



**SCR161/SR126  
RELATING TO INSURANCE**

Ke Kōmike 'Aha Kenekoa o ka 'Oihana Kālepa a me ka Ho'omalū Mea Kemu  
Senate Committee on Commerce and Consumer Protection

Malaki 25, 2021

9:30 a.m.

Lumi 229

The Office of Hawaiian Affairs' (OHA) Beneficiary Advocacy and Empowerment Committee will recommend that the Board of Trustees **SUPPORT** SCR161/SR126, which urges that gender transition treatments be considered medically necessary for insurance coverage purposes. OHA has been long committed to Maui Ola, the holistic health and well-being of all 'ōiwi, as it relates to traditional and cultural concepts of health and the social, environmental, and personal factors that influence health. This measure would provide a meaningful and permanent way to ensure that our mähū,<sup>1</sup> transgender, and gender non-conforming community members' unique medical needs are treated, considered, and valued.

Mähū, transgender, and gender non-conforming people have deep roots in traditional Hawaiian society, and remain a significant but often unacknowledged part of Hawai'i's community today. Hawaiian culture has a rich history of gender diversity and acceptance of those who would now be considered lesbian, gay, bisexual, transgender, or gender non-conforming. In pre-colonial Hawaiian culture and society, aikāne and mähū were revered and maintained special roles in society and in certain cultural practices.<sup>2</sup> Today, Hawai'i also ranks first in the nation as the state with the highest proportion of its population composed of transgender adults.<sup>3</sup> Unfortunately, our community today does not meaningfully acknowledge and accommodate our mähū, transgender, and gender non-conforming communities, resulting in various forms of systemic and invidious discrimination not reflective of Hawai'i's cultural history and traditional values.

Despite being recognized and included in positions of reverence in the Hawaiian Kingdom and in pre-contact Hawai'i, mähū, transgender, and gender non-conforming people in Hawai'i face significant adversities today. Their exclusion from consideration or recognition in policies and programs may not only perpetuate such adversities, but may also limit our society from realizing and benefiting from its members' true and full potential. This includes exclusion

<sup>1</sup> Mähū is often asserted to be completely different from transgender or gay categories in the West. Niko Besnier & Kalissa Alexe Yeff Gender on the Edge Transgender, Gay, and Other Pacific Islanders 8 (2014).

<sup>2</sup> See, e.g., NOENOE SILVA, ALOHA BETRAYED: NATIVE HAWAIIAN RESISTANCE TO AMERICAN COLONIALISM (2004); Lilikalā Kame'eleihiwa, *Le'ale'a o nā Kūpuna: Traditional Hawaiian Sexuality*, Ke Ola Mamo Conference (1999); Keith Bettinger, *Historically Speaking: A quick look at homosexuality and gender roles in pre-contact Hawai'i*, HONOLULU WEEKLY (June 20-26, 2007).

<sup>3</sup> WILLIAMS INSTITUTE, HOW MANY ADULTS IDENTIFY AS TRANSGENDER IN THE UNITED STATES? 3 (2016).

from insurance coverage for what are recognized as medically necessary services,<sup>4</sup> which inhibits the realization of Maui Ola for all ‘ōiwi, and the full inclusion and participation of māhū, transgender, and gender non-conforming people in our society. By urging that gender transition surgeries and treatments be recognized as medically necessary for the purposes of health care insurance coverage, this measure would take an important step toward better supporting this segment of our community, improving their lives and well-being, and thereby benefitting our society overall.

Accordingly, please **PASS** SCR161/SR126. Mahalo piha for the opportunity to testify on this measure.

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<sup>4</sup> THE WORLD PROFESSIONAL ASSOCIATION FOR TRANSGENDER HEALTH, STANDARDS OF CARE FOR THE HEALTH OF TRANSEXUAL, TRANSGENDER, AND GENDER NONCONFORMING PEOPLE 55 (2011).



March 19, 2021

Senate's Committee on Commerce and Consumer Protection  
Hawai'i State Capitol  
415 South Beretania Street  
Honolulu, HI 96813

RE: **Senate Concurrent Resolution 161**

Aloha Chair Baker, Vice Chair Chang and Committee Members,

I am writing in support with requested amendments for Senate Concurrent Resolution 161 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 161 calls for SUPPORTING AND URGING THE INCLUSION OF GENDER TRANSITION TREATMENTS AND SERVICES AS MEDICALLY NECESSARY FOR THE PURPOSES OF HEALTH CARE INSURANCE COVERAGE.

To fulfill the much-needed goal of SCR 161 the LGBT Caucus is requesting the following amendments to the resolution:

Insert the following on line 41 on page 4:

BE IT FURTHER RESOLVED by the Senate of the Thirty-first Legislature of the State of Hawaii, Regular Session of 2021, the House of Representatives concurring, that the Auditor is requested to perform an analysis of the proposed requirement that "all health care services related to gender transition treatments shall be considered medically necessary and not cosmetic", as proposed in Senate Bill No. 752; and

BE IT FURTHER RESOLVED that the Auditor is requested to submit findings of the sunrise analysis to the Legislature no later than twenty days prior to the convening of the Regular Session of 2022; and

Amend the Order Clause (the last Resolved clause) to read as follows:

BE IT FURTHER RESOLVED that certified copies of this Concurrent Resolution be transmitted to the Governor, Lieutenant Governor, State of Hawaii's Auditor, Director of Health, Director of Commerce and Consumer Affairs, and Insurance Commissioner.

