



WRITTEN TESTIMONY ONLY

STATE OF HAWAII
DEPARTMENT OF HEALTH

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**Testimony COMMENTING on H.C.R. 33
REQUESTING THE AUDITOR TO CONDUCT A SOCIAL AND FINANCIAL
ASSESSMENT OF THE PROPOSED MANDATORY HEALTH INSURANCE
COVERAGE FOR EARLY ACCESS BREAST CANCER SCREENING**

REPRESENTATIVE AARON LING JOHANSON, CHAIR
HOUSE COMMITTEE ON CONSUMER PROTECTION & COMMERCE

Hearing Date: April 5, 2022

Room Number: Conference Room 329
& Videoconference

1 **Fiscal Implications:** The Department of Health (DOH) defers to the Office of the State Auditor
2 on the fiscal implications of conducting the social and financial assessment.

3 **Department Testimony:** The DOH offers comments on House Concurrent Resolution 33
4 (H.C.R. 33). H.C.R. 33 requests that the Auditor conduct an impact assessment report to
5 increase categories of women required to have coverage for mammography however the
6 increases proposed do not align with the U.S. Preventive Services Task Force (USPSTF)
7 recommendations that guide federal screening policies and practices. Based on the analysis of
8 harm to benefit the USPSTF does not currently recommend breast cancer screening before age
9 fifty except for women in their forties with a parent, sibling, or child with breast cancer.¹ The
10 Department respectfully recommends following the USPSTF guidelines of biennial screening
11 mammography for women aged fifty to seventy-four years for breast cancer screening and
12 supplemental screening.

13 According to the 2018 data from the Hawaii Behavioral Risk Factor Surveillance System,
14 87% of women aged fifty to seventy-four years had a mammogram within the past two years.²
15 Screening is effective in identifying breast cancer early, when it is often highly treatable.

¹ U.S. Preventive Services Task Force, Final Recommendation Statement, Breast Cancer: Screening, January 11, 2016.
<https://www.uspreventiveservicestaskforce.org/uspstf/recommendation/breast-cancer-screening>. Accessed on February 3, 2021.

² Hawaii State Department of Health, Hawaii Health Data Warehouse. Behavioral Risk Factor Surveillance System. (2018).
<http://hhdw.org>. Accessed on February 3, 2021.

1 Increasing cancer screening rates and ensuring access to breast cancer screening for residents of
2 Hawaii is a priority for both Centers for Disease Control and Prevention funded programs, the
3 Hawaii Breast and Cervical Cancer Control Program and Hawaii Comprehensive Cancer Control
4 Program in the DOH which follow the USPSTF recommendations.

5 Thank you for the opportunity to testify on this measure.

6 **Offered Amendments:** None



April 5, 2022

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REPRESENTATIVE AARON JOHANSON, CHAIR
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MEMBERS OF THE CONSUMER PROTECTION AND COMMERCE COMMITTEE

Re: **House Concurrent Resolution (HCR) 33– SUPPORT**
REQUESTING THE AUDITOR TO CONDUCT A SOCIAL AND FINANCIAL
ASSESSMENT OF PROPOSED MANDATORY HEALTH INSURANCE COVERAGE FOR
EARLY ACCESS BREAST CANCER SCREENING.

Dear Chair, Vice-Chair and Members of the Committee:

The Hawaii Society of Clinical Oncology (HSCO) is a local community of oncologists, nurse practitioners, physician assistants, and other allied health professionals who provide a voice for multidisciplinary cancer care teams and the patients they serve. Founded in 1996, HSCO is the largest oncology professional organization in the state.

We support HCR33 as this promotes the goals of coverage that were proposed in 2021's Senate Bill (SB) 827. We support this change to coverage because it follows the screening guidelines issued by leading clinical organizations such as the American College of Radiology, the National Comprehensive Cancer Network, and the American Medical Association instead of the U.S. Preventive Services Task Force (USPSTF).

