MARTII stands for My Accessible Real-Time Trusted Interpreter that is a HIPAA-approved, video and audio wireless connection to a skilled, certified medical interpreter. HHSC facilities use a video monitor for this face-to-face communication. These services are timely and effective, especially in an emergency health situation. Off-site interpretation services are used by all hospitals as the maintenance of employed on-site certified medical interpreters in all languages is cost prohibitive.

Community health workers are an emerging component of a culturally competent team approach towards improved healthcare outcomes. However, at this time, those services are not billable to the insurers, Medicare, nor Medicaid. As such, any consideration of this classification of positions will require significant, consistent funding.

While previously applicable to all hospitals this measure as currently amended appears to apply only to Hawaii County's HHSC facilities; Hilo Medical Center, Hale Ho'ola Hamakua, and Ka'u Hospital operated by HHSC's East Hawaii Regional board and Kona Community Hospital and Kohala Hospital operated by the HHSC West Hawaii Regional board. The limitations previously described in our testimony are valid for hospitals in general, but are even more pertinent to the limited resources of public hospitals on the neighbor islands.

For the above reasons, we respectfully suggest this measure be deferred.

Thank you for the opportunity to testify before this committee on this measure.

March 22, 2021

The Honorable Aaron Ling Johanson, Chairman
House Committee on Consumer Protection & Commerce, Hawaii State Capitol

My name is David Anitok, Co-Founder and Policy Director for the COFA Alliance National Network or CANN. CANN is a national not-for-profit organization dedicated to advocate with and for communities from Micronesia, Marshall Islands, and Palau for social and economic justice. CANN has partnered with culturally-based grassroots organizations to advance the well being and social health of Pacific Islanders who live and work in the United States under COFA or the Compact of Free Association treaty. Thank you for this opportunity to testify in support of SB 1285, as amended.

In 1986, the Compact of Free Association (COFA) was established between the United States and the Marshall Islands and the Federated States of Micronesia, then in 1994 with the Republic of Palau. This unique treaty gives the United States the national and international security defense against adversaries and provides the US military force the land, water, and air space for its purposes. The United States conducts their most highest and consistent missile range defense system and military training in the Micronesia COFA islands to protect all 52 States including the State of Hawaii and its people. The Compact of Free Association states that people from the Marshall Islands, Federated States of Micronesia and Palau may enter to the United States without green card or visa, work and pay all local, state, and federal taxes, join the United States military, and can even become a citizen of the United States. Nowadays, we have many of our current and future generations that are born in the beautiful State of Hawaii and other United States across the mainland. CANN, in solidarity with 40 plus organizations and individuals who signed the letter of support submitted to Chairman Johanson, are in full support and urge the committee to pass SB 1285, as amended.

I've seen and heard from far too many community members from my COFA communities suffering in pain and crying themselves to sleep because of cultural and systematic racism. One day, I went to visit my partner Lucinda Brokken, who's a community health educator from Enewetak Atoll Marshall Islands, currently working with Dr. Neal Palafox on a TeleHealth Project in Ocean View, Island of Hawaii. We stopped by one of her relatives' house and saw her laying on the ground underneath a blanket because she was cold, suffering from ongoing health problems. She's no more than 55 years old, self-employed farm worker at the coffee and macadamia farms making .80 cents per pound, and does not have health insurance. She's been lying there for 3 days without much food or drink. When first asked if she's gone to the hospital or emergency, she replied "no need. They're going to just tell me to fill out a bunch of paperwork, which I can't understand. Ask me a bunch of questions in english, which I don't understand, and talk about me and giggle, then send me back home without helping or caring for me or my health problems we don't understand." Unfortunately, we've come across too many cases like this on the Big Island, especially in the rural communities like Ocean View. Our families in Ocean View drive an hour and a half or two hours to the other end of the Island to seek proper care. We're grateful to Sen. Dru Kanuha for being a champion for our COFA Islanders communities on the Big Island and Hawaii State, and strongly urged your support to pass SB1285 as amended.

Kommol tata, Kinisou Chapur, Kulo Ma lalap, Kammangar, Kalahngan, Sulang, Mahalo and Thank you!

David Anitok
CANN Policy Director



March 24, 2021 at 2:00 pm
Via Videoconference

House Committee on Consumer Protection and Commerce

To: Chair Aaron Ling Johanson
Vice Chair Lisa Kitagawa

From: Paige Heckathorn Choy
Director of Government Affairs
Healthcare Association of Hawaii

Re: **Submitting Comments**
SB 1285 SD 2 HD 1, Relating to Medical Facilities

The Healthcare Association of Hawaii (HAH), established in 1939, serves as the leading voice of healthcare on behalf of 170 member organizations who represent almost every aspect of the healthcare continuum in Hawaii. Members include acute care hospitals, skilled nursing facilities, home health agencies, hospices, assisted living facilities, and durable medical equipment suppliers. In addition to providing access to appropriate, affordable, high-quality care to all of Hawaii's residents, our members contribute significantly to Hawaii's economy by employing over 20,000 people statewide.

Thank you for the opportunity to provide **comments** on this bill, which requires Hawaii Health Systems Corporations (HHSC) facilities located in a county with an area greater than four thousand square miles that serves residents from the Compact of Free Association nations to establish a program of diversity and inclusion training for all staff, and to hire interpreters and community healthcare workers (CHWs) to effectively communicate with and provide culturally sensitive services to the community.

