



STATE OF HAWAII
OFFICE OF WELLNESS AND RESILIENCE
KE KE'ENA KŪPA'A MAULI OLA
OFFICE OF THE GOVERNOR
415 S.BERETANIA ST. #415
HONOLULU, HAWAII 96813

**Testimony in SUPPORT of S.B. 3239
RELATING TO MEDICAL DEBT**

Senator Joy A. San Buenaventura, Chair
Senate Committee on Health and Human Services
Senator Jarrett Keohokalole, Chair
Senate Committee on Commerce and Consumer Protection

Hearing Date: February 12, 2024 at 1:00pm
Room Number: 225

The Office of Wellness and Resilience (OWR) in the Governor's Office **SUPPORTS** S.B. 3239, Relating to Medical Debt. The OWR humbly requests your consideration on some recommended amendments.

Established through Act 291 (Session Laws of Hawai'i 2022) the overall aim of the OWR is to make Hawai'i a trauma-informed state. OWR is focused on is breaking down barriers that impact the physical, social and emotional well-being of Hawai'i's people. The OWR explores avenues to increase access and availability to mental, behavioral, social, and emotional health services and support.

Medical debt can take a serious toll on mental and physical well-being. Individuals with debt are three times more likely to have mental health conditions such as anxiety, stress, or depression.¹ According to the Consumer Finance Protection Bureau, medical debt is the top reason consumers are contacted by debt collectors.² In fact, many physicians and public health researches consider medical debt as an important social determinant of health.³ Although Hawai'i opted in to join Medicaid expansion under the Affordable Care Act, numbers of households remain uninsured, incur medical debt from out of pocket costs for treatments that are not covered by insurance plans, and are financially burdened by increased cost-sharing.

The OWR strongly believes that alleviating medical debt for households in Hawai'i will significantly improve the well-being of these families. We propose adding the following language to S.B. 3239:

1. Ensure that any specific personal information or health data collected is done in compliance with the health insurance portability act and is used for no purpose other

¹ Wiltshire et al. "Problems paying medical bills and mental health symptoms post-Affordable Care Act." AIMS Public Health. May 6, 2020. <http://www.aimspress.com/article/10.3934/publichealth.2020023>.

² *Consumer Experiences with Debt Collection. Findings from the CFPS's Survey of Consumer Views on Debt*, Consumer Finance Protection Bureau, 2017, https://s3.amazonaws.com/files.consumerfinance.gov/f/documents/201701_cfpb_Debt-Collection-Survey-Report.pdf

³ Mendes de Leon, Carlos and Jennifer Griggs. "Medical Debt as a Social Determinant of Health." Journal of the American Medical Association. July 20, 2021. <https://jamanetwork.com/journals/jama/article-abstract/2782205>.

than the acquisition and forgiveness of medical debt, provision of financial education, insurance, preventative measures, or similar assistance.

2. Program qualifiers should include appropriate debt percentage to annual household income and poverty level percentage according to federal policy for Hawai'i.
3. Any prospective program structure should include:
 - a. Education on prevention strategies to avoid incurring future medical debt;
 - b. Case management to connect recipients with any identified services needed;
 - c. Demonstration of executing formal agreements with health care entities, such as HIPAA Business Associate Agreements.

Trauma-informed care (TIC) is an approach to understanding and responding to the widespread impact of trauma. By passing this bill, the State would be upholding the TIC principles of Safety, Peer Support, Empowerment, and Voice and Choice, which strengthens our pathway towards a trauma-informed state. As such, the OWR **SUPPORTS** S.B. 3239.

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

Mahalo,

A handwritten signature in black ink, appearing to read 'Tia L R Hartsock', with a long, sweeping horizontal line extending to the right.

Tia L R Hartsock, MSW, MSCJA
Director, Office of Wellness & Resilience
Office of the Governor



**STATE HEALTH PLANNING
AND DEVELOPMENT AGENCY**
DEPARTMENT OF HEALTH - KA 'OIHANA OLAKINO

JOSH GREEN, M.D.
GOVERNOR OF HAWAII
KE KIA'ĀINA O KA MOKU'ĀINA 'O HAWAII

KENNETH S. FINK, MD, MGA, MPH
DIRECTOR OF HEALTH
KA LUNA HO'ŌKELE

John C. (Jack) Lewin, M.D.
ADMINISTRATOR

1177 Alakea St., #402, Honolulu, HI 96813 Phone: 587-0788 Fax: 587-0783 www.shpda.org

Senate Committee on Health and Human Services
Senator Joy A. San Buenaventura, Chair
Senator Henry J.C. Aquino, Vice Chair

Senate Committee on Commerce and Consumer Protection
Senator Jarrett Keohokalole, Chair
Senator Carol Fukunaga, Vice Chair

S.B. 3239 Relating to Medical Debt

Testimony of John C. (Jack) Lewin, M.D.
SHPDA Administrator

Monday, February 12, 2024
1:00 p.m.

1 **Agency's Position: Support with Comments**

2 **Fiscal Implications:** None

3 **Purpose and Justification:** Medical debt is the most common form of personal bankruptcy
4 across the nation. This is tragic; and fear of this causes many patients with acute and chronic
5 conditions to avoid necessary care, only to result in catastrophically expensive medical
6 complications later. This bill assigns the Office of Wellness and Resilience to design and
7 implement a 3-year pilot program in collaboration with health care providers to seeks means to
8 forgive outstanding medical debt, which is needed, and we support it.

9 However, preventing future medical debt is also an important imperative to be achieved,
10 and one that is being considered in other states. Thinking broadly about this problem and the
11 future, Hawai'i and the nation must seek means to guarantee universal access to high-quality,

1 equitable, affordable health and long-term care for ALL, as virtually all other developed nations
2 have accomplished in various ways. This is SHPDA's assigned mission, which would
3 eliminate medical debt issues for future generations. This is key to the Governor's vision of
4 "Hawai'i the Health State" and Hawai'i should be the first state to fully achieve this worthy,
5 long-overdue goal.

6 Mahalo for the opportunity to testify.



THE QUEEN'S HEALTH SYSTEM

To: The Honorable Joy San Buenaventura, Chair
The Honorable Henry Aquino, Vice Chair
Members, Senate Committee on Health & Human Services

The Honorable Jarrett Keohokalole, Chair
The Honorable Carol Fukunaga, Vice Chair
Members, Senate Committee on Commerce & Consumer Protection

From: Jacce Mikulanec, Director, Government Relations, The Queen's Health System

Date: February 12, 2024

Re: Support of SB3239 – Relating to Medical Debt

The Queen's Health System (Queen's) is a nonprofit corporation that provides expanded health care capabilities to the people of Hawai'i and the Pacific Basin. Since the founding of the first Queen's hospital in 1859 by Queen Emma and King Kamehameha IV, it has been our mission to provide quality health care services in perpetuity for Native Hawaiians and all of the people of Hawai'i. Over the years, the organization has grown to four hospitals, and more than 10,000 affiliated physicians, caregivers, and dedicated medical staff statewide. As the preeminent health care system in Hawai'i, Queen's strives to provide superior patient care that is constantly advancing through education and research.