We are requesting these amendments to trigger the "sunrise audit" and thereby complying with Hawai'i Revised Statutes (HRS) section 23-51 as well as HRS section 23-52. Thus, assisting SCR 161 in achieving its ultimate goal of ensuring that gender transition treatments be considered medically necessary for Hawaii's transgender community and covered by their health insurance policy.

We would like to note that Colin M. Hayashida, the Insurance Commissioner of the Department of Commerce and Consumer Affairs' - Insurance Division, is already on record saying that the "sunrise audit" is necessary in Commissioner Hayashida's written testimony before the [House of](#)

## LGBT Caucus Testimony is Support of SCR 161 with Requested Amendments

[Representative's Committee on Health, Human Services, and Homelessness for House Bill 285, that took place of Tuesday, February 9, 2021.](#)

The LGBT Caucus knows that the passage of SCR 161 is a necessity to help achieve justice and equality for Hawaii's Transgender community. SCR 161 says it perfectly why this resolution is so needed.

Mahalo nui loa for your time and consideration,

Michael Golojuch, Jr.

Chair

LGBT Caucus of the Democratic Party of Hawai'i

**SCR-161**

Submitted on: 3/22/2021 8:36:21 AM

Testimony for CPN on 3/25/2021 9:30:00 AM

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Present at Hearing</b>
Maddalynn Seseapasara	Testifying for HHHRC	Support	No

Comments:

Aloha Chair Baker, Vice Chair Chang, and Honorable Members,

Please pass SCR161/SR126 which urges that medically necessary care include the listed types of care that transgender people in Hawai'i need. Some insurance providers in Hawai'i deem procedures such as breast augmentation as "cosmetic," which puts lives and mental health at great risk. Insurance companies also claim that such procedures are costly even though [multiple studies prove otherwise](#). Please pass this resolution to ensure insurance providers in the state are following their moral and legal duty to treat transgender people without discrimination when seeking insurance coverage for transgender care, which is all medically necessary.

Mahalo,

Maddalynn Seseapasara

Hawaii Health & Harm Reduction Center

Kua'ana Project, Project Manager

**SCR-161**

Submitted on: 3/22/2021 2:26:20 PM

Testimony for CPN on 3/25/2021 9:30:00 AM

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Present at Hearing</b>
Laurie Field	Testifying for Planned Parenthood Votes Northwest and Hawaii	Support	No

Comments:


Planned Parenthood Votes Northwest and Hawaii supports SCR 161. Thank you!



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MĀNOA

LGBTQ+ Center

To: Sen. Rosalyn Baker, Chair  
Sen. Stanley Chang, Vice Chair  
Members of the Committee on Commerce and Consumer Protection

From: Camaron Miyamoto, Director  
LGBTQ+ Center  
University of Hawai'i at Mānoa 

Date: Thursday, March 25, 2021

Re: **Strong support to PASS SCR 161/SR 126 WITHOUT AMENDMENTS**

Aloha Chair Baker, Vice Chair Chang, and Honorable Members,

Thank you for this opportunity to submit written testimony in strong support to pass SCR 161/SR 126 without amendments. My testimony does not represent the official opinion of the university, but is informed by over 20 years of professional service, research and advocacy for Lesbian, Gay, Bisexual, Transgender, Queer (LGBTQ+) communities. It is my opinion that this legislation is necessary to align insurance providers with the university policies of non-discrimination.

Please pass this legislation as drafted. The language was drafted with meticulous input from transgender and non-binary communities in Hawai'i from over 70 stakeholder organizations. SCR 161/SR 126 as drafted, represent a thorough and rigorous process of input, collaboration and consultation of transgender and non-binary communities in Hawai'i.

Please pass this resolution to ensure insurance providers in the state are following their moral and legal duty to treat transgender people without discrimination when seeking insurance coverage for transgender care, which is all medically necessary.

Mahalo for this opportunity to submit testimony and your careful consideration on this matter.

Queen Lili'uokalani Center for Student Service 211-C  
2600 Campus Road Honolulu, Hawai'i 96822-2205  
Telephone: (808) 956-9250 Fax: (808) 956-9314  
Email: LGBTQ@hawaii.edu

An Equal Opportunity/Affirmative Action Institution

**SCR-161**

Submitted on: 3/20/2021 12:48:32 PM

Testimony for CPN on 3/25/2021 9:30:00 AM

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Present at Hearing</b>
Mike Golojuch, Sr.	Testifying for Rainbow Family 808	Support	No

Comments:

Rainbow Family 808 strongly supports SCR161. Please pass this resolution. Thank you.