We appreciate the intent of this measure, which is to ensure that all residents have access to culturally competent care. This pandemic has affected the Pacific Islander community disproportionately, with an outsized number of cases of COVID-19 presenting in residents from the compact nations compared to their population numbers. As providers who are engaged in and invested in improving the health of our communities, our members are working with community partners to address disparities in care.

Many of our members have expressed concern that requiring facilities to hire interpreters and CHWs to improve communication would require significant funding. Because of the nature of hospital staffing, facilities would need resources to hire these individuals and it might be difficult in certain areas to find qualified individuals. Thank you for the opportunity to comment on this bill.



**Consulate - General of the
Republic of the Marshall Islands**
Honolulu Office

March 23, 2021

The Honorable Aaron Ling Johanson, Chairman
House Committee on Consumer Protection & Commerce
Hawaii State Capitol
415 South Beretania St., Room 436
Honolulu, HI 96813

Re: In **strong support of SB1285 SD2 HD1**

Dear Chairman, Johanson,

The Republic of the Marshall Islands Consulate in Honolulu **supports SB1285 SD2 HD1**. This bill will provide an added layer of support for our most vulnerable population in the Micronesian community who were disproportionately affected by COVID-19 due to health disparities, as well as, access to healthcare. Adequate language access and healthcare workers with cultural understanding are just a few of the ways in which we can work together to help our communities.

In this regard, we hope the current version of SB1285 is restored to a Statewide effort.

Sincerely,
Isabela Silk
Consul General
RMI Consulate - Honolulu

March 22, 2021

The Honorable Aaron Ling Johanson, Chairman

House Committee on Consumer Protection & Commerce , Hawaii State Capitol

Dear Chairman Johanson,

Re: in **strong support of SB1285 SD2 HD1**

Thank you for hearing this important Bill. My name is Neal A. Palafox MD MPH. a resident of Hawaii and work for the John A. Burns School for Medicine, University of Hawaii. The views in this testimony are my own.

The COVID-19 Pandemic has highlighted the assets and vulnerabilities of all of Hawaii's geographic and ethnic communities. These communities have unnecessarily suffered a heavy and unequal burden of COVID-19 in Hawaii. According to the HI DOH, the PI population makes up 4 % of Hawaii's populations and carries 26% of all COVID-19 cases in Hawai'i and is over twice as likely to be hospitalized or die from COVID-19 compared to other ethnic groups in Hawaii. This Bill is introduced to:

- a. mitigate discriminatory behavior towards PIs by all of Hawaii's health, and social welfare institutions which is a barrier to appropriate and timely health care
- b. develop and sustain PI hospital and community-based community health workers with the linguistic and cultural knowledge to effectively facilitate access to health care and promote health literacy

The data of the Pandemic is revealing. The current State Health and Healthcare Institutions are not effective to address institutional discrimination remains, and current communications / translation strategies are not effective. An institutional response of "we already have language access readiness and diversity training in place" is not responsive to the reality and not acceptable.

Addressing the needs of the PI communities necessitates allowing the PI communities to handle their own communities through their own cultural, linguistic, intellectual, and human assets. Indeed many PI response teams have carried the day including the Micronesian Ministers & Leaders Uut (Uut is hui or gathering), Marshallese Community Organization of Hawaii, Micronesian Health Advisory Coalition, the Marshall Islands COVID 19 Task Force, We are Oceania (WAO), and Nations of Micronesia (NOM) through their own grass roots efforts and resources.

Addressing the COVID-19 pandemic now and in the future is not only a health care, health institution and State Department of Health response. Essential is the concept that the solution is a societal, community and a government responsibility, and that it is possible and can be done now. In this regard, it is hoped that the current version of SB1285 be restored to a Statewide effort.

SB-1285-HD-1

Submitted on: 3/23/2021 9:22:11 AM

Testimony for CPC on 3/24/2021 2:00:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
Sharon Wong	Individual	Support	No

Comments:

Aloha,

My name is Sharon Wong and I'm currently a second year medical student at the John A. Burns School of Medicine and I strongly support this bill (SB1285). As an aspiring healthcare provider, I think it is crucial to consider all of the social determinants of health (SDH) that can affect our local population. And unfortunately, these SDH are disproportionately divided between different ethnic groups and demographics amongst our islands, especially the Pacific Islander community. COFA residents fall under this population group and are often subject to higher rates of health disparities due to the disproportionate SDH.

With this bill (SB1285), requiring qualifying facilities with diversity & inclusion training is a step in the right direction so that staff that are taking care of these patients can provide safe and culturally appropriate care. Prioritizing the hiring of interpreters is another action step that will break down barriers and ensure proper patient-provider communication. I hope to see support from administrations to ensure that these measures are in place and working efficiently.

Healthcare should be an equal opportunity for people of all backgrounds. I thank you folks for taking the time to consider this bill (SB1285) and hope that you will consider passing it. Mahalo nui loa!

SB-1285-HD-1

Submitted on: 3/24/2021 1:17:20 PM

Testimony for CPC on 3/24/2021 2:00:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
Jenny Mae Respicio	Individual	Support	No

Comments:

I support this bill.

SB-1285-HD-1

Submitted on: 3/24/2021 1:33:58 PM

Testimony for CPC on 3/24/2021 2:00:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
Taryn Adams-Leon	Individual	Support	No

Comments:

I support this bill

SB-1285-HD-1

Submitted on: 3/24/2021 1:40:39 PM

Testimony for CPC on 3/24/2021 2:00:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
Annie Chang	Individual	Support	No

Comments:

I support this bill.