



DAVID Y. IGE
GOVERNOR

JOSH GREEN
LT. GOVERNOR

**STATE OF HAWAII
OFFICE OF THE DIRECTOR
DEPARTMENT OF COMMERCE AND CONSUMER AFFAIRS**

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CATHERINE P. AWAKUNI COLÓN
DIRECTOR

JO ANN M. UCHIDA TAKEUCHI
DEPUTY DIRECTOR

Testimony of the Department of Commerce and Consumer Affairs

**Before the
Senate Committee on Commerce and Consumer Protection
Thursday, February 3, 2022
9:30 a.m.
Via Videoconference**

**On the following measure:
S.B. 2835, RELATING TO INSURANCE**

Chair Baker and Members of the Committee:

My name is Colin M. Hayashida, and I am the Insurance Commissioner of the Department of Commerce and Consumer Affairs' (Department) Insurance Division. The Department offers comments on this bill.

The purposes of this bill are to: (1) prohibit health insurance companies from denying coverage on the basis of gender identity if the policy covers the treatment for purposes other than gender transition; and (2) require insurance companies to provide applicants and insured persons with clear information about the coverage of gender transition services, including the process for appealing a claim denied on the basis of medical necessity.

Section 2, page 2, lines 12 – 13, and Section 3, page 7, lines 13 - 14 of the bill amend two similar non-discrimination sections regulating insurers and Mutual Benefit Societies (MBS). Amending HRS §§ 431:10A-118.3 and 432:1-607.3 to reference health maintenance organizations (HMO), rather than amending the equivalent non-discrimination section applicable to HMOs in HRS § 432D-26.3, would result in three

separate, inconsistent non-discrimination sections applying to HMOs and will likely cause confusion.

In addition, the Department concurs with requiring insurers to provide applicants and insureds with clear information about the coverage of gender transition services, including the process for appealing a claim denied on the basis of medical necessity.

However, language in Section 2, page 4, lines 13-14 and Section 3, page 9, lines 15-16, that “[a]ll health care services related to gender transition treatments shall be considered medically necessary[.]” read in conjunction with the amendments in this bill, may be construed to circumvent the analysis of medical necessity, which is defined in HRS § 432E-1.4. Further, it is unclear whether these amendments would be construed as “in addition to the essential health benefits” within the meaning of 45 Code of Federal Regulations (CFR) § 155.170(a) or subject to defrayment provisions under 45 CFR § 155.170(b), which apply to benefits “in addition to the essential health benefits.”

For the Committee’s information, Hawaii Revised Statutes section 23-51 provides, in part, that “[b]efore any legislative measure that mandates health insurance coverage for specific health services, specific diseases, or certain providers of health care services as part of individual or group health insurance policies, [sic] can be considered, there shall be concurrent resolutions passed requesting the auditor to prepare and submit to the legislature a report[.]”

Thank you for the opportunity to testify.

SB-2835

Submitted on: 1/31/2022 9:13:59 AM

Testimony for CPN on 2/3/2022 9:30:00 AM

Submitted By	Organization	Testifier Position	Remote Testimony Requested
Aaron Ruddick	Testifying for HHHRC	Support	No

Comments:

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

I strongly support SB 2835 which updates the language on the transgender anti-discrimination health insurance law to further support case by case determinations and requires insurance companies in Hawai'i to post their policies.

There is an overwhelming and growing consensus among major medical organizations that transition-related health care services, including surgical treatments, to alleviate gender dysphoria are medically necessary ([HRS §432E-1.4](#)) and should be fully covered by patients' insurance. Without insurance coverage of these medically necessary procedures (that are provided for the cisgender people), trans lives are put at risk for depression and suicidal ideation.

Please make sure that insurance companies are not ignoring the majority of medical opinion and forming their own internal policies (e.g HMSA Policy Number: MM.06.026 & Kaiser 2022 policy page 41) that ignore the law and medical necessity of gender-affirming care by passing this bill.

Thank you for investing in the health and safety of our māhū and trans community members!

Sincerely,

Aaron Ruddick

Hepatitis Care Coordinator

HHHRC

SB-2835

Submitted on: 2/1/2022 4:06:27 PM

Testimony for CPN on 2/3/2022 9:30:00 AM

Submitted By	Organization	Testifier Position	Remote Testimony Requested
Laurie Iona	Testifying for HHHRC	Support	No

Comments:

I fully support the bill SB2835 and those who are advocating the health and well being of trans folk.



Statement of the Democratic Party of Hawai'i Comments on SB2835, Relating to Insurance

The [Democratic Party of Hawai'i](#) supports SB2835, Relating to Insurance, to the extent that it aligns with our Party's [platform](#). The bill would prohibit health insurance companies from denying coverage on the basis of gender identity if the policy covers the treatment for purposes other than gender transition; and require insurance companies to provide applicants and insured persons with clear information about the coverage of gender transition services, including the process for appealing a claim denied on the basis of medical necessity.

The Democratic Party of Hawai'i believes that healthcare is a right, not a privilege - one that extends to people of all genders regardless of their gender identity. Our platform notes that the high costs of insurance and insufficient coverage mean that many people do not have access to the care they need - particularly those from ethnic, sexual, or gender minority backgrounds. We further believe we must take steps to prohibit discrimination in healthcare based on gender.

We support this bill as it would clarify that insurance companies cannot categorically deny medically necessary surgeries and require them to post their policies. The bill would align Hawai'i's anti-discrimination insurance statute with the current medical majority understanding of trans-affirming care, which is important as Hawai'i has the highest trans population per capita of any state in the U.S.

Mahalo nui for the opportunity to provide these comments in support of this important bill.

SB-2835

Submitted on: 1/31/2022 11:16:13 PM

Testimony for CPN on 2/3/2022 9:30:00 AM

Submitted By	Organization	Testifier Position	Remote Testimony Requested
Michael Golojuch Jr	Testifying for Stonewall Caucus of the Democratic Party of Hawaii	Support	Yes

Comments:

Aloha Senators,

The Stonewall Caucus of the Democratic Party of Hawai'i (formerly the LGBT Caucus), Hawai'i's oldest and largest policy and political LGBTQIA+ focused organization, fully supports SB 2835.

We hope you all will support this important piece of legislation.

Mahalo nui loa,

Michael Golojuch, Jr.
Chair and SCC Representative
Stonewall Caucus for the DPH



AMERICANS FOR DEMOCRATIC ACTION

OFFICERS	DIRECTORS	MAILING ADDRESS		
John Bickel, President	Melodie Aduja	Jan Lubin	Bill South	P.O. Box 23404
Alan Burdick, Vice President	Keola Akana	John Miller	Zahava Zaidoff	Honolulu
Dave Nagajji, Treasurer	Juliet Begley	Jenny Nomura		Hawaii 96823
Doug Pyle, Secretary	Stephanie Fitzpatrick	Stephen O'Harrow		

January 31, 2022

TO: Chair Baker and Members of the CPN Committee

RE: SB 2835 Relating to Insurance

Support for a Hearing on February 3

Americans for Democratic Action is an organization founded in the 1950s by leading supporters of the New Deal and led by Patsy Mink in the 1970s. We are devoted to the promotion of progressive public policies.

Americans for Democratic Action Hawaii supports this bill as it would prohibit health insurance companies from denying coverage on the basis of gender identity if the policy covers the treatment for purposes other than gender transition. Also it requires insurance companies to provide applicants and insured persons with clear information about the coverage of gender transition services, including the process for appealing a claim denied on the basis of medical necessity.

Thank you for your consideration.

Sincerely,

John Bickel, President

SB-2835

Submitted on: 2/1/2022 9:34:01 AM

Testimony for CPN on 2/3/2022 9:30:00 AM

Submitted By	Organization	Testifier Position	Remote Testimony Requested
Maddalynn Seseapasara	Testifying for Hawaii Health & Harm Reduction Center	Support	Yes

Comments:

Hawai‘i Health & Harm Reduction Center (HHHRC) supports SB 2835. This bill requires insurance providers to post their gender identity policies and clarifies the language of Act 135 (2016), which states that insurance agencies cannot discriminate based on gender identity. Without the clarifications in this bill, insurance companies in Hawai‘i will likely continue to categorically deny surgeries they claim are not medically necessary despite the reality of the science, law, and, most importantly, the lived experiences of māhū and trans people in Hawai‘i.

Because of our leadership in the local transgender community, we frequently hear from community members seeking gender affirming surgery and healthcare. Despite Act 135 from 2016, trans community members continue to be denied medically necessary and life-saving procedures. There is an overwhelming and growing consensus among major medical organizations that transition-related health care services, including surgical treatments, to alleviate gender dysphoria are medically necessary and should be fully covered by patients’ insurance. Without insurance coverage of these medically necessary procedures (that are provided for the cisgender people), trans lives are put at risk for depression and suicidal ideation.

We need your help in correcting this issue of gender-based discrimination. Thank you for the opportunity to testify in support of this bill.

Mahalo nui,

Maddalynn Seseapasara

Hawaii Health & Harm Reduction Center

Kua'ana Project Manager

SB-2835

Submitted on: 2/1/2022 2:45:04 PM

Testimony for CPN on 2/3/2022 9:30:00 AM

Submitted By	Organization	Testifier Position	Remote Testimony Requested
Keiva Lei Cadena	Testifying for Kumukahi Health + Wellness	Support	No

Comments:

Dear Chair Baker, Vice Chair Chang and members of the committee,

My name is Keiva Lei Cadena. I am the Director of Harm Reduction Services at Kumukahi Health & Wellness (formerly known as Hawaii Island HIV AIDS Foundation) on Hawaii Island. I am also a transgender woman.

We at Kumukahi Health + Wellness strongly support SB2835 which updates the language on the transgender anti-discrimination health insurance law to further support case by case determinations and requires insurance companies in Hawai'i to post their policies.

There is an overwhelming and growing consensus among major medical organizations that transition-related health care services, including surgical treatments, to alleviate gender dysphoria are medically necessary ([HRS §432E-1.4](#)) and should be fully covered by patients' insurance. Without insurance coverage of these medically necessary procedures (that are provided for the cisgender people), trans lives are put at risk for depression and suicidal ideation as well as contributes to the ongoing high risk lifestyle choices for survival that put transgender people at higher rates of exposure to HIV and other STI's, physical mental and emotional abuse, substance use and violence including death.

Please make sure that insurance companies are not ignoring the majority of medical opinion and forming their own internal policies (e.g HMSA Policy Number: MM.06.026 & Kaiser 2022 policy page 41) that ignore the law and medical necessity of gender-affirming care by passing this bill.

Thank you for investing in the health and safety of our māhū and trans community members!

Respectfully,

Keiva Lei K. Cadena

Director of Harm Reduction Services

Kumukahi Health + Wellness

Hilo, Hawaii

SB-2835

Submitted on: 1/28/2022 4:27:03 PM

Testimony for CPN on 2/3/2022 9:30:00 AM

Submitted By	Organization	Testifier Position	Remote Testimony Requested
Patricio Battani	Individual	Support	No

Comments:

Dear Chair Baker, Vice Chair Tam and Members of the Committee:

I strongly support SB 2835 which updates the language on the transgender anti-discrimination health insurance law and requires insurance companies in Hawai'i to post their policies.

There is an overwhelming and growing consensus among major medical organizations that transition-related health care services, including surgical treatments and electrology, to alleviate gender dysphoria are medically necessary and should be fully covered by patients' insurance. Without insurance coverage of these medically necessary procedures (that are provided for the cisgender people), trans lives are put at risk for depression and suicidal ideation.

As a licensed electrologist, I have seen firsthand what these services can do in the treatment of gender dysphoria. When removing the hair from someone's face and having them see the reduction in density, is a joy that only few would understand.

Insurance companies like HMSA are using outdated and unsubstantiated evidence to discriminate not only based on gender but, race and age. They are only willing to cover laser hair removal which has been proven only to reduce hair by the FDA. Whereas electrology is the ONLY FDA approved method of permanent hair removal. This practice is not rooted in medical science or the realities of the two modalities. Electrology has been around since 1875 as a medical procedure to remove hair. This method is tested and has a long history of results.

Please make sure that insurance companies are not ignoring most of the medical opinion and forming their own internal policies (e.g., HMSA Policy Number: MM.06.026 & Kaiser 2022 policy page 41) that ignore the law and medical necessity of gender-affirming care by passing this bill. The urgency of this matter is great. HMSA will propose to remove electrology as a covered service on April 1, 2022. This is because the claim to not know how to "contract with electrologists".

I have personally given many of these insurance companies information about the medical necessity and ways to contract with licensed electrology, only to have it fall on deaf ears.

Thank you for investing in the health and safety of our māhū and trans community members!

Sincerely,

Patricio Battani

EL-46



January 31, 2022

The Honorable Rosalyn H. Baker, Chair
The Honorable Stanley Chang, Vice Chair
Senate Committee on Commerce and Consumer Protection

Re: SB 2835 – Relating to Insurance

Dear Chair Baker, Vice Chair Chang, and Committee Members:

Hawaii Medical Service Association (HMSA) appreciates the opportunity to testify on SB 2835, which prohibits health insurance companies from denying coverage on the basis of gender identify if the policy covers the treatment for purposes other than gender transition. It also requires insurance companies to provide applicants and insured persons with clear information about the coverage of gender transition services, including the process for appealing a claim denied on the basis of medical necessity.