Queen's appreciates the opportunity to provide comments in support of SB3239, which requires the Office of Wellness and Resilience (OWR) to design and implement a 3-year pilot program in collaboration with healthcare providers to acquire and forgive outstanding medical debt. Roughly one in three people in this country are currently struggling with unpaid medical bills – over 100 million people. This debt can in-turn have a profound and cascading adverse influence over decisions to seek future medical services and critical medications. The proposed pilot program in SB3269 is similar to successful programs currently being deployed in states like New Jersey and Connecticut.

For Queen's, we see this model of addressing medical debt as a promising and worthy endeavor and one that we are currently employing. Through our work with RIP, a national non-profit focused on eliminating medical debt, we are on the threshold of piloting our first effort to remove medical debt going back nearly three years. We see this as a benefit to both our patients and to our overall healthcare system. Should this legislation ultimately pass, we urge the OWR to collaborate and learn from our experience to help ensure the pilot program broadly helps our community.

Thank you for allowing us to provide testimony in support of SB3239.

The mission of The Queen's Health System is to fulfill the intent of Queen Emma and King Kamehameha IV to provide in perpetuity quality health care services to improve the well-being of Native Hawaiians and all of the people of Hawai'i.

OUR MISSION

To support and advance public policies that make Hawai'i affordable for all working families.

OUR VISION

Collaborative, sustainable, and evidence-based public policies that create a diverse and sustainable Hawai'i economy, an abundance of quality job opportunities, and a future where all working families living in Hawai'i can thrive.

BOARD MEMBERS

Jason Fujimoto
Meli James, *Board Chair*
Micah Kāne
Brandon Kurisu
Mike Mohr
Brad Nicolai
Mike Pietsch

ADVISORY COMMITTEE

Josh Feldman
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Josh Wisch
President & Executive Director

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HolomuaCollaborative.org

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

Bill Number: SB 3239, Relating to Medical Debt

Hearing Date and Time: February 12, 2024 at 1:00pm (Room 225)

Re: Testimony of Holomua Collaborative in support

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

We write in support of SB 3239, Relating to Medical Debt. This bill requires the Office of Wellness and Resilience to design and implement a 3-year pilot program in collaboration with healthcare providers to acquire and forgive outstanding medical debt. As noted in the bill's preamble, medical debt is a social determinant of health because patients with burdensome medical debt often delay the care they need, may experience problems obtaining employment and housing, have difficulty escaping poverty, and experience mental stress.

As an organization that is devoted to finding ways to keep all local working families in Hawai'i by making sure they can afford to stay, eliminating local families' medical debts would help. And the way this program works makes economic sense. According to reporting from *Governing* magazine, "[a]cquiring medical debt is relatively cheap: hospitals that sell medical debt portfolios do so for just pennies on the dollar, usually to investors on the secondary market. The purchase price is so low because hospitals and debt buyers alike know that medical debt is the hardest form to collect. Nearly 60 percent of all debt held by collection agencies is medical debt owed by some 43 million households, according to the Consumer Financial Protection Bureau."¹

This is why an increasing number of jurisdictions across the country have adopted the model. These jurisdictions have been partnering with nonprofits that purchase debt for pennies on the dollar and then relieve the debt. There are no administrative hurdles for community members to overcome. Instead, relief recipients are simply sent a letter informing them their debt has been canceled.

In addition to the direct health and economic benefits for the families that are positively impacted, there are systemic benefits to the local economy, including:

- For some, medical debt may have prevented them from seeking necessary healthcare services due to financial constraints. By cancelling medical debt, people may be more likely to seek preventive care, treatments, or procedures they had previously delayed. This can lead to healthier communities, increased productivity, and reduced healthcare costs in the long term.

¹ "These Local Governments are Using Federal Aid to Cancel Medical Debt," December 12, 2022 in *Governing* Magazine (<https://www.governing.com/finance/these-local-governments-are-using-federal-aid-to-cancel-medical-debt>).

- Hospitals often must write off a portion of their accounts receivable as bad debt when patients are unable to pay. By proactively cancelling medical debt, hospitals can avoid or minimize these write-offs, rather than keeping them on their books for five to ten years, which can improve their financial position.
- Medical debt cancellation can improve the financial stability of households, reducing stress and uncertainty about their financial situation. This stability can lead to increased confidence in making purchases, investments, or big-ticket items like homes or vehicles, which can further boost local economic activity.
- When people have medical debt cancelled, they have more disposable income available for other expenses. This can lead to increased spending on goods and services within their communities, supporting local businesses such as restaurants, retail stores, and service providers.
- Medical debt cancellation can also have positive effects on local credit markets. When individuals have medical debt forgiven, it can improve their credit scores and financial profiles. This can lead to increased access to credit for individuals and businesses within the community, facilitating investments and economic growth.

Overall, cancelling medical debt can provide direct financial relief to individuals while also generating positive ripple effects throughout local economies, ultimately contributing to economic growth and stability.

We appreciate the opportunity to testify in support of SB 3239.

Sincerely,



Josh Wisch
President & Executive Director



February 12, 2024

Honorable Joy A. San Buenaventura, Chair, Chair
Senate Health and Human Services Committee
State Capitol
415 S Beretania St.
Honolulu, HI 96813

Honorable Jarrett Keohokalole, Chair
Senate Commerce and Consumer Protection
Committee
State Capitol
415 S Beretania St.
Honolulu, HI 96813

RE: Senate Bill 3239, Relating to Medical Debt - SUPPORT

Dear Chair Buenaventura and Chair Keohokalole,

On behalf of those living with or in remission from blood cancer, we encourage you to support Senate Bill 3239 (SB 3239), relating to medical debt. Sb 3239 offers a practical route for families to prevent unforeseen financial challenges when hospitalized, avoiding the risk of being pushed deeper into a cycle of debt and poverty.

The Leukemia & Lymphoma Society® (LLS) is a global leader in the fight against cancer. The LLS mission: Cure leukemia, lymphoma, Hodgkin's disease and myeloma, and improve the quality of life of patients and their families. LLS funds lifesaving blood cancer research around the world, provides free information and support services, and is the voice for all blood cancer patients seeking access to quality, affordable, coordinated care.