Mike Golojuch, Sr., Secretary, Rainbow Family 808





**LATE**

Committee: Committee on Commerce and Consumer Protection  
Hearing Date/Time: Thursday, March 25, 2021, 9:30 a.m.  
Place: Via videoconference  
Re: Testimony of the ACLU of Hawai'i in Support of S.C.R. 161/S.R. 126, Supporting and Urging the Inclusion of Gender Transition Treatments and Services as Medically Necessary for the Purposes of Health Care Insurance Coverage

Dear Chair Baker, Vice Chair Chang, and members of the Committee:

The American Civil Liberties Union of Hawai'i ("ACLU of Hawai'i") writes **in support of S.C.R. 161/S.R. 126**, which urges the recognition of gender transition treatments as medically necessary for the purposes of health insurance coverage.

In 2016, the Hawai'i State Legislature passed Act 135,<sup>1</sup> which prohibits health insurance discrimination in participation or coverage under a policy against any person on the basis of the person's actual or perceived gender identity. Since the law's passage, however, ACLU of Hawai'i has received complaints that health insurance providers are not complying with the law, leaving many patients in a state of uncertainty about their rights and how to receive the medically necessary care to which they are entitled. Specifically, we have received reports that health insurance providers are violating HRS §431:10A-118.3(b)(4)(A), which requires coverage for services relating to gender transition, providing that there is coverage under the policy for those services when they are unrelated to gender transition. For example, some insurance providers in Hawai'i deem procedures such as breast augmentation as "cosmetic," which puts lives and mental health at great risk.

S.C.R. 161/S.R. 126 addresses this problem by recognizing the medical necessity of transition-related treatments and services, reflecting the views of every major medical association. This resolution is a necessary step forward to further to goals of Act 135, offer guidance to health insurance providers regarding their legal and moral obligations, and to ultimately help ensure that people can access the care that they need and deserve.

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<sup>1</sup> Codified as Haw. Rev. Stat. §431:10A-118.3.

American Civil Liberties Union of Hawai'i  
P.O. Box 3410  
Honolulu, Hawai'i 96801  
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F: 808.522-5909  
E: [office@acluhawaii.org](mailto:office@acluhawaii.org)  
[www.acluhawaii.org](http://www.acluhawaii.org)

ACLU of Hawai'i testimony in support of S.C.R. 161/S.R. 126  
March 25, 2021  
Page 2 of 2

For the above reasons, the ACLU of Hawai'i requests that the Committee support this measure.  
Thank you for the opportunity to testify.

Sincerely,



Mandy Fernandes  
Policy Director  
ACLU of Hawai'i

*The mission of the ACLU of Hawai'i is to protect the fundamental freedoms enshrined in the U.S. and State Constitutions. The ACLU of Hawai'i fulfills this through legislative, litigation, and public education programs statewide. The ACLU of Hawai'i is a non-partisan and private non-profit organization that provides its services at no cost to the public and does not accept government funds. The ACLU of Hawai'i has been serving Hawai'i for over 50 years.*

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**LATE**

## TESTIMONY IN SUPPORT OF SCR 161

TO: Chair Baker, Vice-Chair Chang, & Commerce & Consumer Protection Committee

FROM: Nikos Leverenz  
Grants, Development & Policy Manager

DATE: March 25, 2021 (9:30 AM)

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Hawai'i Health & Harm Reduction Center (HHRC) **supports** SCR 161, which urges the inclusion of gender transition treatments and services as medically necessary for the purposes of health insurance coverage.

Unlike many other states, Hawai'i includes gender identity in its civil rights and anti-discrimination laws. Yet there is still a lot of work to do in combating structural biases and social stigma that negatively impact the health and well-being of trans persons. Structural biases include the provision of health care generally and access to gender transition-related medication, services, and surgery. As the resolution notes many mental health disorders and substance use disorders among gender minorities are a consequence of minority stress that results from the continued need to cope with societal stigma and discrimination. Stigma is still regrettably present in socioeconomic venues from the schoolyard to corporate board rooms, including those making key decisions in a profit-driven health care system.

[HHRC's Kua'ana Project](#) is a trans-led and trans-staffed program that offers a range of services to the transgender community, including gender affirming services, health care linkage services, supportive services, and education and advocacy. In late November Kua'ana Project hosts O'ahu's annual Transgender Day of Remembrance, a global commemoration of those who have lost their lives to gender-based violence.

HHRC's mission is to reduce harm, promote health, create wellness, and fight stigma in Hawai'i and the Pacific. We work with many individuals who are impacted by poverty, housing instability, and other social determinants of health. Many have behavioral health problems, including those relating to substance use and underlying mental health conditions. Many of our clients and participants have been deeply impacted by trauma, including histories of physical, sexual, and psychological abuse.

Thank you for the opportunity to testify on this measure.

**SCR-161**

Submitted on: 3/20/2021 10:36:07 AM

Testimony for CPN on 3/25/2021 9:30:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Breanna Zoey	Individual	Support	No

Comments:

Dear committee, my name is Breanna, my pronouns are she/her, and I am transgender. I will testify in person and share additional thoughts with you personally, but for the mean time I would like to submit some written testimony in support of this resolution.

