



STATE OF HAWAII
DEPARTMENT OF HEALTH
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Testimony in SUPPORT of SB 3125
RELATING TO MEDICAL CARE FOR MINORS

SENATOR JOY SAN BUENAVENTURA, CHAIR
SENATE COMMITTEE ON HEALTH & HUMAN SERVICES

SENATOR JARRETT KEOHOKALOLE, CHAIR
SENATE COMMITTEE ON COMMERCE & CONSUMER PROTECTION
Hearing: Wednesday, February 7, 2024; 1:00 PM; Conference Room 225

- 1 **Fiscal Implications:** None.
- 2 **Department Position:** The Department of Health (“Department”) supports this measure.
- 3 **Department Testimony:** The Communicable Disease and Public Health Nursing Division
- 4 (CDPHND) provides the following testimony on behalf of the Department.
- 5 The Department appreciates the opportunity to testify in SUPPORT of SB 3125 which would
- 6 permit minors age fourteen to seventeen to consent to medical care related to the prevention
- 7 of sexually transmitted infections, including HIV, and would update archaic terminology in
- 8 §577A, HRS, by replacing “venereal disease” with “sexually transmitted infection.” This measure
- 9 would permit licensed health care providers to submit insurance claims for minors who initiate
- 10 medical care and services pursuant this section, including minors covered by a parent or
- 11 guardian’s health insurance, and would protect the minor-initiated medical care and services
- 12 from disclosure to the minor’s parent or guardian.
- 13 Current statutes allow minors age fourteen to seventeen to consent to certain types of medical
- 14 care including the treatment of sexually transmitted infections such as HIV. However, the

1 current statutes do not permit a minor to consent to medical care related to the **prevention** of
2 sexually transmitted infections such as HIV. This measure would resolve this critical gap in
3 minor's access to medical care. Medications taken by an HIV-uninfected individual to prevent
4 acquisition of HIV are safe and highly effective and were approved for use in minors in 2018.

5 The department strongly supports this bill as it could help prevent HIV in minors. Permitting
6 minors who cannot or will not seek the consent of their parents or guardians to consent to HIV
7 medical care is essential to the health of the minor and a valuable step in ending the HIV
8 epidemic in Hawai'i.

9 **Offered Amendments:** None

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

PARTNERS IN CARE

Oahu's Continuum of Care

Our mission is to eliminate homelessness through open and inclusive participation and the coordination of integrated responses.

OYAB O'AHU YOUTH ACTION BOARD

TESTIMONY IN STRONG SUPPORT OF SB 3125 RELATING TO MEDICAL CARE FOR MINORS.

TO: Senate Committee on Health and Human Services & Committee on Commerce and Consumer Protection
FROM: Efren Berrones- Chair of O'ahu Youth Action Board, Partners In Care (PIC)
Hearing: **Wednesday, February 7th, 1:00 PM**

Members of Senate Committee on Health and Human Services & Commerce and Consumer Protection:

Thank you for the opportunity to provide testimony on **STRONG SUPPORT of SB 3125 RELATING TO MEDICAL CARE FOR MINORS**. My name is Efren Berrones and I am the Chair of the O'ahu Youth Action Board (OYAB). OYAB is the designated board made up of youth who have previously or are currently experiencing homelessness on O'ahu and our role is to advocate for houseless youth in systems that directly impact us. We firmly believe that any decision that involves us should include our perspectives, our voices, and our experiences. Today we write in support of SB 3125 which would increase access to medical care for minors 14-17 years old. Specifically, HB 2436 which would give 14-17-year-olds the ability to consent to life-saving HIV prevention medications called Pre-exposure Prophylaxis or PrEP. Under the current HRS, minors are allowed to consent to the treatment of HIV and STD's but cannot consent to vital preventative services. The consequences of the laws disproportionately affect youth experiencing homelessness as it is estimated that more than half of unhoused youth become homeless for the first time due to a caregiver asking them to leave the home. This leads young people experiencing homelessness to not being able to access safe and easily accessible care and the long-term affect can be detrimental. We urge the Senate to pass this bill and allow Youth to utilize easily accessible services and to give us autonomy over our bodies.

