



April 5, 2021

House's Committee on Legislative Management  
Hawai'i State Capitol  
415 South Beretania Street  
Honolulu, HI 96813

RE: **Senate Concurrent Resolution 143**

Aloha Chairs Kobayashi, Vice Chair Mizuno, and Committee Members,

I am writing in support for Senate Concurrent Resolution 143 on behalf of the LGBT Caucus of the Democratic Party of Hawai'i, Hawaii's oldest and largest policy and political LGBTQIA+ focused organization. SCR 142 calls for REQUESTING THE AUDITOR TO CONDUCT A SOCIAL AND FINANCIAL ASSESSMENT OF PROPOSED MANDATORY HEALTH INSURANCE COVERAGE.

The LGBT Caucus fully supports SB 623 which calls for requiring health insurance coverage for various sexual and reproductive health care services.

We understand the need for the Auditor to conduct the "sunrise audit" called for in SCR 143 to be in compliance with Hawai'i Revised Statute (HRS) section 23-51 as well as HRS section 23-52.

Mahalo nui loa for your time and consideration,

Michael Golojuch, Jr.  
Chair  
LGBT Caucus of the Democratic Party of Hawai'i

**SCR-143-SD-1**

Submitted on: 4/5/2021 2:47:49 PM

Testimony for LMG on 4/7/2021 2:00:00 PM

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Present at Hearing</b>
Younghi Overly	AAUW of Hawaii	Support	No

Comments:

Members of American Association of University Women (AAUW) of Hawaii thank you for this opportunity to submit this testimony in strong support of SCR143 SD1. SCR 143 will request the Auditor to conduct a social and financial assessment of the mandatory health insurance coverage proposed under S.B. 623, the Reproductive Health Equity Act ("RHEA"). All people deserve access to health care to decide on whether to become a parent or grow a family.



To: Hawai'i State House of Representatives Committee on Legislative Management  
Hearing Date/Time: Wed., Apr. 7, 2021, 2:00 pm  
Place: Hawai'i State Capitol, Rm. 312  
Re: Testimony of Planned Parenthood Alliance Advocates in strong support of SCR 143, SD1

Dear Chair Kobayashi and Members of the Committee,

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 at no cost, especially in the wake of COVID-19 and widespread job loss. With the Affordable Care Act and abortion access under threat at the Supreme Court, Hawai'i should pass legislation to solidify ACA health benefits, safeguard access to abortion, and save money in the budget down the road.

Now is the time to take action to ensure all people in Hawai'i have access to the full range of preventive sexual and reproductive health services with no out-of-pocket costs. SCR 143 will request the Auditor to conduct a social and financial assessment of the mandatory health insurance coverage proposed under S.B. 623, the Reproductive Health Equity Act (“RHEA”), if required pursuant to H.R.S. §23-51.

We need RHEA, which **requires insurance coverage of the full range of sexual and reproductive health care**. While state law requires insurance plans to pay the full range of FSA-approved contraceptives without cost-sharing, thousands of people must pay out-of-pocket for other basic, preventive health services. Without action, people in Hawaii will continue to delay care or forego care altogether due to these out-of-pocket costs, risking their health and economic security. We are already seeing the consequences of Hawaii's coverage gaps: for example, Hawaii's sexually transmitted infections (STIs) rates are the highest they have been in 30 years, with the STI rates more than doubling over the last ten years. Congressional leaders and the former federal administration made it clear that enacting additional restrictions on health care access and undermining consumer protections are their top priorities. They have targeted the rights of women and LGBTQ people with attacks on non-discrimination protections and access to abortion and birth control. The former federal administration even finalized a rule designed to make it much more difficult for private health insurance plans to cover abortion care. Without RHEA, insurers will most certainly consider discontinuing this important coverage.

Given these federal attacks on basic rights and health care, it is more important than ever that our state legislature act to ensure that nobody loses access to the health care and protections they depend on. RHEA will do just that. We need legislation to codify the Affordable Care Act (ACA) preventive service coverage requirements in state law, ensuring that people in Hawaii don't lose their access to no-copay preventive services such as birth control, well-person exams, and life-saving cancer screenings. It would also strengthen and expand these coverage requirements by requiring coverage of the full range of sexual and reproductive health care services, including abortion and

vasectomy. And it would make sure that all people in Hawaii can access these important services, regardless of gender, gender identity, or sexual orientation.

**SCR 143 will help us enact a cost-effective solution through RHEA.** Protecting and expanding access to sexual and reproductive health is not only the right thing to do, it's also cost-effective for consumers and health plans alike. The services included in this legislation 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, preventing unplanned pregnancies creates significant cost-savings. Therefore, even if some services are determined to be new mandated benefits, in the long term, covering these services would likely be either cost-neutral or even create cost savings for health plans. Because of this cost-effectiveness, requiring coverage of these services would likely have a minimal impact on premiums, which in turn means that there would be minimal additional cost to the state to offset any potential premium increases.