Please allow SCR161 to pass so that we can continue to send a clear message to our big health insurance companies and mutual benefit societies that the way they currently view and cover transgender health care is in need of an immediate overall. It is blatantly clear that until required these insurance companies will never, ever do the right thing and provide transgender people with the coverage we need. The insurance companies just do not care about trans folks and would rather leave us to die than provide the basic coverage we need, as evidenced by their repeated public refusal to expand coverage. I'm sick and tired of this, and I'm so tired of my insurance company thinking they have even the slightest clue on trans health care. **THEY HAVEN'T THE SLIGHTEST CLUE!!**

Until legislation is passed, so many trans people in our community, myself included, are forced to struggle day in and day out. The big insurance organizations just don't understand or even want to take the time to understand what it's like being trans, the adversity and discrimination they inflict on us, the kind of crummy situations they directly put people like me through, or just how much people just like me are hurting and struggling just to make it through another day and live to see tomorrow. All we literally want is to feel seen for who we are, and to have basic health care access. Is that really too much to ask?

On a personal note, I currently need to pay out of pocket for much of my own health care needs because my insurance company calls it "not medically necessary." I don't want to go in to financial debt any more, but I literally have no other option beyond not getting the care that I need, which is not an option. It's so frustrating that I need to incur tens of thousands of dollars of debt for care that should intuitively be covered by insurance. It's so irritating we are letting these giant insurance companies cripple our trans citizens, how can we possible think that this is ok?

And you know what, I am tired of insurance companies citing limited research as an excuse for trans coverage. HRS 432E-1.4 explicitly says that when professional

standards of care (SOC) are inconsistent or outdated, which the World Professional Association for Transgender Health (WPATH) current SOCs are, that expert opinion can be used. We have so many experts who have been providing their opinions for so long on trans health care yet somehow, we still let the insurance companies dismiss them. That needs to change, and our insurance companies need to start following the law and listening to expert opinion.

Lastly, I try my best to never compare the needs of transgender people to any other groups because it's not fair to the other groups. But I'm going to try painting just one example of a service that should be covered now for trans women but isn't. And this is just one example, one of the seemingly more controversial ones, and I can provide more if asked.

- **Breast augmentation.** The world generally understands how important breasts are for women. And I don't just mean when it comes to breast feeding. Breasts are generally important when it comes to feeling and being seen as a woman in our society. Imagine a woman who had to have a bilateral mastectomy following a battle with breast cancer... how do you think people would react if insurance companies were allowed to say that breast reconstruction was "not medically necessary"? It's oh so similar for trans women like myself, but unfortunately because I am trans we allow the insurance companies to discriminate against me and say that even though we as a society understand the importance of breasts for women that I'm somehow excluded from that or that I'm somehow different. ***NEWS FLASH, WOMEN ARE WOMEN, AND WE NEED TO ENSURE INSURANCE COMPANIES STOP DISCRIMINATING AGAINST TRANS WOMEN RIGHT NOW.***

Thank you for the opportunity to provide this testimony and I look forward to speaking with you all on the Zoom hearing.

Breanna, she/her

**SCR-161**

Submitted on: 3/21/2021 9:52:40 AM

Testimony for CPN on 3/25/2021 9:30:00 AM

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

**Comments:**

Aloha Chair Baker, Vice Chair Chang, and Honorable Members,

Please pass SCR161/SR126 which urges that medically necessary care include the listed types of care that transgender people in Hawai'i need. Some insurance providers in Hawai'i deem procedures such as breast augmentation as "cosmetic," which puts lives and mental health at great risk. Insurance companies also claim that such procedures are costly even though [multiple studies prove otherwise](#). Please pass this resolution to ensure insurance providers in the state are following their moral and legal duty to treat transgender people without discrimination when seeking insurance coverage for transgender care, which is all medically necessary.

Mahalo,

Shayna Lonoaea Alexander

Aloha mai 'oukou,

I am here to provide testimony in support of SCR161/SR126 which provides a first step in transition related care. I have a unique experience as a retransitioner (MtFtMtF) who detransitioned for 20 years before later beginning to retransition at 40. I only discovered at 40 I have intersex genetics and signs of an abnormal endocrine system. I have never had good experiences with medical except when leaving the state for care. I had hard experiences and traumatic ones as well that caused me to detransition. But detransition also gave me new perspectives; one without much social limits; and what a happy transgender individual could be if either a) no one judged them or b) their outward appearance matched internally.

I am here to provide testimony in my two transition periods where medical fails transgender individuals and how not much has changed in the 20 years I have missed from a benefits standpoint. Also I am also here to point out what happens during a transition and how suicide, threats of homelessness, dysphoria, and the transgender condition can lead to loss of life and serious life-long health impairments. While I do believe that individuals within the healthcare system do advocate for transgender rights; I don't always believe they fully represent our voices; unless they are our voices.

