



HAWAII MEDICAL ASSOCIATION

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Senator Jarrett Keohokalole, Chair

Senator Rosalyn H. Baker, Vice Chair

SENATE COMMITTEE ON COMMERCE AND CONSUMER PROTECTION

Senator Rosalyn H. Baker, Chair

Senator Stanley Chang, Vice Chair

Date: March 31, 2022

From: Hawaii Medical Association

Elizabeth Ann Ignacio MD, Chair, HMA Legislative Committee

Elizabeth England MD, Vice Chair, HMA Legislative Committee

**Re: SCR 123 Auditor; Impact Assessment Report; Mandatory Health Insurance Coverage; Early Access Breast Cancer Screening
Position: Support**

This resolution requests that the Auditor conduct an impact assessment report for a proposed mandate of health insurance coverage for early access breast cancer screening. This report would include the social and financial effects of the proposed mandated coverage.

The most frequently diagnosed cancer in the women of Hawaii by far is breast cancer, making up approximately 34% of newly diagnosed cases^{1,2}. United States Preventive Services Task Force (USPSTF) guidelines recommend cancer screening for women at age fifty. But women in Hawaii between the ages of forty and forty-nine have higher incidence of breast cancer compared to the national average. USPSTF guidelines adversely impact women of Asian ancestry in Hawaii who are the ethnic group most likely to develop breast cancer before the age of fifty. In addition, Native Hawaiian women have the greatest breast cancer incidence and mortality in Hawaii.

Risk assessment and early detection decreases breast cancer morbidity and mortality. Expansion of insurance coverage for breast cancer screening for younger women of Hawaii will increase the early identification of breast cancer, and forward earlier initiation of the treatment needed.

A proposed mandate for health insurance coverage for early access breast cancer screening is necessary for the early detection and treatment of breast cancer in the women of Hawaii. HMA commends our lawmakers for this auditor resolution, which is an important step toward legislation that can save lives, especially for our minority women who are more likely to develop breast cancer before age 50. HMA strongly supports this resolution and all efforts to improve breast cancer screening in Hawaii.

Thank you for allowing the Hawaii Medical Association to testify in support of this resolution.

continued

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Immediate Past President – Michael Champion, MD Treasurer – Nadine Tenn Salle, MD
Secretary – Thomas Kosasa, MD Executive Director – Marc Alexander



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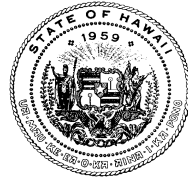
www.hawaiimedicalassociation.org

REFERENCES

1. 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.
2. University of Hawaii at Manoa Speaker Series. "Cancer Disparities and Survival in Hawai'i." Jan 7, 2022.
3. 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>.
4. 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>
5. 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/>
6. 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.

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STATE OF HAWAII
DEPARTMENT OF HEALTH
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WRITTEN TESTIMONY ONLY

**Testimony COMMENTING on S.C.R. 123
REQUESTING THE AUDITOR TO CONDUCT A SOCIAL AND FINANCIAL
ASSESSMENT OF THE PROPOSED MANDATORY HEALTH INSURANCE
COVERAGE FOR EARLY ACCESS BREAST CANCER SCREENING**

SENATOR JARRETT KEOHOKALOOLE, CHAIR
SENATE COMMITTEE ON HEALTH

SENATOR ROSALYN H. BAKER, CHAIR
SENATE COMMITTEE ON COMMERCE AND CONSUMER PROTECTION

Hearing Date: March 31, 2022

Room Number: Conference Room 229
& Videoconference

- 1 **Fiscal Implications:** The Department of Health (DOH) defers to the Office of the State Auditor
2 on the fiscal implications of conducting the social and financial assessment.
- 3 **Department Testimony:** The DOH offers comments on Senate Concurrent Resolution 123
4 (S.C.R. 123). S.C.R. 123 requests that the Auditor conduct an impact assessment report to
5 increase categories of women required to have coverage for mammography, however the
6 proposed increases do not align with the U.S. Preventive Services Task Force (USPSTF)
7 recommendations that guide federal screening policies and practices. Based on the analysis of
8 harm to benefit the USPSTF does not currently recommend breast cancer screening before age
9 fifty except for women in their forties with a parent, sibling, or child with breast cancer.¹ The
10 Department respectfully recommends following the USPSTF guidelines of biennial screening
11 mammography for women aged fifty to seventy-four years for breast cancer screening and
12 supplemental screening.

