

STATE OF HAWAII | KA MOKU'ĀINA 'O HAWAI'I
OFFICE OF THE DIRECTOR
DEPARTMENT OF COMMERCE AND CONSUMER AFFAIRS
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JOSH GREEN, M.D.
GOVERNOR | KE KIA'ĀINA

SYLVIA LUKE
LIEUTENANT GOVERNOR | KA HOPE KIA'ĀINA

NADINE Y. ANDO
DIRECTOR | KA LUNA HO'OKELE

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

Testimony of the Department of Commerce and Consumer Affairs

**Before the
House Committee on Consumer Protection & Commerce
Wednesday, March 20, 2024
2:00 p.m.
Conference Room 329 and Videoconference**

**On the following measure:
S.B. 2605, S.D. 2, H.D. 1, RELATING TO HEALTH CARE**

Chair Nakashima and Members of the Committee:

My name is Ahlani Quiogue, and I am the Licensing Administrator of the Department of Commerce and Consumer Affairs (Department) Professional and Vocational Licensing Division (Division). The Division limits its comments to section 10 of this bill .

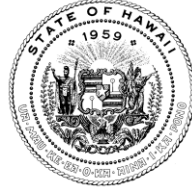
The purposes of this bill are , beginning January 1, 2026 to: (1) require health insurers, mutual benefit societies, and health maintenance organizations to provide health insurance coverage for various sexual and reproductive health care services; (2) apply this coverage to health benefits plans under the Hawai'i Employer-Union Health Benefits Trust Fund; (3) require the Insurance Division of the Department of Commerce and Consumer Affairs to submit a report to the Legislature; and (4) establish a Reproductive Health Care Working Group.

The Division lacks the subject matter expertise necessary to be a valuable member on the working group. The Division's knowledge is limited to consumer

protection through standardizing and enforcing license requirements of professions, trades, and vocations. It is not the foremost expert on health care services and/or health insurance coverage for various sexual and reproductive health care services.

Given this, the Division respectfully requests that it be removed as a member from the working group.

Thank you for the opportunity to testify on this bill.



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Wednesday, March 20, 2024

2:00 p.m.

State Capitol, Conference Room 329 and via Video Conferencing

On the following measure:

S.B. 2605, S.D. 2, H.D. 1, RELATING TO HEALTH CARE

Chair Nakashima and Members of the Committees:

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

The purpose of this bill is, beginning January 1, 2026, to require health insurers, mutual benefit societies, and health maintenance organizations to provide health insurance coverage for various sexual and reproductive health care services, apply this coverage to health benefits plans under the Hawai'i Employer-Union Health Benefits Trust Fund, require the Insurance Division of the Department to submit a report to the Legislature, and establish a Reproductive Health Care Working Group.

We are concerned that use of the term "medically-appropriate" in, sections 4 and 6 of the bill, may be potentially construed to circumvent the medical necessity provisions in Hawaii Revised Statutes section 432E-1.4, which apply to other services. Moreover,

“medically-appropriate” is vague and undefined, which will result in confusion and statutory interpretation issues.

The Department notes that it is unclear whether the amendments in sections 2 through 7 of this bill, which require health plans to provide benefits for various sexual and reproductive health care services, would be construed as “in addition to the essential health benefits” within the meaning of 45 Code of Federal Regulations (CFR) § 155.170(a), or subject to defrayment provisions under 45 CFR § 155.170(b) which apply to benefits “in addition to the essential health benefits.”

Finally, this bill proposes in Part II, a Reproductive Health Care Working Group, to be chaired by the Insurance Commissioner. We support the intent of understanding reproductive healthcare issues. However, the subject matter of this working group goes well beyond the expertise of the Insurance Division’s staff such that it would be challenging for the Insurance Division to effectively coordinate this working group. Other working group members may have expertise in subjects such as health care services, telehealth, and workforce issues, and may be better suited to coordinate the working group.

Thank you for the opportunity to testify.



The House Committee on Consumer Protection & Commerce
March 20, 2024
2:00 PM
Room 329

RE: SB 2605 SD2, HD1 Relating to Health Care

Attention: Chair Mark Nakashimai, Vice Chair Jackson Sayama and members of the Committee

The University of Hawaii Professional Assembly (UHPA) supports **SB 2605 SD2, HD1 Relating to Health Care**, and specifically the establishment of a reproductive health care working group, as outlined in SB 2605 SD2, HD1 Relating to Health Care, Section 10.

We believe that conducting the proper due diligence on any insurance mandate is appropriate, and a working group to study the requirement of mandating insurance coverage for various sexual and reproductive health care services is the appropriate venue for that to take place.

As a part of the working group's due diligence, there should be an analysis done on any potential impact mandating this type of benefit coverage could have on the State's Prepaid Health Care Act. If this insurance mandate moves forward, it is important that industry experts and key stakeholders convene to ensure that this would not jeopardize in any way the ERISA exemption currently in place for our Prepaid Health Care law.

Thank you for the opportunity to provide testimony in support of **SB 2605, SD 2, HD 1**.

Respectfully submitted,

Christian L. Fern
Executive Director

JOSH GREEN, M.D.
GOVERNOR

SYLVIA LUKE
LIEUTENANT GOVERNOR



JADE T. BUTAY
DIRECTOR

WILLIAM G. KUNSTMAN
DEPUTY DIRECTOR

STATE OF HAWAII
KA MOKU'ĀINA O HAWAII'Ī
DEPARTMENT OF LABOR AND INDUSTRIAL RELATIONS
KA 'OIHANA PONO LIMAHANA

March 20, 2024

To: The Honorable Mark M. Nakashima, Chair,
The Honorable Jackson D. Sayama, Vice Chair, and
Members of the House Committee on Consumer Protection & Commerce

Date: Wednesday, March 20, 2024
Time: 2:00 p.m.
Place: Conference Room 329, State Capitol

From: Jade T. Butay, Director
Department of Labor and Industrial Relations (DLIR)

Re: S.B. 2605 SD2 HD1 RELATING TO HEALTH CARE

The **DLIR supports** Part II of this measure. The DLIR supports preventive care and coverage as established in Hawaii's Prepaid Healthcare Law, Chapter 393, and Hawaii's Essential Health Benefit's Benchmark Plan as approved by the Centers of Medicare and Medicaid Services. For further analysis on reproductive health care benefits not covered in the Prepaid Healthcare Law and Hawaii's Benchmark Plan, DLIR is willing to participate in the reproductive healthcare working group outlined in the resolution with participation from the Director or designee and the Administrator of the Disability Compensation Division.