I first transitioned at 18. I detransitioned at 22. At 18 I had a hard time finding a doctor willing to give me hormones; it was near-impossible but I was determined. While I ended up finding a doctor I encountered medical based discrimination based on my gender identity as well as a lack of training or desire to be known as the doctor treating trans patients. There is a taboo for that that I am all-too-aware of. My hormones always felt off...i dealt with beard growth while on hormones indicating my testosterone was not adequately suppressed. Breast augmentation, gender confirming surgeries were not available and I did go through what at the time was the Harry Benjamin standards of care; currently WPATH. I do believe it to be a gatekeeper in the negative sense but it never kept me from my ultimate mistake; detransition. The doctor was all too willing to remove my breasts without seeking care; and other doctors were supportive as well. I identify as a trans lesbian and although transfeminine; I am a tomboy; I have always earlier found that invalidating; others used it against me "You may want to be a woman; but you're not really (mentally) a woman". This was told to me by doctors and those closest to me; and I am in fact at 40; intersex; and no I was not the one who was confused; others were confused by me; but I paid the price. Hid myself; told myself it was in my head; until it wouldn't go away again and I thought about suicide.

I am known now because I am an innovator. I've done things people didn't think were possible and I've recently begun to make a name for myself in that I've created a way to turn any movie on Netflix into an 'ōlelo Hawai'i film via the platform 'ōleloflix. I've also been successful in my private life up and during detransition. Everything that had been denied to me during my first transition was easy success after detransition. And step after step I got everything I wanted in life; except being a woman. My successes were made possible because I did detransition; and almost purely because of this. While my talents, passion, and hard work were contributing

factors they were also present factors when I transitioned my first time. I experienced severe discrimination based on my male looks and voice in female form. I could not be hired and even when resorting to fields I thought I may be accepted (in which I also had not talents I would not). I was literally one of the most talented and hireable computer software engineer available and I could not get single job anywhere save delivering newspapers or cleaning out restaurant stoves after midnight.

My spirit had been broken. The sexualization of my existence and identity. And the correlation to my gender identity in conjunction with pedophiles, bestiality, prostitution, and liar and cheats. I grew up on a strong moral foundation but I was told on a daily basis in many ways that I was sub-human. When out of money I could not even sell my blood plasma because I was trans. Jobs that were opened for me specifically were denied to me after I disclosed.

These are very real realities. These are not made up stories. They are not a perception of a reality. They were my reality. Worse aspects I will not disclose in testimony but the reason I bring these up is that there are 1) health, safety, and employment issues with passing as the gender identified sex (such as the prevention of suicide) as well as 2) body positivity. Cleft lips are a birth defect and are covered as medically necessary. Why isn't transgender health care? At 40 I have now identify in a full genome certain genetic traits known to cause XY Sex Reversal 9 via the ZFPM2 gene. I believe this to be the cause of my gender dysphoria; and could have caused more signs of actually physically being born with a vagina and XY chromosomes. I also had supraphysiological endogenous estrogen (native estradiol above female normal levels prior to HRT or feminizing hormones. In my studies I've learned there are many genetic and enzymatic functions which are different in transgender folk that during the develop can cause gender dysphoria. Why is a child with a cleft lip so cared for and peoples hearts bleed out in caring support but a transgender child disgusting?

We have a serious lack of compassion for those with gender identity issues. It's still labeled a choice and a disorder or a mental illness. I have genetic proof. I can point to the exact dna regions in the genes that caused my gender dysphoria and geneticists have pointed out to me.

So; what have I encountered?

- 1) Difficulty with accessing services; needing to become an expert on everything to access care. Some of this I am still hopeful after 2 years of trying; but haven't yet accessed anything beyond hormones.
- 2) Some care completely inaccessible.

**Kaiser:** Did not give me hormones for over a year after I made initial contact because I had levels of estradiol too high (above 240 pg/ml pre-HRT). After the levels subsided after 7 months (discovered a weight component that triggered my novel aromatase) they finally started me on hormones but low-dosed me; as I complained on a weekly/biweekly basis that my hormones were off because I felt off after 5 days post-shot. My estradiol finally tested at male levels; despite being on HRT at 45 pg/ml.



They also told me I had to wait 6 months or 1 year to apply for breasts or GRS or Hair removal but said breasts were not generally covered; when inquiring with insurance staff, hospital staff could not give me any reasons.

The waiting periods were in addition to the time they would not give me hormones and not accounting for the fact that I was also a retransitioner and had already been on hormones for multiple years in an earlier transition; or already at levels of estradiol higher than their target levels by my natural hormones (prior to hrt). They also did not want to acknowledge my highly unique condition as a DSD; and rejected a cause until my second genetics tests confirm and oddity that is known to cause XY males to be born with vaginas; or somewhere between; from research I also found this can impact how the testes aromatize estradiol. No doctor has confirmed this and they stopped looking.

It reminds me of 20 years ago when I saw on O'ahu a Doctor named Dr. Rodwell who was the only person treating trans patients; did so once a week, and was the only person willing and able to see. Kaiser is that; despite with the presence of hormones tests but not better science.

During this time suicide was contemplated as I was dealing with a number of other life issues...transition just seemed impossibly out of reach. This is a real effect of denying people care.