Patients feel trapped by medical debt. According to a recent [national survey](#), nearly 7 in 10 U.S. adults say they receive medical bills they cannot afford. Many are forced to delay paying the bill, put it on a credit card, or challenge the bill. 74% of those with past or present medical debt have experienced negative impacts as a result. More than 4 in 10 delayed medical care because they did not want to go further into debt. And 32% of Americans say they became more depressed and anxious due to their medical debt.

Paying for incurred medical debt is a great first step for governments. And there is even more we can do together to address medical debt. We encourage the legislature to consider other additional measures that protect and prevent patients from the most harmful impacts of medical debt. These include protecting wages and assets, preventing lawsuits against patients for medical debt, or screening patients for charity care.

There is strong bipartisan support for action to protect consumers from medical debt and high healthcare costs. We thank you in advance for your consideration and urge your support of HB 416.

Sincerely,

A handwritten signature in cursive script that reads "Adam C Zarrin".

Adam Zarrin
Director, State Government Affairs

To: Senate Committees on Health and Human Services
Re: **SB 3239 - Relating to Medical Debt**

Hawai'i State Capitol, Conference Room 225 & Via Videoconference
Monday February 12, 2024, 1:00 PM

Dear Chair San Buenaventura, Vice Chair Aquino, and Committee Members,

On behalf of HCAN Speaks!, I am writing in strong support of SB 3239, relating to medical debt. This purpose of this bill is to appropriate funds so the Office of Wellness and Resilience can implement a 3-year pilot program in collaboration with healthcare providers to acquire and forgive outstanding medical debt. Medical debt refers to medical costs people were unable to pay up front or when they received care. Medical debt is a financial stressor with adverse mental and physical health consequences; it can also prevent individuals from accessing needed medical and dental care.¹

The pilot program proposed by this bill is an important opportunity to alleviate a heavy burden affecting Hawai'i's families, including many who are Asset Limited, Income Constrained, Employed (ALICE) households, or those earning above the federal poverty line and still cannot afford the basic cost of living.² While the official number of households in financial hardship in HI continues to be undercounted, estimates show that more than 12% experience poverty and at least 30% of families are ALICE. The average monthly cost of healthcare for an ALICE family of four is approximately \$800.

In Hawai'i, many families simply do not have the financial safety net or "rainy day funds" necessary to cover the high costs of medical care. And, though families with health insurance coverage are better protected from high medical costs than those without coverage, households with health insurance still struggle to pay for healthcare costs.

Eliminating medical debt is necessary to improve health equity. Economically vulnerable families, people of color, and people with disabilities carry a higher medical debt burden. Families with children are more likely to have medical debt.³

Please look out for the health and wellbeing of our keiki and families and pass this bill.

Thank you,
Noreen Kohl, Ph.D.
Children's Health and Wellness Policy Advocate

¹ <https://www.healthsystemtracker.org/chart-collection/cost-affect-access-care/>

² Latest ALICE HI report, available [here](#).

³ <https://www.census.gov/library/stories/2021/04/who-had-medical-debt-in-united-states.html>



Senate Committee on Health and Human Services
Senator Joy A. San Buenaventura, Chair
Senator Henry J.C. Aquino, Vice Chair

Senate Committee on Commerce and Consumer Protection
Senator Jarrett Keohokalole, Chair
Senator Carol Fukunaga, Vice Chair

Hearing Date: Monday, February 12, 2024

ACS CAN SUPPORTS SB 3239: RELATING TO MEDICAL DEBT.

Cynthia Au, Government Relations Director – Hawai'i Guam
American Cancer Society Cancer Action Network

Thank you for the opportunity to **SUPPORT** SB 3239: RELATING TO MEDICAL DEBT which requires the Office of Wellness and Resilience to design and implement a 3-year pilot program in collaboration with healthcare providers to acquire and forgive outstanding medical debt. The American Cancer Society Cancer Action Network (ACS CAN) is the nonprofit, nonpartisan advocacy affiliate of the American Cancer Society. We support fact-based policy and legislative solutions designed to eliminate cancer as a major health problem.

It's estimated that 8,670 people will be diagnosed with cancer in Hawai'i this year. Unanticipated medical costs contribute to the worry about affording cancer care.ⁱ Medical debt impacts many people with cancer, their caregivers and their families. ACS CAN has long fought for public policies – like access to comprehensive and affordable health insurance coverage – that reduce the likelihood or severity of that debt. People with cancer often bear significant health care costs because they can have substantial health care needs, are high utilizers of health care services, use many different providers, and sometimes require more expensive treatments. They also must pay many indirect costs, like transportation and lodging as well as losing wages due to unpaid time

off or job loss, that add to their already heavy cost burden. In Hawai'i, patients located on the neighbor islands may have to travel to O'ahu to receive their cancer treatments.

Other research documents the negative effect medical debt has on people with cancer including housing concerns, strained relationships,ⁱⁱ and bankruptcy.ⁱⁱⁱ Delaying or forgoing care because of cost, which is more common among people with medical debt, is associated with increased mortality risk among cancer survivors.^{iv} U.S. counties with higher levels of medical debt are also more likely to have significantly higher rates of cancer mortality.^v

Thank you for the opportunity to support this important bill. We urge the committee to pass SB 3239. Should you have any questions, please do not hesitate to contact Government Relations Director Cynthia Au at Cynthia.Au@Cancer.org or 808.460.6109.

ⁱ American Cancer Society Cancer Facts & Figures 2024 <https://www.cancer.org/content/dam/cancer-org/research/cancer-facts-and-statistics/annual-cancer-facts-and-figures/2024/2024-cancer-facts-and-figures-acf.pdf>

ⁱⁱ Banegas MP, Schneider JL, Firemark AJ, et al. The social and economic toll of cancer survivorship: a complex web of financial sacrifice. *J Cancer Surviv*. 2019;13(3):406-417. doi:10.1007/s11764-019-00761-1

ⁱⁱⁱ Ramsey SD, Blough DK, Kirchoff AC, et al. Washington Cancer Patients Found To Be At Greater Risk For Bankruptcy Than People Without A Cancer Diagnosis. *Health Aff (Millwood)*. 2013;32(6):1143-1152. doi:10.1377/hlthaff.2012.1263

^{iv} Yabroff KR, Han X, Song W, Zhao J, Nogueira L, Pollack CE, Jemal A, Zheng Z. Association of Medical Financial Hardship and Mortality Among Cancer Survivors in the United States. *J Natl Cancer Inst*. 2022 Jun 13;114(6):863 -870.