JOSH GREEN, M.D.
GOVERNOR

SYLVIA LUKE
LIEUTENANT GOVERNOR



JADE T. BUTAY
DIRECTOR

WILLIAM G. KUNSTMAN
DEPUTY DIRECTOR

STATE OF HAWAII
KA MOKU'ĀINA O HAWAII
DEPARTMENT OF LABOR AND INDUSTRIAL RELATIONS
KA 'OIHANA PONO LIMAHANA

LATE

March 20, 2024

To: The Honorable Mark M. Nakashima, Chair,
The Honorable Jackson D. Sayama, Vice Chair, and
Members of the House Committee on Consumer Protection & Commerce

Date: Wednesday, March 20, 2024
Time: 2:00 p.m.
Place: Conference Room 329, State Capitol

From: Jade T. Butay, Director
Department of Labor and Industrial Relations (DLIR)

Re: S.B. 2605 SD2 HD1 RELATING TO HEALTH CARE

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SB-2605-HD-1

Submitted on: 3/18/2024 3:09:53 PM

Testimony for CPC on 3/20/2024 2:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Doris Segal Matsunaga	Indivisible Hawaii Healthcare Team	Support	Written Testimony Only

Comments:

Indivisible Hawaii Healthcare Team supports SB 2605 SD2 HD1

CEASE FIRE NOW! - An Open Letter from Health Workers from Hawai'i

(Signatories updated as of March 17, 2024)

We health care and public health workers and future health workers of Hawai'i call for an immediate ceasefire in Israel's assault on Palestine. As health workers, we hold all lives to be precious, and we cannot be silent. We therefore condemn Hamas's October 7 killings of Israeli civilians. Israel's assault on Gaza has gone beyond retaliation for October 7, however, and fulfills the United Nation's definition of genocide, which

“means any of the following acts committed with intent to destroy, in whole or in part, a national, ethnical, racial or religious group, as such:

- a. Killing members of the group;*
- b. Causing serious bodily or mental harm to members of the group;*
- c. Deliberately inflicting on the group conditions of life calculated to bring about its physical destruction in whole or in part;*
- d. Imposing measures intended to prevent births within the group;*
- e. Forcibly transferring children of the group to another group.”*

Israel's leaders openly stated that the people of Gaza would be denied food, water, electricity, and fuel. Prior to October 7, Gaza, as an occupied territory, was dependent on 500 trucks per day of supplies, including medicines. It goes without saying that the denial of food and water leads to death. With its air and ground assault, Israel has destroyed half the structures in Northern Gaza. By targeting mosques, schools, universities, bakeries, refugee camps, residences, and infrastructure, Israel is destroying Gaza's civil society and ecology. As health workers, we find the targeting of hospitals the most depraved.

Hospitals are humanity's refuge for the ill and injured. Hospitals are where babies are born and where the sick seek comfort. Israel's assault on hospitals, on patients, on health care workers are crimes against humanity. Without medicines, Gaza's doctors have been operating on patients without anesthesia. Without electricity, they have been operating with cellphone lights. With the Israeli military invasion of the Al-Shifa Hospital, Gaza's largest hospital, patients on life support and babies in incubators died.

In the seven weeks since October 7, of 2.3 million Gazans, over 14,000 have been killed, 40% of them children. That is, over half the killed have been women and children. That is, more than 1 in 200 people in Gaza have been killed. How would you feel if that happened in your neighborhood, and half the houses were razed? Numerous Palestinian health workers have been killed, many as they tended to patients, others while they were at home with their families.

We health workers of Hawai'i are sick to our stomachs of the killing. We decry genocide. We want peace, coexistence, and equal rights as humans. We call for a ceasefire now.

LIST OF SIGNATORIES AS OF MARCH 17, 2024, 8:00 AM

1. Seiji Yamada, MD, MPH
2. Arcy Imasa, MD, Family Medicine
3. Richard Rothschiller, Doctor of Psychology
4. Kalamaokaaina Niheu, Family Medicine
5. 96701, Couples and Family Therapist
6. Dennis Miller, Movement, Yoga, Massage
7. Thomas Quattlebaum, MD, Family Medicine
8. K.W., MD, PhD
9. Mary, retired RN
10. Doris Segal Matsunaga, MPH
11. Frederick M. Burkle, Jr., MD, MPH, DTM, Global Scholar, Woodrow Wilson International Center for Scholars
12. Shandhini Raidoo, MD, MPH
13. Celina Hayashi, MD
14. Jean McDermott, Public Health Nurse
15. Peggy Gwi-Seok Hong, Iyengar Yoga Teacher and Yoga Therapist
16. Christina Marzo, MD, MPH, FAAFP
17. Wesley Palmer, MD, Family Medicine
18. JoAnnTsark, MPH, Educator
19. Daniel Saltman, MD, Internal Medicine
20. M.P., Family Medicine
21. Kristine Qureshi, RN
22. Krystina Begonia, MD, Family Medicine
23. Joanne Amberg, CNM MSN MPH
24. Carlyn Gresham, Retired Neuro-Fitness Trainer
25. Sharon, Medical Student
26. Jill Omori, Family Medicine
27. Victoria Fox-Behrle, MD, MPH
28. Rachel Gorenflo, MD
29. Diana, PhD, Health Care Policy
30. Leimomi Kanagusuku, MD
31. Kyle DeBoy, DO, MPH
32. Kaitlynn Ebisutani, MD
33. Ricardo C. Custodio, MD, MPH
34. May Rose Dela Cruz, Public Health Researcher
35. K.G., MD, FM
36. Winona Kaalouahi Lee, MD, Pediatrics and Native Hawaiian Health
37. M.S., MD, MPH
38. Sarah Racsa, MD, Family & Geriatric Medicine
39. Ann Chang, MD, MPH
40. Olivia Manayan, MD, MPH
41. Daniel Ross, RN
42. Matthew Rogers, MD, Emergency Medicine
43. Sarah, Medical Student
44. Sarah, Medical Student
45. Anela Johnson, Medical Student
46. Ana Danko, Medical Student
47. M.L., Molecular Biology
48. Cynthia Kim, Clinical Social Work
49. Selena Vanapruks, Medical Student
50. Monet Cheung, MD, Emergency Medicine, Internal Medicine
51. Grace Alvaro Caligtan, Sexual and Reproductive Health Educator
52. Lucia Xiong, MD

