



STATE OF HAWAII
DEPARTMENT OF HEALTH
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Honolulu, HI 96801-3378
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**Testimony in SUPPORT of SB3122 SD1 HD1
RELATING TO PUBLIC HEALTH STANDING ORDERS.**

REP. DAVID A. TARNAS, CHAIR
HOUSE COMMITTEE ON JUDICIARY & HAWAIIAN AFFAIRS

Hearing Date: April 2, 2024

Room Number: 325

1 **Fiscal Implications:** N/A.

2 **Department Testimony:** The Department of Health (DOH) strongly supports SB3122 SD1
3 HD1, which is part of the Governor's Administrative Package.

4 The goal of this measure is to foster a more patient-centered and prevention-focused health
5 ecosystem for Hawaii by re-examining common policies and processes, identifying and aligning
6 synergies around evidence-based practices, and leveraging the shared goals of the public and
7 private sector health stakeholders.

8 This measure authorizes the Director of Health, in conjunction with key stakeholders, as
9 amended, to improve access to routine health screenings. Currently, the U.S. Preventive
10 Services Task Force [recommends many secondary prevention interventions](#), i.e. tests that are
11 routinely recommended to screen for certain conditions in asymptomatic populations, and for
12 which the Affordable Care Act (P.L. 111-148) requires no patient copay or cost-share for most
13 insurance coverage. Examples include screenings for:

- 14 • Breast cancer for women aged 50 – 75 years;
- 15 • Lung cancer for adults 50 – 80 years with a history of smoking;
- 16 • Aortic aneurysm in men aged 65 – 75 years who have ever smoked; and
- 17 • Hepatitis C and HIV for most adults.

1 To access these screenings today, a patient must schedule an office visit with their provider to
2 receive an order, then schedule another appointment for the actual screening. SB3122 SD1 HD1
3 removes the need for the first doctor visit and allows the patient to self-refer for the screening
4 test, saving time and money. Individuals with symptoms or diagnosed disease should receive
5 care directly from their provider. For example, this measure seeks to allow a woman who may
6 have a full-time job, childcare responsibilities, and perhaps transportation challenges to directly
7 schedule her screening mammogram. But a woman who detected a lump would need to see her
8 provider to determine the appropriate diagnostic test.

9 This proposal requires good faith attempts to share results with the patient's provider, as well as
10 to the patient at an appropriate literacy level, similar to clinic visit summaries that have become
11 more prevalent.

12 The intent is to increase receipt of preventive care, advance population health, encourage routine
13 care that can be moved out of the exam room, and create more time for providers to address
14 individualized patient care.

15 DOH continues to engage with stakeholders to refine this concept and address real-world
16 implementation issues such as provider participation status, benefits integrity, patient health
17 literacy, primary care provider coordination, and system capacity. The department also
18 acknowledges that implementation of this Act will require investments of time and money from
19 the private sector, and that a thorough evaluation is essential to determine efficacy, which DOH
20 will provide. As such, DOH is open to amendments from industry stakeholders that assure
21 transparency, communication, coordination, and shared goals.

22 The downstream benefits of easier access to healthcare, the greatly increased potential for
23 catching illness such as cancer, an aneurysm, and various infections sooner, and increasing
24 patient activation with regard to their own health return significant value in time, money, and
25 avoidance of suffering.

26 Thank you for the opportunity to testify.

April 3, 2024

To: Chair Tarnas, Vice Chair Takayama, and Members of the House Committee on Judiciary & Hawaiian Affairs (JHA)

From: Hawaii Association of Health Plans Public Policy Committee

Date/Location: April 3, 2024; 2:00 p.m./Conference Room 325 & Videoconference

Re: Testimony in support of SB3122 SD1 HD1 – Relating to Public Health Standing Order

All of HAHP’s member organizations support the intent of the bill and the efforts of the Department of Health to increase timely access to evidence-based clinical preventive care and screenings. HAHP is a statewide partnership that unifies Hawaii’s health plans to improve the health of Hawaii’s communities together. A majority of Hawaii residents receive their health coverage through a plan associated with one of our organizations.