^v Xin Hu, Zhiyuan Zheng, Kewei Sylvia Shi, Robin Yabroff, and Xuesong Han. Association of medical debt and cancer mortality in the US. *Journal of Clinical Oncology* 2023 41:16_suppl, 6505-6505

Trapped: America's Crippling Medical Debt Crisis

Over 100 million people living in America, one in three, struggle with the weight of medical debt. The American Cancer Society Cancer Action Network (ACS CAN), The Leukemia & Lymphoma Society, and RIP Medical Debt sponsored a national survey to explore these issues and shed light on patients' experiences and attitudes towards medical debt – and potential policy solutions. The poll was conducted by PerryUndem, a non-partisan research firm.

Key Findings:

Medical debt has become a shared experience for patients across the country. Patients feel trapped in debt and see no way out.

- Nearly 7 in 10 U.S. adults say they receive medical bills they cannot afford. Many are forced to delay paying the bill, put it on a credit card, or challenge the bill.
- 74% of those with past or present medical debt have experienced negative impacts as a result.
 - More than 4 in 10 (42%) delayed medical care because they did not want to go further into debt.
 - 1 in 5 (21%) avoided going back to the same provider where they owed money because they feared they would not treat them.
 - One in three (32%) say they became more depressed and anxious due to their medical debt and nearly half say they feel trapped by their medical debt. 45% felt they would never be able to pay it off.

There are ways to challenge a medical bill but most people don't know about it.

- 7 in 10 U.S. adults have never challenged or appealed a medical bill and nearly half didn't know providers offer financial assistance. People of color are more likely to say both of these things, and younger patients are also more likely to not know about provider financial assistance.
- Only 1 in 4 patients report being offered financial assistance from a provider to reduce their medical bills.

High health care costs have a particularly crippling impact on people with cancer and other chronic conditions.

- Over 6 in 10 U.S. adults say they would be unable to afford the cost of cancer treatment if they were diagnosed tomorrow.
- Over 9 in 10 feel cancer care is too costly - even if a patient has comprehensive health insurance.

U.S. adults will hold the government accountable if they don't bring down high health care costs.

- 84% of U.S. adults agree that it is "the responsibility of the government to ensure health care is affordable for all people in the U.S."
- 91% agree that "elected officials should pass policies that protect people with serious illnesses like cancer from medical debt and harassment from collection agencies."
- Nearly 9 in 10 blame the health care industry for fueling the medical debt crisis - not patients themselves. They say the problem stems from the system putting profit over patients.

There is strong bipartisan support for action to protect consumers from medical debt and high health care costs, and 64% of U.S. adults said they would likely blame policymakers if they fail to act.

- All 12 policy ideas to prevent or lessen the impact of medical debt tested in the poll received between 75-95% bipartisan support.
- Seven in 10 say they would view lawmakers more positively if they passed these patient protection policies.
- 80% say they want their state and federal elected officials to also pass policies to reduce health care costs.

About the Poll:

This was a national survey of 2,663 adults in the U.S. conducted August 10-30, 2023. It was offered online via YouGov. The survey included large numbers of individuals with current or past medical debt, and with a chronic illness; as well as representative sampling of several racial/ethnic groups.

SB-3239

Submitted on: 2/10/2024 10:34:17 PM

Testimony for HHS on 2/12/2024 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Susan B Roberts Emery	Testifying for Green Party of Hawai'i	Support	Written Testimony Only

Comments:

Aloha committee members,

The US healthcare system forces too many families to choose between needed medical care and procedures, and other essentials of life. The Green Party of Hawai'i believes we should put our families first. No one should be forced into un-payable debt because they chose lifesaving care. This legislation represents a transformational opportunity to free those families of their burden and begin to right some of the wrongs of our healthcare system. This is an important step for all Hawai'i families , Please pass SB 3239,

Mahalo,

Susan Roberts Emery

Co chair GPH

LATE

SB-3239

Submitted on: 2/11/2024 8:36:07 PM

Testimony for HHS on 2/12/2024 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
John & Rita Shockley	Testifying for Free Access Coalition	Support	Written Testimony Only

Comments:

Aloha!

The Free Access Coalition supports SB 3239. The public needs freer access to medical care especially when it involves life-saving procedures. Many families are forced into poverty and homelessness trying to pay exhorbatent medical bills.

If we want to keep residents healthy and help them maintain financial viablity, This Bill needs to become law.

Mahalo for your time.



Monday, February 12, 2024 at 1:00 pm
Conference Room 225

Senate Committee on Health and Human Services

To: Chair Joy A. San Buenaventura
Vice Chair Henry J.C. Aquino

Senate Committee on Commerce and Consumer Protection

To: Chair Jarrett Keohokalole
Vice Chair Carol Fukunaga

From: Paige Choy
AVP, Government Affairs
Healthcare Association of Hawaii

Re: Submitting Comments
SB 3239 Relating to Medical Debt

The Healthcare Association of Hawaii (HAH), established in 1939, serves as the leading voice of healthcare on behalf of 170 member organizations who represent almost every aspect of the healthcare continuum in Hawaii. Members include acute care hospitals, skilled nursing facilities, home health agencies, hospices, assisted living facilities and durable medical equipment suppliers. In addition to providing access to appropriate, affordable, high-quality care to all of Hawaii's residents, our members contribute significantly to Hawaii's economy by employing over 30,000 people statewide.

Thank you for the opportunity to **submit comments** on this measure, which would seek to implement a pilot program in collaboration with medical providers to acquire and forgive medical debt. We are appreciative of the intent of this measure and believe that a broader discussion on the extent of medical indebtedness and how to address the issue will be worthwhile and productive.

The Hawaii State Legislature has been a leader in ensuring that residents have access to quality, affordable care. As we celebrate the 50th anniversary of the Prepaid Act, it should be noted that the requirements under Prepaid, along with Medicaid expansion, has resulted in one of the lowest uninsured rates in the country. Our members will continue to advocate for expanded access to care, and support efforts to ensure that no one forgoes needed services over concerns about affordability.

Background on RIP Medical Debt and Government-Funded Medical Debt Relief Initiatives

LATE

RIP Medical Debt (RIPMD) is a 501(c)(3) not-for-profit, national charity that locates, acquires, and cancels unpayable medical debt for those burdened by financial hardship.¹

RIPMD's mission is to end medical debt and be:

- **A source of justice in an unjust healthcare finance system:** Our unique and highly leveraged debt abolishment model combines the generosity of donors and funders with debt industry expertise to produce a high volume of debt relief return, mitigating significant financial and mental distress for millions of people.
- **A unique solution for patient-centered health care providers:** By partnering with us, health care organizations can strengthen individuals and communities by relieving dormant, uncollectible, and damaging bad debt and can identify opportunities to refine their financial assistance programs to better serve their communities.
- **A moral force for systemic change:** Our work brings attention to the range of negative impacts of medical debt and a deeper understanding of its causes. These efforts support progress toward a more compassionate, transparent, equitable and affordable healthcare system.