53. Sydney, Medical Student
54. Justin Cheng, MD, Plastic Surgery
55. Sheehan, MBA, Yoga Teacher
56. Bruce Shimoda, MA, MS, Retired Administrator
57. Ashley, Medical Student
58. Virginia. M. Tanji
59. Emily Unebasami, Medical Student
60. Russ Henrie, Psychologist
61. Lauren, Medical Student
62. John A. H. Tomoso, MSW, ACSW & Episcopal Priest
63. Brooke, Medical Student
64. Scott, Medical Student
65. Eileen McDermott, Nurse Practitioner
66. Kelsi Chan, MD
67. Lucas Morgan, Doctor of Psychology
68. Anna-Kaelle Ramos, Medical Student
69. Michelle Kimura, Medical Student
70. Ashley Lee, Medical Student
71. Jeffrey Wil Hayashi, Medical Student
72. Michael, Clinical Psychologist
73. E., MD, MPH
74. Jonathan, Medical Student
75. Elisabeth Young, MD, MPH
76. Christine Chan, MD, Family Medicine
77. Stephanie, Medical Student
78. Helen Kwon, Medical Student
79. Erika, Medical Student
80. Margo, Medical Student
81. Cassie Tarleton, MD, MPH
82. Marisa Woo, Medical Student
83. Kylie, Medical Student
84. Simone Evett, Medical Student
85. Roxana Hu, Medical Student
86. N.F., Education
87. Yelena, Nurse
88. Taylor, Diabetes
89. Sarah H., Medical Student
90. Michael, P.T., M.S., Board Certified Geriatric Clinical Specialist
91. M.G.T.C., BSN
92. Kiersten Chong, Medical Student
93. Me Fuimaono-Poe, Family Nurse Practitioner
94. Ashlee H., RN
95. Catherine F., LSW
96. Kathy, LCSW Healthcare Social Worker
97. Laura Muller, Former ATC
98. Ann Collins, Mental health Therapist
99. Shalom, Paramedic
100. Laura Dvorak, Medical Social Worker
101. R.K., Physician
102. Y.W., Nurse
103. Jessica Redford, RN
104. Laulani Teale, MPH, Indigenous Community Health Development, Laau Lapaau
105. Noelani Ahia, Acupuncture/Chinese Herbalist/Organizer
106. Alexis, Solicitor

107. L.S.K., Social Work/Mental Health
108. Heidi Kray, Psychology
109. Joshua Preciado, Social Work Student
110. N.M., Social Work
111. T.T., MD
112. D.L., Family Medicine
113. Kimberly Nagamine, MD OB/GYN
114. Jade, Mental Health Support
115. Laurel Mei-Singh, Public Health
116. Bliss Kaneshiro, MD, MPH
117. Arlene Kiyohara, MD, Pediatrics
118. Emily K. Jones, MD, Internal Medicine-Geriatrics
119. Ryan Johal, MD
120. Philip Verhoef, MD, PhD, ICU physician
121. Alyssa Peric, MD
122. Komal Soin, Physician
123. P.K., MD, Psychiatry Resident
124. Robin, Nurse Practitioner
125. Kamu Andrade, MD
126. Rui Morimoto, MD, Family Medicine
127. Andrew Ruege MD, Physician
128. Jerry Liu, MD
129. Ashley Baldauf, DO, Family Medicine Physician
130. Sara McAllaster, MD, Resident
131. Roxanne E., Medical Student
132. S.C., Medical Student
133. Lisa Abbott, APRN
134. Olivia Kapon, MD
135. Anna Davide, Medical Student
136. Nancy Yang, MD, OBGYN Resident Physician
137. Leilani Maxera, MPH, LCSW
138. Jessica Palomino, RN BSN
139. Whitney Ko, RN
140. Ashley Amas, DACM, LAc
141. Antonia Wollert, Licensed Professional Counselor/ Intern-LMHC
142. Ahmed A, Computer Science Student
143. A. Siu, Holistic Healthcare
144. Kathy Southard, LCSW
145. Daria Cassese, Nurse
146. Nicole T., RN
147. Ellen Del Bene, Registered Nurse
148. Shannon, Dental hygienist
149. Darcy Attisani, Registered Nurse
150. Carrie, BCBA
151. Cherrisse Kawamura, MD
152. David Siemann, Family Medicine Resident
153. Jeanette Qablawi, MD Family Medicine and Integrative Medicine
154. Pia Francisco-Natanauan, MD Adolescent and Young Adult Medicine



To: Hawai'i State House Committee Consumer Protection and Commerce
Hearing Date/Time: Wednesday, March 20th, 2024
Place: Hawai'i State Capitol, Rm. 329 and videoconference
Re: Testimony of Planned Parenthood Alliance Advocates – Hawai'i in strong support of RHEA (SB 2605)

Chair and Members of the Committee,

Planned Parenthood Alliance Advocates strongly supports the Reproductive Health Equity Act (“RHEA”), a critical Women’s Package bill aimed at fortifying ACA sexual and reproductive health preventive services in state law. We respectfully request the committee to adopt two amendments on SB 2605 outlined below.

Ultimately, while RHEA’s language may look long and confusing, the bill is keeping the status quo of current insurance mandates – what RHEA is doing is protecting the people of Hawai'i from reductions at the federal level and through lawsuits by codifying coverage for these preventive services in state law. Every service listed in RHEA is already either mandated under the Affordable Care Act or the state benchmark plan. Since most of the HI Prepaid Care plans are tied to the state benchmark plans and the ACA preventive services as an essential health benefit, they also already cover RHEA’s mandated services. Plus, nearly all insurers under the HI Prepaid Care Act were already surveyed in the auditor’s report.

