STAND. COM. REP. NO.



Honolulu, Hawaii

FEB 1 2 2010

RE: S.B. No. 2599 S.D. 1

Honorable Colleen Hanabusa President of the Senate Twenty-Fifth State Legislature Regular Session of 2010 State of Hawaii

Madam:

Your Committees on Commerce and Consumer Protection and Health, to which was referred S.B. No. 2599 entitled:

"A BILL FOR AN ACT RELATING TO HEALTH INSURANCE, "

beg leave to report as follows:

The purpose of this measure is to require insurers to provide coverage for colorectal cancer screening by colonoscopy every ten years after age fifty.

Your Committees received testimony in support of this measure from Kaiser Permanente, the Association of Hawaiian Civic Clubs, the American Cancer Society Hawaii Pacific, Inc., Hawaii Medical Service Association, Hawaii Association of Health Plans, and the Filipino Coalition for Solidarity. Testimony with comments was received from the Department of Commerce and Consumer Affairs. Written testimony presented to the Committees may be reviewed on the Legislature's website.

Your Committees find that colorectal cancer is preventable, treatable, and beatable when it is detected early. However, your Committees find that colorectal cancer is currently the third most common cancer in the United States and the second most common cause of cancer deaths among both men and women. Your Committees note that the American Cancer Society estimates that over 710 Hawaii residents will develop colorectal cancer this year and approximately 200 will die from the disease. Your Committees find that when colorectal cancer is detected at the earliest stage, it has a five-year survival rate of ninety per cent. However, that

2010-1045 SSCR SMA-2.doc

STAND. COM. REP. NO. Page 2



rate drops to ten per cent if it is not detected until after the cancer spreads.

Your Committees note that although colorectal screening, including screening colonoscopy, is the only effective means of early detection, only about half of Hawaii residents over the age of fifty report having a screening exam. Your Committees find that this low screening rate is due to a lack of insurance coverage for routine screenings. Your Committees further find that mandating insurance coverage for routine colorectal screening will save both money and lives, as it will encourage early detection and allow for the use of cost-efficient and less invasive treatment options. Your Committees find that advances in medical technology have led to the availability of a variety of screening methods that patients, in consultation with their doctors, can choose to fit individual needs. Finally, your Committees note that the United States Preventative Services Task Force recommends against screening colonoscopy for persons over age seventy-five based on the risks of the procedure, although it does recommend the use of other screening modalities after that age.

Your Committees thank the Auditor for the thorough sunrise review of proposed legislation to mandate insurance coverage for screening for colorectal cancer. Your Committees note that the Auditor found that, according to at least one estimate, 18,800 lives in the United States could be saved annually if every person over the age of fifty were regularly screened for colorectal cancer. In addition, your Committees note that the Auditor found that while some insurance coverage for screening is available in the State, there are significant gaps in coverage availability such that a majority of Hawaii's insured population of asymptomatic adults between the ages of fifty and seventy-five are currently unable to access most methods of colorectal screening, including screening colonoscopy. Finally, your Committees find that, based on the Auditor's findings, the Auditor recommended the enactment of legislation to mandate insurance coverage for screening for colorectal cancer, including by screening colonoscopy.

Your Committees have amended this measure by:

 Deleting a reference to colorectal screening by colonoscopy from the purpose section;



STAND. COM. REP. NO. Page 3

- (2) Amending each substantive section of the measure to include coverage for all screening modalities that have received a grade of A or B from the United States Preventative Service Task Force; and
- (3) Making nonsubstantive technical amendments for the purposes of clarity and accuracy.

As affirmed by the records of votes of the members of your Committees on Commerce and Consumer Protection and Health that are attached to this report, your Committees are in accord with the intent and purpose of S.B. No. 2599, as amended herein, and recommend that it pass Second Reading in the form attached hereto as S.B. No. 2599, S.D. 1, and be referred to the Committee on Ways and Means.

> Respectfully submitted on behalf of the members of the Committees on Commerce and Consumer Protection and Health,

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ROSALYN H. BAKER, Chair

The Senate Twenty-Fifth Legislature State of Hawaii

Record of Votes Committee on Commerce and Consumer Protection CPN

Bill / Resolution No.:* SB2599	Committee Referral: Date: Z/10/10								
The committee is reconsidering its previous decision on this measure. If so, then the previous decision was to:									
The Recommendation is:									
Pass, unamended Pass, with amendments Hold Recommit 2312 2311 2310 2313									
Members		Aye	Aye (WR)	Nay	Excused				
BAKER, Rosalyn H. (C)		V							
IGE, David Y. (VC)			- 12						
ESPERO, Will									
GREEN, M.D., Josh									
IHARA, Jr., Les	· ·	V							
SAKAMOTO, Norman									
HEMMINGS, Fred					~				
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TOTAL		5	0	0	2				
Recommendation:									
Chair's or Designee's Signature:									
Distribution: Original Yellow Pink Goldenrod File with Committee Report Clerk's Office Drafting Agency Committee File Copy									

*Only one measure per Record of Votes

The Senate Twenty-Fifth Legislature State of Hawaii

Record of Votes Committee on Health HTH

Bill / Resolution No.:* <i>SB</i> 2599	Committee Referral: Date: CPN/HTH, WAM 2/9/10								
The committee is reconsidering its previous decision on this measure.									
The Recommendation is:									
Pass, unamended Pass, with amendments Hold Recommit 2312 2311 2310 2313									
Members		Aye	Aye (WR)	Nay	Excused				
IGE, David Y. (C)									
GREEN, M.D., Josh (VC)		V							
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Recommendation:									
Chair's or Designee's Signature:									
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*Only one measure per Record of Votes