As a supporter of the LGBTQ+ community HMSA offers gender transition benefits for many of our members. This policy covers gender identity and transition services based on medical necessity as defined by HRS 432.

We would like to respectfully request the State Auditor conduct an impact assessment report pursuant to Section 23-51 and 23-53 of the Hawaii Revised Statutes. Should this bill move forward, we respectfully request that the impact assessment be conducted first since this bill creates new mandated benefits that increase costs for our members.

Thank you for the opportunity to testify on this measure. Your consideration of our comments is appreciated.

Sincerely,

Matthew W. Sasaki
Assistant Vice President
Government & External Relations



LATE

January 31, 2021

The Honorable Rosalyn H. Baker, Chair
The Honorable Stanley Chang, Vice Chair
Senate Committee on Commerce and Consumer Protection

Senate Bill 2835 – Relating to Insurance

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

The Hawaii Association of Health Plans (HAHP) appreciates the opportunity to provide testimony on SB 2835. HAHP is a statewide partnership of Hawaii’s health plans and affiliated organizations to improve the health of Hawaii’s communities together. The vast majority of Hawaii residents receive their health coverage through a health plan associated with one of our organizations.

HAHP appreciates the intent of this measure and would like to respectfully request that the State Auditor first conduct an impact assessment report pursuant to HRS 23-51 and 23-53. The bill as currently written would create new mandated benefits that would increase costs for our members.

Thank you for allowing us to provide comments on SB 2835.

Sincerely,

HAHP Public Policy Committee

cc: HAHP Board Members

hahp.org | 818 Keeaumoku St., Honolulu, HI 96814 | info@hahp.org

AlohaCare | HMAA | HMSA | Humana | HWMG | Kaiser Permanente | MDX Hawaii | Ohana Health Plan |
UHA Health Insurance | UnitedHealthcare

SB-2835

Submitted on: 2/1/2022 3:51:59 PM

Testimony for CPN on 2/3/2022 9:30:00 AM

Submitted By	Organization	Testifier Position	Remote Testimony Requested
Lianne Napolis	Testifying for Hawaii Health & Harm Reduction Center	Support	No

Comments:

I, Lianne Napolis. Wholeheartedly encourage support of this bill SB2835

Please consider passing this bill, in support of Transgendered lives, to help lessen the struggles and discrimination they suffer daily.

Sincerely,

Ms. Lianne Napolis

SB-2835

Submitted on: 02/02/2022

Testimony for: CPN, JDC



Submitted By	Organization	Testifiers' Positions	Present at Hearing
Wendy Taylor And Partners	One Single Rainbow Connection, LLC	Support	Yes

Aloha Representatives,

We are asking you to please consider the passage of Senate Bill 2835, which was proposed last year with the promise of being revisited this year. This bill is of the utmost importance to us, as it affects each one of us, both personally and professionally. As gender non-conforming individuals who work with Hawai'i's trans and gender non-conforming population, we know well that we are in desperate need of an adequate process of health navigation that will be reimbursed by a Hawai'i medical insurance. Currently, we must engage in complex searches for loopholes in the system, find providers who are willing to work for an affordable cost, or wait for open enrollment, to switch plans so that medically necessary care is available.

The current conditions under which our state's transgender population is living is unfair, dangerous, and, for Hawai'i, culturally unacceptable. Hawai'i's culture has historically embraced gender diversity, yet the current gaps in our health care system leave people open to exploitation, inferior medical care, and debilitating stress. In part, it is because of this intersectionality that we are seeing a rise in the already sky-high suicidality rates in gender non-conforming Native Hawaiians. The passage of this bill would be a step toward healing just a small amount of historical trauma for the state's kānaka 'ōiwi, kānaka maoli, and Hawai'i maoli, as well as affording inclusivity to a large community in dire need.

With the utmost respect, we ask you to consider this bill as a life saving measure, as well as a step toward healing this crucial part of Hawai'i's historically oppressed culture. We thank you for your time and look forward to the positive changes we will make together. Mahalo.

Na'u me ka mana'o kōkua,

na Wendy Taylor and Partners

02/02/2022

SB-2835

Submitted on: 1/28/2022 7:34:15 PM

Testimony for CPN on 2/3/2022 9:30:00 AM

Submitted By	Organization	Testifier Position	Remote Testimony Requested
Mike Golojuch, Sr.	Individual	Support	No

Comments:

I support SB2835.

Mike Golojuch, Sr.

Aloha Chair Bake, Vice Chair Chang, and Honorable member

My name is Jen Jenkins and I am writing in **strong support** of SB 2835. This bill requires insurance providers to post their gender identity policies and clarifies the language of Act 135¹ (2016), which states that insurance agencies cannot discriminate based on gender identity provided that there is coverage under the policy, contract, plan, or agreement for the services when the services are not related to gender transition. Without the clarifications in this bill, insurance companies in Hawai'i will likely continue to categorically deny surgeries they claim are not medically necessary despite the reality of the science, law, and, most importantly, the lived experiences of mähū and trans people in Hawai'i.

The trans-affirming procedures in (SB/HB) are almost always medically necessary.

There is an overwhelming and growing consensus among major medical organizations that transition-related health care services, including surgical treatments, to alleviate gender dysphoria are medically necessary and should be fully covered by patients' insurance.² Without insurance coverage of these medically necessary procedures (that are provided for the cisgender people), trans lives are put at risk for depression and suicidal ideation.³ Also, trans

¹ H.B. 2084 HD2 SD1 (2016) *available at* https://www.capitol.hawaii.gov/Archives/measure_indiv_Archives.aspx?billtype=HB&billnumber=2084&year=2016.

² See American College of Obstetricians and Gynecologists, ACOG Releases Guidance on Health Care for Transgender and Gender Diverse Individuals (Feb. 18, 2021) *available at* <https://www.acog.org/news/news-releases/2021/02/acog-guidance-health-care-for-transgender-gender-diverse-individuals>; Kaiser Permanente Northwest, Transgender Procedures Medically Necessary Criteria at 183 (2021) *available at* <https://www.hca.wa.gov/sites/default/files/pebb/kaiser-preauthreqs.pdf>; The World Medical Association, WMA Statement on Transgender People, *available at* <https://www.wma.net/policies-post/wma-statement-on-transgender-people>; The American Medical Association, Issue Brief, *available at* <https://www.ama-assn.org/system/files/2019-03/transgender-coverage-issue-brief.pdf>; Wylie C Hembree & Peggy T Cohen-Ketten et al., J. of Clinical Endocrinology & Metabolism Endocrine Treatment of Gender-Dysphoric/Gender-Incongruent Persons: An Endocrine Society Clinical Practice Guideline (Sept. 13, 2017) *available at* https://academic.oup.com/jcem/article/102/11/3869/4157558?source=post_page-----, The Endocrine Society, Transgender Health, An Endocrine Society Position Statement (Dec. 15, 2020) *available at* <https://www.endocrine.org/advocacy/position-statements/transgender-health>; American Academy of Child & Adolescent Psychiatry, AACAP Statement Responding to Efforts to ban Evidence-Based Care for Transgender and Gender Diverse Youth (Nov. 8, 2018) *available at* https://www.aacap.org/AACAP/Latest_News/AACAP_Statement_Responding_to_Efforts_to_ban_Evidence-Based_Care_for_Transgender_and_Gender_Diverse.aspx, World Professional Association for Transgender Health (2011) *available at* https://e-space.mmu.ac.uk/625048/1/2011_WPATH_Standards_of_Care_V7-%202011.pdf; the American Public Health Association (Nov. 1, 2016) *available at* <https://apha.org/policies-and-advocacy/public-health-policy-statements/policy-database/2017/01/26/promoting-transgender-and-gender-minority-health-through-inclusive-policies-and-practices>; Barry Anton, Proceedings of the American Psychological Association For the Legislative Year 2009: Minutes of the Annual Meeting of the Council of Representatives and Minutes of the Meetings of the Board of Directors (2009) *available at* <https://psycnet.apa.org/record/2010-14198-008>.

³ Fenway Health,

people often resort to underground economies to gain the funds needed for these life saving surgeries, when insurance companies could, at the recommendation of a doctor, have easily covered, the cost.⁴

To categorically deny insurance coverage for transgender affirming/confirming care is to deny insurance based on gender identity in violation of Act 135 and the Insurance Code.

Currently, doctors are telling the insurance companies that, in their medical opinion, they recommend their transgender (a gender identity) patients receive affirming surgery. In response, certain insurance companies deny coverage based on their own, unsubstantiated “policy” and despite the overwhelming scientific evidence. Insurance providers in Hawai‘i deny medically necessary surgeries by claiming that “procedures such as breast augmentation, liposuction, Adam's apple reduction, rhinoplasty, and facial reconstruction are usually considered cosmetic and their impact on relieving gender dysphoria is unclear.”⁵ Because of these unsubstantiated beliefs, these surgeries are denied, even though they are covered for cisgender patients, meaning almost no trans people (until we started advocating at the legislature in 2021) have been approved for coverage of these surgeries since 2017 when the anti-discrimination law (Act 135) came into effect.

These persistent and categorical denials in violation of Act 135 also violate Hawai‘i’s insurance code. HRS §431:2-203 (b)(1) states that a person who intentionally or knowingly violates, intentionally or knowingly permits any person over whom the person has authority to violate, or intentionally or knowingly aids any person **in violating any insurance rule or statute of this State or any effective order issued by the commissioner** shall be subject to any penalty or fine as provided by this code or by the Hawaii Penal Code.

Conclusion

Insurance companies in Hawai‘i claim to support trans people during times like Pride, but then when it’s really needed, fail to provide true care. By passing this bill insurance companies in Hawai‘i will be required to remove policies categorically prohibiting surgeries, prioritizing doctor’s recommendations over their current unsupported policies. Please **PASS** this clarification bill to

New Study Shows Transgender People Who Receive Gender-Affirming Surgery Are Significantly Less Likely To Experience Psychological Distress Or Suicidal Ideation, (April 28, 2021) *available at* <https://fenwayhealth.org/new-study-shows-transgender-people-who-receive-gender-affirming-surgery-are-significantly-less-likely-to-experience-psychological-distress-or-suicidal-ideation/>.

⁴ See Johns Hopkins University, Study: Covering transgender Health Care Would Be cost-effective for Insurance Companies (2015) *available at* <https://hub.jhu.edu/2015/12/03/transgender-health-insurance-cost-effective/>.

⁵ HMSA Policy Number: MM.06.026 *available at* <https://prc.hmsa.com/s/article/Gender-Identity-Services?r=43&ui-knowledge-components-aura-actions.KnowledgeArticleVersionCreateDraftFromOnlineAction.createDraftFromOnlineArticle=1> (Mar. 1, 2021); see also Kaiser Permanent Hawai‘i at 41 (2022) *available at* https://www.opm.gov/healthcare-insurance/healthcare/plan-information/plan-codes/2022/brochures/73-005.pdf?fbclid=IwAR38X63dr3ZhnmeFbZXhOz5HGQKLgXgQ8NGN-CtITd3T6ZcTkuWstLGF_oc.

ensure the insurance companies follow the law and post their policies because māhū and trans lives and well-being depend on it.

Mahalo,

Jen Jenkins

Attachments:

Attorney General Letter, January 14, 2022

NCTE/TLC Letter to Insurance Commissioner April 27, 2021

DAVID Y. IGE
GOVERNOR



HOLLY T. SHIKADA
ATTORNEY GENERAL

VALERIE M. KATO
FIRST DEPUTY ATTORNEY GENERAL

STATE OF HAWAII
DEPARTMENT OF THE ATTORNEY GENERAL
425 QUEEN STREET
HONOLULU, HAWAII 96813
(808) 586-1500

January 18, 2022

The Honorable Chris Lee
Senator, Twenty-Fifth District
The Thirty-First Legislature
State of Hawaii
State Capitol, Room 216
Honolulu, Hawaii 96813

Dear Senator Lee:

Re: Transgender Individuals' Access to Medical Care in Hawaii

In your letter dated December 1, 2021, you asked for an opinion from our office on two questions about whether two reports by the legislative auditor concerning the social and financial impact of mandated health insurance coverage are required by section 23-51, Hawaii Revised Statutes. Specifically, you asked:

- (1) Whether Senate Bill No. 752 (2021) is considered a health mandate that should trigger a "sunrise analysis" by the state auditor pursuant to sections 23-51 and -52, Hawaii Revised Statutes; and
- (2) Why Act 135, Session Law Hawaii 2016, was not considered a health mandate triggering a "sunrise analysis" pursuant to sections 23-51 and -52, Hawaii Revised Statutes.

We note that you raised these two questions in a request for an informal opinion by a letter dated September 1, 2021. Our answers here do not deviate substantially from the informal advice given by Andrea J. Armitage by letter dated September 23, 2021.

- (1) Whether Senate Bill No. 752 (2021) is considered a health mandate that should trigger a "sunrise analysis" by the state auditor pursuant to sections 23-51 and -52, Hawaii Revised Statutes.