**Others:** From Dec 2019 to April 2020 I sought care from other providers. No providers knew what to do with my situation but I finally found a Hawai'i licensed doctor living in California to provide my care at my expense. However when it was finally started as a new baseline my estradiol had dropped due to 25 lbs of weight loss. I kept him because of Kaiser's lack of care. I had also tried Planned Parenthood and the Lavender clinic but they were either unwilling to see me because of my novel aromatase and lacking experience or because certain drugs like bicalutamide (an effective androgen blocker) were not in their formulary and what I consider a poor riskier with side-effects anti-androgen, I contacted about 10 doctors in and out of state during this time. Many were unwilling to see me because I was trans and they kept sending me to the same people who were causing my lack of care.

**Out of Pocket costs:**

- Facial Feminization Surgeries (2001)
- Voice feminization surgery
- Laser Hair Removal

**HMSA:** I felt better off with HMSA because of blue cross blue shield and it being a PPO that perhaps I could get better hormone coverage. I left the state and have begun seeing a famous out of state doctor for transgender care. I love my care currently. However HMSA with navigating the process is impossible; and Kaiser was a better provider of care; however lacked quality hormonal care. With HMSA I can't even get an answer on the phone after 8 calls whether a surgery is covered. I also spoke to 5 providers which are HMSA providers and they will not even see me because I am trying to use insurance to pay for the Breast Augmentation;

while they will see other transgender patients who are paying out of pocket. I was told by our HR's insurance representative that I would have to be seen; apply for care and be denied; in order to appeal before she could help me but I cannot get that far. One provider's staff member went as far to tell me the many times they've submitted claims; event times the procedure was preauthorized; only to be later declined..and they won't work with insurance for breast augmentation. I've also learned not a single hair removal insurance claim has ever been covered despite it being a covered benefit and conversations now have me worried about GRS coverage; which i am on a 3 year waiting list for with the surgeon that I came out of pocket for the procedures, as I understand it many folks get denied for this procedure despite it being covered. I believe that if we truly care about people; and whether people live or die; gender dysphoria is an entirely treatable disorder that does not need to cause loss of life. It is medically necessary; and procedures are entirely different. My biggest dysphoria has always been facial hair and my voice which i have come out of pocket for because coverage was not accessible to me; they would not even make a claim on my behalf; and as I understand it; noone in Hawai'i has been successful.

During my first transition; the violence done to me; my self esteem; and my fear of never having a happy life were very tied to how others saw me and how I saw myself; it would have had an entirely different effect if medical treatments not available to me at the time had made themselves available with helpful support. It seems only the fringes of the medical community will deal with transgender care and it still carries taboo with doctors.

If you; were trapped; right now; in the opposite body forever; you lost your opportunities and freedoms; and people looked at you as freak and would not hire you; then you look at how cisgender folks have it so easy; they take everything for granted; the world is not free from prejudice but trans folks have it the worst.

Please look at our gender dysphoria for what it is. A medically treatable birth defect. Our body is the birth defect. Not our mind. We are powerful, strong, have a broad perspectives, and can be teachers. Feel the same as the child with a cleft lip who you feel for because they look monstish and you want to help. We look monstish to ourselves in the mirror because our physical appearance doesn't align with who we know ourselves to be inside.

FFS, Voice, Quality (emphasis on quality) HRT, Hair Removal (Electrolysis and Laser, including face and body), Breast Augmentation, Mastectomy, GRS are all medically necessary procedures needed to correct a birth defect.

I apologize for any typos; or confusing areas. I wanted to make sure my testimony was received on time so it can be used. I hope my testimony will be used to further transgender heathcare; please feel free to reach out to me for more questions or discussion.

Kalani Bright  
she/her/'o ia/kona



**SCR-161**

Submitted on: 3/20/2021 10:17:11 AM

Testimony for CPN on 3/25/2021 9:30:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Thaddeus Pham	Individual	Support	No

Comments:

Aloha CPN Committee,

As a public health professional and concerned community member, I urge you to **pass SCR161 without amendments.**

The individual and public health implications of this are very real, with data from the Hawai'i Dept. of Health's most recent Sexual and Gender Minority Health Report showing stark health disparities for transgender people, especially youth. As has been made clear by the ongoing COVID pandemic, quality and comprehensive healthcare for all communities are essential not only for public health but also economic sustainability and growth.

I personally collaborate with many local LGBTQIA+ community members and agencies, who have contributed to the development of this measure in its current form. **Please pass this resolution as it is.**

With aloha,

Thaddeus Pham (he/him)

**SCR-161**

Submitted on: 3/20/2021 10:23:46 AM

Testimony for CPN on 3/25/2021 9:30:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Thaddeus Pham	Individual	Support	No

Comments:

Aloha Chair Yamane, Vice Chair Tam, and Honorable Members,

As a public health professional and concerned community member, I urge you to **pass HCR51 without amendments.**

Hawai'i Department of Health's Sexual and Gender Minority [Reports](#) showed that our Lesbian, Gay, Bisexual, and Transgender youth experience higher rates of suicidality than their peers. Passing this resolution will help to ensure a comprehensive statewide policy of suicide prevention and postvention that is LGBTQ inclusive.