Not only do all these insurance plans already require RHEA’s mandates, they also cover these services without cost-sharing. In the 2023 Auditor’s report, insurers confirmed that these cost-sharing provisions would likely have insignificant impacts on their budgets. While covering these costs will likely have little impact on insurers, RHEA’s no cost-sharing provisions will be indispensable to patients, who will benefit immensely from eliminating cost sharing. In other states that have eliminated cost-sharing for similar services, like Washington, Oregon, and California, the federal government has not determined these services to be new mandates that would require defrayal.

Respectfully, PPAA requests two amendments:

- In the Health & Homelessness committee, PrEP, PEP, HPV, and abortion were removed from the list of mandated preventive services. While we were deeply disappointed to see the removal of abortion and PEP, our understanding was that these removals were intended to reflect current ACA-mandated services and being extremely cautious to avoid Hawaii losing its ERISA exemption. If the goal is to reflect the ACA, as the committee suggested, it is critical to note that the [ACA already requires no cost-sharing coverage for PrEP and HPV](#). This also means these services are also mandated under the Prepaid Care Act plans. Adding these two services back into the bill would be reflective of the current federal mandates, and we urge the committee to do so.
- PPAA also requests amending the workgroup to be more flexible to diverse community input. Instead of listing specific organizations assigned to the workgroup, we recommend



Alliance Advocates - Hawai'i

changing the language to be flexible and open to a greater variety of community members. Here is the list we recommend (*changes in italics*):

- *A representative from an organization representing reproductive health care providers;*
- *A representative from an organization with expertise in legal issues surrounding preventive services and sexual and reproductive health care;*
- A member of the Hawaii State Bar Association with expertise in labor and employment law;
- *Two representatives from direct-service reproductive health care specialists providing the preventive services listed in RHEA.*

RHEA is unlikely to cause Hawai'i to lose its ERISA exemption

As the Insurance Commissioner noted in the Health & Homelessness committee hearing, Prepaid Care Act plans already must comply with the preventive services ACA mandate (it is on their list of 7 essential health benefits) and must be in line with the state benchmark plan mandates. As such, we believe RHEA would not qualify as substantial changes such that this would revoke our state's ERISA's exemption, particularly because revocation would require an act of Congress. Initially, the ERISA exemption was designed to allow Hawai'i to have coverage mandates even beyond the federal level – the intent was never for the Prepaid Act to prevent the implementation of state insurance coverage mandates. We believe that RHEA is another example of our state ensuring that Hawai'i safeguards their strong insurance protections.

All people in Hawai'i – regardless of income, wealth, or type of insurance – should have access to the full range of preventive sexual and reproductive health services at no cost. Thank you for your consideration and support for this important bill.

Jen Wilbur
Hawai'i State Director
Planned Parenthood Alliance Advocates



March 20, 2024

The Honorable Mark M. Nakashima, Chair
The Honorable Jackson D. Sayama, Vice Chair
House Committee on Consumer Protection & Commerce

Re: SB 2605 SD2 HD1 – RELATING TO HEALTHCARE

Dear Chair Nakashima, Vice Chair Sayama, and Members of the Committee:

Hawaii Medical Service Association (HMSA) appreciates the opportunity provide testimony in support with comments for SB 2605 SD2 HD1, which requires health insurers, mutual benefit societies, and health maintenance organizations to provide health insurance coverage for various sexual and reproductive health care services, applies this coverage to health benefits plans under the Hawai‘i Employer-Union Health Benefits Trust Fund, requires the Insurance Division of the Department of Commerce and Consumer Affairs to submit a report to the Legislature, and establishes a Reproductive Health Care Working Group.

HMSA appreciates the legislature’s intent to ensure access to sexual and reproductive healthcare services in Hawaii and we appreciate the continued discussion to strengthen access to these important services for residents across the state.

We respectfully request that a health plan representative be added to the working group.

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

Sincerely,

Dawn Kurisu
Assistant Vice President
Community and Government Relations



HAWAII GOVERNMENT EMPLOYEES ASSOCIATION
AFSCME Local 152, AFL-CIO

RANDY PERREIRA, Executive Director • Tel: 808.543.0011 • Fax: 808.528.0922

The Thirty-Second Legislature, State of Hawaii
House of Representatives
Committee on Consumer Protection and Commerce

Testimony by
Hawaii Government Employees Association

March 20, 2024

S.B. 2605, S.D. 2, H.D. 1 — RELATING TO HEALTH CARE.

The Hawaii Government Employees Association, AFSCME Local 152, AFL-CIO supports the concept of SB 2605, S.D. 2, H.D. 1, Section 10 which establishes a reproductive health care working group.

We find it necessary and appropriate to convene a working group to study the requirement of mandating insurance coverage for various sexual and reproductive health care services. Our concern stems from the potential negative impact mandating coverage could have on the State's Prepaid Health Care Act. Should this type of health insurance coverage be mandated, it is important that industry experts and key stakeholders convene to ensure that this would not jeopardize in any way the ERISA exemption currently in place for Prepaid Health.

Thank you for the opportunity to provide testimony in support of S.B. 2605, S.D. 2, H.D. 1.

Respectfully submitted,

Randy Perreira
Executive Director

LATE

SB-2605-HD-1

Submitted on: 3/19/2024 2:23:36 PM

Testimony for CPC on 3/20/2024 2:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Michael Golojuch Jr	Stonewall Caucus of the Democratic Party of Hawai'i	Support	Written Testimony Only

Comments:

Aloha Representatives,

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 2605 SD 2 HD 1.

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

Mahalo nui loa,

Michael Golojuch, Jr. (he/him)
Chair and SCC Representative
Stonewall Caucus of the Democratic Party of Hawai'i



March 20, 2024

TO: Representative Mark Nakashima, Chair
Rep. Jackson Sayama, Vice Chair and
Members of the Committee on Consumer Protection and Commerce

LATE

From: Jeanne Y. Ohta, Co-Chair
Hawai'i State Democratic Women's Caucus

RE: SB 2605 SD2 HD1 Relating to Health Care

POSITION: SUPPORT with Amendments

The Hawai'i State Democratic Women's Caucus (HSDWC) writes in strong support of SB 2605 SD2 HD1 Relating to Health Care which would ensure that people in Hawai'i have coverage for crucial preventive reproductive health services at zero out-of-pocket cost. This measure would ensure Reproductive Health Equity for All (RHEA).