**RHEA is similar to coverage requirements in other states.** Many other states have already implemented requirements found in RHEA including the comprehensive sexual and reproductive health requirements. For example:

In 2018, the Washington Legislature passed Substitute Senate Bill 6219, also known as the Reproductive Parity Act. This legislation required that state-regulated health plans that cover maternity care provide substantially equivalent coverage for abortion care. It also expanded contraceptive coverage requirements beyond those in the ACA, including gender-neutral coverage of sterilization services for all enrollees and coverage of over-the-counter contraception. None of the requirements in this legislation was determined to be a new mandate that would trigger section 1311(d)(3) of the ACA.

In 2017, the Oregon Legislature passed House Bill 3391, also known as the Reproductive Health Equity Act. This bill required comprehensive, non-discriminatory coverage of sexual and reproductive health care services. This included coverage of abortion and a wide range of other sexual and reproductive health care services at no out-of-pocket cost to the patient.

In 2019, the Illinois Legislature passed the Illinois Reproductive Health Act, which required public and private insurance plans that provide pregnancy benefits to also cover abortions services – any deductible, coinsurance, waiting period, or other cost-sharing limit that applies to abortion cannot be higher than what the policy requires for other pregnancy care.

Several states have also put in place laws that codify existing requirements from the ACA to ensure that those important protections stay in place at the state level, no matter what happens at the federal level. For example, in 2017, Washington State enacted legislation requiring state-regulated health plans to cover all preventive services required to be covered under federal law as of December 31, 2016, without cost sharing. The requirements of this legislation are broader than Hawaii's RHEA, but the reproductive preventive health services are nearly identical to the coverage required in §431:10A-A(a)(1). In the fiscal note for Washington's legislation, the Washington Office of the Insurance Commissioner (OIC) noted that "[t]his bill does not have a direct fiscal impact on the OIC because the bill maintains coverage of preventive services with zero cost-sharing as they currently exist in Federal law and are currently being enforced by the OIC." As OIC rightly stated,

these are not new requirements: RHEA and similar legislation in other states simply require health plans to continue covering the basic health care that the ACA already requires them to cover. For example, states must already comply with coverage for any additional preventive women's services under 42 U.S. Code section 300gg-13 of the ACA. These federal coverage requirements are already in place across the country and have already been well-defined.

Other 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. And other states 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. ACA requirements also continue to expand and evolve, making the impact of RHEA on Hawaii minimal – for example, all plans that have an effective date of June 11, 2020 or later are now required to cover PrEP medication without cost sharing. In implementing RHEA, Hawaii can look to the example of other states and learn from their experiences and successes.

Additionally, it is crucial to note that RHEA is focused on insurance coverage, not the provision of care. In Hawaii, refusals of care continue to put patients' health and lives in danger because they enable a patient's care to be based on a hospital's religious beliefs rather than on what is best for the patient's health and circumstances. While Planned Parenthood opposes these refusals of care and religious exemptions, they are already in place in state and federal law. Ultimately, Planned Parenthood would advocate that a patient should receive equal access to health care services, as well as complete and accurate information about their health situation, no matter their reproductive decisions, sexual orientation, or gender identity.

**We need a RHEA to protect confidentiality.** The HIPAA Privacy Rule requires providers and insurers to protect patients' Personal Health Information (PHI). However, a provision allowing for some disclosures in connection with billing and payment can and does lead to the disclosure of patients' PHI, sometimes without their understanding or permission. Without strong protections to prevent such disclosure, teens and young adults insured on their parents' health plan may be deterred from seeking care, particularly sensitive services like reproductive health care and mental health services. Victims of domestic and sexual assault may also be prevented from safely accessing care such as contraception and STI testing without their abuser finding out. And if individuals with confidentiality concerns do seek care, they may not be able to use their insurance, forcing them to pay out-of-pocket or turn to already-strained safety net programs.

A number of other states have also taken steps to improve health care access and protect confidentiality for individuals insured as dependents by requiring that health plans communicate directly with the individual receiving care. Planned Parenthood strongly supports putting in place similar confidentiality protections in Hawaii.

**Thousands of people in Hawaii still lack access to the full range of reproductive health services.** Access to comprehensive sexual and reproductive health care, without discrimination, is critical for the health and economic security of people in Hawaii. RHEA will give more people in Hawaii the ability to decide if and when they have children based on what's best for them and their family's circumstances. Hawaii must continue its leadership in promoting all peoples' ability to

access the health care they need and deserve, no matter what happens at the federal level. Please give Hawaii families access to the health care they need to thrive by supporting SCR 143 and giving us the ability to pass a RHEA in the future.

Thank you for your consideration and support for this important resolution.