¹ U.S. Preventive Services Task Force, Final Recommendation Statement, Breast Cancer: Screening, January 11, 2016. <https://www.uspreventiveservicestaskforce.org/uspstf/recommendation/breast-cancer-screening>. Accessed on February 3, 2021.

1 According to the 2018 data from the Hawaii Behavioral Risk Factor Surveillance System,
2 87% of women aged fifty to seventy-four years had a mammogram within the past two years.²
3 Screening is effective in identifying breast cancer early, when it is often highly treatable.
4 Increasing cancer screening rates and ensuring access to breast cancer screening for residents of
5 Hawaii is a priority for both Centers for Disease Control and Prevention funded programs, the
6 Hawaii Breast and Cervical Cancer Control Program and Hawaii Comprehensive Cancer Control
7 Program in the DOH which follow the USPSTF recommendations.

8 Thank you for the opportunity to testify on this measure.

9 **Offered Amendments:** None

² Hawaii State Department of Health, Hawaii Health Data Warehouse. Behavioral Risk Factor Surveillance System. (2018). <http://hhdw.org>. Accessed on February 3, 2021.



UNIVERSITY OF HAWAII SYSTEM

Legislative Testimony

Testimony Presented Before the
Senate Committee on Health and
Senate Committee on Commerce and Consumer Protection
Thursday, March 31, 2022 at 10:00 a.m.

By
Joe W. Ramos, Ph.D.
Interim Director
University of Hawai'i Cancer Center
And
Michael Bruno, PhD
Provost
University of Hawai'i at Mānoa

SCR 123 – REQUESTING THE AUDITOR TO CONDUCT A SOCIAL AND FINANCIAL ASSESSMENT OF PROPOSED MANDATORY HEALTH INSURANCE COVERAGE FOR EARLY ACCESS BREAST CANCER SCREENING

Chairs Keohokalole and Bakers, Vice Chair Chang, and members of the committees:

The University of Hawai'i Cancer Center supports SCR 123, requesting the Auditor to conduct a social and financial assessment of proposed mandatory health insurance coverage for early access breast cancer screening.

Breast cancer is the most common cancer diagnosed in Hawai'i women. Annually in Hawai'i, an average of 1,233 women are diagnosed with invasive breast cancer and another 308 are diagnosed with in situ (non-invasive) tumors. An average of 155 women in Hawai'i die of breast cancer each year. The incidence of breast cancer in Hawai'i is higher than the U.S. overall and statewide rates continue to increase each year. There are substantial disparities in the burden of breast cancer across Hawai'i's multiethnic populations with the highest mortality in Native Hawaiian women. Nearly ¼ of all breast cancer patients are diagnosed at advanced stages when it is more difficult to treat, and survival is poorest. Mammography is an important tool for the early detection of breast cancer.

The Resolution is necessary to determine the impact of expanding health care coverage for baseline mammograms for women between the ages of thirty-five and thirty-nine. The UH Cancer Center is prepared to provide relevant expertise and data to facilitate the proposed assessment.

SCR-123

Submitted on: 3/28/2022 12:12:51 PM

Testimony for HTH on 3/31/2022 10:00:00 AM

Submitted By	Organization	Testifier Position	Testify
Devon Cataldi	Testifying for University Of Hawaii At Manoa	Support	Written Testimony Only

Comments:

I would like to support this testimony for enabling the collection of early breast cancer screening in hawaii to further understand those who are at risk and ultimately learn how this can help those with breast cancer in living in Hawaii. Thank you,



'Ahahui o nā Kauka

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March 30, 2022

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COMMITTEE ON HEALTH

Senator Jarrett Keohokalole, Chair
Senator Rosalyn H. Baker, Vice Chair

Group Testimony in Support of SCR123

REQUESTING THE AUDITOR TO CONDUCT A SOCIAL AND FINANCIAL ASSESSMENT OF PROPOSED MANDATORY HEALTH INSURANCE COVERAGE FOR EARLY ACCESS BREAST CANCER SCREENING.

Hawai'i is one of the most racially and ethnically diverse states in the U.S. Overall, Hawai'i ranks 5th highest for breast cancer incidence in the nation, and rates have increased in recent years despite a stable national trend.

Hawai'i SEER data presented by Dr. Brenda Hernandez of UH Cancer Research Center shows that women of Asian ancestry in Hawaii are the ethnic group most likely to develop breast cancer before age 50 in our state. The women of Hawai'i between ages 40-49 have higher incidence of breast cancer compared to the US national average, and hormone receptor positive breast cancer rates are higher for Japanese and Native Hawaiians compared to Whites. **Additionally Native Hawaiian women have the greatest breast cancer incidence and mortality in Hawaii.** Nationally, half of all fatal cancers are diagnosed in women before age 50 in the general population.

