JOSH GREEN, M.I. GOVERNOR

SYLVIA LUKE LIEUTENANT GOVERNOR



JADE T. BUTAY DIRECTOR

WILLIAM G. KUNSTMAN DEPUTY DIRECTOR

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

January 30, 2024

To: The Honorable Scot Z. Matayoshi, Chair,

The Honorable Andrew Takuya Garrett, Vice Chair, and

Members of the House Committee on Labor & Government Operations

Date: Tuesday, January 30, 2024

Time: 9:30 a.m.

Place: Conference Room 309, State Capitol

From: Jade T. Butay, Director

Department of Labor and Industrial Relations (DLIR)

Re: H.B. 1673 RELATING TO WORKER' COMPENSATION

I. OVERVIEW OF PROPOSED LEGISLATION

The DLIR supports this proposal. HB 1673 amends Section 386-21.9, Hawaii Revised Statues (HRS) to improve access for comprehensive medical coverage specifically for solid waste workers with five or more years of service with significant regular exposure to trash and who suffer from cancer for specific organs, when their claim is accepted or determined to be compensable.

II. CURRENT LAW

Section 386-21.9, HRS establishes medical care, services, and supplies for firefighters suffering from cancer. If a claim for leukemia, multiple myeloma, non-Hodgkin Lymphoma, or cancer of the lung, brain, stomach, esophagus, intestines, rectum, kidney, bladder, prostate, or testes filed by an employee with five or more years of services as a firefighter is accepted or determined to be compensable.

Section 386-21 (a), HRS, states that immediately after a work injury is sustained by an employee and for so long as reasonable needed, the employer shall furnish to the employee all medical care, services and supplies as the nature of the injury requires.

III. COMMENTS ON THE HOUSE BILL

The DLIR supports this measure to ensure that solid waste workers with five or more years of service with significant exposure to trash and suffering from cancer for specific organs receive proper and timely medical treatment.



HOUSE OF REPRESENTATIVES THE THIRTY-SECOND LEGISLATURE **REGULAR SESSION OF 2024**

COMMITTEE ON LABOR & GOVERNMENT OPERATIONS

Rep. Scot Z. Matavoshi, Chair Rep. Andrew Takuya Garrett, Vice Chair

Tuesday, January 30, 2024, 9:30 AM Conference Room 309 & Videoconference

Re: Testimony on HB1673 – RELATING TO WORKERS' COMPENSATION

Chair Matayoshi, Vice Chair Garrett, and Members of the Committee:

The United Public Workers, AFSCME Local 646, AFL-CIO ("UPW") is the exclusive bargaining representative for approximately 14,000 public employees, which includes blue collar, non-supervisory employees in Bargaining Unit 1 and institutional, health, and correctional employees in Bargaining Unit 10, in the State of Hawaii and various counties.

UPW supports HB1673, which requires employers to be liable for medical care, services, and supplies when a worker's compensation claim filed by a solid waste worker suffering from cancer is accepted.

UPW represents the county employees of Bargaining Unit 1 who are assigned to refuse collection and disposal. This includes, but is not limited to, refuse collectors, refuse collection equipment operators, transfer station equipment operators, refuse facilities maintenance mechanics, and refuse collection crew leaders. From the definition of "solid waste worker" contained in this bill, we believe that nearly all of our members who work in refuse collection and disposal would be eligible for cancer-related medical coverage if they meet the service time criteria of five years.

These hard-working public employees are constantly exposed to variety materials that, unbeknownst to them, may result in life-altering or long-term health issues. It is critical that employers cover cancerrelated medical costs that may have resulted from these employees being exposed to harmful materials during their years of dedicated service.

Mahalo for the opportunity to testify on this measure. We urge the committee to pass this measure.

Sincerely,

Kalani Werner State Director

Phone 808.961.3424

Testimony in Strong Support of HB1637

Good morning. My name is Fairlene Naone, I am the Director of Workers' Compensation/Third-Party Liability Department for Premier Medical Group Hawaii, as founded by Dr. Scott J. Miscovich. I am in support of HB1637. I have worked in the legal field as a paralegal since 1992, then started working for Premier Medical Group in 2015.

During these 31 years, I have seen how much damage the delay in treatment can cost a patient. The current law that was passed in the at its essence was passed to help patients receive timely medical care whether by patient's private insurance carrier while an insurance carrier exercises its right to investigate the liability of the employer or upon the acceptance of the claim by the workers' compensation carrier. These time limits to investigate can by request be extended by the Department of Labor and Industrial Relations, by up to 60 days or more. In the meantime, patient care is stalled.

Following the patient's injury, it is a critical time for a medical provider to have set the course of treatment for the best possible outcomes. Such care would always start off to be conservative, unless the injury is severe enough to warrant specialty care. At which point any delay in care could, and I have seen it happen, cause harm in with the delay of prognosis and appropriate care.

Upon billing the private insurance carrier under HRS §386:21.1, the private insurance carrier has disregarded this request and replied with a denial stating that this is workers' compensation related. Then the bill remains unpaid. This happens so frequently that medical providers have decided to not to treat workers compensation patients. Thus, lowering the available medical providers to treat patients. Many of these medical providers are specialists and patients have been left looking out of state.

For the patient, their life has become difficult to live with. Besides dealing with physical pain, they would also deal with financial pain. When the WC carrier denies pending investigation, the patient is then force to rely on TDI (temporary disability insurance), which is only 1/3 of a person's pay. This amount is not enough to survive on. Not enough to pay for groceries to feed themselves and their family. Often making the decision to pay rent or feed their children.

When rent is not paid, patients are then forced to decide to return to work injured, not getting the care they need to keep their pay and medical benefits. Often, patients cannot return to work, becoming homeless. Losing not only vital employment benefits, but now having to qualify for Medicaid assistance. The average time I have witnessed before the denied pending investigation process is estimated at 6 months.

This passing of this bill would add the necessary coverage to see those patients be timely and effectively treated. Allowing patient's care to progress, assist in the recovery and return the patient back to work as quickly and medically as possible. Ensuring the payment would also give medical providers the confidence to treat patients knowing that they will be appropriately compensated. I am in support of HP1637.

Thank you. Fairlene Naone