The current standards are based national guidelines from the USPSTF. However, doing so fails to acknowledge the evidence showing women of certain ethnic groups suffer a disproportionately higher rate of breast cancer diagnosis before the age of fifty. Hawaii has a large population of Asian American women who have an earlier peak age of breast cancer diagnosis and a Native Hawaiian population which has the highest mortality from breast cancer. Because of the ethnic diversity in Hawai'i, health insurance coverage for screening for certain risk factors as well as lowering the age of for women to undergo baseline mammograms would improve health outcomes for those women whose ethnic backgrounds and other characteristics make them susceptible to an earlier onset of breast cancer.

Thank you for the opportunity to testify.



ASCO State/Regional
Affiliate Program



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HOUSE COMMITTEE ON CONSUMER PROTECTION AND COMMERCE

Representative Aaron Ling Johanson, Chair

Representative Lisa Kitagawa, Vice Chair

Date: April 5, 2022

From: Hawaii Medical Association

Elizabeth Ann Ignacio MD, Chair, HMA Legislative Committee

Elizabeth England MD, Vice Chair, HMA Legislative Committee

Re: HCR 33 Auditor; Impact Assessment Report; Mandatory Health Insurance Coverage; Early Access Breast Cancer Screening

Position: Support

This resolution requests that the Auditor conduct an impact assessment report for a proposed mandate of health insurance coverage for early access breast cancer screening. This report would include the social and financial effects of the proposed mandated coverage.

The most frequently diagnosed cancer in the women of Hawaii by far is breast cancer, making up approximately 34% of newly diagnosed cases^{1,2}. United States Preventive Services Task Force (USPSTF) guidelines recommend cancer screening for women at age fifty. But women in Hawaii between the ages of forty and forty-nine have higher incidence of breast cancer compared to the national average. USPSTF guidelines adversely impact women of Asian ancestry in Hawaii who are the ethnic group most likely to develop breast cancer before the age of fifty. In addition, Native Hawaiian women have the greatest breast cancer incidence and mortality in Hawaii.

Risk assessment and early detection decreases breast cancer morbidity and mortality. Expansion of insurance coverage for breast cancer screening for younger women of Hawaii will increase the early identification of breast cancer, and forward earlier initiation of the treatment needed.

A proposed mandate for health insurance coverage for early access breast cancer screening is necessary for the early detection and treatment of breast cancer in the women of Hawaii. HMA commends our lawmakers for this auditor resolution, which is an important step toward legislation that can save lives, especially for our minority women who are more likely to develop breast cancer before age 50. HMA strongly supports this resolution and all efforts to improve breast cancer screening in Hawaii.

Thank you for allowing the Hawaii Medical Association to testify in support of this resolution.

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REFERENCES

1. Loo LWM, Williams M, Hernandez BY. The high and heterogeneous burden of breast cancer in Hawaii: A unique multiethnic U.S. Population. Cancer Epidemiol. 2019 Feb;58:71-76.
2. University of Hawaii at Manoa Speaker Series. "Cancer Disparities and Survival in Hawai'i." Jan 7, 2022.
3. Sharp Declines in Breast and Cervical Cancer Screening. 2021 June 30. Center for Disease Control and Prevention (CDC). <https://www.cdc.gov/media/releases/2021/p0630-cancer-screenings>.
4. Hawaii Radiological Society and American College of Radiology: "Breast Screening Disparities, Diverse Populations and Divergent Guidelines" September 25, 2020. <https://www.youtube.com/watch?v=9o8uMuLxM4k&feature=youtu.be>
5. Sherman R. Mammogram guidelines can put women of color at risk. *Washington Post*. December 8, 2020. <https://www.thelily.com/mammogram-guidelines-can-put-women-of-color-at-risk-these-women-thank-god-they-advocated-for-themselves/>
6. Monticciolo DL, Newell MS, Hendrick RE, Helvie MA, Moy L, Monsees B, et al. Breast Cancer Screening in Women at Higher-Than-Average Risk: Recommendations From the ACR. J Am Coll Radiol. 2018;15(3):408-414.