The research underscores the importance of considering the heterogeneity in breast cancer rates and subtypes across the different racial/ethnic populations of our diverse state. Earlier risk assessment and screening will increase the likelihood of early identification of breast cancer, and earlier initiation of the treatment needed.

A proposed mandate for insurance coverage of earlier breast cancer screening is necessary, but it requires an auditor study to report the social and financial impact. 'Ahahui o nā Kauka supports this auditor resolution, so that we may move toward earlier access to breast cancer screening for our Hawaii patients.

SCR-123

Submitted on: 3/27/2022 10:44:03 PM

Testimony for HTH on 3/31/2022 10:00:00 AM

Submitted By	Organization	Testifier Position	Testify
Elizabeth Christenson, MD	Testifying for CHI Lifestyle Medical Center, LLC	Support	Written Testimony Only

Comments:

Risk assessment and early detection decreases breast cancer morbidity and mortality. Expansion of insurance coverage for breast cancer screening for younger women of Hawaii will increase the early identification of breast cancer, and forward earlier initiation of the treatment needed.

REFERENCES

- [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.](#)
- [University of Hawaii at Manoa Speaker Series. "Cancer Disparities and Survival in Hawai'i." Jan 7, 2022.](#)
- [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>.](#)
- [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>](#)
- [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/>](#)
- [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.](#)



SENATE COMMITTEES ON HEALTH & COMMERCE AND CONSUMER PROTECTION

Senator Jarrett Keohokalole, Chair HTH

Senator Rosalyn H. Baker, Chair CPN and Vice Chair HTH

Senator Stanley Chang, Vice Chair CPN

Date: 03-31-22 10:00AM

From: Hawaii Chapter of American College of Emergency Physicians (HACEP)

Elizabeth England MD, Chair, HACEP Legislative Committee

Re: SCR123; REQUESTING THE AUDITOR TO CONDUCT A SOCIAL AND FINANCIAL ASSESSMENT OF PROPOSED MANDATORY HEALTH INSURANCE COVERAGE FOR EARLY ACCESS BREAST CANCER SCREENING.

Position: Support

HACEP is the Hawaii Chapter of the American College of Emergency Physicians and represents over 150 emergency physicians, residents and medical students working and training across the state.

It is well established in the medical literature that ethnicity and race play a role in risk for various diseases. Further research into breast cancer has found that women of Asian ancestry are at an increased risk of developing breast cancer before age 50. Furthermore, native Hawaiian women have the highest rate of mortality associated with breast cancer in Hawaii. With these statistics, it is no surprise that women living in Hawaii aged 40-49 have a higher incidence of breast cancer than the general population. While the US Preventative Services Task Force (USPFTF) recommends beginning breast cancer screening at the age of 50, it does not account for the disproportionate risk the women of Hawaii face.

This resolution is a step in the right direction towards getting the women of Hawaii the appropriate breast cancer screening they deserve. Thank you for allowing the HACEP to testify in support of this measure.



REFERENCES

1. 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/>
2. 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>
3. 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.

SCR-123

Submitted on: 3/26/2022 11:01:00 AM

Testimony for HTH on 3/31/2022 10:00:00 AM

Submitted By	Organization	Testifier Position	Testify
Laeton J Pang	Testifying for Hawaii Radiological Society	Support	Written Testimony Only

Comments:

I'm please as president of the Hawaii Radiological Society and as a practicing radiation oncologist serving as the operations medical director of the Cancer Center of Hawaii, our state's leading radiation therapy treatment provider to write in support of HCR 33/SCR 123 .

This resolution requests that the Auditor conduct an impact assessment report for a proposed mandate of health insurance coverage for early access breast cancer screening. This report would include the social and financial effects of the proposed mandated coverage.

Hawaii SEER data presented by Dr. Brenda Hernandez of UH Cancer Research Center shows that women of Asian ancestry in Hawaii are the ethnic group most likely to develop breast cancer before age 50 in our state. The women of Hawaii between ages 40-49 have a higher incidence of breast cancer compared to the US national average. Additionally Native Hawaiian women have the greatest breast cancer incidence and mortality in Hawaii. Nationally half of all fatal cancers are diagnosed in women before age 50 in the general population.