RIPMD was incorporated in 2014. To date, RIPMD has abolished more than \$10.4 billion of medical debt for more than 7.1 million people. RIPMD is focused on this work because medical debt:

- Is widespread even among the insured. Four in ten adults² have medical debt; many Americans have little savings to buffer the shocks of unanticipated medical bills.
- Is more prevalent in communities of color.
- Is a Social Determinant of Health. Patients with burdensome medical debt and in financial hardship often delay the care they need, experience food and housing insecurity, have problems obtaining employment and escaping poverty, and experience mental stress.

RIPMD analyzes medical debt portfolios to identify accounts of individuals in households at or below 400% of the Federal Poverty Level or that owe medical debt equal to or exceeding 5% of household income. RIPMD's data partner, FinThrive, provides estimated FPL, household income, and current addresses for these analyses.

For a number of practical and regulatory reasons, accounts must have reached terminal bad debt status, meaning that the routine medical billing and collections process has been completed and balances owed by patients (or guarantors) remain unpaid.

RIPMD then buys qualifying medical debt accounts at fair market value, often paying less than a penny on the dollar. Fair market value is established based on a non-negotiable, standard pricing

¹ This document has been prepared to provide information about RIP Medical Debt and how RIPMD carries out medical debt relief initiatives in partnership with government jurisdictions. It has not been prepared to advocate for or solicit funding.

² <https://www.kff.org/report-section/kff-health-care-debt-survey-main-findings/>

Background on RIP Medical Debt and Government-Funded Medical Debt Relief Initiatives

model. Younger accounts (e.g., 1-2 years old measured from the date services were provided) have a higher price than older accounts (e.g., 6-7+ years of age).

Once purchased, RIPMD abolishes the debt at no cost or tax consequence to the debtor. Any adverse information resulting from the abolished medical debt is then removed from credit reports. Individuals and account guarantors are notified by letter that specific medical debts have been erased.

RIPMD acquires qualifying medical debt portfolios from hospitals and physician groups – including many that never sold patient accounts prior to learning about RIPMD’s mission and debt cancellation process. To date, medical debt portfolios have been acquired from over 150 hospitals, many of which are owned and operated by multi-state health systems.³ RIPMD purchases entire portfolios of medical debt accounts that qualify for erasure based on RIPMD’s pre-established eligibility criteria and a standard pricing model that proxies fair market value of medical debt at different ages.

Until 2020, RIPMD acquired medical debt primarily from commercial debt buyers (for-profit corporations that purchase medical debt from providers for collections purposes). Since then, RIPMD has been partnering directly with hospitals and other types of health care providers. Before contacting hospitals and health systems across the U.S., RIPMD obtained Advisory Opinion #20-04 from the HHS OIG, which provides legal clarity that hospitals can donate or sell debt to RIPMD. The opinion was modified in April 2023.⁴

RIPMD **never** collects on medical debt that has been acquired. Purchase agreements signed with healthcare providers and commercial debt buyers clearly state that RIPMD only **abolishes** qualifying medical debt that has been acquired.

Until 2022, all of this work had been funded by philanthropic donors (including individuals, faith-based organizations, corporations, and foundations). MacKenzie Scott is one such donor. She provided a transformative, \$50 million gift in 2020 and another \$30 million in 2022.

In 2022, Cook County committed \$12 million in American Rescue Plan Act funding and plans to cancel \$1 billion of medical debt via a multi-year Government Medical Debt Relief Initiative together with RIPMD.⁵

To date, medical debt relief contracts have been established with the following government jurisdictions:

- Cook County, Illinois (funding = \$12.0 million)
- Toledo, Ohio (funding = \$800,000)
- Lucas County, Ohio (funding = \$800,000)
- New Orleans, Louisiana (funding = \$1.3 million)

³ See, for example: <https://www.trinityhealthofne.org/about-us/in-the-news/partnership-to-abolish-patient-debt>

⁴ <https://oig.hhs.gov/documents/advisory-opinions/1115/AO-20-04-Modified.pdf>

⁵ See: <https://arpa.cookcountyil.gov/medical-debt-relief-initiative>

Background on RIP Medical Debt and Government-Funded Medical Debt Relief Initiatives

- Cleveland, Ohio (funding = \$1.9 million)
- Washington, D.C. (funding = \$1.0 million)
- Akron, Ohio (funding = \$500,000)

In the next few months, RIPMD anticipates entering into additional contracts with over ten additional cities, counties, and states. Several of these jurisdictions are using ARPA funds for their medical debt relief initiatives. Others are relying on general (non-federal) funds.

Contracts with government jurisdictions stipulate that to use government funds, program recipients must be residents of the jurisdiction; RIP Medical Debt uses other philanthropic funds for non-residents, when needed and available.

RIPMD's contracts with government jurisdictions include a Statement of Work⁶ that provides details regarding the process that would be implemented by RIPMD. That process is summarized below:

- Establish program management infrastructure.
- Recruit hospitals and other providers to sell or donate medical debt for Program purposes.
- Request and receive patient accounts data files from hospitals and other providers.
- Analyze patient accounts data files (using proprietary scrubbing processes) to identify individuals with medical debt that meet Program Eligibility Criteria.
- Develop proposals to acquire medical debt using RIPMD's standard pricing model.
- Apply RIPMD's standard pricing model to all transactions that involve purchasing medical debt.
- Use Program Funds to acquire and cancel medical debt for Eligible Individuals.
- Issue letters to notify Eligible Residents that medical debts have been cancelled.
- Solicit and collect testimonials from Eligible Residents who have had their medical debts canceled.
- Collaborate on marketing and outreach efforts.
- Conduct data analysis to report information to the government partner on progress and program impacts.
- Support the government partner's Monitoring and Compliance.

RIPMD's government-sponsored medical debt relief initiatives include providing statistics regarding the number and characteristics of individuals who have had medical debts erased and reports submitted quarterly and upon initiative completion.

RIPMD is pleased to be working with cities, counties, and states across the country to bring medical debt relief to people in need.

⁶ By design, RIP Medical Debt's Board-approved eligibility criteria and work plan for government medical debt relief initiatives are standard across jurisdictions.

SB-3239

Submitted on: 2/10/2024 12:39:33 PM

Testimony for HHS on 2/12/2024 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Nikos Leverenz	Individual	Support	Remotely Via Zoom

Comments:

Chair San Buenaventura, Vice Chair Aquino, & HHS Committee Members:

Chair Keohokalole, Vice Chair Fukunaga, & CPN Committee Members:

This bill requires the Office of Wellness and Resilience to design and implement a 3-year pilot program in collaboration with healthcare providers to acquire and forgive outstanding medical debt.