We appreciate our discussion with the department and their collaboration to ensure:

- patients are aware that they may have out-of-pocket costs associated with accessing services so that they can make informed decisions when accessing services recommended in a public health standing order.
- patients are either connected with their own PCP or informed of the PCP selection process.
- a collaborative stakeholder process for the implementation of this bill.

HAHP supports the language proposed by the department to establish a DOH Public Health Standing Orders Working Group as well as a 2027 sunset date for the pilot, and we look forward to working together.

Thank you for the opportunity to testify in support of SB3122 SD1 HD1.

Sincerely,

HAHP Public Policy Committee

cc: HAHP Board Members



April 3, 2024

The Honorable Kyle T. Yamashita, Chair
The Honorable Lisa Kitagawa, Vice Chair
House Committee on Finance

Re: SB 3122 SD1 HD1 – Relating to Public Health Standing Orders

Dear Chair Yamashita, Vice Chair Kitagawa, and Members of the Committee:

Hawaii Medical Service Association (HMSA) appreciates the opportunity to provide testimony in support of SB 3122 SD1 HD1, which authorizes the Director of Health to issue public health standing orders for patients to self-refer to certain health care screening services, establishes requirements for the provision of items or services pursuant to a public health standing order, and establishes the Public Health Standing Orders Working Group.

We support the legislature’s intent to strengthen public health policy and look forward to continued discussions to strengthen the language so we can best help Hawaii’s residents have access to healthcare that meets their needs.

Thank you for the opportunity to offer comment on SB 3122 SD1 HD1.

Sincerely,



Dawn Kurisu
Assistant Vice President
Community and Government Relations

To: The Honorable David A. Tarnas, Chair
The Honorable Gregg Takayama, Vice Chair
House Committee on Judiciary and Hawaiian Affairs

From: Paula Arcena, External Affairs Vice President
Mike Nguyen, Public Policy Manager

Hearing: Wednesday, April 3, 2024, 2:00 PM, Conference Room 325

RE: **SB3122 SD1 HD1 Relating to Public Health Standing Orders**

AlohaCare appreciates the opportunity to provide testimony in **support with comments** on **SB3122 SD1 HD1**. This measure authorizes the Director of the Department of Health to issue public health standing orders for certain patients to self-refer to evidence-based preventive health care screening services; establishes requirements for the provision of these services; establishes a Public Health Standing Orders Working Group; and sunsets these provisions in 2027.

Founded in 1994 by Hawai'i's community health centers, AlohaCare is a community-rooted, non-profit health plan serving over 84,000 Medicaid and dual-eligible health plan members on all islands. Approximately 40 percent of our members are keiki. We are Hawai'i's only health plan exclusively dedicated to serving Medicaid and Medicaid-Medicare dually-eligible beneficiaries. Our mission is to serve individuals and communities in the true spirit of aloha by ensuring and advocating for access to quality, whole-person care for all.

AlohaCare is committed to improving access to care and strengthening the Medicaid program. As you may know, Medicaid enrollment in our State has grown by over 46% from 327,000 enrollees in March 2020 to 476,000 in January 2024. This tremendous growth has put a further strain on our State's already challenged provider capacity. We support this proposal to increase timely access to evidence-based clinical preventive care and screenings, while also relieving some of the burden faced by our existing provider workforce.

AlohaCare thanks for the Department of Health for working with us and other stakeholders on amendments taken in the HD1 version. These amendments ensure patients are making informed decisions about accessing services recommended in a public health standing order to address concerns about unexpected out-of-pocket costs; ensure patients are connected to their primary care provider; and establish a stakeholder Working Group for the implementation of this new program.



We would also note that we have previously testified on SB3122 before other committees and ask that your committee consider broadening the organizations from which the DOH Director may issue standing orders for evidence-based preventive services beyond the United States Preventive Services Task Force recommendations. There are also other national organizations that issue evidence-based guidelines such as the American Academy of Family Physicians, the American College of Obstetricians and Gynecologists, and the American College of Preventive Medicine. While the guidelines may vary slightly, for example, age ranges for testing or clinical parameters may differ, they all make sound recommendations for evidence-based preventive services. We ask that you consider adding “[USPSTF] and other nationally recognized professional academies and specialty organizations,”

Mahalo for this opportunity to testify in **support with comments** on **SB3122 SD1 HD1**.

