LATE

Testimony by: Cheri Teranishi-Hashimoto, DPT



HCR 109/HR 88, Requesting the Auditor to Assess the
Social And Financial Effects of Requiring Health Insurance Coverage for Colonscopy
Colorectal Cancer Screening
Hse HLT, March 27, 2009
Room 329, 10:00 am
Position: Support
Chair Yamane, and Members of the House HLT Committee:

I am Cheri Teranishi-Hashimoto, D.P.T., and a member of HAPTA's Legislative Committee. The Hawaii Chapter – American Physical Therapy Association (HAPTA) is comprised of 300 member physical therapists and physical therapist assistants employed in hospitals and health care facilities, the Department of Education and Department of Health systems, and private practice. Our members represent Hawaii at the national American Physical Therapy Association and are delegates for Pediatrics, Women's Health, Parkinson's Disease and other issue sections. We are part of the spectrum of care for Hawaii, and provide rehabilitative services for infants and children, youth, adults and the elderly. Rehabilitative services are a vital part of restoring optimum function from neuromusculoskeletal injuries and impairments.

HAPTA strongly supports HCR 109/HR88, which is a pre-requisite for mandating health insurance coverage for a specific health service. Colorectal cancer is the 3rd most common form of cancer, and it is the 2nd leading cause of cancer related death in the western world. The American Cancer Society 2008 Report states that the estimated new cancer cases and deaths in the U.S. pertaining to the colon/rectal regions were: 151,880 new cases and 50,640 estimated deaths.

The good news is that colorectal cancer is highly curable through early detection and treatment in the early stages, as with most cancers detected by screens (e.g., mammograms for breast cancer) that are covered by insurance carriers. However, only 21 states have laws mandating colonscopy coverage, and other states usually cover colonscopies if there are symptoms that warrant a screen.

According to the 2007 Colorectal Cancer Legislation Report Card, Hawaii was given an "F" rating, which means we do not have legislation in place that requires insurance providers to cover preventative colorectal cancer screenings.

Treatment of colorectal cancer can vary: surgery, chemotherapy, or radiation. After treatment, the individual may experience fecal incontinence (inability to control bowel movements). These individuals that experience fecal incontinence may be treated by a physical therapist trained in pelvic floor rehabilitation. When colorectal cancer is caught in the earlier stages there may be a decrease risk of damage to the anal sphincter and pelvic floor region through surgical interventions, radiation and other treatment options pursued.

I may be reached at 432-5872 if there are any questions. Thank you for the opportunity to present testimony.