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HOUSE RESOLUTION

CONVENING A STUDY GROUP TO EXAMINE THE ISSUES OF MEDICAL NECESSITY AND COST FACTORS FOR CONTINUED REIMBURSEMENT FOR THE COST OF ROUTINE CIRCUMCISION FOR NEWBORN MALE INFANTS IN HAWAII.

WHEREAS, it is unclear why 1,200,000 circumcisions are performed in the United States each year, more than any other country, when this operation is considered a medically unnecessary procedure; and

WHEREAS, the American Academy of Pediatrics, the American Academy of Family Practitioners, and the American Medical Association, have published statements that do not support routine neonatal circumcisions; and

WHEREAS, although there are potential medical benefits such as reduced incidence of urinary tract infections in circumcised male infants under one year of age and reduced risk of penile cancer, these risks are minimal, while potential adverse complications of circumcision are more likely; and

WHEREAS, parents who were not provided with adequate information have chosen circumcision for their newborn sons because it seems routine, when in fact, up to 85 percent of the world's male population is not circumcised, and in the United States the cost of routine circumcisions ranges from \$150,000,000 to \$270,000,000 annually; and

WHEREAS, in some states such as Virginia, Medicaid still pays for circumcisions when the cost-savings from circumcisions that are not covered could have paid for many of an infant's necessary immunizations; and

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WHEREAS, sixteen states--Arizona, California, Florida, 1 Idaho, Louisiana, Maine, Minnesota, Mississippi, Missouri, 2 Montana, Nevada, North Carolina, North Dakota, Oregon, Utah, and 3 Washington disallow Medicaid coverage for circumcision; and 4 5

WHEREAS, in recent years, routine circumcision seems to be declining in popularity; in California, only one-third of male newborns are currently undergoing the procedure; and

WHEREAS, newborn circumcision is not recommended by any major American, foreign, or international medical organization, is medically unnecessary and defined as an elective procedure by the Centers for Medicare and Medicaid, and is not costeffective; and

WHEREAS, private health insurance and Medicaid should only pay for medically necessary care and not for elective care and removing circumcision from health insurance and Medicaid coverage could result in cost-savings to cover other necessary Medicaid needs; now, therefore,

BE IT RESOLVED by the House of Representatives of the Twenty-third Legislature of the State of Hawaii, Regular Session of 2006, that the Chairs and/or Vice-Chairs of the House and Senate Health and/or Human Services committees convene a study group to explore the issue of routine infant circumcision with regard to health benefits, medical necessity, and the possibility of healthcare cost-savings by eliminating reimbursements for the procedure; and

BE IT FURTHER RESOLVED that the convenors of the study group are requested to invite representatives of the following to participate:

- The Pediatric Council of Hawaii; (1)
- (2) The Department of Human Services;
- (3) The Department of Health; and
- (4) Child health advocates from the community;

and

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BE IT FURTHER RESOLVED that the study group is requested to make recommendations on whether health insurers and Medicaid should continue to reimburse the cost of non-medically necessary routine circumcision for newborn male infants in Hawaii; and

BE IT FURTHER RESOLVED that the study group is requested to submit its findings and recommendations to the Legislature no later than 20 days prior to the convening of the Regular Session of 2007; and

BE IT FURTHER RESOLVED that certified copies of this Resolution be transmitted to the Director of Human Services, Executive Director of the Hawaii Chapter of the American Academy of Pediatrics, Chair of the Pediatric Council of Hawaii, President of the Hawaii Health Systems Corporation, Hawaii Chapter of the American College of Obstetrics and Gynecology, and Director of Health, who is requested to distribute copies to all health insurance providers in Hawaii.