Our hope is that this auditor study can be completed for the legislature, and the results will allow for the next step of legislation toward earlier breast cancer screening for Hawaii.

Thank you for your consideration.

Laeton J Pang, MD, MPH, FACR, FACRO

SCR-123

Submitted on: 3/27/2022 11:02:37 AM

Testimony for HTH on 3/31/2022 10:00:00 AM

Submitted By	Organization	Testifier Position	Testify
Martha Wiedman, M.D.	Testifying for Martha Wiedman, M.D., Inc., Hawaii Radiological Society	Support	Written Testimony Only

Comments:

I am a member of the Hawaii Radiological Society and the American College of Radiology and am a radiologist specializing in body and breast imaging for 33 years, 28 years in California and the last 3 years in Hawaii. The Hawaii Radiological Society and the Hawaii Medical Society collaborated in 2021 and 2022 to increase availability of mammogram screening and decrease breast cancer deaths and morbidity. Hawaiian SEER data presented by Dr. Brenda Hernandez of UH Cancer Research Center shows women of Asian ancestry in Hawaii are the ethnic group most likely to develop breast cancer before age 50 in our state, while women between ages 40-49 in Hawaii have higher incidence of breast cancer compared to the US national average, with Native Hawaiian women suffering the greatest incidence and mortality. Many of these women lack adequate insurance to cover screenings or breast cancer treatment.

The current US Preventative Services and Task Force (USPSTF) guidelines, which recommend breast cancer screening at age 50 fail to recognize these statistics. I support screening for women between ages 40-49, currently advocated by the American College of Radiology, to reduce morbidity, mortality and the economic toll breast cancer creates for the families as well as for the state with the high cost of treatment and potential loss of income at risk. I also support resolution SCR 123 to request the Hawaii State Auditor to conduct an impact assessment of health insurance coverage for early access to breast cancer screening. The report would include the social and financial effects of the proposed mandated coverage to support legislation.

Respectfully,

Martha Wiedman, M.D.

mwmd92705@aol.com

SCR-123

Submitted on: 3/28/2022 9:30:34 AM

Testimony for HTH on 3/31/2022 10:00:00 AM

Submitted By	Organization	Testifier Position	Testify
Stephen Smith	Individual	Support	Written Testimony Only

Comments:

Aloha,

As a health care provider here in Hawaii, I see on a daily basis the ravages of cancer in our population. As a pathologist, I often make or confirm the initial diagnosis of cancer. Our population is at an increased risk for breast cancer, and the earlier we can detect it, the greater likelihood these patients will survive, and go on to live a longer, more healthy life. This bill will assist us in lowering obstacles to that goal. Please do support this bill. Early detection and treatment is the key. Help us to better define the obstacles and remove them. With your help, and a multidisciplinary effort including providers, insurers and patients, we can do better.

Respectfully,

Stephen M. Smith, MD

SCR-123

Submitted on: 3/28/2022 7:53:43 PM

Testimony for HTH on 3/31/2022 10:00:00 AM

Submitted By	Organization	Testifier Position	Testify
David Camacho	Individual	Support	Written Testimony Only

Comments:

I am in support of breast cancer screening our Asian, Hawaii and Pacific Islander women population at an earlier age.

SCR-123

Submitted on: 3/29/2022 11:57:09 AM

Testimony for HTH on 3/31/2022 10:00:00 AM

Submitted By	Organization	Testifier Position	Testify
Thomas Wolfgruber	Individual	Support	Written Testimony Only

Comments:

I support SCR 123. Importantly, I suggest that the bills be MODIFIED to require a STANDARDIZE BREAST HEALTH QUESTIONNAIRE be provided to all women participating in screening or diagnostic mammography at all mammographic imaging facilities in the state. This would provide better opportunities to identify risk using contemporary and future risk models. Thank you.



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March 31, 2022

SENATOR ROSALYN BAKER, CHAIR
SENATOR JARRETT KEOHOKALO, CHAIR
MEMBERS OF THE JOINT COMMITTEE ON COMMERCE AND CONSUMER PROTECTION
AND COMMITTEE ON HEALTH

Re: **Senate Concurrent Resolution (SCR) 123– SUPPORT**
REQUESTING THE AUDITOR TO CONDUCT A SOCIAL AND FINANCIAL
ASSESSMENT OF PROPOSED MANDATORY HEALTH INSURANCE COVERAGE FOR
EARLY ACCESS BREAST CANCER SCREENING.