Thank you for the opportunity to testify today in STRONG SUPPORT OF Senate Bill 3125.
Mahalo

Efren Berrones
Chair- O'ahu Youth Action Board
Eberrones@hhrc.org
80-743-0860



To: Committee on Health and Human Services and Committee on Commerce and Consumer Protection

Hearing Date/Time: Wednesday February 7th, 1:00 PM

Re: Testimony in Strong Support of SB 3125

From: Heather Lusk, Hawaii Health and Harm Reduction Center

Dear Chair San Buenaventura, Chair Keohokalole, Vice Chairs and members of the committee:

The Hawaii Health & Harm Reduction Center (HHHRC) **supports SB 3125** which would increase access to medical care for minors 14-17. Specifically, HB 2436 would give 14-17 year olds the ability to consent for life-saving HIV prevention medications called Pre-exposure Prophylaxis or PrEP. The Centers for Disease Control and Prevention strongly recommend PrEP as one of the most effective biomedical interventions to prevent HIV. The current HRS for minor consent does allow minors to consent to treatment of HIV and other sexually-related diseases but not have access to prevention measures such as PrEP (ironically we can treat them once they get HIV but not provide proven prevention medications).

HHHRC's mission is to *reduce harm, promote health, create wellness and fight stigma in Hawaii and the Pacific*. We focus our efforts on those disproportionately affected by social determinants of health, including but not limited to: people living with and/or affected by HIV, hepatitis, substance use, and the transgender, LGBQ and the Native Hawaiian communities.

HHHRC runs a sexual health clinic and is one of the largest providers of PrEP in the islands. Young people are the largest growing age group contracting HIV and by passing SB 3125 you can help save lives!

Thank you for the opportunity to testify.

Heather Lusk, Executive Director, Hawaii Health and Harm Reduction Center

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SB-3125

Submitted on: 1/31/2024 5:43:29 PM

Testimony for HHS on 2/7/2024 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Michael Golojuch Jr	Testifying for Stonewall Caucus of the Democratic Party of Hawai'i	Support	Remotely Via Zoom

Comments:

Aloha Senators,

The Stonewall Caucus of the Democratic Party of Hawai'i; Hawai'i's oldest and largest policy and political LGBTQIA+ focused organization fully supports SB 3125.

We hope you all will support this important piece of legislation.

Mahalo nui loa,

Michael Golojuch, Jr. (he/him)
Chair and SCC Representative

SB-3125

Submitted on: 1/31/2024 4:22:38 PM

Testimony for HHS on 2/7/2024 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Mike Golojuch, Sr.	Testifying for Rainbow Family 808	Support	Written Testimony Only

Comments:

We support SB3125. Please pass this bill.

Mike Golojuch, Sr., Secretary/Board Member

Opportunity Youth Action Hawai‘i

February 7, 2024

Senate Committee on Health and Human Services

Hearing Time: 1:00 PM

Location: State Capitol Conference Room 225

Re: SB3125, RELATING TO MEDICAL CARE FOR MINORS

Aloha e Chair San Buenaventura, Vice Chair Aquino, and members of the Committee:

On behalf of the Opportunity Youth Action Hawai‘i hui, we are writing in **strong support** of SB3125, relating to medical care for minors. This bill authorizes minors who are 14 years or older to consent to medical care for sexually transmitted infections, pregnancy, and family planning services, including the prevention of sexually transmitted infections. This bill also requires confidentiality policies and practices for insurers and providers.

Allowing youth who are under the age of 14 to consent to medical care for STDs and other family planning services empowers youth held back from caring for themselves due to parental neglect or abandonment. This is especially important for youth dealing with trauma-based health issues who are unable to receive care.

Opportunity Youth Action Hawai‘i is a collaboration of organizations and individuals committed to reducing the harmful effects of a punitive incarceration system for youth; promoting equity in the justice system; and improving and increasing resources to address adolescent and young adult mental health needs. We seek to improve the continuity of programs and services for youth and young adults transitioning from minor to adult status; eliminate youth homelessness and housing market discrimination against young adults; and promote and fund more holistic and culturally informed approaches among public/private agencies serving youth.