Sincerely,

Laurie Field  
Hawaii State Director



## Hawaii Women's Coalition

To: Hawai'i State House of Representatives Committee on Legislative Management  
Hearing Date/Time: Wed., Apr. 7, 2021, 2:00 pm  
Place: Hawai'i State Capitol, Rm. 312  
Re: Testimony of Hawai'i Women's Coalition in strong support of SCR 143, SD1

Dear Chair Kobayashi and Members of the Committee,

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 at no cost, especially in the wake of COVID-19 and widespread job loss. With the Affordable Care Act and abortion access under threat at the Supreme Court, Hawai'i should pass legislation to solidify ACA health benefits, safeguard access to abortion, and save money in the budget down the road.

Now is the time to take action to ensure all people in Hawai'i have access to the full range of preventive sexual and reproductive health services with no out-of-pocket costs. SCR 143 will request the Auditor to conduct a social and financial assessment of the mandatory health insurance coverage proposed under S.B. 623, the Reproductive Health Equity Act (“RHEA”), if required pursuant to H.R.S. §23-51.

### **Thousands of people in Hawai'i still lack access to the full range of health services.**

Without action, people in Hawai'i will continue to be forced to pay high costs and delay care or forego care altogether, risking their health and economic security.

- While state law requires insurance plans to pay for the full range of FDA-approved contraceptives without cost-sharing, thousands of people must pay out-of-pocket for other basic, preventive health services.
- RHEA would fill these coverage gaps – it would strengthen state law by requiring a wide range of sexual and reproductive health care services with no out-of-pocket costs.
- Hawai'i needs RHEA: forcing people to pay out-of-pocket for sexual and reproductive health care negatively impacts health, particularly for those who already face significant barriers to care. Forcing people to delay or forego preventive care would only serve to create new public health crises and strain emergency services during a global pandemic.
- Transgender and gender non-conforming people often face barriers when accessing services categorized as “women's” health care, including gender-specific cancer screenings and the full range of reproductive health services. RHEA would help transgender and gender non-conforming people access these necessary and life-saving services.

### **Hawaii needs SCR 143 to pass RHEA and fill gaps in sexual and reproductive health coverage.**

RHEA will ensure that people in Hawai'i have coverage for crucial preventive sexual and reproductive health services at zero out-of-pocket cost and prohibit discrimination by:

- Requiring insurers to cover essential sexual and reproductive health services without cost-sharing, including abortion, the full range of contraceptive methods, and vasectomy;

- Prohibiting insurance companies from discriminating in insurance coverage, including coverage of reproductive health services, based on gender or gender identity.

All people deserve equal access to health care and the freedom to decide whether or not to become a parent or grow a family. Please pass SCR 143 to ensure that RHEA can provide people in Hawai'i with access to the care they need.

Thank you for your consideration and support for this important resolution.

Sincerely,  
Laurie Field  
Hawai'i Women's Coalition Community Co-Chair



**SCR-143-SD-1**

Submitted on: 4/5/2021 9:54:43 PM

Testimony for LMG on 4/7/2021 2:00:00 PM

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Present at Hearing</b>
Anna Chua	Individual	Support	No

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 at no cost, especially in the wake of COVID-19 and widespread job loss. With the Affordable Care Act and abortion access under threat at the Supreme Court, Hawai'i should pass legislation to solidify ACA health benefits, safeguard access to abortion, and save money in the budget down the road.

Now is the time to take action to ensure all people in Hawai'i have access to the full range of preventive sexual and reproductive health services with no out-of-pocket costs. SCR 143 will request the Auditor to conduct a social and financial assessment of the mandatory health insurance coverage proposed under S.B. 623, the Reproductive Health Equity Act ("RHEA"), if required pursuant to H.R.S. §23-51.

Thousands of people in Hawai'i still lack access to the full range of health services and are forced to pay out-of-pocket for other basic, preventive health services. Without action, people in Hawai'i will continue to be forced to pay high costs and delay care or forego care altogether, risking their health and economic security. Transgender and gender non-conforming people often face barriers when accessing services categorized as "women's" health care, including gender-specific cancer screenings and the full range of reproductive health services. RHEA would help transgender and gender non-conforming people access these necessary and life-saving services. It is imperative to eliminate discrimination to accessing coverage of reproductive health services, based on gender or gender identity.

All people deserve equal access to health care and the freedom to decide whether or not to become a parent or grow a family. Please pass SCR 143 to ensure that RHEA can provide people in Hawai'i with access to the care they need.

Thank you for your consideration and support for this important resolution.

Anna Chua

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**SCR-143-SD-1**

Submitted on: 4/7/2021 10:43:07 AM

Testimony for LMG on 4/7/2021 2:00:00 PM

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Present at Hearing</b>
Nikki-Ann Yee	Individual	Support	No

Comments:

I support SCR143!