SB-3122-HD-1

Submitted on: 4/1/2024 2:59:57 PM

Testimony for JHA on 4/3/2024 2:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Aaron Ruddick	Hawaii Health & Harm Reduction Center	Support	Written Testimony Only

Comments:

Dear Chair Tarnas, Vice Chair Takayama and members of the committee

Hawaii Health & Harm Reduction Center **supports SB 3122** which would support public health standing orders. Public health standing orders can empower both clinical and non-clinical staff to integrate evidence-based recommendations into the practice’s workflow. Standing orders can focus on screenings, immunizations, labs, and point of care testing.

Wednesday, April 3, 2024 at 2:00 pm
Conference Room 325 & Videoconference

House Committee on Judiciary & Hawaiian Affairs

To: Representative David Tarnas, Chair
Representative Gregg Takayama, Vice Chair

From: Michael Robinson
Vice President, Government Relations & Community Affairs

Re: **Testimony In Support of SB 3122, SD1, HD1
Relating To Public Health Standing Orders**

My name is Michael Robinson and I am the Vice President of Government Relations & Community Affairs at Hawai'i Pacific Health (HPH). Hawai'i Pacific Health is a not-for-profit health care system comprised of its four medical centers – Kapi'olani, Pali Momi, Straub and Wilcox and over 70 locations statewide with a mission of creating a healthier Hawai'i.

I write in support of SB 3122, SD1, HD1 which authorizes the Director of Health to issue public health standing orders for patients to self-refer to certain healthcare screening services. HPH supports the intent of this measure, recognizing that in light of the current shortages of healthcare professionals at all levels, many patients face difficulties obtaining necessary diagnostic screening.

The healthcare workforce shortages have affected access to care for many Hawai'i residents. There may be value in providing the opportunity for patient engagement and autonomy in having these tests. However, there are a number of operational and implementation challenges that should be considered before the program can become functioning, including the administrative burden on a state agency. A critical component is ensuring that the patient seeks follow-up care with a physician in the event of an abnormal test result. Additionally, the critical role of the primary care physician should not be overlooked in the process to avoid the fragmentation of care over time.

HPH would welcome the opportunity to be a part of the public health working group that will provide advice and recommendations to the Department of Health in implementing the program. We believe the perspective of the hospital systems would be meaningful in examining this issue.

Thank you for the opportunity to testify.



HIPHI Board

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Chair
University of Hawai'i at Hilo

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Kaiser Permanente

Dina Shek, JD
Medical-Legal Partnership
For Children in Hawai'i

Garret Sugai
HMSA

JoAnn Tsark, MPH
John A. Burns School of Medicine,
Native Hawaiian Research Office

HIPHI Initiatives

Coalition for a
Tobacco-Free Hawai'i

Community-Based Research &
Evaluation

Community Health
Worker Initiatives

COVID-19 Response

Environmental Health

Hawai'i Drug & Alcohol-Free
Coalitions

Hawai'i Farm to School Hui

Hawai'i Oral Health Coalition

Hawai'i Public Health Training Hui

Healthy Eating + Active Living

Kūpuna Collective/Healthy Aging
& Community Living

Public Health Workforce
Development

Date: April 3, 2024

To: Representative David Tarnas, Chair
Representative Gregg Takayami, Vice Chair
Members of the Committee on Judiciary & Hawaiian Affairs

Re: Support: SB3122 Relating to Public Health Standing Orders

Hrg: Wednesday, April 3, 2024 at 2:00 AM

Hawai'i Public Health Institute (HIPHI) **supports the intent** of SB3122 SD1 HD1, which would authorize the Director of Health to issue public health standing orders for patients to self-refer to obtain specific health care screening services.

Access to care is a challenge throughout the state, particularly in rural areas and on neighbor islands. Some places have no providers in specific areas. There is no one way to resolve this complex situation, which is partly due to a severe shortage of healthcare providers and healthcare worker allies throughout the healthcare system.