All people in Hawai'i—regardless of income, gender identity, or type of insurance—should have access to the full range of preventive and reproductive health services at no cost. With abortion no longer protected at the federal level, potential reductions in coverage in the Affordable Care Act (ACA), RHEA is needed to safeguard access to abortion, solidify ACA health benefits in state law, and save money on health care because preventive services are covered.

Without the proper insurance coverage, many individuals will be forced to pay high out-of-pocket costs and delay or forego care altogether, risking their health and economic security. RHEA would fill coverage gaps that affect thousands of people in Hawai'i.

We ask that services removed from the bill by the previous committee be added back. The changes include removing coverage for PrEP, HPV, abortion, and PEP. The ACA already requires no cost-sharing coverage for PrEP and HPV, services mandated under the Prepaid Care Act plans. Adding these two services back would reflect the current federal mandates, and we request that the committee reflect that mandate.

We are disappointed that coverage for abortion and PEP was removed from the bill especially since a 2023 Auditors report confirmed these services would cost insurers very little, but would have a huge impact on patient access to care.

We also ask the committee to amend the workgroup to be more flexible to community input. For example, instead of listing specific organizations, such as the Hawaii Women Lawyers or the American

College of Obstetricians and Gynecologists, we ask that the workgroup be amended to be more open to input from various community members.

This is a priority measure for the Hawai'i State Democratic Women's Caucus. The Hawai'i State Democratic Women's Caucus is a catalyst for progressive, social, economic, and political change through action on critical issues facing Hawaii's women and girls.

We respectfully request that the Committee pass this important measure. Thank you for the opportunity to provide our testimony on SB 2605 SD2 HD1 Relating to Health Care.

LATE

SB-2605-HD-1

Submitted on: 3/19/2024 7:48:04 PM

Testimony for CPC on 3/20/2024 2:00:00 PM

Submitted By	Organization	Testifier Position	Testify
laurel brier	Kauai Women's Caucus	Support	Written Testimony Only

Comments:

Please ensure all Hawai'i's students are provided with the knowledge and tools to make responsible, informed, and empowered decisions. Strong support for SB2605



March 20, 2024

The Honorable Representative Mark M. Nakashima
Chair, Committee on Consumer Protection & Commerce
415 South Beretania Street, Room 329
Honolulu, HI 96813

RE: SB 2605 (Kidani) - SUPPORT

Aloha Chair Nakashima, Vice Chair Sayama, and members of the committee,

I am writing to express Essential Access Health's (Essential Access) support for SB 2605 (Kidani), which would increase access to medical care for minors 14-17.

This bill is integral in ensuring that Hawaii residents maintain access to comprehensive and affordable coverage for essential healthcare services, regardless of what may happen at the federal level. It encompasses a range of vital services such as STI screenings, well-woman visits, and contraceptive supplies, among others, without imposing any out-of-pocket costs on patients.

Essential Access champions and promotes quality sexual and reproductive health care for all. We achieve our mission through an umbrella of programs and services including clinic support initiatives, provider training, advanced clinical research, advocacy, and public awareness campaigns.

Essential Access currently supports the delivery of Title X-funded services that serves more than 14,000 family planning patients annually on O'ahu, Maui, and the Big Island. We support Title X-funded providers to provide a range of family planning services to support the needs of youth and people with low-incomes, such as birth control, STI services, pregnancy testing and options counseling, and cancer screenings.

However, recent amendments made by the previous committee have removed critical services such as abortion, pre-exposure prophylaxis, post-exposure prophylaxis, and human papillomavirus vaccination from the list of covered services. ***These deletions are detrimental to the health and well-being of our residents and should be reversed before this bill becomes law.***

By passing this bill, we're not just protecting access to vital services; we're also taking a stand for our values. Hawaii has long been a leader in reproductive rights and affordable healthcare access. This bill allows us to solidify those values and ensure everyone in our communities has the opportunity to live a healthy and empowered life.

I urge you to support SB2605 **and** re-insert coverage for abortion, pre-exposure prophylaxis, post-exposure prophylaxis, and human papillomavirus vaccination. Let's show the nation that Hawaii stands strong for its people and their healthcare needs – let's make sure everyone is better able to get the care they need and deserve.

Thank you for the opportunity to testify.

Sincerely,

A handwritten signature in blue ink, appearing to read 'Amy', is written over a light blue circular watermark.

Co-CEO
Essential Access Health

SB-2605-HD-1

Submitted on: 3/18/2024 3:08:57 PM

Testimony for CPC on 3/20/2024 2:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Deb Nehmad	Individual	Support	Written Testimony Only

Comments:

Please support this important bill.

Mahalo

Deb Nehmad

SB-2605-HD-1

Submitted on: 3/18/2024 3:22:29 PM

Testimony for CPC on 3/20/2024 2:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Younghee Overly	Individual	Support	Written Testimony Only

Comments:

Thank you for this opportunity to testify in strong support of SB2605 SD2 HD1. Please pass this measure so all people in Hawai'i would have access to the full range of preventive sexual and reproductive health care service at no cost. With abortion no longer protected at the federal level and potential attacks on ACA, we should pass this measure to safeguard access to women's health care and reproductive choice.

SB-2605-HD-1

Submitted on: 3/18/2024 4:01:14 PM

Testimony for CPC on 3/20/2024 2:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Andrew Crossland	Individual	Oppose	Written Testimony Only

Comments:

I **strongly oppose** this Bill and I urge all committee members to vote **NO**.

SB-2605-HD-1

Submitted on: 3/18/2024 4:27:44 PM

Testimony for CPC on 3/20/2024 2:00:00 PM

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

Comments:

Aloha Chair Nakashima, Vice Chair Sayama, and CPC Committe Members,

As a public health professional, I write in **STRONG** Support of SB2605 SD2 HD1, which would expand access to recommended preventive services, thereby strengthening the health of communities statewide.

This bill would help guarantee Hawai'i residents continue to have comprehensive and affordable coverage for essential sexual and reproductive healthcare services. That means services like STI screenings, well-woman visits, abortion care, PrEP, contraceptive supplies, and more – all without any out-of-pocket costs for patients. The fight for affordable healthcare has been ongoing for years, and with recent changes at the federal level, continued patient access to and affordability of such critical services are more uncertain than ever.