Please support SB3125.

SB-3125

Submitted on: 2/6/2024 12:12:30 PM

Testimony for HHS on 2/7/2024 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Kekoa Kealoha	Individual	Support	In Person

Comments:

‘Ano‘ai ke aloha kākou. I’m Kekoa Kealoha. I am testifying in **STRONG SUPPORT** of SB 3125.

I also take PrEP for HIV prevention. I have known I was gay since I was in elementary. I remember my teenage years vividly... it was the nineties and I remember how impossible it was to speak to any adult, let alone my parents, about what I was going through.

And It turns out I’m not alone. I work in HIV care & prevention, and I have extensive experience offering HIV testing and STI screening services to people who, like me, **COULD NOT** safely open up about their experiences. I have counseled numerous people who experienced things many parents would be ill-equipped to handle. I once sat with a young woman who recalled an assault experience as if she were reliving it. With her permission, I escorted her to a police station to file a report. I also helped a young man understand that coercion is **NOT** consent, that he had a right to his body, that his partner had no right to force a sexual encounter. I interviewed at least three women who recounted the retaliatory nature of their male partners who, when they broke up, said, “now you have HIV.”

All of these people were ages 14-17. They felt too ashamed to share this with the people they loved. Youth are often unwilling to share some of those deeply personal and stigmatizing experiences. Had these youth had an opportunity to take prevention medicines, it could have alleviated some of their stress and given them peace of mind. After all, they were victims to abusive and manipulative behavior. And their abusers were not asking for parental consent. Abusers never will.

Please do not misunderstand me, I greatly respect the role of parents in shaping the lives of their children. But our youth will decide who they do and do not share their life experiences with. If parents cannot or do not create safety for their children, this bill gives youth the ability to protect themselves when others will not.

In an ideal world, a teenager would be open with their parents and it would be safe for all youth to open up. Many young people—especially LGBTQ+ youth—do not go home to love and acceptance. Give our youth a chance to protect themselves, because they are the arbiters of their own lives. They will make decisions without their parents anyway; parents should NOT take away the necessary tools teens need to protect themselves. Please vote in favor of SB 3125.

SB-3125

Submitted on: 1/31/2024 3:17:32 PM

Testimony for HHS on 2/7/2024 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Danielle Sato	Individual	Support	Written Testimony Only

Comments:

Aloha Chairs San Buenaventura and Keohokalole, Vice Chairs Aquino and Fukunaga, and members of the committees,

I strongly support SB3125, which would increase access to medical care for minors 14-17. This bill would give 14-17 year olds the ability to consent for life-saving HIV prevention medications called Pre-exposure Prophylaxis or PrEP. The Centers for Disease Control and Prevention strongly recommend PrEP as one of the most effective biomedical interventions to prevent HIV. The current HRS for minor consent does allow minors to consent to treatment of HIV and other sexually-related diseases but not have access to prevention measures such as PrEP (ironically we can treat them once they get HIV but not provide proven prevention medications).

We now have this life-saving medication, which is covered by insurance, but those 14-17 cannot access without parental consent – which may mean that someone has to decide between sharing intimate information that could impact their familial relationship or getting access to a drug that could prevent a life-threatening disease.

Please pass SB3125 so that our young people have every tool available to support themselves and be healthy.

Thank you for the opportunity to testify

Danielle

SB-3125

Submitted on: 1/31/2024 3:45:22 PM

Testimony for HHS on 2/7/2024 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Lisa Lee	Individual	Support	Written Testimony Only

Comments:

Aloha Chairs San Buenaventura and Keohokalole, Vice Chairs Aquino and Fukunaga, and members of the committees,

I strongly support SB3125, which would increase access to medical care for minors 14-17. This bill would give 14-17 year olds the ability to consent for life-saving HIV prevention medications called Pre-exposure Prophylaxis or PrEP. The Centers for Disease Control and Prevention strongly recommend PrEP as one of the most effective biomedical interventions to prevent HIV. The current HRS for minor consent does allow minors to consent to treatment of HIV and other sexually-related diseases but not have access to prevention measures such as PrEP (ironically we can treat them once they get HIV but not provide proven prevention medications).