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*American College of
Obstetricians and Gynecologists
Hawai'i, Guam & American Samoa Section*

TO: House Committee on Consumer Protection & Commerce
Representative Aaron Ling Johanson, Chair
Representative Lisa Kitagawa, Vice Chair

DATE: Tuesday, April 5, 2022, 2:00PM

FROM: Hawai'i Section, ACOG
Reni Soon, MD, MPH, FACOG, Chair

Re: HCR 33
Position: SUPPORT

The Hawai'i Section of the American College of Obstetricians and Gynecologists (HI ACOG) supports HCR 33 which requests that the auditor conduct a social and financial assessment of proposed mandatory health insurance coverage for early access breast cancer screening.

As the premier physicians in the healthcare of women and those identifying as women or assigned female at birth, we provide care for many patients needing screening for breast cancer. There is nothing like talking face to face with a patient concerned about her risk of breast cancer and then struggling to get her what you, as her physician, have determined with her to be the most appropriate imaging for her. Each year, over 1400 people are diagnosed with breast cancer in Hawai'i, and we know that there are significant disparities in how our communities experience breast cancer, such as higher incidence and higher mortality among Native Hawaiians.¹ In addition, emerging evidence from the University of Hawai'i cancer center suggests that people of Asian, Hispanic, and African-American descent are more likely to develop breast cancer before the age of 50 (when the United States Preventive Services Task Force recommends starting screening).

We urge you to support HCR 33.

Mahalo for the opportunity to testify.

¹University of Hawaii Cancer Center. Hawaii Cancer at a Glance 2012-2016. Accessed at: www.uhcancercenter.org/pdf/htr/Hawaii%20Cancer%20at%20a%20Glance%202012_2016.pdf#page=21

Sunday, April 3, 2022

Aloha,

My name is Kristina L. Hulama, a current intern with The Hawai'i State Rural Health Association and a current Graduate Student in the Master of Social Work program at The University of Hawai'i at Mānoa, Thompson School of Social Work & Public Health. I am testifying in **FULL SUPPORT of H.C.R. No. 33**, Requesting The Auditor To Conduct A Social And Financial Assessment Of Proposed Mandatory Health Insurance Coverage For Early Access Breast Cancer Screenings.

According to the 2019 U.S. Census Bureau, an estimated 1.4 million Native Hawaiians/Pacific Islanders reside in the United States, representing only about 0.4% of the total U.S. population. The U.S. Department of Health and Human Services, Office of Minority Health, reported that Native Hawaiian/Pacific Islander women have the highest incidence and mortality rates due to breast cancer compared to the general population. For some odd reason, Native Hawaiian/Pacific Islander women are being diagnosed at the same rates as women from other ethnic backgrounds but are dying at higher and faster rates than any other ethnic group in Hawai'i.

The U.S. and Hawai'i governments have an ethical and legal obligation to address this gross disparity. Every Native Hawaiian woman has a right to live a long, healthy, and happy life with their family and within their community. Healthcare is a fundamental human right. The World Health Organization states that "the enjoyment of the highest attainable standard of health is one of the fundamental rights of every human being without distinction of race, religion, political belief, economic or social condition."

My family and I have personally been affected by cancer. I lost my sister Kristie at the young age of 34 due to cancer. She experienced barriers to accessing cancer-related services and discrimination from providers and institutions in the healthcare field. My family lost a dearly beloved wife, daughter, and sister.

If we can prevent even one more woman, wife, daughter, and sister from dying at a young age from cancer, we as a society have an obligation to at least try. I believe this policy can help with this, so I am testifying in **FULL SUPPORT of H.C.R. No. 33**, Requesting The Auditor To Conduct A Social And Financial Assessment Of Proposed Mandatory Health Insurance Coverage For Early Access Breast Cancer Screenings.

Sincerely,
Kristina L. Hulama