Hawai'i has long been a leader in reproductive rights and affordable healthcare access. This bill allows us to solidify those values and ensure everyone in our communities has the opportunity to live a healthy and empowered life.

Mahalo for your consideration of this important bill.

Thaddeus Pham (he/him)

SB-2605-HD-1

Submitted on: 3/18/2024 8:37:56 PM

Testimony for CPC on 3/20/2024 2:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Patti Cook	Individual	Support	Written Testimony Only

Comments:

Strongly Support and MAHALO. Patti Cook 808-937-2833

Waimea, Island of Hawai'i

SB-2605-HD-1

Submitted on: 3/19/2024 12:13:51 AM

Testimony for CPC on 3/20/2024 2:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Barbara Shimei	Individual	Support	Written Testimony Only

Comments:

IN SUPPORT

SB-2605-HD-1

Submitted on: 3/19/2024 1:14:44 AM

Testimony for CPC on 3/20/2024 2:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Angel M. Willey, MD	Individual	Support	Written Testimony Only

Comments:

Please accept my written testimony in support of this bill.

Thank you so much,

Angel Willey, MD

OBGYN Honolulu

SB-2605-HD-1

Submitted on: 3/19/2024 7:56:35 AM

Testimony for CPC on 3/20/2024 2:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Amanda Allison	Individual	Support	Written Testimony Only

Comments:

Aloha Chair Nakashima, Vice Chair Sayama, and members of the committee:

I am writing in strong support of SB2605, a crucial measure for safeguarding the health and well-being of individuals across Hawaii.

This bill is integral in ensuring that Hawaii residents maintain access to comprehensive and affordable coverage for essential healthcare services, regardless of what may happen at the federal level. It encompasses a range of vital services such as STI screenings, well-woman visits, and contraceptive supplies, among others, without imposing any out-of-pocket costs on patients.

However, recent amendments made by the previous committee have removed critical services such as abortion, pre-exposure prophylaxis, post-exposure prophylaxis, and human papillomavirus vaccination from the list of covered services. *These deletions are detrimental to the health and well-being of our residents and should be reversed before this bill becomes law.* In fact, HIV pre-exposure prophylaxis and post-exposure prophylaxis can prevent a fatal disease, and the human papillomavirus vaccination can prevent cancer. Why wouldn't we give the people of our state the fullest possible access to these services?

By passing this bill, we're not just protecting access to vital services; we're also taking a stand for our values. Hawaii has long been a leader in reproductive rights and affordable healthcare access. This bill allows us to solidify those values and ensure everyone in our communities has the opportunity to live a healthy and empowered life.

I urge you to support SB2605 **and** re-insert coverage for abortion, pre-exposure prophylaxis, post-exposure prophylaxis, and human papillomavirus vaccination. Let's show the nation that Hawaii stands strong for its people and their healthcare needs – let's make sure everyone is better able to get the care they need and deserve.

Mahalo!

SB-2605-HD-1

Submitted on: 3/19/2024 8:16:52 AM

Testimony for CPC on 3/20/2024 2:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Anne Leake	Individual	Support	Written Testimony Only

Comments:

Aloha. My name is Anne Leake and I reside in Kaneohe. I am I retired nurse practitioner and practiced in federally-funded community health centers in Hawaii for 30 years. All Hawaii citizens deserve access to these needed services. Mahalo.

To: Hawaii State House Committee on Consumer Protection & Commerce
Hearing Date/Time: Wednesday, March 20, 2024, 2:00pm
Place: Hawaii State Capitol, CR 329 & Videoconference
Re: Judith Ann Armstrong supports SB2605 SD2 HD1 Relating to Health Care

Dear Chair Rep. Rep. Mark M. Nakashima, Vice Chair Rep. Jackson D. Sayama and members of the Committee on Consumer Protection & Commerce.

I, Judith Ann Armstrong, support SB2605 SD2 HD1 Relating to Health Care, which requires insurers to provide coverage for various sexual health and reproductive services.

Preventative health measures including well-woman visits, patient education and counseling, and screening services, are the cornerstone of effective medical care. These interventions have been shown to reduce disease burden and improve health outcomes. Services outlined in this bill, including counseling and screening for sexually transmitted infections and folic acid supplementation have demonstrated effectiveness and follow recommendations from the Center for Disease Control and United States Preventative Services Task Force.

Eliminating cost-sharing requirements will help ensure that our most vulnerable populations can access these evidence-based interventions. Hawaii has long been at the forefront of providing valuable healthcare services and protecting reproductive rights and SB2605 is an effective step forward to continue this trend.

Thank you for this opportunity to testify in support of SB2605 SD2 HD1.

Sincerely,

Judith Ann Armstrong

SB-2605-HD-1

Submitted on: 3/19/2024 1:04:39 PM

Testimony for CPC on 3/20/2024 2:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Chuck Taylor	Individual	Support	Written Testimony Only

Comments:

Please adopt PPAA's suggested amendments, including adding coverage for PrEP and HPV vaccines back into the bill.

SB-2605-HD-1

Submitted on: 3/19/2024 1:19:13 PM

Testimony for CPC on 3/20/2024 2:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Colleen Rost-Banik	Individual	Support	Written Testimony Only

Comments:

Aloha,

My name is Colleen Rost-Banik, and I am a resident of Honolulu.

I ask that you please support SB2605 SD2 HD1 as all people in Hawai‘i – regardless of income, gender identity, or type of insurance – should have access to the full range of preventive sexual and reproductive health services with no cost sharing. RHEA will safeguard ACA health benefits in state law and save money for the people in Hawai‘i. The 2023 Auditor report on RHEA verified that there will be little-to-no financial impact of RHEA, as all the services are currently covered by health plans. Additionally, RHEA will give more people in Hawai‘i the ability to decide if and when they have children based on what’s best for them and their family’s circumstances. Hawai‘i must continue its leadership in promoting all people’s ability to access the health care they need and deserve, no matter what happens at the federal level.