Income is the foremost determinant of health, and medical debt cancellation furthers health equity. To the extent that this program will help many thousands of Hawaii residents clear prior obligations, including billing and collections-related "junk fees," it will increase their capacity to obtain needed medical care and other life necessities (e.g., rental housing, transportation access).

Mahalo for the opportunity to provide testimony on this important measure.

SB-3239

Submitted on: 2/9/2024 8:29:55 PM

Testimony for HHS on 2/12/2024 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
sandra kapela	Individual	Support	Written Testimony Only

Comments:

I support 100% for these:) Godbless everyone:)

SB-3239

Submitted on: 2/10/2024 9:50:02 AM

Testimony for HHS on 2/12/2024 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Kristen Alice	Individual	Support	Written Testimony Only

Comments:

Aloha committee members,

The US healthcare system forces too many families to choose between needed medical care and procedures, and other essentials of life. Now, too many families in Hawaii are burdened with debt they can never get out of. No one should be forced into un-payable debt because they needed lifesaving care. This legislation represents a transformational opportunity to free those families of their burden and begin to right some of the wrongs of our healthcare system. Please pass SB 3239.

Mahalo,
Kristen Alice

SB-3239

Submitted on: 2/10/2024 9:49:12 AM

Testimony for HHS on 2/12/2024 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Susan Stayton	Individual	Support	Written Testimony Only

Comments:

Aloha committee members,

The FOR PROFIT US healthcare system forces too many families to choose between needed medical care and procedures, and other essentials of life. Now, too many families in Hawaii are burdened with debt they can never get out of. No one should be forced into un-payable debt because they chose lifesaving care. This legislation represents a transformational opportunity to free those families of their burden and begin to right some of the wrongs of our healthcare system. Please pass SB 3239.

Mahalo for yur consideration,

Susan Stayton, Lawai, Kauai, HI

SB-3239

Submitted on: 2/10/2024 9:51:59 AM

Testimony for HHS on 2/12/2024 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Bryson Ellegard	Individual	Support	Written Testimony Only

Comments:

Aloha committee members,

The US healthcare system forces too many families to choose between needed medical care and procedures, and other essentials of life. Now, too many families in Hawaii are burdened with debt they can never get out of. No one should be forced into un-payable debt because they chose lifesaving care. This legislation represents a transformational opportunity to free those families of their burden and begin to right some of the wrongs of our healthcare system. Please pass SB 3239

SB-3239

Submitted on: 2/10/2024 10:35:01 AM

Testimony for HHS on 2/12/2024 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Rodger Hansen	Individual	Support	Written Testimony Only

Comments:

Aloha / please pass this important bill.
Mahalo,

Rodger Hansen, Hakalau HI 96710

SB-3239

Submitted on: 2/10/2024 9:59:09 AM

Testimony for HHS on 2/12/2024 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Teresa Landreau	Individual	Support	Written Testimony Only

Comments:

SB3239 provides a simple, effective solution to one devastating aspect of the dysfunctional medical system that Americans suffer under. Political will has been unsuccessful so far to provide national affordable health care to all. Enactment of this medical debt forgiveness for Hawaiian residents program will pragmatically bypass the national deadlock with a very cost-effective approach. Passage of SB3239 will free up Hawaiian families to live fuller and healthier lives that contribute to a vibrant Hawaiian society. Mahalo. Let's follow Connecticut's lead and honor the ancient medical ideal of "First, do no harm."

SB-3239

Submitted on: 2/10/2024 10:30:21 AM

Testimony for HHS on 2/12/2024 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Judie Hoepner	Individual	Support	Written Testimony Only

Comments:

I strongly support this bill.

SB-3239

Submitted on: 2/10/2024 11:28:23 AM

Testimony for HHS on 2/12/2024 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Greg Puppione	Individual	Support	Written Testimony Only

Comments:

Aloha committee members,

The US healthcare system forces too many families to choose between needed medical care and procedures, and other essentials of life. Now, too many families in Hawaii are burdened with debt they can never get out of. No one should be forced into un-payable debt because they chose lifesaving care. This legislation represents a transformational opportunity to free those families of their burden and begin to right some of the wrongs of our healthcare system. Please pass SB 3239

Mahalo!

SB-3239

Submitted on: 2/10/2024 9:57:21 AM

Testimony for HHS on 2/12/2024 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Stacey Alapai	Individual	Support	Written Testimony Only

Comments:

Aloha committee members,

The US healthcare system forces too many families to choose between needed medical care and procedures, and other essentials of life. Now, too many families in Hawaii are burdened with debt they can never get out of. No one should be forced into un-payable debt because they chose lifesaving care. This legislation represents a transformational opportunity to free those families of their burden and begin to right some of the wrongs of our healthcare system. Please pass SB 3239

Mahalo,

Stacey Alapai

Makawao, HI 96768

SB-3239

Submitted on: 2/10/2024 10:12:33 AM

Testimony for HHS on 2/12/2024 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Elizabeth Hansen	Individual	Support	Written Testimony Only

Comments:

Aloha committee members,

The US healthcare system forces too many families to choose between needed medical care and procedures, and other essentials of life. Now, too many families in Hawaii are burdened with debt they can never get out of. No one should be forced into un-payable debt because they chose lifesaving care. This legislation represents a transformational opportunity to free those families of their burden and begin to right some of the wrongs of our healthcare system. Please pass SB 3239

Mahalo / Elizabeth Hansen, Hakakau HI 96710

SB-3239

Submitted on: 2/10/2024 11:57:49 AM

Testimony for HHS on 2/12/2024 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Sarah Biggs	Individual	Support	Written Testimony Only

Comments:

Let us seize the opportunity to shift the power balance. For so long only a few people have benefited from our healthcare system financially while devastating so many others financially for life. It doesn't have to be this way. Let's serve as many people as possible by unburdening them with medical debt. Medical debt is not something that should be allowed to continue to exist. Make history and do what's right by passing SB 3239. Mahalo

SB-3239

Submitted on: 2/10/2024 10:39:10 AM

Testimony for HHS on 2/12/2024 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Shay Chan Hodges	Individual	Support	Written Testimony Only

Comments: Aloha committee members, The US healthcare system forces too many families to choose between needed medical care and procedures, and other essentials of life. Now, too many families in Hawaii are burdened with debt they can never get out of. No one should be forced into un-payable debt because they chose lifesaving care. Furthermore, on multiple occasions, I have personally received multiple medial bills in error, which took months if not years to resolve. Many families who are burdened by debt have likely experienced something similar -- and probably should not have been billed in the first place. This legislation represents a transformational opportunity to free those families of their burden and begin to right some of the wrongs of our healthcare system. Please pass SB 3239

SB-3239

Submitted on: 2/10/2024 12:04:02 PM

Testimony for HHS on 2/12/2024 1:00:00 PM

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

Comments:

Please pass SB3239. What we really need is a medical system that doesn't profit from people's healthcare needs - but until we have a chance to create that, the least we can do is to reduce the burden of medical debt. I have been contributing to RIP Medical Debt (an organization that buys debt to relieve it) but the small amount individuals like me can do is minor compared to what the state can do for its citizens.