Senate Bill No. 752 would amend sections 431:10A-118.3 and 432:1-607.3, Hawaii Revised Statutes (HRS). These two sections were added to their respective chapters of HRS by sections 2 and 4 of Act 135, 2016 Haw. Sess. Laws 447 and 449. Among other things, Senate Bill No. 752 would amend the medical necessity of any treatment in both sections to be in "accordance with the most recent edition of the Standards of Care for the Health of

Transsexual, Transgender, and Gender Nonconforming People, issued by the World Professional Association for Transgender Health.”

This amended definition of medical necessity could be construed as a mandate for new health insurance coverage of specific health services, specific diseases, or certain providers of health care services. However, subsection (d) of each of the two new sections provides, in part:

All health care services related to gender transition treatments shall be considered medically necessary and not cosmetic; provided the policy also provides coverage for those services when the services are offered for purposes other than gender transition (emphasis added), page 4, lines 13-17, and page 9, lines 7-11 of Senate Bill No. 752.

Although Senate Bill No. 752 lists fourteen health services that are to be considered among those health care services related to gender transition treatments, subsection (d) deems those services as being medically necessary only when the policy “provides coverage for those services when the services are offered for purposes other than gender transition.” The effect of subsection (d) is not to mandate specific health services but to prohibit discrimination against persons needing those health services for gender transition if those health services are otherwise covered by the policy when the health services are offered for purposes other than gender transition. As noted in the September 23 informal advice letter, “if a health insurance plan does not already cover ‘Laser hair removal’ services, Senate Bill No. 752 would not mandate the plan to do so for purposes of gender transition.”

As this bill does not require a new health mandate - it prohibits discrimination against persons needing the procedures and the reasons for needing the procedures - it does not trigger the requirement for a “sunrise analysis.”

(2) Why Act 135, Session Law Hawaii 2016, was not considered a health mandate triggering a “sunrise analysis” pursuant to sections 23-51 and -52, Hawaii Revised Statutes.

Act 135, 2016 Haw. Sess. Laws 447, enacted new sections 431-10A-118.3, 432:1-607.3, and 432D-26.3, HRS, that each prohibit discrimination “with respect to participation and coverage under the policy, contract, plan, or agreement against any person on the basis of actual gender identity or perceived gender identity.” Significantly, subsections (b)(4)(A) of the three then new sections included in discrimination the “[d]enying, canceling, or limiting coverage for services on the basis of actual gender identity or perceived gender identity including but not limited to the following: (A) Health care services related to gender transition; provided that there is coverage under the policy, contract, plan, or agreement for the services when the services are not related to gender transition . . .” (emphasis added). See Act 135, 2016 Haw. Sess. Laws 448, 449, and 450.

The Honorable Chris Lee

January 18, 2022

Page 3

The effect of Act 135's three subsections (b)(4)(A) is analogous to the two subsections (d) of Senate Bill No. 752--if certain health care services are covered by the policy, contract, plan, or agreement when the services are not related to gender transition, then it is unlawful to deny coverage for those certain health care services when they are related to gender transition. The effect of the subsections (b)(4)(A) is not to mandate specific health care services but to prohibit discrimination against persons who need those health care services for gender transition if those services are otherwise covered by the policy, contract, plan, or agreement when the health care services are not related to gender transition. As such, the requirement for a "sunrise analysis" is not triggered.

Very truly yours,

Blair Goto

Blair Goto
Deputy Attorney General

APPROVED:



Holly T. Shikada
Attorney General



National Center for Transgender Equality
1032 15th Street NW #199;
Washington, DC 20005

Transgender Law Center
PO Box 70976
Oakland, CA 94612-0976

April, 27, 2021

Colin M. Hayashida
Insurance Commissioner
Department of Commerce and Consumer Affairs
King Kalakaua Building
335 Merchant Street, Rm. 213
Honolulu, Hawaii 96813

cc: Hawaii Medical Service Association (HMSA)
818 Ke'eaumoku St,
Honolulu, HI 96814

Dear Mr. Hayashida,

We, the National Center for Transgender Equality and Transgender Law Center, write to request you ensure that transition-related care, including surgical treatments such as breast augmentation, is deemed medically necessary care for many transgender people and therefore subject to Hawai'i's insurance nondiscrimination laws enacted in 2016 (§ [431:10A-118.3](#) & § [432D-26.3](#)) and the Patient Protection and Affordable Care Act, section 1557a (**42 U.S.C. 18116**). Refusal or failure to cover medically necessary transition-related care is discrimination on the basis of actual gender identity and on the basis of sex. The National Center for Transgender Equality (NCTE) is one of the nation's leading social justice organizations working for life-saving change for transgender people at the federal, state and local level. We believe in the critical importance of eliminating health disparities and ensuring that all people, transgender individuals and their families, do not face discriminatory barriers when seeking quality, affordable health coverage and care. Transgender Law Center (TLC) is the largest national trans-led organization advocating for a world in which all people are free to define themselves and their futures.



Grounded in legal expertise and committed to racial justice, TLC employs a variety of community-driven strategies to keep transgender and gender nonconforming people alive, thriving, and fighting for liberation.

Transition-related care, including surgical care, is medically necessary and lowers suicidal ideation and alleviates negative mental health symptoms for transgender populations

There is an overwhelming and growing consensus among major medical organizations—including the American College of Obstetricians and Gynecologists (ACOG)¹, the World Medical Association (WMA)², the American Medical Association (AMA)³, the Pediatric Endocrine Society⁴, the Endocrine Society⁵, the American Academy of Child & Adolescent Psychiatry (AACAP)⁶, the World Professional Association for Transgender Health (WPATH)⁷, the American Public Health Association (APHA)⁸ and the American Psychological Association (APA)⁹—that transition-related health care services, including surgical treatments, to alleviate gender dysphoria are medically necessary and should be fully covered by patients’ insurance. The broad medical support is directly influenced by robust research literature,

¹ ACOG. (2021). ACOG Releases Guidance on Health Care for Transgender and Gender Diverse Individuals. Retrieved from <https://www.acog.org/news/news-releases/2021/02/acog-guidance-health-care-for-transgender-gender-diverse-in-dividuals>

² WMA. (2020). WMA - The World Medical Association-WMA Statement on Transgender People. Retrieved from <https://www.wma.net/policies-post/wma-statement-on-transgender-people/>

³ AMA. (2019). Health insurance coverage for genderaffirming care of transgender patients (Issue brief). Retrieved from <https://www.ama-assn.org/system/files/2019-03/transgender-coverage-issue-brief.pdf>

⁴ Hembree, W. C., Cohen-Kettenis, P. T., Gooren, L., Hannema, S. E., Meyer, W. J., Murad, M. H., ... & T’Sjoen, G. G. (2017). Endocrine treatment of gender-dysphoric/gender-incongruent persons: an endocrine society clinical practice guideline. *The Journal of Clinical Endocrinology & Metabolism*, 102(11), 3869-3903.

⁵ Endocrine Society. (2020). Transgender Health. Retrieved from <https://www.endocrine.org/advocacy/position-statements/transgender-health>

⁶ American Academy of Child & Adolescent Psychiatry. (2019). AACAP Statement Responding to Efforts to ban Evidence-Based Care for Transgender and Gender Diverse Youth. Retrieved from https://www.aacap.org/AACAP/Latest_News/AACAP_Statement_Responding_to_Efforts-to_ban_Evidence-Based_Care_for_Transgender_and_Gender_Diverse.aspx

⁷ Coleman, E., Bockting, W., Botzer, M., Cohen-Kettenis, P., DeCuypere, G., Feldman, J., ... & Zucker, K. (2012). Standards of care for the health of transsexual, transgender, and gender-nonconforming people, version 7. *International journal of transgenderism*, 13(4), 165-232.

⁸ Promoting Transgender and Gender Minority Health through Inclusive Policies and Practices. (2016). Retrieved from <https://apha.org/policies-and-advocacy/public-health-policy-statements/policy-database/2017/01/26/promoting-transgender-and-gender-minority-health-through-inclusive-policies-and-practices>

⁹ Anton, B. S. (2009). Proceedings of the American Psychological Association for the legislative year 2008: Minutes of the annual meeting of the Council of Representatives. *American Psychologist*, 64, 372–453. doi:10.1037/a0015932



spanning decades, on transition-related care and its beneficial impacts within the transgender community. Specifically, the literature review suggests that gender-affirming and transition-related care services are significantly associated with improvements on mental health outcome measures such as the reduction of suicidal ideation, depression and anxiety.¹⁰ Furthermore, many studies have found that transition-related surgical treatments were significantly associated with higher levels of body satisfaction, self-esteem and quality of life.¹¹

¹⁰ Keo-Meier C, Herman LI, Reisner SL, Pardo ST, Sharp C, & Babcock JC (2015). Testosterone treatment and MMPI-2 improvement in transgender men: A prospective controlled study. *Journal of Consulting and Clinical Psychology*, 83(1), 143–156. doi:10.1037/a0037599; Wilson, E. C., Chen, Y. H., Arayasirikul, S., Wenzel, C., & Raymond, H. F. (2015). Connecting the dots: examining transgender women’s utilization of transition-related medical care and associations with mental health, substance use, and HIV. *Journal of Urban Health*, 92(1), 182-192.; Mueller, S. C., De Cuypere, G., & T’Sjoen, G. (2017). Transgender research in the 21st century: a selective critical review from a neurocognitive perspective. *American Journal of Psychiatry*, 174(12), 1155-1162.; Valentine, S. E., & Shipherd, J. C. (2018). A systematic review of social stress and mental health among transgender and gender non-conforming people in the United States. *Clinical Psychology Review*, 66, 24-38.; Beckwith, N., Reisner, S. L., Zaslowsky, S., Mayer, K. H., & Keuroghlian, A. S. (2017). Factors associated with gender-affirming surgery and age of hormone therapy initiation among transgender adults. *Transgender health*, 2(1), 156-164.; Tucker, R. P., Testa, R. J., Simpson, T. L., Shipherd, J. C., Blosnich, J. R., & Lehavot, K. (2018). Hormone therapy, gender affirmation surgery, and their association with recent suicidal ideation and depression symptoms in transgender veterans. *Psychological medicine*, 48(14), 2329-2336.

¹¹ van de Grift, T. C., Elaut, E., Cerwenka, S. C., Cohen-Kettenis, P. T., Cuypere G. D., Richter-Appelt, H., & Kreukels, B.P. (2017). Effects of medical interventions on gender dysphoria and body image. *Psychosomatic Medicine*, 79(7), 815-823, <https://www.ncbi.nlm.nih.gov/pubmed/28319558> (longitudinal study finding substantially lower rates of gender dysphoria, psychological symptoms, and body dissatisfaction after surgical or hormone treatment); Owen-Smith, A.A., Gerth, J, Sineath R.C., Brazilay, J., et al. (2018). Association between gender confirmation treatments and perceived gender congruence, body image satisfaction, and mental health in a cohort of transgender individuals. *Journal of Sexual Medicine*, 15(4), 591-600. <https://www.ncbi.nlm.nih.gov/pubmed/29463478> (finding that transition-related care, including surgical care, is associated with substantially higher self-esteem and lower levels of depression and anxiety); Nelson, L., Whallett, E., & McGregor, J. (2009). Transgender patient satisfaction following reduction mammoplasty. *Journal of Plastic, Reconstructive & Aesthetic Surgery* 62(3), 331-334 (reduction mammoplasty for transgender people associated with high patient satisfaction and improved quality of life); Parola, N., Bonierbale, M., Lemaire, A., Aghababian, V., Michel, A., & Lançon, C. (2010). Study of quality of life for transsexuals after hormonal and surgical reassignment. *Sexologies*, 19(1), 24-28 (finding improved quality of life among patients after surgery); Ruppin, U. & Pfäfflin, Friedemann. (2015). Long-Term Follow-Up of Adults with Gender Identity Disorder. *Archives of Sexual Behavior*, 44(5), 1321-1329 (study of 71 transgender people 10 or more years after a legal name change, finding that participants showed significantly fewer psychological and interpersonal problems and a substantially increased life satisfaction at follow-up than at the time of the initial consultation); Ainsworth, T. A. & Spiegel, J. H. (2010). Quality of life of individuals with and without facial feminization surgery or gender reassignment surgery. *Quality of Life Research*, 19(7), 1019-1024. <https://www.ncbi.nlm.nih.gov/pubmed/20461468> (finding that transgender women who had received genital and/or facial surgery had higher mental health-related quality of life than transgender women who had not received either surgery); Papadopoulos, N. A., Zavlin, D., Lellé, J., Henrich, G., et al. (2017). Male-to-female sex reassignment surgery using the combined technique leads to increased quality of life in a prospective study. *Plastic and Reconstructive Surgery*, 140(2), 286-294 (prospective study found improved psychological symptoms and quality of life after surgery, compared to patients’ baseline preoperative responses).