I personally collaborate with many local LGBTQIA+ community members and agencies, who have contributed to the development of this measure in its current form. **Please pass this resolution as it is.**

Mahalo,

Thaddeus Pham (he/him)

**SCR-161**

Submitted on: 3/20/2021 5:54:22 PM

Testimony for CPN on 3/25/2021 9:30:00 AM

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Present at Hearing</b>
Dr. Lawrence Frank	Individual	Support	No

Comments:

Aloha Chair Baker, Vice-Chair Chang, and Honorable Members,

Please pass SCR161/SR126, which urges that medically necessary care include the listed types of care that transgender people in Hawai'i need. One such person is my 11-year-old transgender daughter, who will soon be needing this affirming care, and she approaches puberty. Some insurance providers in Hawai'i deem procedures such as breast augmentation as "cosmetic," which puts lives and mental health at great risk. Insurance companies also claim that such procedures are costly even though [multiple studies prove otherwise](#). Please pass this resolution to ensure that insurance providers in the state follow their moral and legal duty to treat transgender people without discrimination when seeking insurance coverage for transgender care, which is all medically necessary.

My Ph.D. is in Human Sexuality, and my dissertation focused on sexuality education and transgender youth. My study is relevant to this bill as transgender youth face interpersonal issues such as lack of acceptance, chronic discrimination, and transphobia, as well as a host of individual-level risks such as experiences of clinical anxiety, depression, hopelessness, suicidal ideations, and substance abuse due to adverse experiences when affirming care is not provided (Ching et al., 2018). I have advocated, studied, and fought hard so that my daughter has a place as a member of our society and, more salient, as a human being that deserves validation as a citizen.

Please be pono, do what is right for diversity and inclusion, and for the support of Hawaii's transgender community. Help to restore the honored role that mahu held in Hawaiian society. My daughter and all transgender people deserve to be treated well and have their gender affirmed and supported through the care that they need!

Mahalo,

Lawrence "Bo" Frank, PhD

**SCR-161**

Submitted on: 3/21/2021 9:48:44 AM

Testimony for CPN on 3/25/2021 9:30:00 AM

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Present at Hearing</b>
Jen Jenkins	Individual	Support	No

Comments:

Aloha Chair Baker, Vice Chair Chang, and Honorable Members,

Please pass SCR161/SR126 which urges that medically necessary care include the listed types of care that transgender people in Hawai'i need. Some insurance providers in Hawai'i deem procedures such as breast augmentation as "cosmetic," which puts lives and mental health at great risk. Insurance companies also claim that such procedures are costly even though [multiple studies prove otherwise](#). Please pass this resolution to ensure insurance providers in the state are following their moral and legal duty to treat transgender people without discrimination when seeking insurance coverage for transgender care, which is all medically necessary.

Mahalo,

Jen Jenkins

**SCR-161**

Submitted on: 3/21/2021 9:56:10 AM

Testimony for CPN on 3/25/2021 9:30:00 AM

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Present at Hearing</b>
Windy Vaughs	Individual	Support	No

Comments:

Nobody "chooses" to be transgender, bisexual, homosexual, heterosexual anymore than they choose to be born with 11 toes or 3 nipples. We are all mammals and all mammals should be offered the same health insurance coverage without special attention to their inherent identity or sexuality.



**SCR-161**

Submitted on: 3/22/2021 5:29:53 AM

Testimony for CPN on 3/25/2021 9:30:00 AM

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Present at Hearing</b>
Itai Bradshaw-Lang	Individual	Support	No

Comments:

Aloha Chair Baker, Vice Chair Chang, and Honorable Members,

Please pass SCR161/SR126 which urges that medically necessary care include the listed types of care that transgender people in Hawai'i need. Some insurance providers in Hawai'i deem procedures such as breast augmentation as "cosmetic," which puts lives and mental health at great risk. Insurance companies also claim that such procedures are costly even though [multiple studies prove otherwise](#). Please pass this resolution to ensure insurance providers in the state are following their moral and legal duty to treat transgender people without discrimination when seeking insurance coverage for transgender care, which is all medically necessary.

Mahalo,

Itai Bradshaw-Lang

**SCR-161**

Submitted on: 3/22/2021 8:06:57 AM

Testimony for CPN on 3/25/2021 9:30:00 AM

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

Comments:

Aloha Chair Baker, Vice Chair Chang, and Honorable Members,

Please pass SCR161/SR126 which urges that medically necessary care include the listed types of care that transgender people in Hawai'i need. Some insurance providers in Hawai'i deem procedures such as breast augmentation as "cosmetic," which puts lives and mental health at great risk. Insurance companies also claim that such procedures are costly even though [multiple studies prove otherwise](#). Please pass this resolution to ensure insurance providers in the state are following their moral and legal duty to treat transgender people without discrimination when seeking insurance coverage for transgender care, which is all medically necessary.

Mahalo,

Nikki-Ann Yee

**SCR-161**

Submitted on: 3/22/2021 8:14:15 AM

Testimony for CPN on 3/25/2021 9:30:00 AM

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Present at Hearing</b>
Kamuela Werner	Individual	Support	No

Comments:

Aloha:

I strongly support SCR161.