Many people and organizations have been working to create and implement programs to ensure a strong workforce pipeline, ensure that all healthcare providers can practice to the full scope of their licensure, and open pathways to lessen the administrative burdens of licensure reciprocity. This work is moving the state in a positive direction.

The work still needs to be finished, and innovative ideas should continue to be considered. This bill is one of those "outside of the box" ideas that will help to increase access to healthcare. Enabling a patient to self-refer for a routine and potentially life-saving routine screening without going through multiple steps lessens the strain on the system and the patient.

HIPHI recognizes that implementing such a different, innovative program would be, at best, complicated. There are many elements: new coding, transfer of patient health information, and the roles of providers and insurers, among many other logistics. We strongly support any necessary pieces to ensure communication and collaboration among the stakeholders to ultimately provide the best, safest patient experience possible.

We support the innovative thinking that will help to strengthen our healthcare system. We hope there is continued communication and collaboration as this measure continues to be considered in the legislative process.

Patients benefit by increasing the opportunities to access healthcare, thereby, public health benefits. This policy is part of a larger comprehensive approach to address healthcare provider shortages. Thank you for considering our comments on SB3122 SD1 HD1.

Mahalo,

A handwritten signature in black ink that reads "Peggy Mierzwa". The signature is written in a cursive style and is positioned above the printed name and title.

Peggy Mierzwa
Director of Policy & Advocacy
Hawai'i Public Health Institute

ⁱ Hawai'i Public Health Institute (HIPHI) is a hub for building healthy communities, providing issue-based advocacy, education, and technical assistance through partnerships with government, academia, foundations, business, and community-based organizations.

SB-3122-HD-1

Submitted on: 4/3/2024 10:49:52 AM

Testimony for JHA on 4/3/2024 2:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Heather Lusk	Hep Free Hawai'i	Support	Written Testimony Only

Comments:

Aloha Chair Tarnas, Vice Chair Takayama, and Committee Members:

As Co-Director of Hep Free Hawai'i (HFH), a coalition of local, national, and global partners dedicated to increasing viral hepatitis awareness and access to care throughout our state, I am writing in support of SB 3122, SD 1, HD 1.

As noted by the State Department of Health, the U.S. Preventative Services Task Force recommends secondary prevention interventions, including Hepatitis C and HIV screening, to better facilitate access to needed care services.

Hawai'i is fortunate to have executive and legislative leadership that recognizes the imperative of expanding our state's public health response to viral hepatitis.

HFH has worked with over 200 community partners in recent years on a strategy to eliminate viral hepatitis A, B, and C on a statewide basis. "[Hep Free 2030](#)" identifies five priorities to eliminate hepatitis in Hawai'i: awareness and education, access to services, advocacy at all levels; equity in everything; and data for decision making. The strategy also articulates four core values: harm reduction, social justice, intersectionality, and aloha.

Last fall, the legislature convened a joint informational briefing to discuss more ways to advance hepatitis elimination across the state. Increased access to HBV vaccination, HCV testing, and HCV treatment are of paramount concern. [The federal Centers for Disease Control and Prevention declared viral hepatitis a "winnable battle" in 2020](#), meaning that significant progress can be made in a relatively short period of time. We were very excited to see that President Biden [included the national HCV elimination strategy in his proposed HHS budget](#). This represents the first time that such a strategy was forwarded by the White House.

Mahalo for the opportunity to provide testimony.

SB-3122-HD-1

Submitted on: 4/2/2024 8:42:44 AM

Testimony for JHA on 4/3/2024 2:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Thaddeus Pham	Individual	Support	Written Testimony Only

Comments:

Aloha Chair Tarnas, Vice Chair Takayama, and JHA Committe Members,

As a public health professional, I write in **UNEQUIVOCAL SUPPORT** of SB3122 SD1 HD1, which would authorize the Director of Health to issue public health standing orders for patients to self-refer to certain healthcare screening services.