Mahalo for your consideration,
Colleen Rost-Banik

SB-2605-HD-1

Submitted on: 3/19/2024 1:55:51 PM

Testimony for CPC on 3/20/2024 2:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Mary Kawasaki	Individual	Support	Written Testimony Only

Comments:

I support this bill along with Planned Parenthood Hawaii suggestions for additions to cover HIV Prep by insurance providers and their other proposed additions/amendments.

LATE

SB-2605-HD-1

Submitted on: 3/19/2024 2:45:45 PM

Testimony for CPC on 3/20/2024 2:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Barbara J. Service	Individual	Support	Written Testimony Only

Comments:

- Please do whatever you can to insure reproductive rights for anyone who wants them.

Thank you for allowing me to testify.

Barbara J. Service MSW

Child Welfare Services (ret.)

Kupuna advocate

LATE

SB-2605-HD-1

Submitted on: 3/19/2024 3:32:13 PM

Testimony for CPC on 3/20/2024 2:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Jean Adair-Leland Ph.D.	Individual	Support	Written Testimony Only

Comments:

Please support the following amendments to RHEA:

1. **Add coverage for PrEP and HPV back into RHEA:**
 - **PrEP and HPV were removed from the list of mandated covered preventive services in the Health & Homelessness committee, as well as abortion and PEP.**
 - **We were deeply disappointed to see the removal of abortion and PEP, especially since our benchmark plan already requires coverage of abortion and the 2023 Auditors report confirmed that these services would cost insurers very little money but would have a huge impact on patient access.**
 - **However, the [ACA already requires no cost-sharing coverage for PrEP and HPV](#). This also means these services are mandated under the Prepaid Care Act plans.**
 - **Adding these two services back into the bill would be reflective of the current federal mandates, and we urge the committee to do so.**

1. **Amend the workgroup to be more flexible to community input:**
 - **Instead of listing specific organizations, such as the Hawaii Women Lawyers or the American College of Obstetricians and Gynecologists, we recommend the workgroup be amended to be more flexible and open to input from various community members.**

SB-2605-HD-1

Submitted on: 3/19/2024 9:35:56 PM

Testimony for CPC on 3/20/2024 2:00:00 PM



Submitted By	Organization	Testifier Position	Testify
Bo Breda	Individual	Support	Written Testimony Only

Comments:

My name is Bo Breda and I live in Pahoehoe HI. I am testifying in support of SB2605 but it still needs improvement which is detailed below. Thank you for the opportunity to testify.

- The Reproductive Health Equity Act (RHEA) is a crucial bill that requires insurers to cover a wide range of sexual and reproductive health services with no out-of-pocket cost, including cancer screenings, vasectomy, and other critical preventive care services.
- All people in Hawai'i – regardless of income, gender identity, or type of insurance – should have access to the full range of preventive sexual and reproductive health services with no cost sharing.
- RHEA will safeguard ACA health benefits in state law and save money for the people in Hawai'i. The 2023 Auditor report on RHEA verified that there will be little-to-no financial impact of RHEA, as all the services are currently covered by health plans.
- RHEA will give more people in Hawai'i the ability to decide if and when they have children based on what's best for them and their family's circumstances. Hawai'i must continue its leadership in promoting all people's ability to access the health care they need and deserve, no matter what happens at the federal level.

RHEA is a cost-effective solution

- Protecting and expanding access to sexual and reproductive health is not only the right thing to do, but also cost-effective for consumers and health plans alike.
- The 2023 Auditor report on RHEA verified that there will be little-to-no financial impact of RHEA, as all the services are currently covered by health plans.
- Even though many insurers already cover the services included in RHEA, it is still critical Hawai'i take steps to codify these protections in state law. In 2024, we may see a new federal administration aiming to strip the ACA provisions. Moreover, there are current lawsuits threatening certain ACA preventive services like PrEP or breast cancer screenings. Hawai'i must protect preventive services, no matter what happens on a federal level.
- The services included in RHEA are basic components of comprehensive sexual and reproductive health care and are all associated with significant potential cost savings. That's because providing basic preventive care avoids the need for more expensive treatment and management down the road; for example, early detection of sexually

transmitted infections, diabetes, and cervical cancers lead to significant cost savings to the health system.

RHEA is similar to coverage requirements in other states

- Many other states have already implemented the requirements found in RHEA, including Washington, Oregon, Illinois, and California.
- States that have passed coverage requirements have found that continuing to require health plans to cover existing mandates in the ACA is simple and minimally burdensome.
- They have also determined that passing legislation that includes broader coverage requirements than those included in the ACA does not necessarily create new mandates, because in some cases these coverage requirements simply clarify and codify the state's existing commitment to covering comprehensive, non-discriminatory sexual and reproductive health care.

PPAA requests the following amendments to RHEA:

1. Add coverage for PrEP and HPV back into RHEA:
 - PrEP and HPV were removed from the list of mandated covered preventive services in the Health & Homelessness committee, as well as abortion and PEP.
 - We were deeply disappointed to see the removal of abortion and PEP, especially since our benchmark plan already requires coverage of abortion and the 2023 Auditors report confirmed that these services would cost insurers very little money but would have a huge impact on patient access.
 - However, the [ACA already requires no cost-sharing coverage for PrEP and HPV](#). This also means these services are mandated under the Prepaid Care Act plans.
 - Adding these two services back into the bill would be reflective of the current federal mandates, and we urge the committee to do so.

1. Amend the workgroup to be more flexible to community input:
 - Instead of listing specific organizations, such as the Hawaii Women Lawyers or the American College of Obstetricians and Gynecologists, we recommend the workgroup be amended to be more flexible and open to input from various community members.

Support RHEA to ensure that all people in Hawai'i have access to the care they need!

LATE

SB-2605-HD-1

Submitted on: 3/19/2024 9:39:32 PM

Testimony for CPC on 3/20/2024 2:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Peter Wilson	Individual	Support	Written Testimony Only

Comments:

My name is Peter Wilson and I live in Pahoia HI. I am happy to submit testimony in support of SB 2605 and I have some suggestions for improvements that might be incorporated into the final bill that are detailed at the bottom of my testimony.