Breast augmentation (along with other surgical treatments) is often medically necessary and routinely denying coverage violates Hawai'i's insurance nondiscrimination laws enacted in 2016 (§ [431:10A-118.3](#) & § [432D-26.3](#))

HMSA's 'Gender Identity Services' policy¹² does not specifically exclude transition-related care; however, breast augmentation (along with other surgical treatments) when performed to treat gender dysphoria are labeled as presumptively cosmetic in direct violation of the law. HMSA covers breast augmentation (along with other surgical treatments) when performed to treat other conditions without placing a 'presumptively cosmetic' limitation on coverage¹³. When HMSA, or any other insurance carrier, defines transition-related care as presumptively cosmetic and requires transgender patients and their doctors to overcome such a presumption in order to have care recognized as medically necessary and therefore covered, transgender people are not equally able to access insurance coverage—their coverage for services is limited on the basis of actual gender identity. In the case of HMSA, this limitation is clear when the standard for receiving transition-related breast augmentation is compared with the standard for receiving the same service when not transition-related. HMSA further clarifies its limitation on transition-related care in its Cosmetic and Reconstructive Surgery and Services policy which states, “[c]osmetic services are medical and nonmedical services that . . . are prescribed for psychological or psychiatric reasons.”¹⁴ Commissioner, we urge you to clearly affirm that transition-related care, including surgical treatments, is medically necessary for many transgender people and cannot be subject to any presumptively cosmetic limitations.

Violations of Hawai'i's insurance nondiscrimination laws enacted in 2016 (§ [431:10A-118.3](#) & § [432D-26.3](#)) are likely violations of federal law including the Patient Protection and Affordable Care Act, section 1557a ([42 U.S.C. 18116](#))

Placing limitations on health care specific to transgender Hawai'i residents not only violates state law, it also runs afoul of the Affordable Care Act's nondiscrimination provisions ([42 U.S.C. § 18116](#)). The Affordable Care Act sought to expand insurance coverage to as many people as possible. One strategy to expand coverage was to protect patients from discrimination, including discrimination on the basis of sex. Federal courts and the Obama administration interpreted the sex discrimination prohibited by the Affordable Care Act to include discrimination on the basis of transgender status. In addition, on his first day in office, President Biden required all federal

¹² HMSA. Gender Identity Services. Retrieved from https://hmsa.com/portal/provider/MM.06.026_Gender_Identity_Services.pdf

¹³ HMSA. Cosmetic and Reconstructive Surgery and Services. Retrieved from https://hmsa.com/portal/provider/MM.10.001_Cosmetic_and_Reconstructive_Surgery_and_Services.pdf

¹⁴ HMSA. Cosmetic and Reconstructive Surgery and Services. Retrieved from https://hmsa.com/portal/provider/MM.10.001_Cosmetic_and_Reconstructive_Surgery_and_Services.pdf



departments and agencies, including the Department of Health and Human Services (HHS), to review their regulations and policies to ensure each fully implemented the Supreme Court’s decision in Bostock v Clayton County.^{15 16}

Conclusion

It is discriminatory and wrong to single out any group and deny them access to medically necessary care. Putting limitations on medically necessary transition-related surgical treatments negatively impacts the health of so many transgender Hawai’i residents and in some cases puts their lives at risk. We request the Commissioner use his authority to ensure that transition-related care is deemed medically necessary and not subject to limitations not placed on the same services when provided for other reasons. HMSA, and every other insurance carrier must provide coverage for medically necessary and appropriate care to all Hawai’i residents in a nondiscriminatory manner.

To place ‘presumptively cosmetic’ limitations on transition-related surgical treatments, such as breast augmentation, goes against the overwhelming consensus of medical experts and recognized treatment protocols for gender dysphoria. Such limitations are discriminatory and deny access to lifesaving care for many transgender Hawai’i residents. Routine denial of care negatively impacts the mental and physical health of the transgender community— and in some cases places lives at risk.

As the Hawai’i Insurance Commissioner, we ask that you protect the health of all transgender residents of Hawai’i, fully enforce Hawai’i’s insurance nondiscrimination laws, and affirm that all transition-related care, including surgical treatment, is medically necessary.

Sincerely,

¹⁵ *Bostock v. Clayton County*, 140 S. Ct. 1731, [590 U.S.](#) ____ (2020).

¹⁶ Executive Order 13988 of Jan 20, 2021: [Preventing and Combating Discrimination on the Basis of Gender Identity or Sexual Orientation](#).



D. Ojeda
Policy Advocate
National Center for Transgender Equality

Ian Anderson
Legal Services Project Manager
Transgender Law Center

SB-2835

Submitted on: 1/29/2022 10:45:46 AM

Testimony for CPN on 2/3/2022 9:30:00 AM

Submitted By	Organization	Testifier Position	Remote Testimony Requested
Thaddeus Pham	Individual	Support	No

Comments:

Dear Chair Baker, Vice Chair Chang, and Members of the CPN Committee:

As a public health professional and concerned member of the LGBTQIA+ community, I strongly support SB 2835 which updates the language on the transgender anti-discrimination health insurance law and requires insurance companies in Hawai'i to post their policies.

There is an overwhelming and growing consensus among major medical organizations that transition-related health care services, including surgical treatments, to alleviate gender dysphoria are medically necessary and should be fully covered by patients' insurance. Without insurance coverage of these medically necessary procedures (that are provided for the cisgender people), trans lives are put at risk for depression and suicidal ideation.

Please make sure that insurance companies are not ignoring the majority of medical opinion and forming their own internal policies (e.g HMSA Policy Number: MM.06.026 & Kaiser 2022 policy page 41) that ignore the law and medical necessity of gender-affirming care by passing this bill.

Thank you for investing in the health and safety of our māhū and trans community members!

With gratitude,

Thaddeus Pham (he/him)

SB-2835

Submitted on: 1/29/2022 4:21:38 PM

Testimony for CPN on 2/3/2022 9:30:00 AM

Submitted By	Organization	Testifier Position	Remote Testimony Requested
Nikki-Ann Yee	Individual	Support	No

Comments:

Dear Chair Baker, Vice Chair Tam and Members of the Committee:

I strongly support SB 2835 which updates the language on the transgender anti-discrimination health insurance law and requires insurance companies in Hawai'i to post their policies.

There is an overwhelming and growing consensus among major medical organizations that transition-related health care services, including surgical treatments, to alleviate gender dysphoria are medically necessary and should be fully covered by patients' insurance. Without insurance coverage of these medically necessary procedures (that are provided for the cisgender people), trans lives are put at risk for depression and suicidal ideation.

Please make sure that insurance companies are not ignoring the majority of medical opinion and forming their own internal policies (e.g HMSA Policy Number: MM.06.026 & Kaiser 2022 policy page 41) that ignore the law and medical necessity of gender-affirming care by passing this bill.

Thank you for investing in the health and safety of our māhū and trans community members!

Mahalo,

Nikki

SB-2835

Submitted on: 1/29/2022 8:23:10 PM

Testimony for CPN on 2/3/2022 9:30:00 AM

Submitted By	Organization	Testifier Position	Remote Testimony Requested
Lisa Kau	Individual	Support	No

Comments:

Dear Chair Baker, Vice Chair Tam and Members of the Committee:

I strongly support SB 2835 which updates the language on the transgender anti-discrimination health insurance law and requires insurance companies in Hawai'i to post their policies.

There is an overwhelming and growing consensus among major medical organizations that transition-related health care services, including surgical treatments, to alleviate gender dysphoria are medically necessary and should be fully covered by patients' insurance. Without insurance coverage of these medically necessary procedures (that are provided for the cisgender people), trans lives are put at risk for depression and suicidal ideation.

Please make sure that insurance companies are not ignoring the majority of medical opinion and forming their own internal policies (e.g HMSA Policy Number: MM.06.026 & Kaiser 2022 policy page 41) that ignore the law and medical necessity of gender-affirming care by passing this bill.

Thank you for investing in the health and safety of our māhū and trans community members!

Sincerely,

Lisa Kau

SB-2835

Submitted on: 1/30/2022 10:42:29 AM

Testimony for CPN on 2/3/2022 9:30:00 AM

Submitted By	Organization	Testifier Position	Remote Testimony Requested
Shannon Rudolph	Individual	Support	No

Comments:

Support

SB-2835

Submitted on: 1/31/2022 7:44:57 AM

Testimony for CPN on 2/3/2022 9:30:00 AM

Submitted By	Organization	Testifier Position	Remote Testimony Requested
Amanda Martinez	Individual	Support	No

Comments:

Dear Chair Baker, Vice Chair Tam and Members of the Committee:

I strongly support SB 2835 which updates the language on the transgender anti-discrimination health insurance law and requires insurance companies in Hawai'i to post their policies.

There is an overwhelming and growing consensus among major medical organizations that transition-related health care services, including surgical treatments, to alleviate gender dysphoria are medically necessary and should be fully covered by patients' insurance. Without insurance coverage of these medically necessary procedures (that are provided for the cisgender people), trans lives are put at risk for depression and suicidal ideation.

Please make sure that insurance companies are not ignoring the majority of medical opinion and forming their own internal policies (e.g HMSA Policy Number: MM.06.026 & Kaiser 2022 policy page 41) that ignore the law and medical necessity of gender-affirming care by passing this bill.

Thank you for investing in the health and safety of our māhū and trans community members!

Sincerely,

Name

Amanda

SB-2835

Submitted on: 1/31/2022 9:56:30 AM

Testimony for CPN on 2/3/2022 9:30:00 AM

Submitted By	Organization	Testifier Position	Remote Testimony Requested
Tami Whitney	Individual	Support	No

Comments:

Dear Chair Baker, Vice Chair Tam and Members of the Committee:

I strongly support SB 2835 which updates the language on the transgender anti-discrimination health insurance law and requires insurance companies in Hawai'i to post their policies.

There is an overwhelming and growing consensus among major medical organizations that transition-related health care services, including surgical treatments, to alleviate gender dysphoria are medically necessary and should be fully covered by patients' insurance. Without insurance coverage of these medically necessary procedures (that are provided for cisgender people), trans lives are put at risk for depression and suicidal ideation.

Please make sure that insurance companies are not ignoring the majority of medical opinion and forming their own internal policies (e.g HMSA Policy Number: MM.06.026 & Kaiser 2022 policy page 41) that ignore the law and medical necessity of gender-affirming care by passing this bill.

Thank you for investing in the health and safety of our māhū and trans community members!

Sincerely,

Tami Whitney

SB-2835

Submitted on: 1/31/2022 9:59:47 AM

Testimony for CPN on 2/3/2022 9:30:00 AM

Submitted By	Organization	Testifier Position	Remote Testimony Requested
Sarah Rosenbach	Individual	Support	No

Comments:

Dear Chair Baker, Vice Chair Tam and Members of the Committee:

I strongly support SB 2835 which updates the language on the transgender anti-discrimination health insurance law and requires insurance companies in Hawai'i to post their policies.

There is an overwhelming and growing consensus among major medical organizations that transition-related health care services to alleviate gender dysphoria, including surgical treatments, are medically necessary and should be fully covered by patients' insurance. Without insurance coverage of these medically necessary procedures (that are provided for cisgender people), transgender people are at significant risk for depression and suicidal ideation.

Please make sure that insurance companies are not ignoring the majority of medical opinion and forming their own internal policies (e.g HMSA Policy Number: MM.06.026 & Kaiser 2022 policy page 41) that ignore the law and medical necessity of gender-affirming care by passing this bill.

Thank you for investing in the health and safety of our māhū and transgender community members!

Sincerely,

Sarah Rosenbach

SB-2835

Submitted on: 1/31/2022 11:29:30 AM

Testimony for CPN on 2/3/2022 9:30:00 AM

Submitted By	Organization	Testifier Position	Remote Testimony Requested
Erin Furuichi	Individual	Support	No

Comments:

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

I strongly support SB 2835 which updates the language on the transgender anti-discrimination health insurance law to further support case by case determinations and requires insurance companies in Hawai'i to post their policies.

There is an overwhelming and growing consensus among major medical organizations that transition-related health care services, including surgical treatments, to alleviate gender dysphoria are medically necessary (HRS §432E-1.4) and should be fully covered by patients' insurance. Without insurance coverage of these medically necessary procedures (that are provided for the cisgender people), trans lives are put at risk for depression and suicidal ideation.

Please make sure that insurance companies are not ignoring the majority of medical opinion and forming their own internal policies (e.g HMSA Policy Number: MM.06.026 & Kaiser 2022 policy page 41) that ignore the law and medical necessity of gender-affirming care by passing this bill.

Thank you for investing in the health and safety of our māhū and trans community members!

Sincerely,
Erin Furuichi

SB-2835

Submitted on: 1/31/2022 1:02:17 PM

Testimony for CPN on 2/3/2022 9:30:00 AM

Submitted By	Organization	Testifier Position	Remote Testimony Requested
Dr. Lawrence Frank	Individual	Support	No

Comments:

SB 2835

Support

Aloha Chair Baker, Vice-Chair Chang, and Members of the Committee:

I support SB 2835, which updates the language on the transgender anti-discrimination health insurance law to support case by case determinations further and require insurance companies in Hawai'i to post their policies. This bill is salient for my family and me as I have an eleven-year-old transgender daughter about to begin tanner stage 2, meaning the passage of this bill has life and death implications for her affirming care.