Me ke aloha,

Kamuela Werner

**SCR-161**

Submitted on: 3/22/2021 8:19:29 AM

Testimony for CPN on 3/25/2021 9:30:00 AM

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Present at Hearing</b>
Kunane Dreier	Individual	Support	No

Comments:

Aloha Chair Baker, Vice Chair Chang, and Honorable Members,

Please pass SCR161/SR126 which urges that medically necessary care include the listed types of care that transgender people in Hawai'i need. Some insurance providers in Hawai'i deem procedures such as breast augmentation as "cosmetic," which puts lives and mental health at great risk. Insurance companies also claim that such procedures are costly even though [multiple studies prove otherwise](#). Please pass this resolution to ensure insurance providers in the state are following their moral and legal duty to treat transgender people without discrimination when seeking insurance coverage for transgender care, which is all medically necessary.

Mahalo,

Kunane Dreier

**SCR-161**

Submitted on: 3/22/2021 8:58:40 AM

Testimony for CPN on 3/25/2021 9:30:00 AM

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Present at Hearing</b>
Wallace Engberg	Individual	Support	No

Comments:

Aloha Chair Baker, Vice Chair Chang, and Honorable Members,

Please pass SCR161/SR126 which urges that medically necessary care include the listed types of care that transgender people in Hawai'i need. Some insurance providers in Hawai'i deem procedures such as breast augmentation as "cosmetic," which puts lives and mental health at great risk. Insurance companies also claim that such procedures are costly even though [multiple studies prove otherwise](#). Please pass this resolution to ensure insurance providers in the state are following their moral and legal duty to treat transgender people without discrimination when seeking insurance coverage for transgender care, which is all medically necessary.

Mahalo,  
Wallace Engberg

**SCR-161**

Submitted on: 3/22/2021 10:50:53 AM

Testimony for CPN on 3/25/2021 9:30:00 AM

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Present at Hearing</b>
Linda Kim	Individual	Support	No

Comments:

Aloha Chair Baker, Vice Chair Chang, and Honorable Members,

Please pass SCR161/SR126 which urges that medically necessary care include the listed types of care that transgender people in Hawai'i need. Some insurance providers in Hawai'i deem procedures such as breast augmentation as "cosmetic," which puts lives and mental health at great risk. Insurance companies also claim that such procedures are costly even though [multiple studies prove otherwise](#). Please pass this resolution to ensure insurance providers in the state are following their moral and legal duty to treat transgender people without discrimination when seeking insurance coverage for transgender care, which is all medically necessary. The American Psychological Association, The American Medical Association, The American Psychiatric Association all support transgender persons being able to avail themselves of this medically necessary surgery. In the AMA Journal of Ethics, an article stated "Gender dysphoria is a common condition, and the consensus of the scientific medical community is that gender-affirming surgery is medically necessary for appropriate candidates." You can read the article here:

<https://journalofethics.ama-assn.org/article/exclusion-medically-necessary-gender-affirming-surgery-americas-armed-services-veterans/2018-04>

Mahalo,

**SCR-161**

Submitted on: 3/22/2021 4:18:55 PM

Testimony for CPN on 3/25/2021 9:30:00 AM

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Present at Hearing</b>
Eileen McKee	Individual	Support	No

Comments:

I support SCR161.

Mahalo for considering my testimony.

Eileen McKee

Kihei

**SCR-161**

Submitted on: 3/23/2021 5:49:15 PM

Testimony for CPN on 3/25/2021 9:30:00 AM

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Present at Hearing</b>
Andrea Quinn	Individual	Support	No

Comments:

Dear Honorable Committee Members,

Please support SCR161. The only reasons such treatments aren't already available in health care coverage is because the majority is catering to a minority of Christian bigots. Religious bigotry has no place in modern society.

Thank you,

Andrea Quinn



**SCR-161**

Submitted on: 3/24/2021 9:38:26 AM

Testimony for CPN on 3/25/2021 9:30:00 AM

**LATE**

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Present at Hearing</b>
Roque Olmos	Individual	Support	No

Comments:

I am from Salt Lake City; Utah and I have been working and volunteering in the LGBTQIA+ community since 2012 as an educator delivering workshops as a guest speaker to student body and faculty at Colleges and Universities along the west coast.

I moved to Hawaii in 2019 with my partner for him to pursue his career opportunities and over the last year I was blessed to learn a few things about the Hawaiian culture.

I work for a non-profit on island and I have had the opportunity to see how richly Hawaiians care about each other, foster a deep care for Ohana and have seen how that reaches out and positively effects our communities.

Over the years of learning and speaking about Trans-Awareness and struggles, my experience has brought me to know irrefutably that SCR161 is a life saving health care right. This bill would fundamentally provide proper care and life saving treatments to members in our community who feel hopeless, suicidal or are the target of hate crimes.

We need this for Hawaii, we need this for our communities, and we need this for our families.

Millions of voices and identities are swallowed by darkness because committees and legislators like this one can only see through their own experience and their own lens.

There is a colorful world out there made of many different people and identities.

Hawaii should be a beacon of hope and light.

You cannot live Aloha, if you are actively sabotaging the opportunity for others trying to live it.