- The Reproductive Health Equity Act (RHEA) is a crucial bill that requires insurers to cover a wide range of sexual and reproductive health services with no out-of-pocket cost, including cancer screenings, vasectomy, and other critical preventive care services.
- All people in Hawai'i – regardless of income, gender identity, or type of insurance – should have access to the full range of preventive sexual and reproductive health services with no cost sharing.
- RHEA will safeguard ACA health benefits in state law and save money for the people in Hawai'i. The 2023 Auditor report on RHEA verified that there will be little-to-no financial impact of RHEA, as all the services are currently covered by health plans.
- RHEA will give more people in Hawai'i the ability to decide if and when they have children based on what's best for them and their family's circumstances. Hawai'i must continue its leadership in promoting all people's ability to access the health care they need and deserve, no matter what happens at the federal level.

RHEA is a cost-effective solution

- Protecting and expanding access to sexual and reproductive health is not only the right thing to do, but also cost-effective for consumers and health plans alike.
- The 2023 Auditor report on RHEA verified that there will be little-to-no financial impact of RHEA, as all the services are currently covered by health plans.
- Even though many insurers already cover the services included in RHEA, it is still critical Hawai'i take steps to codify these protections in state law. In 2024, we may see a new federal administration aiming to strip the ACA provisions. Moreover, there are current lawsuits threatening certain ACA preventive services like PrEP or breast cancer screenings. Hawai'i must protect preventive services, no matter what happens on a federal level.
- The services included in RHEA are basic components of comprehensive sexual and reproductive health care and are all associated with significant potential cost savings. That's because providing basic preventive care avoids the need for more expensive

treatment and management down the road; for example, early detection of sexually transmitted infections, diabetes, and cervical cancers lead to significant cost savings to the health system.

RHEA is similar to coverage requirements in other states

- Many other states have already implemented the requirements found in RHEA, including Washington, Oregon, Illinois, and California.
- States that have passed coverage requirements have found that continuing to require health plans to cover existing mandates in the ACA is simple and minimally burdensome.
- They have also determined that passing legislation that includes broader coverage requirements than those included in the ACA does not necessarily create new mandates, because in some cases these coverage requirements simply clarify and codify the state's existing commitment to covering comprehensive, non-discriminatory sexual and reproductive health care.

PPAA requests the following amendments to RHEA:

1. Add coverage for PrEP and HPV back into RHEA:
 - PrEP and HPV were removed from the list of mandated covered preventive services in the Health & Homelessness committee, as well as abortion and PEP.
 - We were deeply disappointed to see the removal of abortion and PEP, especially since our benchmark plan already requires coverage of abortion and the 2023 Auditors report confirmed that these services would cost insurers very little money but would have a huge impact on patient access.
 - However, the [ACA already requires no cost-sharing coverage for PrEP and HPV](#). This also means these services are mandated under the Prepaid Care Act plans.
 - Adding these two services back into the bill would be reflective of the current federal mandates, and we urge the committee to do so.

1. Amend the workgroup to be more flexible to community input:
 - Instead of listing specific organizations, such as the Hawaii Women Lawyers or the American College of Obstetricians and Gynecologists, we recommend the workgroup be amended to be more flexible and open to input from various community members.

Support RHEA to ensure that all people in Hawai'i have access to the care they need!

LATE

SB-2605-HD-1

Submitted on: 3/20/2024 4:51:46 AM

Testimony for CPC on 3/20/2024 2:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Sara Catalano	Individual	Support	Written Testimony Only

Comments:

All people in Hawai‘i – regardless of income, gender identity, or type of insurance – should have access to the full range of preventive sexual and reproductive health services with no cost sharing.

RHEA will give more people in Hawai‘i the ability to decide if and when they have children based on what’s best for them and their family’s circumstances. Hawai‘i must continue its leadership in promoting all people’s ability to access the health care they need and deserve, no matter what happens at the federal level.

The services included in RHEA are basic components of comprehensive sexual and reproductive health care and are all associated with significant potential cost savings. That’s because providing basic preventive care avoids the need for more expensive treatment and management down the road; for example, early detection of sexually transmitted infections, diabetes, and cervical cancers lead to significant cost savings to the health system.

I was deeply disappointed to see the removal of abortion and PEP, especially since our benchmark plan already requires coverage of abortion and the 2023 Auditors report confirmed that these services would cost insurers very little money but would have a huge impact on patient access. Adding these two services back into the bill would be reflective of the current federal mandates, and I urge the committee to do so. RHEA with abortion and PEP will give more people in Hawai‘i the ability to decide if and when they have children based on what’s best for them and their family’s circumstances. Hawai‘i must continue its leadership in promoting all people’s ability to access the health care they need and deserve, no matter what happens at the federal level.

Also, Instead of listing specific organizations, such as the Hawaii Women Lawyers or the American College of Obstetricians and Gynecologists, I recommend the workgroup be amended to be more flexible and open to input from various community members.

Thank you for supporting and codifying reproductive freedom for all.

LATE

SB-2605-HD-1

Submitted on: 3/20/2024 10:59:14 AM

Testimony for CPC on 3/20/2024 2:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Taurie Kinoshita	Individual	Support	Written Testimony Only

Comments:

To the Honorable Committee,

I am writing in strong support of SB 2605 SD2 HD1.

The people of Hawai'i need this resolution to make sure our young people are getting the information they need to stay healthy and to thrive. That's why the Department of Education has worked alongside Planned Parenthood to support this resolution (HCR 222/SCR 189) to study the implementation of various sexual health education policies and standards.

Our state needs to better understand what steps we can take to ensure every student gets access to the information they need, whether that is increasing teacher training, enforcing standards in all schools, or ensuring schools have the resources they need.

Young people should get age-appropriate, medically accurate information and answers to their questions about sex and relationships without being shamed or judged. Young people have the right to receive the information and skills they need to protect their health. Sex education helps protect young people from misinformation they get online and from peers.

Sex education that teaches about relationships, diversity, and self-esteem helps young people grow up to be respectful, confident, and conscientious adults. Young people deserve the information and skills they need to make healthy decisions about sex and relationships, now and in the future. Kids who don't get sex education are more likely to experience unintended pregnancy, STIs, bullying, and unhealthy relationships.

Please pass this crucial bill.

Thank you for your consideration.

Sincerely,

Taurie Kinoshita taurie@hawaii.edu