In recent years an overwhelming and growing professional consensus among major medical organizations states that transition-related health care services, including surgical treatments, to alleviate gender dysphoria are medically necessary ([HRS §432E-1.4](#)) and should be fully covered by patients' insurance. Without insurance coverage, these medically essential procedures (provided for cisgender people) negatively impact trans patients and threaten their lives with greater risk for depression and suicidal ideation.

Please make sure that insurance companies do not ignore the majority of current medical perspectives and form their own internal policies (e.g., HMSA Policy Number: MM.06.026 & Kaiser 2022 policy page 41) that ignore the law and medical necessity of gender-affirming care by passing this bill.

Thank you for investing in the health and safety of our mähū and trans community members and my eleven-year-old daughter Sakoda Kekaumana Jordanluna Frank.

Sincerely,

Lawrence Frank Jr. "Bo," PhD

SB-2835

Submitted on: 1/31/2022 2:12:30 PM

Testimony for CPN on 2/3/2022 9:30:00 AM

Submitted By	Organization	Testifier Position	Remote Testimony Requested
Robin Zeller	Individual	Support	No

Comments:

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

I strongly support SB 2835 which updates the language on the transgender anti-discrimination health insurance law to further support case by case determinations and requires insurance companies in Hawai'i to post their policies.

There is an overwhelming and growing consensus among major medical organizations that transition-related health care services, including surgical treatments, to alleviate gender dysphoria are medically necessary ([HRS §432E-1.4](#)) and should be fully covered by patients' insurance. Without insurance coverage of these medically necessary procedures (that are provided for the cisgender people), trans lives are put at risk for depression and suicidal ideation.

Please make sure that insurance companies are not ignoring the majority of medical opinion and forming their own internal policies (e.g HMSA Policy Number: MM.06.026 & Kaiser 2022 policy page 41) that ignore the law and medical necessity of gender-affirming care by passing this bill.

Thank you for investing in the health and safety of our māhū and trans community members!

Sincerely,

Robin Zeller

SB-2835

Submitted on: 1/31/2022 9:20:37 PM

Testimony for CPN on 2/3/2022 9:30:00 AM

Submitted By	Organization	Testifier Position	Remote Testimony Requested
Wendy Gibson-Viviani	Individual	Support	No

Comments:

Aloha, I am a nurse and I support SB2835. Insurance companies should pay for covered procedures and the determination should not be based upon gender identity.

Thank you,

Wendy Gibson-Viviani RN/BSN

Kailua

SB-2835

Submitted on: 2/1/2022 11:37:08 AM

Testimony for CPN on 2/3/2022 9:30:00 AM

Submitted By	Organization	Testifier Position	Remote Testimony Requested
Cathy Kapua	Individual	Support	No

Comments:

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

I strongly support SB 2835 which updates the language on the transgender anti-discrimination health insurance law to further support case by case determinations and requires insurance companies in Hawai'i to post their policies.

There is an overwhelming and growing consensus among major medical organizations that transition-related health care services, including surgical treatments, to alleviate gender dysphoria are medically necessary ([HRS §432E-1.4](#)) and should be fully covered by patients' insurance. Without insurance coverage of these medically necessary procedures (that are provided for the cisgender people), trans lives are put at risk for depression and suicidal ideation.

Please make sure that insurance companies are not ignoring the majority of medical opinion and forming their own internal policies (e.g HMSA Policy Number: MM.06.026 & Kaiser 2022 policy page 41) that ignore the law and medical necessity of gender-affirming care by passing this bill.

Thank you for investing in the health and safety of our māhū and trans community members!

Sincerely,

Cathy Kapua

SB-2835

Submitted on: 2/1/2022 1:56:58 PM

Testimony for CPN on 2/3/2022 9:30:00 AM

Submitted By	Organization	Testifier Position	Remote Testimony Requested
Alexander James Stokes	Individual	Support	No

Comments:

Aloha,

My name is Dr. Alex Stokes, and I am writing in strong support of SB2835. This bill requires insurance providers to post their gender identity policies and clarifies the language of Act 135 (2016), which states that insurance agencies cannot discriminate based on gender identity provided that there is coverage under the policy, contract, plan, or agreement for the services when the services are not related to gender transition.

Insurance companies and health service providers in Hawai'i continue to categorically deny services that are the standard of care for transgender, Māhū and intersex patients. Despite national and international care guidelines to the contrary, they claim these treatments are not medically necessary despite the science, law, and, most importantly, the lived experiences of Māhū and transgender people in Hawai'i. Māhū, intersex and transgender people are an underserved and often marginalized population, without a strong voice, and without the legal resources that would empower a larger group, to overcome discrimination such as this.

The transgender affirming services and procedures are nationally and internationally regarded as medically necessary, and are the standard of care.

Without treatment and intervention transgender individuals are at much higher risk for depression, suicidal ideation, suicide and all cause death. This is especially true for transgender youth, who are approximately six times more likely to commit suicide, than their non-transgender peers.

This is not new to the medical community, who have over decades agreed upon a standard of care for transgender patients (especially youth), including a range of services and surgical treatments, designed to alleviate gender dysphoria, depression and suicidal ideation. These have been accepted as medically necessary and should be fully covered by patients' insurance.

When insurance coverage fails to treat transgender individuals, many become desperate, and resort to seeking treatment outside of regular state and US health systems, often taking drugs and hormones without prescription, or undertaking risky surgeries at foreign institutions. This compounds the problem and not only leads to even greater risk of death, illness, and suicide, but also puts a strain on our own community health care systems, which have to treat botched

surgeries, or complications arising from non-prescribed medications, that transgender patients have taken in lieu of properly prescribed medications, under the supervision of a certified Doctor.

To categorically deny insurance coverage for transgender affirming/confirming care is to deny insurance based on gender identity in violation of Act 135 and the Insurance Code.

Doctors have a moral obligation to treat transgender patients as per the agreed upon standard of care for transgender patients. However certain insurance companies are denying coverage based on their own, unsubstantiated “policies”, often weaponizing their own coding systems, and policy language to totally refuse treatment or obfuscate and delay treatment, so that patients drop-out of treatment, due to eventual external pressures (e.g. like job loss, loss of insurance etc.), or patients just abandon the treatments that have no expectation to fulfil the full and proper care needed to complete a medical transition. Basically, many transgender patients give up, because the care designed by physicians falls short of the treatment pathways designed by the insurance company. Patients think “Full treatment is not available, so why bother trying to fully transition, when you can only get part way”.

All of this creates a barrier for physicians to treat a patient, as per the standard of care for transgender patients, despite the weight of moral obligation and the enormous scientific literature which was used to generate agreed upon standards of care in the first place.

Despite standards of care, and data to the contrary, insurance providers in Hawai‘i are denying services, medical treatment and surgeries deemed necessary by the standards of care for transgender patients, and are claiming that “procedures such as breast augmentation, liposuction, Adam's apple reduction, rhinoplasty, feminizing voice surgery, and facial reconstruction are considered cosmetic and their impact on relieving gender dysphoria is unclear.”

This is of course untrue, and because insurance companies have chosen to utilize this unsubstantiated opinion in opposition to the standards of care, these treatments are denied, despite being covered for non-transgender patients, meaning almost no transgender patients (until 2021 when we started advocating at the legislature) have been approved for coverage of these surgeries since 2017 when the anti-discrimination law (Act 135) came into effect.

Care is denied by the insurer, even when in some instances the very same insurer in other states, offers these services, treatments and surgeries. How could a treatment deemed medically necessary in one state be denied in another state, within the insurers very own policies? This is contrary and hypocritical to the diversity, inclusion and equity that these community health insurers espouse in their advertising. Plus it is damaging to communities that are an intrinsic part of our culture in Hawaii.

These persistent and categorical denials in violation of Act 135 also violate Hawai‘i’s insurance code. HRS §431:2-203 (b)(1) states that a person who intentionally or knowingly violates, intentionally or knowingly permits any person over whom the person has authority to violate, or intentionally or knowingly aids any person **in violating any insurance rule or statute of this State or any effective order issued by the commissioner** shall be subject to any penalty or fine as provided by this code or by the Hawai‘i Penal Code.

Intersex patients.

The discrimination of insurance companies towards transgender patients also effects intersex patients and/or patients that have a “Difference in Sexual Development” (DSD).

Intersex individuals represent almost 2% of the population and are individuals born with any of several sex characteristics including chromosome patterns, hormones, gonads, or genitals that, according to the Office of the United Nations High Commissioner for Human Rights, "do not fit typical binary notions of male or female bodies".

These people often need hormonal treatment, surgery or other medical treatment to enable them to transition to their target gender, in a similar way to transgender patients. This treatment is also written as part of the standard of care for transgender patients, and is almost identical, but with the added caveat that waiting times for treatment are to be specifically reduced, as this patient population is often already genetically and physiologically between sexes, and this has an amplified or greater vulnerability to the same problems that effect transgender patients, as well as this, they often have much more severe physical, mental, and medical issues, than transgender patients.

However, yet again these individuals are being denied the same medical treatment and surgeries deemed necessary by the standards of care for intersex/DSD, and transgender patients. The difference however, is that they are discriminated against based on their sex and genetics, as well as their gender identity. This again is a small, underserved and marginalized group, without a strong voice, and without the legal resources that would empower a larger population to respond succinctly to discrimination by insurance companies in Hawai'i.

Conclusion

Insurance companies in Hawai'i claim to support and treat Māhū, transgender and intersex patients, and are especially keen on advertising this fact during Pride celebrations, or as part of their campaigns in corporate social responsibilities, but then when care is really needed, they fail to provide the actual care needed, to these most venerable individuals in our community.

At the end of the day, it is all about profit. Many local insurance companies are vertically integrated, providing both insurance as well as actual medical care, and as such have an integral conflict of interest within their own organization. By coming up with their own opinions negating and refusing transgender care, they make greater profits, but damage the health and culture of our communities in Hawai'i.

By passing this bill, insurance companies in Hawai'i will be required to remove the morally abhorrent policies that, unfairly, and discriminatorily refuse the services, treatments and surgeries, that are the standard of care, and are medically needed by Māhū, transgender and intersex patients in our community.

We as a community have a moral obligation to help those that are underrepresented, and lack the voice to contest discrimination effectively. It is also a cultural service to our community, and our

state, to protect and help Māhū, intersex and transgender people, and it does our community a great disservice to allow punishment of these people for who they are, for the sake of profit.

We have to prioritize the standard of care a doctor recommends, over artificial, and unsupported health insurance derived policies, that have been designed to create a barrier to care for the sake of profit.

Please **PASS** this clarification bill to ensure the insurance companies follow the law and post their policies because the lives and health of Māhū, intersex and people in our community depend on it.

Mahalo,

Dr. Alexander James Stokes, B.Sc. (Hons), M.Sc., HBO, Ph.D., FRSB

Fellow of the Royal Society of Biology

SB-2835

Submitted on: 2/1/2022 2:31:22 PM

Testimony for CPN on 2/3/2022 9:30:00 AM

Submitted By	Organization	Testifier Position	Remote Testimony Requested
Shalei Eleneke	Individual	Support	No

Comments:

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

I strongly support SB 2835 which updates the language on the transgender anti-discrimination health insurance law to further support case by case determinations and requires insurance companies in Hawai'i to post their policies.

There is an overwhelming and growing consensus among major medical organizations that transition-related health care services, including surgical treatments, to alleviate gender dysphoria are medically necessary ([HRS §432E-1.4](#)) and should be fully covered by patients' insurance. Without insurance coverage of these medically necessary procedures (that are provided for the cisgender people), trans lives are put at risk for depression and suicidal ideation.

Please make sure that insurance companies are not ignoring the majority of medical opinion and forming their own internal policies (e.g HMSA Policy Number: MM.06.026 & Kaiser 2022 policy page 41) that ignore the law and medical necessity of gender-affirming care by passing this bill.

Thank you for investing in the health and safety of our māhū and trans community members!

Sincerely,

Shalei Eleneke

SB-2835

Submitted on: 2/1/2022 3:48:44 PM

Testimony for CPN on 2/3/2022 9:30:00 AM

Submitted By	Organization	Testifier Position	Remote Testimony Requested
Regina Lo	Individual	Support	No

Comments:

I am in full support of SB2835 as it pertains to myself a Trans Woman as a contributing person in Society.

Thank you.

Sincerely,

Regina R. Lo

SB-2835

Submitted on: 2/1/2022 3:52:25 PM

Testimony for CPN on 2/3/2022 9:30:00 AM

Submitted By	Organization	Testifier Position	Remote Testimony Requested
Stacia Ohira	Individual	Support	Yes

Comments:

Aloha Chair, co-chair, commitee members-

My name is Stacia Ohira and I'm in full support of this bill. I am a proactive person and I believe that this bill saves many lives in so many ways. In states where insurance companies are not able to discriminate based on gender alone there are fewer suicides and more active members of society. Of the many other states end up paying extra money on state services for those who are not able to thrive based on their inability to receive Healthcare based on their gender. Today I am not on state subsidies at all and I pay for my own insurance and receive excellent gender specific insurance and I am thriving. Please support this bill that in the long run is very cost efficient and saves lives.