We now have this life-saving medication, which is covered by insurance, but those 14-17 cannot access without parental consent – which may mean that someone has to decide between sharing intimate information that could impact their familial relationship or getting access to a drug that could prevent a life-threatening disease.

Please pass SB3125 so that our young people have every tool available to support themselves and be healthy.

Thank you for the opportunity to testify,

Lisa Lee

SB-3125

Submitted on: 1/31/2024 3:49:54 PM

Testimony for HHS on 2/7/2024 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Kerestin Walker	Individual	Support	Written Testimony Only

Comments:

Aloha Chairs San Buenaventura and Keohokalole, Vice Chairs Aquino and Fukunaga, and members of the committees,

I strongly support SB3125, which would increase access to medical care for minors 14-17. This bill would give 14-17 year olds the ability to consent for life-saving HIV prevention medications called Pre-exposure Prophylaxis or PrEP. The Centers for Disease Control and Prevention strongly recommend PrEP as one of the most effective biomedical interventions to prevent HIV. The current HRS for minor consent does allow minors to consent to treatment of HIV and other sexually-related diseases but not have access to prevention measures such as PrEP (ironically we can treat them once they get HIV but not provide proven prevention medications).

We now have this life-saving medication, which is covered by insurance, but those 14-17 cannot access without parental consent – which may mean that someone has to decide between sharing intimate information that could impact their familial relationship or getting access to a drug that could prevent a life-threatening disease.

Please pass SB3125 so that our young people have every tool available to support themselves and be healthy.

Thank you for the opportunity to testify

Keke Walker

SB-3125

Submitted on: 1/31/2024 4:06:15 PM

Testimony for HHS on 2/7/2024 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Maddalynn Seseapasara	Individual	Support	Written Testimony Only

Comments:

I strongly support SB3125, which would increase access to medical care for minors 14-17. This bill would give 14-17 year olds the ability to consent for life-saving HIV prevention medications called Pre-exposure Prophylaxis or PrEP. The Centers for Disease Control and Prevention strongly recommend PrEP as one of the most effective biomedical interventions to prevent HIV. The current HRS for minor consent does allow minors to consent to treatment of HIV and other sexually-related diseases but not have access to prevention measures such as PrEP (ironically we can treat them once they get HIV but not provide proven prevention medications).

We now have this life-saving medication, which is covered by insurance, but those 14-17 cannot access without parental consent – which may mean that someone has to decide between sharing intimate information that could impact their familial relationship or getting access to a drug that could prevent a life-threatening disease.

Please pass SB3125 so that our young people have every tool available to support themselves and be healthy.

Mahalo for the opportunity to testify,

Maddalynn Seseapasara

SB-3125

Submitted on: 1/31/2024 7:49:05 PM

Testimony for HHS on 2/7/2024 1:00:00 PM

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

Comments:

Aloha Chairs San Buenaventura and Keohokalole, Vice Chairs Aquino and Fukunaga, and members of the committees,

As a public health professional, I write in **STRONG SUPPORT of SB3125**, which would increase access to recommended medical care and life-saving medications for minors 14-17.

This bill would give 14-17 year olds the ability to consent for life-saving HIV prevention medications called Pre-exposure Prophylaxis or PrEP. The Centers for Disease Control and Prevention strongly recommend PrEP as one of the most effective biomedical interventions to prevent HIV. The current HRS for minor consent does allow minors to consent to treatment of HIV and other sexually-related diseases but not have access to prevention measures such as PrEP (ironically we can treat them once they get HIV but not provide proven prevention medications).

We now have this life-saving medication, which is covered by insurance, but those 14-17 cannot access without parental consent – which may mean that someone has to decide between sharing intimate information that could impact their familial relationship or getting access to a drug that could prevent a life-threatening disease.

Mahalo for your consideration of this important health issue.