Dear Chairs and Members of the Committee:

The Hawaii Society of Clinical Oncology (HSCO) is a local community of oncologists, nurse practitioners, physician assistants, and other allied health professionals who provide a voice for multidisciplinary cancer care teams and the patients they serve. Founded in 1996, HSCO is the largest oncology professional organization in the state.

We support SCR123 as this promotes the goals of coverage that were proposed in 2021’s Senate Bill (SB) 827. We support this change to coverage because it follows the screening guidelines issued by leading clinical organizations such as the American College of Radiology, the National Comprehensive Cancer Network, and the American Medical Association instead of the U.S. Preventive Services Task Force (USPSTF).

The current standards are based national guidelines from the USPSTF. However, doing so fails to acknowledge the evidence showing women of certain ethnic groups suffer a disproportionately higher rate of breast cancer diagnosis before the age of fifty. Hawaii has a large population of Asian American women who have an earlier peak age of breast cancer diagnosis and a Native Hawaiian population which has the highest mortality from breast cancer. Because of the ethnic diversity in Hawai’i, health insurance coverage for screening for certain risk factors as well as lowering the age of for women to undergo baseline mammograms would improve health outcomes for those women whose ethnic backgrounds and other characteristics make them susceptible to an earlier onset of breast cancer.

Thank you for the opportunity to testify.



LATE

SCR-123

Submitted on: 3/30/2022 10:30:39 AM
Testimony for HTH on 3/31/2022 10:00:00 AM

Submitted By	Organization	Testifier Position	Testify
Samantha Torres	Individual	Support	Written Testimony Only

Comments:

As a breast cancer researcher and granddaughter of a breast cancer survivor, I strongly support both HCR 33 and SCR 123, the Concurrent Resolution "Requesting the Auditor Conduct and Social AND Financial Assessment of Proposed Mandatory Health Insurance Coverage for Early Access Breast Cancer Screening".

I also strongly support the standardization of breast health questionnaires across to the state, in order to develop demographic-appropriate breast cancer risk models. Breast cancer is the most common cancer diagnosed in women in Hawai'i, and annually, an average of 1233 women are diagnosed with invasive breast cancer and another 308 are diagnosed with in situ tumors. An average of 155 women in Hawai'i die of breast cancer each year. Additionally, there are substantial disparities in the burden of breast cancer across the State's multi-ethnic populations, with the highest mortality in Native Hawaiian women.

This bill would begin the steps to address these disparities. Please pass Bills HCR 33 and SCR 123.

LATE

SCR-123

Submitted on: 3/30/2022 12:44:14 PM
Testimony for HTH on 3/31/2022 10:00:00 AM

Submitted By	Organization	Testifier Position	Testify
John Shepherd	Individual	Support	Written Testimony Only

Comments:

As a breast cancer researcher and faculty member at the University of Hawaii Cancer Center, I strongly support HCR 33 and SCR 123, the Concurrent Resolution “Requesting the Auditor to Conduct a Social and Financial Assessment of Proposed Mandatory Health Insurance Coverage for Early Access Breast Cancer Screening”.

Importantly, I suggest that the bills be MODIFIED to require a STANDARDIZE BREAST HEALTH QUESTIONNAIRE be provided to all women participating in screening or diagnostic mammography at all mammographic imaging facilities in the state.

Breast cancer is the most common cancer diagnosed in Hawaii women. Annually in Hawaii, an average of 1,233 women are diagnosed with invasive breast cancer and another 308 are diagnosed with in situ (non-invasive) tumors. An average of 155 women in Hawaii die of breast cancer each year. The incidence of breast cancer in Hawaii is higher than the U.S. overall and statewide rates continue to increase each year. There are substantial disparities in the burden of breast cancer across Hawaii’s multiethnic populations with the highest mortality in Native Hawaiian women. Nearly ¼ of all breast cancer patients are diagnosed at advanced stages when it is more difficult to treat and survival is poorest. Mammography is an important tool for the early detection of breast cancer.

HOWEVER, we do not fully understand why particular groups of women in our state have a high risk of advanced breast cancer because STANDARDIZE BREAST HEALTH RISK QUESTIONS are not being asked and curated by any state institution.

The Resolution is necessary to determine the impact of expanding health care coverage for baseline mammograms for women between the ages of thirty-five and thirty-nine. LASTLY, it must be MODIFIED to also require STANDARDIZED BREAST HEALTH QUESTIONS so that we can better identify high risk women. I am prepared to provide relevant expertise and data to facilitate the proposed assessment.