Thanks again,

Stacia Ohira

SB-2835

Submitted on: 2/1/2022 4:07:13 PM

Testimony for CPN on 2/3/2022 9:30:00 AM

Submitted By	Organization	Testifier Position	Remote Testimony Requested
asia manu	Individual	Support	No

Comments:

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

I strongly support SB 2835 which updates the language on the transgender anti-discrimination health insurance law to further support case by case determinations and requires insurance companies in Hawai'i to post their policies.

There is an overwhelming and growing consensus among major medical organizations that transition-related health care services, including surgical treatments, to alleviate gender dysphoria are medically necessary (HRS §432E-1.4) and should be fully covered by patients' insurance. Without insurance coverage of these medically necessary procedures (that are provided for the cisgender people), trans lives are put at risk for depression and suicidal ideation. Please make sure that insurance companies are not ignoring the majority of medical opinion and forming their own internal policies (e.g HMSA Policy Number: MM.06.026 & Kaiser 2022 policy page 41) that ignore the law and medical necessity of gender-affirming care by passing this bill.

Thank you for investing in the health and safety of our māhū and trans community members!

Sincerely,

Asia Manu

SB-2835

Submitted on: 2/1/2022 4:24:50 PM

Testimony for CPN on 2/3/2022 9:30:00 AM

Submitted By	Organization	Testifier Position	Remote Testimony Requested
LACIE KENOLIO	Individual	Support	No

Comments:

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

I strongly support SB 2835 which updates the language on the transgender anti-discrimination health insurance law to further support case by case determinations and requires insurance companies in Hawai'i to post their policies.

There is an overwhelming and growing consensus among major medical organizations that transition-related health care services, including surgical treatments, to alleviate gender dysphoria are medically necessary (HRS §432E-1.4) and should be fully covered by patients' insurance. Without insurance coverage of these medically necessary procedures (that are provided for the cisgender people), trans lives are put at risk for depression and suicidal ideation.

Please make sure that insurance companies are not ignoring the majority of medical opinion and forming their own internal policies (e.g HMSA Policy Number: MM.06.026 & Kaiser 2022 policy page 41) that ignore the law and medical necessity of gender-affirming care by passing this bill.

Thank you for investing in the health and safety of our māhū and trans community members!

Sincerely, Lacie Y Kenolio

SB-2835

Submitted on: 2/1/2022 5:32:10 PM

Testimony for CPN on 2/3/2022 9:30:00 AM

Submitted By	Organization	Testifier Position	Remote Testimony Requested
Maddison Moliga	Individual	Support	No

Comments:

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

I strongly support SB 2835 which updates the language on the transgender anti-discrimination health insurance law to further support case by case determinations and requires insurance companies in Hawai'i to post their policies.

There is an overwhelming and growing consensus among major medical organizations that transition-related health care services, including surgical treatments, to alleviate gender dysphoria are medically necessary ([HRS §432E-1.4](#)) And should be fully covered by patients' insurance. Without insurance coverage of these medically necessary procedures (that are provided for the cisgender people), trans lives are put at risk for depression and suicidal ideation.

Please make sure that insurance companies are not ignoring most medical opinions and forming their own internal policies (e.g., HMSA Policy Number: MM.06.026 & Kaiser 2022 policy page 41) that ignore the law and medical necessity of gender-affirming care by passing this bill.

Thank you for investing in the health and safety of our māhū and trans community members!

Sincerely,

Maddison Moliga

SB-2835

Submitted on: 2/1/2022 7:03:42 PM

Testimony for CPN on 2/3/2022 9:30:00 AM

Submitted By	Organization	Testifier Position	Remote Testimony Requested
Tiare Sua	Individual	Support	No

Comments:

Comments:

I Tiare Anelaokalani Kima Sua am in full support of SB2835, which seeks to improve the non-discrimination law for health insurance to better protect transgender people in Hawai'i.

This measure is especially important considering trans healthcare has saved many people's lives. If many of my transgender brothers and sisters in the past has had competent access to trans healthcare, they would have still been here with us today thriving, creating a positive future and living their lives like everyone should. I am going to keep saying this over and over equitable and easier access with a non discrimination health care policy creates a healthy thriving community in Hawai'i. Please consider supporting SB2835 Mahalo,

Tiare Anelaokalani Kima Sua

SB-2835

Submitted on: 2/1/2022 9:34:42 PM

Testimony for CPN on 2/3/2022 9:30:00 AM

Submitted By	Organization	Testifier Position	Remote Testimony Requested
Alessandria Leleo-Akana	Individual	Support	No

Comments:

Dear Chair Baker, Vice Chair Chang and Members of the Committee: I strongly support SB 2835 which updates the language on the transgender anti-discrimination health insurance law to further support case by case determinations and requires insurance companies in Hawaii to post their policies. There is an overwhelming and growing consensus among major medical organizations that transition related health care services, including surgical treatments, to alleviate gender dysphoria are medically necessary (HRS §432E-1.4) and should be fully covered by patient's insurance. Without insurance coverage of these medically necessary procedures (that are provided for cisgender people), trans lives are put at risk for depression and suicidal ideation. Please make sure that insurance companies are not ignoring the majority of medical opinions and forming their own internal policies (e.g. HMSA Policy Number MM.06.026.& Kaiser 2022 policy page 41) that ignore the law and medical necessity of gender-affirming care by passing this bill. Thank you for investing in the health and safety of our mahu and trans community members!

Sincerely,

Alessandria Leleo-Akana

COMMITTEE ON COMMERCE AND CONSUMER PROTECTION

Senator Rosalyn H. Baker, Chair
Senator Stanley Chang, Vice Chair

Tuesday, February 3, 2022 at 0930 HST

RE: Testimony in SUPPORT of SB2835 Relating to Insurance

Aloha kākou Chair Rosalyn H. Baker, Vice Chair Stanley Chang, and the members of the Committee on Commerce and Consumer Protection:

Mahalo for hearing SB2835 which prohibits health insurance companies from denying coverage on the basis of gender identity if the policy covers the treatment for purposes other than gender transition; and requires insurance companies to provide applicants and insured persons with clear information about the coverage of gender transition services including the process for appealing a claim denied on the basis of medical necessity. I strongly **support** this bill because I believe in autonomy, equity, and transparency.

- According to the discipline of ethics, humans are rational beings; therefore, they deserve autonomy. Autonomy is the ability for one to make a decision without the influence of force or coercion, and is a principle of international law. Autonomy relates closely to one's identity (internal) and how one prefers to be identified (external); therefore, identifying factors such as gender should be decided upon the self, not assumed or assigned by private companies or the government.
- Equity is the quality of being fair and impartial; it carries more nuance and consideration than equality does because it considers one's autonomy. For example, a jacket would not be the most viable solution for everyone amid 60° temperatures; some would want air conditioning instead. Hawai'i people know this difference all too well. An autonomous being can speak on their needs and an equitable response would be meeting that need.
- Last, it's important that we delineate between privacy and transparency: a lack of privacy causes harm to the self, whereas a lack of transparency causes harm to others. In a world rife with fine print and civil litigation, it's important that covered entities inform the patient in a way the patient can comprehend the information that's given to them. This is equity. In doing so, the patient can make an informed decision, thereby practicing their autonomy.

In conclusion, hormone therapy is no stranger to the world of medicine. The same medication that clears up my acne can help another person feel whole. Ask Joe Rogan about the benefits of hormone therapy. No person shall be denied medical treatment on the basis of their gender. It's a slippery slope. I strongly encourage the passage of this bill in the name of autonomy, equity, and transparency.

Mahalo for considering my testimony,

Soon Kim
Senate District 15

SB-2835

Submitted on: 2/1/2022 10:09:26 PM

Testimony for CPN on 2/3/2022 9:30:00 AM

Submitted By	Organization	Testifier Position	Remote Testimony Requested
Olivia Dahl	Individual	Support	No

Comments:

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

I strongly support SB 2835 which updates the language on the transgender anti-discrimination health insurance law to further support case by case determinations and requires insurance companies in Hawai'i to post their policies.

There is an overwhelming and growing consensus among major medical organizations that transition-related health care services, including surgical treatments, to alleviate gender dysphoria are medically necessary (HRS §432E-1.4) and should be fully covered by patients' insurance. Without insurance coverage of these medically necessary procedures (that are provided for the cisgender people), trans lives are put at risk for depression and suicidal ideation.

Please make sure that insurance companies are not ignoring the majority of medical opinion and forming their own internal policies (e.g HMSA Policy Number: MM.06.026 & Kaiser 2022 policy page 41) that ignore the law and medical necessity of gender-affirming care by passing this bill.

Thank you for investing in the health and safety of our māhū and trans community members!
Sincerely,

Olivia Dahl

Hi there! My name is Breanna Zoey, my pronouns are she/her, and I am transgender. I appreciate the opportunity to submit this testimony **IN SUPPORT** of SB2835. I am available to any committee or member who wishes to speak with me to better understand my real-life experiences with our insurance companies in Hawaii and the discrimination that too many trans people like me currently face with health insurance coverage.

I would also like to propose an amendment to this legislation. **The amendment proposed is to require that health plans cannot deny trans care on the basis of medical necessity unless a health care provider with experience prescribing or delivering gender affirming treatment has also reviewed and confirmed the appropriateness of the adverse benefit determination.** Even if this legislation is passed as-is, I foresee instances where insurance companies will still deny trans care on the basis of medical necessity and gender identity. This proposed amendment would help ensure that in those instances insurance companies are using experts in the review and denial process rather than continuing to make arbitrary denials based on input from non-experts who are not familiar with trans health care, as is the case today. If an insurance company says 'trans health care is highly specialized and we don't have the expertise to use in reviews as Breanna's amendment is suggesting,' I think that demonstrates why we need legislation like this to pass (and my proposed amendment).

Highlights of my testimony and personal experience with insurance as a trans person (*trigger warning: mention of self-harm and suicide*)

- My insurance company has arbitrarily denied my transgender health care coverage requests over and over in 2021. They keep calling my care "not medically necessary," despite the outside world having already shown this care to be medically necessary and appropriate
- Despite my strength and resilience, even the strongest folks can only take so much discrimination. My insurance company's persistent discrimination and hurtful/wrongful comments led me to the brink of **suicide** a few times in 2021, some of the darkest times of my entire life. Thank goodness I hung in there and did not let an insurance company get the best of me and end my life, but this is unfortunately what happens far too often when trans people are denied access to the health care and coverage they need. **Approving medically necessary trans health care saves lives, plain and simple, and I'm a living example of that**
- Every single time I've challenged my insurance company's denials or their refusal to provide -coverage in 2021, I have won and my care was ultimately approved, sometimes against the insurance company's will
- I have had to go to such lengths as to challenge the insurance company using the independent Medical Review (IMR) rights and protections that the affordable care act affords to me, and every time so far the medical necessity of my care was confirmed and insurance denials were overturned from the outside
- In 2021 alone through my challenges, we've confirmed the medical necessity and/or appropriateness of my **breast reconstruction (augmentation), facial gender confirmation surgery, tracheal shave (reduction thyroid chondroplasty), and electrolysis prior to bottom surgery**. By early March 2022 I'll hopefully overturn the insurance company's discriminatory denials on **facial hair removal via electrolysis**. Every arbitrary insurance denial is being overturned one by one now that people like me are starting to fight back, demonstrating the denials our Hawaii insurance companies are issuing are not appropriate or grounded in reality
- My health care needs are not inherently special or unique. Other trans people need coverage for the same care I've been able to get approved for in 2021, yet my insurance company continues to deny my friends' health care as "not medically necessary" even after the company has already been overturned on my care and provided with enough scientific evidence and research to cover it for other people
- This legislation would not be a new mandate. Insurance companies already cover the same health care services for non-transgender individuals and conditions



Hawaii desperately needs to clarify our current non-discrimination law(s) when it comes to health insurance and transgender care, and this bill would help do just that. In our state, insurance companies are using custom medical policies that are outdated, biased, and which do not reflect contemporary medical and expert opinion. Policy examples include: HMSA's MM.06.026, effective 3/1/2021 to present, and Kaiser's 2022 policy page 41.

Our insurance companies in general have been flagrantly violating existing non-discrimination laws by continuing to deny so much trans health care and arbitrarily calling it "not medically necessary." The scientific literature, the peer-reviewed research, the academic journals, the global professional and expert associations who write the rules and recommendations for trans health care, they have all already evidenced that trans health care is medically necessary and can be vital to an individual's well-being and safety.

Through my challenges to my health insurance company in the past year and using the protections afforded to me by the ACA, I have overturned the insurance denials and got approved for a few gender affirming surgeries and care that continue to be denied for others who cannot or do not fight as hard as I was able to... There is nothing special or inherently unique about me or my health care needs. I am just an ordinary transgender schmuck who knows her rights under state and federal law and who will hold her insurance company accountable. The health care I have and continue to personally fight for is nothing but commonsense, and we need to ensure this care and coverage is available to everybody who needs it and without subjecting them to intense fights with big insurance.