Thaddeus Pham (he/him)

SB-3125

Submitted on: 2/1/2024 10:10:06 AM

Testimony for HHS on 2/7/2024 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Chloe Stewart	Individual	Support	Written Testimony Only

Comments:

Aloha Chairs San Buenaventura and Keohokalole, Vice Chairs Aquino and Fukunaga, and members of the committees,

I strongly support SB3125, which would increase access to medical care for minors 14-17. This bill would give 14-17 year olds the ability to consent for life-saving HIV prevention medications called Pre-exposure Prophylaxis or PrEP. The Centers for Disease Control and Prevention strongly recommend PrEP as one of the most effective biomedical interventions to prevent HIV. The current HRS for minor consent does allow minors to consent to **treatment** of HIV and other sexually-related diseases but **not have access to prevention measures such as PrEP**. Today, young people aged 14-17 cannot access PrEP without parental consent – which may mean that someone has to decide between sharing intimate information that could threaten their familial relationship or getting access to a drug that could prevent a life-threatening disease.

Please pass SB3125 so that our young people have every tool available to support themselves and be healthy.

Thank you for the opportunity to testify

Chloe Stewart

SB-3125

Submitted on: 2/1/2024 11:44:23 AM

Testimony for HHS on 2/7/2024 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Jasper Bang	Individual	Support	Written Testimony Only

Comments:

Aloha Chairs San Buenaventura and Keohokalole, Vice Chairs Aquino and Fukunaga, and members of the committees,

I am a nurse and I **strongly support SB3125**. It would increase access to medical care for minors 14-17, by giving them the ability to consent for **LIFE-SAVING** HIV prevention medications called Pre-exposure Prophylaxis or PrEP. The Centers for Disease Control and Prevention strongly recommend PrEP as one of the most effective biomedical interventions to prevent HIV.

The current HRS for minor consent does allow minors to consent to treatment of HIV and other sexually-related diseases, but not have access to prevention measures such as PrEP. My coworkers and I in healthcare can treat these 14-17 year olds once they *get* HIV but not provide proven medication to prevent them from contracting this deadly virus.

We now have this life-saving medication, which is covered by insurance, but those 14-17 cannot access without parental consent – which may mean that someone has to decide between sharing intimate information that could impact their familial relationship or getting access to a drug that could prevent a life-threatening disease.

Please, *please* pass SB3125 so that our young people have every tool available to support themselves and be healthy.

Thank you for the opportunity to testify,

Jasper Bang

SB-3125

Submitted on: 2/2/2024 6:27:27 AM

Testimony for HHS on 2/7/2024 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Nikki-Ann Yee	Individual	Support	Written Testimony Only

Comments:

Aloha Chairs San Buenaventura and Keohokalole, Vice Chairs Aquino and Fukunaga, and members of the committees,

I strongly support SB3125, which would increase access to medical care for minors 14-17. This bill would give 14-17 year olds the ability to consent to life-saving HIV prevention medications called Pre-exposure Prophylaxis or PrEP. It is vital for them to have access to this life-saving medication and do so without parental consent, so they are not forced to decide between sharing intimate information that could impact their familial relationship or getting access to a drug that could prevent a life-threatening disease.

Please pass SB3125 so that our youth have every tool available to support themselves and be healthy. Mahalo for the opportunity to testify.

SB-3125

Submitted on: 2/3/2024 2:00:14 PM

Testimony for HHS on 2/7/2024 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Erin Furuichi	Individual	Support	Written Testimony Only

Comments:

Aloha Chairs San Buenaventura and Keohokalole, Vice Chairs Aquino and Fukunaga, and members of the committees,

I strongly support SB3125, which would increase access to medical care for minors 14-17. This bill would give 14-17 year olds the ability to consent for life-saving HIV prevention medications called Pre-exposure Prophylaxis or PrEP. The Centers for Disease Control and Prevention strongly recommend PrEP as one of the most effective biomedical interventions to prevent HIV. The current HRS for minor consent does allow minors to consent to treatment of HIV and other sexually-related diseases but not have access to prevention measures such as PrEP (ironically we can treat them once they get HIV but not provide proven prevention medications).