SB-3239

Submitted on: 2/10/2024 11:25:05 AM

Testimony for HHS on 2/12/2024 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Danelle Guion	Individual	Support	Written Testimony Only

Comments:

Aloha committee members,

The US healthcare system forces too many families to choose between needed medical care and procedures, and other essentials of life. Now, too many families in Hawaii are burdened with debt they can never get out of. No one should be forced into un-payable debt because they chose lifesaving care. This legislation represents a transformational opportunity to free those families of their burden and begin to right some of the wrongs of our healthcare system. Please pass SB 3239

SB-3239

Submitted on: 2/10/2024 12:14:57 PM

Testimony for HHS on 2/12/2024 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Anita Anderson	Individual	Support	Written Testimony Only

Comments:

Aloha Committee Members,

I support passing SB 3239 relating to medical debt. Too many families in Hawaii are burdened with medical debt because they chose life-saving medical care. Connecticut has already chosen to cancel medical debt for their eligible residents. Let's do the same and support local families who needed medical care which left them buried in debt. Mahalo!

SB-3239

Submitted on: 2/10/2024 1:45:20 PM

Testimony for HHS on 2/12/2024 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Dennis O'Shea	Individual	Support	Written Testimony Only

Comments:

Medicine-for-profit is a flawed model. The U.S. has one of the most expensive health care systems in the world and one of the sickest populations. Something is fundamentally wrong here and needs to be changed. This bill is a good start. Please pass it.

Mahalo.

SB-3239

Submitted on: 2/10/2024 1:09:38 PM

Testimony for HHS on 2/12/2024 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Amber Kanehailua	Individual	Support	Written Testimony Only

Comments:

Aloha committee members,

The US healthcare system forces too many families to choose between needed medical care and procedures, and other essentials of life. Now, too many families in Hawaii are burdened with debt they can never get out of. No one should be forced into un-payable debt because they chose lifesaving care. This legislation represents a transformational opportunity to free those families of their burden and begin to right some of the wrongs of our healthcare system. Please pass SB 3239.

SB-3239

Submitted on: 2/10/2024 2:37:40 PM

Testimony for HHS on 2/12/2024 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
James Hedgecock	Individual	Support	Written Testimony Only

Comments:

Aloha committee members,

The US healthcare system forces too many families to choose between needed medical care and procedures, and other essentials of life. Now, too many families in Hawaii are burdened with debt they can never get out of. No one should be forced into un-payable debt because they chose lifesaving care. This legislation represents a transformational opportunity to free those families of their burden and begin to right some of the wrongs of our healthcare system. Please pass SB 3239

SB-3239

Submitted on: 2/10/2024 3:16:25 PM

Testimony for HHS on 2/12/2024 1:00:00 PM

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

Comments:

SB-3239

Submitted on: 2/10/2024 5:09:07 PM

Testimony for HHS on 2/12/2024 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Catherine Velasquez	Individual	Support	Written Testimony Only

Comments:

Aloha committee members,

I am a perfect example of why we need this bill passed. I have an outstanding medical bill for \$800 for a PET scan for cancer that I cannot pay!

The US healthcare system forces too many families to choose between needed medical care and procedures, and other essentials of life. Now, too many families in Hawaii are burdened with debt they can never get out of. No one should be forced into un-payable debt because they chose lifesaving care. This legislation represents a transformational opportunity to free those families of their burden and begin to right some of the wrongs of our healthcare system. Please pass SB 3239

[Submit Testimony](#) today in Support of this critical legislation and join us via Zoom or in-person at 1pm this Monday, February 12th.

Mahalo nui loa,

Catherine Velasquez

SB-3239

Submitted on: 2/10/2024 5:19:19 PM

Testimony for HHS on 2/12/2024 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Priscilla Stuckey	Individual	Support	Written Testimony Only

Comments:

Aloha, Committee Members,

The US healthcare system forces too many people to choose between needed medical care and other essentials of life. Now, too many people in Hawaii are burdened with debt they can never repay. Medical care should not bankrupt people. For pennies on the dollar, people can be freed of their medical debt burden. This legislation represents an opportunity to right some of the wrongs of our healthcare system. Please pass SB 3239.

Mahalo.

SB-3239

Submitted on: 2/10/2024 6:28:59 PM

Testimony for HHS on 2/12/2024 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Kathy Shimata	Individual	Support	Written Testimony Only

Comments:

Aloha committee members,

The US healthcare system forces too many families to choose between needed medical care and procedures, and other essentials of life. Now, too many families in Hawaii are burdened with debt they can never get out of. No one should be forced into un-payable debt because they chose lifesaving care. This legislation represents a transformational opportunity to free those families of their burden and begin to right some of the wrongs of our healthcare system. Please pass SB 3239

Mahalo,

Kathy Shimata

96822

SB-3239

Submitted on: 2/11/2024 1:54:34 AM

Testimony for HHS on 2/12/2024 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Susan Douglas	Individual	Support	Written Testimony Only

Comments:

Fifteen percent of families in Hawai‘i are burdened with medical debt they have no ability to repay, simply because they underwent procedures or operations which were sometimes lifesaving.

The good news is we now have an opportunity to put an end to this, and free local families from this burden to help more local people afford to stay in Hawai‘i.

SB-3239

Submitted on: 2/10/2024 7:56:08 PM

Testimony for HHS on 2/12/2024 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Terri Yoshinaga	Individual	Support	Written Testimony Only

Comments:

I support this bill.

LATE

SB-3239

Submitted on: 2/11/2024 12:06:45 PM

Testimony for HHS on 2/12/2024 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Jackie Keefe	Individual	Support	Written Testimony Only

Comments:

Aloha Chairs, Vice Chairs, and Members of the Committees on Health and Human Services and Commerce and Consumer Protection and mahalo for hearing this medical debt bill.

My name is Jackie Keefe and I am writing in strong support of SB3239.

This bill recognizes the problem that medical debt has become for people across the US, but there are a few other things that I believe are worth mentioning.

While medical debt is one reason that people avoid medical care, it is not the only one. Even in Hawai'i, where we mandate that employers must provide healthcare for employees who work an average of 20+ hours/week, healthcare is expensive. We pay for it from our paychecks, in addition to state and federal income tax. We also pay deductibles, medication costs, and any other "out of network" or "elective" procedures, even if they are necessary procedures.

