

MARION M. HIGA State Auditor

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TESTIMONY OF MARION M. HIGA, STATE AUDITOR, ON SENATE BILL NO. 2599, SENATE DRAFT 2, HOUSE DRAFT 2, RELATING TO HEALTH INSURANCE

House Committee on Finance

March 29, 2010

Chair Oshiro and Members of the Committee:

Thank you for this opportunity to testify in support of Senate Bill No. 2599, Senate Draft 2 (SD2), House Draft 1(HD2). The purpose of the bill is to provide for the early detection of colorectal cancer by requiring colorectal cancer screening procedures graded A or B, including colonoscopy screening every ten years for adults between the ages of 50 and 75, as recommended by the U.S. Preventive Services Task Force.

Senate Bill No. 2599, SD2, HD2, as amended implements recommendations in our Report No. 10-02 entitled *Study of Proposed Mandatory Health Insurance Coverage for Colorectal Cancer Screening.* For this reason, I recommend that the measure be passed.

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I would be pleased to answer any questions you may have.

Kaiser Permanente,

Government Relations

Testimony of Phyllis Dendle

Before:

House Committee on Finance The Honorable Marcus R. Oshiro, Chair The Honorable Marilyn B. Lee Vice Chair

March 29, 2010 6:00 pm Conference Room 308

SB2599 SD2 HD2 RELATING TO HEALTH INSURANCE

Chair Oshiro and committee members, thank you for this opportunity to provide testimony on SB 2599 SD2 HD2 mandating health insurance coverage for colorectal cancer screening.

Kaiser Permanente Hawaii supports this bill.

We note for the committee that this draft continues to have an incorrect effective date.

At the beginning of the legislative session the Legislative Auditor issued a Study of Proposed Mandatory Health Insurance Coverage for Colorectal Cancer Screening. The recommendation in this study was to amend this bill to include only the procedures and tests recommended by the U.S. Preventative Service Task Force (USPSTF). We support this recommendation and the amendment made by the previous committees to base the benefits required on the recommendations which USPSTF grades an A or B.

The USPSTF is an independent panel of private sector prevention and primary care experts sponsored by the Agency for Healthcare Research and Quality (AHRQ) within the US Department of Health and Human Services. Their recommendations for clinical preventative services are widely used and respected throughout the nation. Kaiser Permanente uses these guidelines as the basis for all of the preventative services offered to our members. The USPSTF considers the performance of preventative tests and grades their recommendations based on the net benefit the test will provide. Tests rated A have a high certainty of benefit and B have at least a moderate certainty of benefit. At this time FOBT, Flexible Sigmoidoscopy, and colonoscopy have an A grade. There are currently no tests graded B.

The value of basing the benefits in the Hawaii law on the USPSTF tests graded A or B is that as new tests and procedures are determined to be effective they would be covered without the need to change the law.

Thank you for your consideration.

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March 27, 2010

Committee on Committee on Finance Representative Marcus B. Oshiro, Chair Representative Marilyn B. Lee, Vice Chair

Hearing: 6:00 P.M., Monday, March 29, 2010 Hawaii State Capitol, Room 308

RE: SB2599, SD2, HD2 - Relating to Health Insurance

Testimony in Strong Support

Chair Oshiro, Vice Chair Lee and members of the Committee on Finance. Thank you for the opportunity to testify in strong support of SB2599, SD2, HD2 which would require health insurance coverage for colorectal cancer screening and coverage for colonoscopy.

As the committee knows, this bill was introduced at the request of the American Cancer Society in 2009, and was predicated on new colorectal cancer screening guidelines developed by the American Cancer Society, the U.S. Multi-Society Task Force on Colorectal Cancer, and the American College of Radiology; and released in 2008.

Beginning last year, the American Cancer Society offered extensive testimony on the benefits of early detection and treatment of colorectal cancer which included the use of colonoscopy. Removing polyps before they turn into cancer can prevent the disease and reduce deaths. Scientific evidence shows that more than one-third of deaths from colorectal cancer could be avoided if people aged 50 years and older were screened regularly.

At this juncture of the legislative process, we would like to reiterate that colorectal cancer screening using colonoscopy emerges as an effective and very affordable benefit for health plan members when compared to the cost of treating colon cancer which can easily run between \$100,000 and \$200,000. It will dramatically reduce colon cancer death and incidents rates in Hawai'i. We would urge the committee to pass this measure forward for consideration by the full House.

Mahalo for the opportunity to provide testimony in very strong support of this measure.

Sincerely,

LML

George S. Massengale, JD Director of Government Relations