We now have this life-saving medication, which is covered by insurance, but those 14-17 cannot access without parental consent – which may mean that someone has to decide between sharing intimate information that could impact their familial relationship or getting access to a drug that could prevent a life-threatening disease.

Please pass SB3125 so that our young people have every tool available to support themselves and be healthy.

Thank you for the opportunity to testify

Erin Furuichi

SB-3125

Submitted on: 2/2/2024 2:53:47 PM

Testimony for HHS on 2/7/2024 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Mary Smart	Individual	Oppose	Written Testimony Only

Comments:

Parents must be involved in medical care decisions of minors. Government has no right to usurp the authority related to guardianship from parents for these critical, life altering decisions.

Do not pass this bill.

Testimony in Opposition to SB 3125
(companion bill to HB 2436)

Aloha Senators,

I am writing in *opposition* to the proposed amendments to Hawaii Revised Statutes, Chapter 577A: Legal Capacity of Minor Regarding Medical Care, Sections 577A-1 Definitions, 577A- 2 Consent valid, 577A-3 Providing information, and 577A-4 Financial Responsibility; counseling as stated in SB 3125: Relating To Medical Care For Minors.

This bill defines minors as persons of age fourteen to seventeen and removes the informed consent of a parent, custodian, guardian, and spouse of minors with regard to “medical care and services,” as defined in this bill as the “diagnosis, examination, and administration of medication in the prevention or treatment of sexually transmitted infections, pregnancy, and family planning services.”

The traditional family unit is comprised of parents and their children. Court appointed custodians or guardians of minor children comprise a non-traditional family unit. Hawaii is largely comprised of traditional family units. Parental consent is the broad and constitutionally protected authority of parents to make decisions affecting the care, health, and welfare of their children until the age of majority. Parents are responsible for their child’s medical, physical, mental, emotional, social, and educational well-being. Parental discretion and decisional authority (custodian and guardian authority likewise) are fundamental to the family unit and promotes family governance. Adolescent decision making develops within this framework of the family unit and includes their ability to make moral cognitive choices, sound judgment determinations, and develop moral authority. However, the growth and maturity of an adolescent *varies* biologically and *varies* amongst their peers. There is no concrete age line of demarcation to determine when a minor, an older adolescent, is competent and mature enough to independently fulfill the decision-making criteria for a valid informed consent. Parents, custodians, and guardians protect, guide, provide for, and are the safeguards for their children legally until the age of eighteen and yet this surpasses well beyond legal definition.

In Section 577A-1 [3], the definition of a minor person from age fourteen to age seventeen *does not include any proper state photo identification requirements to determine the age of a minor*. Proper state photo identification is required to be presented for any medical care and service provided by health care providers. In lieu of a state photo ID, a birth certificate would also certify a minor’s age. Student photo identification is not an acceptable form of identification as it only identifies the education enrollment of a student and does not certify the actual age of a minor.

Applying this definition of a minor and the exclusion of informed parent, custodian, or guardian consent would also affect children with special needs, learning disabilities, and/or intellectual disabilities who are entirely dependent and reliant on the care and advocacy of their parents,

custodians, or guardians. The American Academy of Pediatrics, Committee on Bioethics, lists the elements of informed consent and practical aspects of assent in their article, *Informed Consent in Decision-Making in Pediatric Practice*, published in 2016.¹ How can such a minor with special needs, learning disabilities, and/or intellectual disabilities be independently able to adequately comprehend the necessary elements of informed consent for medical decision-making with appropriate awareness and assent? The parents of students with disabilities enrolled in public schools are required to consent to an Individualized Educational Plan. There is legal precedence and ethical arguments that also apply to parental, custodian, and guardian consent with regards to their medical care and services.