And that is only for those with health insurance. Because of underinsurance or no insurance, many people have to seek care in emergency rooms when they become significant issues rather than simply having the ability to seek preventative care in the first place. This highlights the need for healthcare for all in our state and the country.

We have incredibly limited mental healthcare resources available in the islands, and many of us have had numerous appointments cancelled on us in recent years due to employee strikes, simply because these people are fighting for their employers to pay better and hire more to address the healthcare worker shortage that we have had even since before the days of the pandemic.

Our employers also pay about \$500+/employee on average, so it also negatively impacts small businesses and their ability to stay competitive with large corporations and what they can pay.

Thank you for hearing this bill and I look forward to seeing it pass. I hope that you will not allow the timeline to push further back than 2028 for the findings and recommendations, as this is a very important opportunity for Hawai'i families.

Jackie Keefe

LATE

SB-3239

Submitted on: 2/11/2024 1:48:07 PM

Testimony for HHS on 2/12/2024 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
dennis b miller	Individual	Support	Written Testimony Only

Comments:

Medical debt is so common because our healthcare system has a cost artificially inflated by a huge amount of unnecessary insurance administration.

In 2020 the CBO scored three versions of single payer. In one of them, it found an annual reduction in spending of \$743 billion dollars, just by eliminating all private health insurance companies and replacing them with one national Single Payer federal department. Medicare For All, a national Universal Single Payer Healthcare bill, could do that.

The legislature could help to increase public support for Medicare For All by passing new resolutions in support, but much more by hosting monthly Health Policy Teach-Ins at which the facts of Single Payer are taught, and the common anti single payer talking points are debunked.

However, at the state level, states can regulate private health insurance into administrative simplicity. Connecticut did so very successfully 12 years ago, for the Medicaid program.

To reduce Medical debt in Hawaii, fund the Hawaii Health Authority this session with a line item in the budget. Ensure that non insurance flunky's are appointed to the board.

Details on how the HHA could operate are available by request.

Dennis B Miller

(808) 227 8241

singlepayerhawaii@gmail.com

Waikiki

Chair Joy San Buenaventura
Vice Chair Henry Aquino

Senate Committee on Health & Human Services

Chair Jarrett Keohokalole
Vice Chair Carol Fukunaga

Senate Committee on Commerce & Consumer Protection

Monday, February 12, 2024
1:00 PM

TESTIMONY IN STRONG SUPPORT OF SB3239 RELATING TO MEDICAL DEBT

Aloha Chair(s) San Buenaventura and Keohokalole, Vice Chair(s) Aquino and Fukunaga, Members of the Senate Committee(s) on Health & Human Services and Commerce & Consumer Protection,

My name is Jun Shin. I am a service worker as well as a labor and social justice activist, testifying as an individual in **STRONG SUPPORT** of **SB3239**, Relating to Medical Debt.

Important reforms passed by labor-led (specifically ILWU) forces in the past like the Prepaid Healthcare Act have helped bring healthcare coverage to many local working class families, while lowering their healthcare costs. Unfortunately people are still in debt or going into bankruptcy, all for the crime of trying to take care of themselves and their loved ones. We must carry on the unfinished project of our predecessors and make sure that healthcare is a right, not a privilege.

While universal, single-payer healthcare is ultimately how we right the wrongs of this for-profit system, in the short-term, I am for the state government using its power and resources to free as many working people as possible from unpayable medical debt and the fear that debt profiteers bring to their daily lives. Just imagine what can be done when you free people from debt, the breathing room and hope you can give to them and their families. I am for reforms that will actually improve the lives of working class families, while challenging the hegemony of the for-profit healthcare system.

Please **PASS Senate Bill 3239** out of your committees.

Mahalo for the opportunity to testify,

Jun Shin,
State House District 23 | State Senate District 12
Cell: 808-255-6663
Email: junshinbusiness729@gmail.com

SB-3239

Submitted on: 2/11/2024 9:06:11 PM

Testimony for HHS on 2/12/2024 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Carolyn Eaton	Individual	Support	Written Testimony Only

Comments:

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

My name is Carolyn Eaton and I support enactment of this bill for a three-year pilot program to erase medical debt in Hawaii. It is both rational and compassionate.

Mahalo for your consideration of my support for SB3239.

LATE

SB-3239

Submitted on: 2/11/2024 10:11:38 PM

Testimony for HHS on 2/12/2024 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Brodie Lockard	Individual	Support	Written Testimony Only

Comments:

I strongly support this bill.

LATE

SB-3239

Submitted on: 2/11/2024 9:18:25 PM

Testimony for HHS on 2/12/2024 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Leesean silva	Individual	Support	Written Testimony Only

Comments:

Aloha and good day,

I suppor this bill strictly because I have seen first hand how medical expenses can burden a family. Cancer is the number 1 cause of death to our Hawaiian people and the cost of treatment is primarily the reason why they feel they will not live through this disease or get better all together. They worry that they will not be able to afford treatment. They worry how it will affect themselves and their loved ones financially. Therefore they cannot get better. To much worry is not good for one's health. No one should be turned away from receiving life saving treatment just because of cost. Medical dental treatments are also not covered by medical insurance. Which is crazy to me! It's considered a cosmetic procedure when clearly it affects your health and should be considered and covered by our medical as it can cause infection and move into your bloodstream and then to your heart causing serious infections and then death. I don't think you folk's understand how hard it is for our people to receive proper medical care. If this bill passes it will help us tremendously and it will strengthen the foundation of our Ohana! Health is not a cosmetic enhancement. It's a necessity! No Hawaiians, No Hawai'i! Simple as that! Thank you for hearing my testimony. I truly appreciate it!

Mahalo!

LATE

SB-3239

Submitted on: 2/12/2024 10:26:58 AM

Testimony for HHS on 2/12/2024 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Elizabeth Nelson	Individual	Support	Written Testimony Only

Comments:

I strongly support this legislation. It would make such a difference to so many people in our state. As a Registered Nurse for over 50 years, I can attest to this fact. Please seriously consider passing this legislation. Thank you so much.

Elizabeth Nelson

Kaneohe

LATE

SB-3239

Submitted on: 2/12/2024 10:57:34 AM

Testimony for HHS on 2/12/2024 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Louise Johnson	Individual	Support	Written Testimony Only

Comments:

Aloha committee members,

The US healthcare system forces too many families to choose between needed medical care and procedures and other essentials of life. Now, too many families in Hawaii are burdened with debt they can never get out of. No one should be forced into un-payable debt because they chose lifesaving care. This legislation represents a transformational opportunity to free those families of their burden and begin to right some of the wrongs of our healthcare system. Please pass SB 3239.