My experiences with insurance in 2021 as a trans person (trigger warning: mention of suicide)

My insurance company nearly cost me my life in 2021 by refusing to provide me with coverage for medically necessary care and through some of the horrific things that were said and done in the process of denying my care time and time again. In kindergarten language, because of my insurance company I was the blink of an eye away from ending my life by suicide. It's not because I am weak or that I am not resilient, and in fact to the contrary I think I've been incredibly strong and resilient as I've successfully challenged HMSA's denials, won coverage every single time (so far), and endured some of the greatest challenges of my life.

Trans people are already marginalized and struggle in so many ways, and when folks cannot access the gender affirming care they need and want it's been shown time and time again that the prevalence of self-harm and suicide go through the roof. Even the strongest of individuals cannot forever evade the realities of continued and persistent discrimination. I honestly do not know how I am still here today, but I am sure glad that I did not die otherwise I wouldn't be able to share my experiences or continue to advocate against big insurance and to help ensure we put an end to this discrimination. I want no one else to have to suffer or endure some of the things my insurance company put me through in 2021 and continues to put me through today.

In the last 10 months alone I have had to spend roughly 300 hours challenging HMSA and to successfully get them to approve coverage for:

- a- Gender affirming breast augmentation
- b- Facial gender confirmation surgery (including genioplasty, osteoplasty, hairline advance, reduction forehead, rhinoplasty, and brow ptosis, and I will likely soon be requesting a few additional procedures to be added to the approval)
- c- Tracheal shave (reduction thyroid chondroplasty)
- d- Electrolysis coverage prior to bottom surgery
- e- Electrolysis of facial hair (currently under Independent Medical Review pursuant to the ACA, decision expected by early March 2022)



In the end, my health care has thus far ultimately been approved for coverage because it is commonsense and the world knows it to be medically necessary, but insurance did not approve any of these without first putting up a fight. For some of these I've had to use the rights and protections that the affordable care act (ACA) affords to me, like an Independent Medical Review (IMR) where the denials are reviewed by outside experts and the decision making is removed from the insurance company. Every time I've gone through the ACA's IMR process, my trans health care denials have been overturned and it just demonstrates how my insurance company is not getting things right with their denials on trans care or when they call trans health care "not medically necessary."

Reasons why HMSA has denied my trans health care needs in 2021

These are just some of the reasons that HMSA issued to me in writing when denying my personal health care coverage requests over the last year or so (spoiler alert: every single reason is not an accurate reflection of reality and is false):

- 1) "nor is there proof that in those who self-harm that [the requested service] decreases that behavior"
- 2) "there is lack of support of improvement of quality of life"
- 3) "the requested procedures are not considered effective in improving health outcomes"
- 4) "gender dysphoria does not meet the definition of medical condition"
- 5) "published, peer-reviewed data does not support that the surgical procedure performed achieves outcomes in the treatment of gender dysphoria and/or gender incongruence that are superior to or equivalent to alternative interventions for treatment"
- 6) "exaggerate[s] masculine or feminine traits beyond the range of norms found within society"
- 7) "primarily serve[s] to beautify or otherwise enhance physical appearance"
- 8) "deny as does not meet current GIS policy criteria nor medical necessity, due to lack of supporting evidence that these procedures help to improve health outcomes"
- 9) "there is no decisive or definite absolute indication that health outcomes are improved with the use of facial feminization surgery"
- 10) "the research studies that show persistent improvement in quality of life in the long term are limited"
- 11) "there are very limited supporting data showing overall improved daily functioning following these procedures; therefore a conclusion that improved health outcomes will occur is not supported by clinical evidence. Therefore, the requested procedures are not medically necessary"
- 12) "there is limited literature review and research that support complete resolution or satisfaction upon completion of the surgical procedure"
- 13) "there is insufficient research studies that further support improvement in health outcome, daily functioning following successful completion of the surgery"
- 14) "removal of the facial hair is not critical for the process of gender reassignment"
- 15) "electrolysis of the facial hair would not improve the overall health outcome as measured by length or quality of the patient's life"
- 16) "there is no evidence of expert opinion that supports the attestation that electrolysis of facial hair improves the overall health outcome"

This is just a handful of the bogus and uninformed reasons my insurance company had denied my care for in the past 10 months, and they are all not true. To emphasize the severity of the situation we're dealing with in Hawaii, take another look at #1 above where HMSA says access to gender affirming care doesn't reduce the likelihood of self-harm and suicide. Seriously? There is no better way to demonstrate that Hawaii insurance companies do not understand trans health care at all. Since I've been able to access and get approved for gender affirming care, my quality of life has



increased significantly and my depression, anxiety, and unwanted desires to self-harm have all decreased immensely, just as the research says happens when people can access gender affirming health care and coverage. The fact insurance here continues to say trans health care doesn't save lives and doesn't/won't improve quality of life is a kick in the gut to say the least and makes absolutely no sense.

Not accessing health care is not an option for most people because all that results in is increased depression and anxiety, increased gender dysphoria and misgendering, decreased social functioning, increased likelihood of physical harm and hate crimes, and unfortunately increased suicides and attempts. Access to gender affirming care quite literally saves lives, and I am a living example of that.

Financial impacts when my trans health care was denied

- While I was fighting my insurance company on their denials last year I had to take out a 401k loan to self-finance breast reconstruction (which eventually was overturned and paid for by insurance)
- I was then moments away from needing to take out a second mortgage in order to keep my facial surgeries moving along (fortunately I overturned HMSA's denials using the ACA's protections before the 2nd mortgage was executed)
- In 2022 I've had to take a second/part-time job (in addition to my regular/full-time job) in order to pay for my health care needs (facial electrolysis) while I continue to challenge HMSA's denials using the ACA's protections
- I've even seriously considered renting out my apartment and living out of my car for 6-12 months out of desperation and in order to be able to help pay for my health care needs (which let me remind you are already viewed as a medical necessity and covered by existing state law, whether or not my insurance company will agree or admit it)

I've had to do and consider all of these things as a direct result of my insurance company discriminating against me and denying my medically necessary health care. No one should be required to do such things in order to access lifesaving health care that the world already views as being medically necessary.

This legislation is not a new mandate

I want to take the time here to touch on something that came up last year, which is the notion that this legislation would be a new mandate. This is not accurate.

With respect to my insurance company, they already view my trans health care services as covered benefits when prescribed for non-trans conditions and treatments. Every time I challenge HMSA under the affordable care act, HMSA is required to check a yes/no box that asks if my requested health care would ordinarily be a covered benefit of the plan had they not deemed it to be not medically necessary. When push comes to shove HMSA always checks the "yes" box, indicating that my requested care is already a benefit for non-trans conditions and when medically necessary. This legislation does not mandate the coverage of anything that isn't already covered and paid for by insurance... we're just tightening up the idea that insurance companies should not be discriminating against trans folks and denying health care on the basis of our gender identity and when the care is treating gender dysphoria, especially when the world already knows this health care to be medically necessary, appropriate, and well-supported.

I have been approved for and demonstrated to my insurance company the medical necessity for my breast augmentation, facial gender confirmation surgery, tracheal shave, and soon my facial hair removal care. In what



rational world does it make sense that HMSA has been overturned on my care but then they continue to deny this same care for other trans folks? Like I said, there is really nothing too special about my health care needs and we must end this nonsense once and for all and ensure all trans folks have access to the health care and coverage that they need and deserve.

My independent medical reviews and appeals

Like I already said, every time I have challenged my insurance company's denials the insurance company has been overturned and the medical necessity of my trans health care has been upheld and confirmed. I've been approved for breast augmentation, facial gender confirmation surgery, and tracheal shave. I have an IMR underway right now for facial electrolysis, because despite me providing two letters from the World Professional Association for Transgender Health (WPATH) that say 'facial electrolysis is medically necessary for trans folks,' my insurance company STILL denied my requested coverage twice and called it not medically necessary. I expect a decision on the denials to be made by early March and sure hope it's another victory where the insurance denials are overturned based on rationality, commonsense, and the existing scientific literature.

In California, nearly every single IMR that challenged discriminatory transgender-related denials in the last several years has been victorious and the insurance companies have been overturned for all sorts of care like breast reconstruction, facial surgeries, facial hair removal, body contouring, voice procedures, chest masculinization, and more... From what I understand, BCBS of CA was overturned on their discriminatory denials so regularly via IMRs that after a few years they voluntarily started covering additional transgender-related care bit by bit, until taking a relatively significant plunge more recently to do better by their trans members and reduce the need for further embarrassing IMR overturns.

I am already seeing the IMR process to be favorable to trans patients in Hawaii (because trans health care is common sense)... But even if the IMRs tend to overturn discriminatory health insurance denials in the end, the process of fighting for coverage, enduring so many hurtful actions by health insurance companies, and enduring an ACA IMR process can come with significant trauma for the patient that they may not necessarily always be able to withstand and pull through. Also, I don't think the ACA's IMR process can be used in exactly the same ways by people insured under self-funded group plans or Medicaid, so we need a better solution anyway that meets the needs of the larger trans community (like passing this legislation).

Regardless of having an IMR process that seems to work in Hawaii (for those who can use it), we have the opportunity right now to alleviate the need for trans folks to endure so many unnecessary struggles. We have the opportunity to allow trans folks to access the basic health care they are already afforded by state law and the broader medical consensus. We have the opportunity to save lives by passing this legislation and preventing health insurance companies from arbitrarily denying trans care.

Insurance companies arbitrarily deny trans care by using non-expert reviewers

My insurance company has been denying much of my gender affirming care over the past 10 months by using reviewers who seem to have zero experience in treating trans patients or prescribing care for trans folks, who do not seem to understand trans health care, who do not seem to even review the science and evidence that I've been providing to them time and time again, and who simply have no business being involved in transgender decision making in my opinion. When I request coverage, HMSA requires me to submit letters of medical necessity from providers who are highly trained and experienced with trans care and who meet specific criteria and characteristics as defined by the insurance company and WPATH (like education and relevant clinical experience). However, my insurance company has



not been using reviewers with comparable knowledge and expertise when reviewing and denying me. I alleged this problem last year via the insurance commissioner's office, and HMSA responded with the following:

"...the "Characteristics" set forth in Appendix A of the GIS Policy apply to a member's treating providers and not the clinical reviewers"

"...there is no requirement that a "reviewing body" must have such credentials."

In kindergarten language, my insurance company said that while they require my treating and referring providers to be highly skilled and trained in trans health care and meet specific criteria, HMSA's reviewers do not need to be comparable in knowledge and expertise, which would be fine ONLY IF HMSA would listen to and defer to the clinical judgements of the experts who are treating the patient (insurance does not listen to or defer to the expertise of the experts they require me to bring into the process). Please tell me how that makes any sense at all. This all results in insurance companies not understanding transgender health care and they are making arbitrary and uninformed denials.

To further improve the issue of insurance companies arbitrarily denying trans care, I propose an amendment to this legislation. We must require that health plans cannot deny trans care on the basis of medical necessity unless a health care provider with experience prescribing or delivering gender affirming treatment has also reviewed and confirmed the appropriateness of the adverse benefit determination. Even if this legislation is passed as-is, I foresee instances where insurance companies will still deny trans care on the basis of medical necessity and gender identity. This proposed amendment would help ensure that in those instances insurance companies are using experts in the review and denial process rather than continuing to make arbitrary denials based on input from non-experts who are not familiar with trans health care, as is the case today. If an insurance company says 'trans health care is highly specialized and we don't have the expertise to use in reviews as Breanna's amendment is suggesting,' I think that demonstrates why we need legislation like this to pass (and my proposed amendment).

Health plans on the mainland already cover trans health care

The majority of insurance on the mainland already understand trans health care is medically necessary and routinely cover it. For example, within blue cross blue shield alone nearly 85% of mainland states/companies already routinely cover breast augmentation for trans women, and about half routinely cover facial gender confirmation surgeries (with more starting to cover it as of 2021 and 2022). HMSA does not routinely cover this care, and in fact they routinely DENY this medically necessary care for the reasons I've listed above. Some of our Hawaii insurance companies are on the wrong side of history with all of this, and I'd love for someone to rationalize why my health care is widely viewed as medically necessary in the mainland and around the world, but because I live in Hawaii suddenly big insurance can call my care not medically necessary. It makes no sense and this shows that at least my insurance company is out of sync with the broader world.

The end

Please pass this commonsense legislation in 2022 (with my proposed amendment). There is quite literally no reason why this legislation should not pass, and there is no reason why we should allow Hawaii insurance companies to continue to flagrantly and arbitrarily deny trans health care and go against the grain of reality.

I am happy to speak more in depth with any member or committee regarding my personal experience. Thank you for this opportunity. -Breanna Zoey (she/her)



SB-2835

Submitted on: 2/2/2022 7:40:58 AM

Testimony for CPN on 2/3/2022 9:30:00 AM

Submitted By	Organization	Testifier Position	Remote Testimony Requested
Kevin Tomita	Individual	Support	No

Comments:

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

I strongly support SB 2835 which updates the language on the transgender anti-discrimination health insurance law to further support case by case determinations and requires insurance companies in Hawai'i to post their policies.

As a clinical psychologist specializing in the mental health of transgender and gender diverse individuals, I witness the detrimental impact of insurance companies reducing access to gender-affirming medical interventions through discriminatory policies, difficulties navigating approval processes for gender affirming care, and difficulties navigating appeal processes after being denied coverage despite multiple medical professionals determining medical necessity of procedures. These difficulties have directly led to an increase in suicidality, depression, various forms of anxiety, and other mental health disturbances.