Under 577A-2 [a], a minors consent to said medical care and services “*shall be valid and binding as if the minor had achieved the age of majority ... shall be deemed to have, and shall have the same legal capacity to act, and the same legal obligations with regard to the giving of consent to hospitals, clinics, or licensed health care providers for the provision of medical care and services as a person of full legal age and capacity, the infancy of the minor and any contrary provisions of law notwithstanding.*” Full legal age or age of majority is eighteen. To be deemed as full legal age and capacity implies the capacity in legal competence. There are differences in competencies in minors, ages fourteen to seventeen, and overall deficiency in legal competencies. The terms “shall be valid and binding, shall be deemed to have, and shall have the same legal capacity” denotes enforcement without dissent and proper determination of competency.

Section 577A-2 [c] also removes informed consent of a spouse. HRS 572-1.7 [d,e] says the rights, benefits, protections, and responsibilities created by the civil union or reciprocal beneficiary relationship shall be continuous through the marriage... any rights, benefits, protections, and responsibilities created by the solemnization of a marriage that are *not included* within the reciprocal beneficiary relationship *shall be recognized* as of the date of marriage. Spouses have the right to informed consent. Interestingly, 572-2 requires a written consent of a parent or guardian for a person under the age of eighteen shall accompany a marriage application and the minimum age of marriage is sixteen. In addition, the Uniform Child-Custody Jurisdiction and Enforcement Act, HRS 538A-102, defines a child as “an individual who has not attained eighteen years of age.”

Sections 577A-2 [d] and 577A-3 [a,b] give licensed health care providers the responsibility to ensure ‘covered entities’ are notified to not disclose minor initiated medical care and services. Section 577A-3 [a,b] further clarifies that licensed health care providers may at their discretion after obtaining a minors consent may inform or disclose information to a parent, custodian, guardian, or spouse. Licensed health care providers are not surrogate decision makers for our minors nor is it currently legally binding.

In Section 577A-4 [b] regarding individual counseling, it says “the counseling shall seek to open the lines of communication between parent and child.” For a child, parental consent and participation is a constitutional right which requires inclusion.

Section 577A-4 [a] gives the financial responsibility for the costs of medical care and services to the minor and not to parents, spouse, custodian or guardian. Section 577 A-5 says that the recovery of debt made pursuant to this chapter shall not commence until minor reaches age of majority, eighteen. A health care provider may not be paid for up to four years or more. If a minor is deemed of full legal age and capacity of eighteen, then the minor is financially responsible to begin paying the costs of their debt.

Lastly, Section 577A-4 [c] enforces covered entities to *establish policies and procedures to not disclose minor initiated medical care and services*. Subsection [d] would allow the minor or *licensed health provider* to notify the covered entity to *not disclose information to a spouse, parent, custodian, or guardian*. The covered entity may require a written statement of disclosure with notice of harm to minor and may request an alternative communication means or alternate locations. A licensed health care provider will be able to submit a minor initiated medical care and services claim(s) on behalf of the minor to their parent's health coverage plan. Either the minor or the health care provider would be able to notify the health plan to not disclose claim information to their parents, custodian, guardian, or spouse nor bill them. This subversive activity is intentional, unethical and under the guise of political justification.

For the reasons detailed above and being a parent, a resident of this state, I ask you to vote No and deny the passage of SB 3125.

Respectfully submitted,

Mrs. Sharon Martin

References:

¹ *Informed Consent in Decision-Making in Pediatric Practice, Committee on Bioethics, PEDIATRICS, Volume 138, number 2, August 2016: e20161484*

When Does a Minor's Legal Competence to Make Health Care Decisions Matter?, Weithorn, Lois PhD, JD, PEDIATRICS, volume 146, number s1, August 2020:e20200818G

Self-Determination Is Not an Appropriate Model for Understanding Parental Permission and Child Assent, Denham, Joseph E. DO, JD, and; Nelson, Robert M. MD, PhD, Anesthesia & Analgesia 94(5): p1049-1051, May 2002.

LATE

SB-3125

Submitted on: 2/6/2024 9:30:43 PM

Testimony for HHS on 2/7/2024 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Dara Yatsushiro	Individual	Oppose	Written Testimony Only

Comments:

SB3125 deliberately circumvents parental consent - STRONGLY OPPOSE!!!