Given the ongoing provider shortage in Hawai'i, it is important to mobilize all members of our health system to support community health. This bill would provide additional opportunities for people to receive recommended and evidence-based screening and medical services, which would improve health outcomes and alleviate the burden on local providers. The American Academy of Family Physicians notes that standing orders can increase efficiency and reduce physican workloads (<https://www.aafp.org/pubs/fpm/issues/2018/0500/p13.html>)

Mahalo for your thoughtful consideration of this important bill, which could improve the health of Hawai'i at the community level.

Thaddeus Pham (he/him)

SB-3122-HD-1

Submitted on: 4/2/2024 8:54:10 AM

Testimony for JHA on 4/3/2024 2:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Beatrice Zovich	Individual	Support	Written Testimony Only

Comments:

Dear Chair Tarnas, Vice Chair Takayama and members of the committee

I **support SB 3122** which would support public health standing orders. Public health standing orders can empower both clinical and non-clinical staff to integrate evidence-based recommendations into the practice's workflow. Standing orders can focus on screenings, immunizations, labs, and point of care testing.

SB-3122-HD-1

Submitted on: 4/2/2024 9:18:25 AM

Testimony for JHA on 4/3/2024 2:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Ellen Awai	Individual	Support	Written Testimony Only

Comments:

Please support SB3122.SD1.HD1 Authorizing DOH Director to issue self-referred services to such programs that could be more effective in giving people immediate help, instead of waiting for months for a medical profession to get the approval to be paid by health insurances. This has been a Medical Model control held by medical pros, insurances, pharmaceuticals to advance their wellbeing and not those of their patients.

Programs in recovery that have had evidence-based models with SAMHSA's federal offices, such as the Office of Recovery for Peer Support Specialists have been held up far too long over 2 decades. I myself was labeled, discriminated, and stigmatized by the so called medical professionals who knew nothing about my strengths prior to them seeing me for 2 minutes. I lowered to a status below criminals, and held volunteer positions for almost 4 decades in hospitals because paid staff didn't know their alphabets or their numbers, legal advocacy agencies, the largest grass-roots organization in the country as a state and national representative, a SAMHSA CMHS NAC subcommittee consultant bringing in a federal grant of \$11.2 million, traveling most of the 48 contiguous states.

Prior to my confirmed diagnosis by several local psychiatrists with a Serious & Persistent Mental Illness SPMI, I worked for the largest tour company in Hawaii for 9 years in almost every department and ended up paying all their bills with 6 different companies, working in Department of Education as a part-time teacher with Students of Limited English Proficiency and those in Math & English, DLIR Department of Labor and Industrial Relations as an emergency-hire statistician, and as a Professional Adjudication Unit's claims examiner in our largest health insurance company correcting medical codes for doctors to be paid with 5 other women who didn't have English as their first language.

Working with the Department of Health's AMHD administration only showed me how ignorant people were of why they had a job and showed others how toxic a government work environment could be. State workers are to serve the community, not to profit your own financial gain or to further your careers or in education, find a spouse to live in Hawaii, and take the jobs and homes of the local residents who were born and lived here. It's time you help the mass population of Hawaii, those living in poverty! Mahalo in supporting this bill and HSCR1215-24!

SB-3122-HD-1

Submitted on: 4/2/2024 1:35:23 PM

Testimony for JHA on 4/3/2024 2:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Chuck Lyons	Individual	Oppose	Written Testimony Only

Comments:

Aloha,

I am opposed to SB3122. After the recent pandemic and it's subsequent findings, the Public Health officials failed the people of Hawaii. As we are discovering, and continue to discover, many of the assumptions and directions were wrong. Yet, we have not held any public health officials for their role(s) in implementing bad policy.

Increasing their power at this time is wrong until there has been a post mortem of the failures of our public health officials.

Mahalo,

Chuck Lyons

SB-3122-HD-1

Submitted on: 4/2/2024 1:45:21 PM

Testimony for JHA on 4/3/2024 2:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Jason Yaris	Individual	Support	Written Testimony Only

Comments:

Dear Chair Tarnas, Vice Chair Takayama and members of the committee

I support SB 3122 which would support public health standing orders. Public health standing orders can empower both clinical and non-clinical staff to integrate evidence-based recommendations into the practice's workflow. Standing orders can focus on screenings, immunizations, labs, and point of care testing.

Mahalo,

Jason Yaris