There is an overwhelming and growing consensus among major medical organizations that transition-related health care services, including surgical treatments, to alleviate gender dysphoria are medically necessary ([HRS §432E-1.4](#)) and should be fully covered by patients' insurance. Without insurance coverage of these medically necessary procedures (that are provided for the cisgender people), trans lives are put at risk for depression and suicidal ideation.

Please make sure that insurance companies are not ignoring the majority of medical opinion and forming their own internal policies (e.g **HMSA Policy Number: MM.06.026 & Kaiser 2022 policy page 41**) that ignore the law and medical necessity of gender-affirming care by passing this bill.

Thank you for investing in the health and safety of our māhū and trans community members!

Sincerely,

Kevin Kiyoshi Tomita, PhD

Aloha mai 'oukou,

I am here to provide testimony in support of SB2385 which provides to remove serious discrimination in transgender related care.

I am a binary transgender woman. By trade I am a software engineer. I have been through two transitions and one former detransition due to lumps in my breast and social ostracism, lack of work, and severe emotional abuse.

I have a unique perspective having being discriminated in the past 20 years (during first attempt), past 2 ½ years (seriously blockaded in my transition), present, and undoubtedly into the future if this bill is not passed.

HMSA and Kaiser severely discriminate against transgender folks. HMSA more seriously. I know this from 2 ½ years having Kaiser, HMSA, or both at the same time. Yes, as a software engineer I started working as a Barista for Starbucks starting my day at 2 AM to 6:30 PM between my two jobs just to get past insurance barriers. They proved insurmountable and I was never able to get gender identity coverage even with both plans and my mental health had never been worse in being denied after fighting so hard and being organized and proactive..it didn't matter.

I will state it plainly, at times this discrimination has increased stress levels already above max; and I am one who handles stress well. Approximately more than 40% of transgender folks attempt suicide in their life. It's so apparent to me why; being physically in the wrong gender is an emotional roller coaster. That's why it's necessary we pass this bill.

I propose that the determination for medically necessary should be at the discretion of a mental health therapist; Not the insurance company. After numerous years of fighting my employer who is in a group plan finally began advocating for breasts. HMSA then added it arguing with my employer for a year that the coverage was not necessary. Still they began providing it beginning January 1 of this year as medically necessary only for people who are part of the company. For others it is still considered not medically necessary. So it's medically necessary if you pay extra for it; and is not medically necessary if you don't.

It's also impossible (completely impossible) to get any doctor in Hawai'i to fill out the preauthorization request necessary for breast augmentation. Since they've been denied so many times before; until this is resolved claims submitted without prior authorization should be approved.

Propose the change from Electrolysis or Laser Hair Removal to Electrolysis and Laser Hair Removal. Certain hair types and hair colors cannot be removed with Laser. Also time to do laser first than electrolysis would delay treatment. I have been undergoing laser for approximately 2 years not on my face and legs and I still get hairs there..bottom would be the same. This is critical because hair in an area that will be used for gender reassignment surgery

can create terrible health conditions when the hair is inside of your new internal organs. White hair is something that can only be removed with electrolysis.

I have recently been denied voice surgery by HMSA and in the process of being denied for Facial Feminization Surgery. Having to pay out of pocket for electrolysis which is required to be covered by insurance companies per the 2016 law but is not (they lie that they do). These are huge barriers to me.

Proposal Changes:

- Cover Electrolysis and Laser together at patient prescription. Coverage to be provided by anyone licensed to do so in the state. I.e. Can be an electrologist; doesn't need to be a doctor (this is a huge problem; cant receive service as it is not offered).
- Cover Hormonal Pellet implants
- Cover Injectable Hormones via the Drug Side / Pharmacy (vs Medical Side) like other states.
- Cover Breast Reconstruction (as per the womens breast cancer act), excepted the 5 year requirement as most doctors only keep 5 years of records.
- Insurance must cover based on current WPATH guidelines and therapist recommendation; not insurance companies designation on what is medically necessary; insurance is only about profit not people.
- Insurance coverage for Gender Identity comparable to California, Washington, and Oregon.

Kalani Bright

SB-2835

Submitted on: 2/2/2022 9:12:51 AM

Testimony for CPN on 2/3/2022 9:30:00 AM

Submitted By	Organization	Testifier Position	Remote Testimony Requested
Mandy Fernandes	Individual	Support	No

Comments:

Dear Chair Baker, Vice Chair Chang, and members of the Committee on Consumer Protection,

I write in strong support of SB 2835, which offers important clarification on insurers' obligations regarding coverage of gender-affirming care.

In 2016, the Legislature passed Act 135, which prohibited all insurers in the state from discriminating in coverage on the basis of gender identity. This act required insurers to cover gender affirming care *so long as there is already coverage for the same services when not related to gender affirmation*. However, since Act 135's passage, there have been numerous cases of blanket denials for gender-affirming care, even when the same service would be covered under the policy or plan for other reasons.

Gender-affirming care is necessary, life-saving care, and this bill clarifies insurers' existing legal obligations to ensure that transgender people have equal access to this care. The Office of the Attorney General recently issued an opinion that this bill does not mandate new coverage, because even though it lists services that would be deemed medically necessary, it only does so when those services would be covered for other reasons.

For these reasons, I respectfully request that the Committee pass SB 2835.

Mahalo,

Mandy Fernandes

Honolulu, Hawai'i

SB-2835

Submitted on: 2/2/2022 9:14:26 AM

Testimony for CPN on 2/3/2022 9:30:00 AM

Submitted By	Organization	Testifier Position	Remote Testimony Requested
Bianka Tasaka	Individual	Support	No

Comments:

ALOHA,

I Bianka Tasaka M.A of Hanalei, Kauai HI support measure SB2835 in healthcare coverage for Trans Identified individuals. This will crate ongoing edquate health care service coverage for the Transgender community of Hawaii. My Health and Well Being Matters!

Please PASS Bill SB2835!

Mahalo,

Bianka Tasaka

LATE

SB-2835

Submitted on: 2/2/2022 11:20:51 AM

Testimony for CPN on 2/3/2022 9:30:00 AM

Submitted By	Organization	Testifier Position	Remote Testimony Requested
Cameron Woods	Individual	Support	No

Comments:

Aloha,

My name is Cameron Woods, I am from ‘Aiea, Hawai‘i, and I am writing in strong support of SB 2835. Healthcare is a human right, and gender-affirming healthcare is medically necessary. We must end discrimination against transgender, māhū, and gender non-confirming people in Hawai‘i. One significant way to end this violence is through providing vital and medically necessary healthcare services. Discrimination in insurance and healthcare causes extreme harm and is an act of violence against transgender and gender non-confirming people, particularly those who are Black, brown, indigenous and people of color.

Gender-affirming healthcare should not only be afforded to those who are able to pay. Unfortunately, many transgender and gender non-confirming people are houseless or lower-income due to the exclusive structures in our society that lead to discrimination and adversity. Therefore, we must realize that we need equity in the healthcare system, and we must provide coverage for gender-affirming healthcare, particularly for the safety of those who cannot afford it. Gender diverse people should not be subjected to violence or exploitation in order to secure resources.

SB 2835 would ensure that transgender and gender non-confirming persons receive the healthcare that they need and deserve. The World Professional Association for Transgender Health (WPATH) firmly asserts that gender-affirming services are medically necessary and providing these services is a lifesaving measure that positively impacts both the recipients of said services, as well as the healthcare system that serves them. You do not have to understand what it is like to be trans or experience discrimination based on your gender identity to acknowledge that gender-affirming healthcare has been irrefutably determined to be medically necessary within medicine.

It is far overdue for insurance companies and organizations to follow medical guidelines to provide coverage for these medically necessary and paramount services. SB 2835 identifies the significant gaps that exist in our healthcare system for transgender and gender non-confirming people who are seeking gender-affirming healthcare and these gaps must be addressed. For these reasons and more, I am in unwavering support of SB 2835.

Mahalo for your time and consideration,

Cameron Woods

LATE

SB-2835

Submitted on: 2/2/2022 1:19:18 PM

Testimony for CPN on 2/3/2022 9:30:00 AM

Submitted By	Organization	Testifier Position	Remote Testimony Requested
Elizer Rios	Individual	Support	No

Comments:

Aloha,

My name is Elizer Rios, I am a transplant from Washington, D.C., currently residing in Honolulu, Hawai'i, and I am writing in strong support of SB 2835. Healthcare is a human right, and gender-affirming healthcare is medically necessary. We must end discrimination against transgender, māhū, and gender non-confirming people in Hawai'i. One significant way to end this violence is through providing vital and medically necessary healthcare services. Discrimination in insurance and healthcare causes extreme harm and is an act of violence against transgender and gender non-confirming people, particularly those who are Black, brown, indigenous and people of color.

Gender-affirming healthcare should not only be afforded to those who are able to pay. Unfortunately, many transgender and gender non-confirming people are houseless or lower-income due to the exclusive structures in our society that lead to discrimination and adversity. Therefore, we must realize that we need equity in the healthcare system, and we must provide coverage for gender-affirming healthcare, particularly for the safety of those who cannot afford it. Gender diverse people should not be subjected to violence or exploitation in order to secure resources.

As a trans, queer person of color, my safety is threatened daily by harmful legislation that excludes me from obtaining proper healthcare that allow me to exist safely, freely and authentically. It is imperative that trans people, like me, have access to the same safety and autonomy that other people are provided by default simply for existing within a socially acceptable binary.

SB 2835 would ensure that transgender and gender non-confirming persons receive the healthcare that they need and deserve. The World Professional Association for Transgender Health (WPATH) firmly asserts that gender-affirming services are medically necessary and providing these services is a lifesaving measure that positively impacts both the recipients of said services, as well as the healthcare system that serves them. You do not have to understand what it is like to be trans or experience discrimination based on your gender identity to acknowledge that gender-affirming healthcare has been irrefutably determined to be medically necessary within medicine.

It is far overdue for insurance companies and organizations to follow medical guidelines to provide coverage for these medically necessary and paramount services. SB 2835 identifies the significant gaps that exist in our healthcare system for transgender and gender non-conforming people who are seeking gender-affirming healthcare and these gaps must be addressed. For these reasons and more, I am in unwavering support of SB 2835.

Mahalo for your time and consideration,

Elizer Rios

Concerned Citizen

SB-2835

Submitted on: 2/2/2022 6:49:08 PM

Testimony for CPN on 2/3/2022 9:30:00 AM

LATE

Submitted By	Organization	Testifier Position	Remote Testimony Requested
Shalani Placencia	Testifying for hawaii health and harm reduction center	Oppose	No

Comments:

as person living as a Transgender women as well as a avocator for my work. i dont agree with passing this bill. everyone including Transgender deserves health care to help heal each person as they see fit. and if the medical procedurs are able too why not...

SB-2835

Submitted on: 2/3/2022 2:12:45 AM

Testimony for CPN on 2/3/2022 9:30:00 AM

LATE

Submitted By	Organization	Testifier Position	Remote Testimony Requested
Shayna Lonoaea Alexander	Individual	Support	No

Comments:

Aloha Chair Baker and Honorable Committee,

I support SB2835 for the following reasons:

Private insurance companies have unlawfully exempted themselves from the medical necessity statute as it relates to gender identity services.

When insurance companies categorically deny certain gender-affirming procedures by saying they are cosmetic in their policies, insurers attempt to take themselves out of HRS §432E-1.4(a) (Medical Necessity Statute). The Medical Necessity Statute requires coverage of a procedure if (1) it is not specifically excluded (2) is recommended by a licensed healthcare provider and (3) is medically necessary under §432E-1.4(b). Because (1) the anti-discrimination law prohibits insurance companies from categorically excluding surgeries like facial feminization and breast augmentation for transgender people (a protected gender identity) in their policies, (2) licensed doctors are recommending these procedures, and (3) gender-affirming procedures (even those that HMSA and Kaiser have categorically denied) are supported by the majority of medical opinion and therefore satisfy §432E-1.4(b). As such, insurance companies are subject to the controlling definition of medical necessity in the HRS 432E.

It is also worth noting that the HRS §432E-1.4 medical necessity definition of “cost-effective” is satisfied which emphasizes “the benefits and harms relative to the costs represent an economically efficient use of resources for patients” not lower dollar amounts. Because of the harmful mental and physical consequences if gender-affirming surgery is not granted. The costs of lives well lived or lost due to suicide for trans people far outweigh any perceived cost (of which there really is none) of surgeries and procedures for trans people that are regularly and easily granted to cisgender patients.

Mahalo,

Shayna Lonoaea Alexander

SB-2835

Submitted on: 2/2/2022 9:46:39 PM

Testimony for CPN on 2/3/2022 9:30:00 AM

LATE

Submitted By	Organization	Testifier Position	Remote Testimony Requested
Bradley Kuo	Individual	Support	No

Comments:

I treat patients from the transgender community. I support this measure as it is important for all trans people to receive affirming healthcare without barriers.

-Dr. Bradley Kuo