

STATE OF HAWAII STATE COUNCIL ON DEVELOPMENTAL DISABILITIES 919 ALA MOANA BOULEVARD, ROOM 113 HONOLULU, HAWAII 96814 TELEPHONE: (808) 586-8100 FAX: (808) 586-7543 February 21, 2014

The Honorable Sylvia Luke, Chair House Committee on Finance Twenty-Seventh Legislature State Capitol State of Hawaii Honolulu, Hawaii 96813

Dear Representative Luke and Members of the Committee:

SUBJECT: HB 1776 HD2 - RELATING TO EDUCATION

The State Council on Developmental Disabilities (DD) **SUPPORTS THE INTENT** of HB 1776 HD2. The bill adds a dental examination to existing medical requirements for initial entry into school in the State; requires the Board of Education to establish a pilot program to require a physical examination for entry into seventh grade in one complex area; and provides an appropriation.

By requiring dental examinations prior to the entrance of school, parents or guardians would make it a priority to have their child complete an examination. This would be a proactive step in preventing tooth decay, providing early diagnosis and treatment of dental caries, and improving the oral health of children.

The proposed "ninety" days (Page 3, line 1) to complete a dental exam seems to be a reasonable timeframe. There are individuals with special needs who cannot and will not be able to sit in a dental chair and tolerate any dental procedure to be performed on them. They may require desensitization to going to a dental office and may require sedation to perform any type of dental procedure. For these situations, it may take more than the 30 days (current language under Notification for noncompliance) to complete a dental examination. As a result, these individuals would not be admitted to school. For students with special needs or a disability, the consequence of not attending school may result in loss of acquired skills.

Access to dental care services for individuals with DD is a priority of the Council and is addressed in our 2012-2016 State Plan through partnerships with dental hygienists, the University of Hawaii School of Nursing and Dental Hygiene, the Maternal Child Health Leadership in Neurodevelopmental and Related Disabilities program, and Special Olympics to do in-service training on preventive oral health care for families and other caregivers. Children and adults with DD face increased oral health challenges to find a dentist willing and able to treat them due to their disability. The Honorable Sylvia Luke Page 2 February 21, 2014

With regards to the pilot program to be established by the Board of Education which is referenced in Section 5, Page 3, lines 14-20, we noticed that dental examinations are not included as a requirement for entrance into the seventh grade. We respectfully ask for your consideration to amend the bill to include dental examinations as part of the pilot project.

Thank you for the opportunity to submit testimony **supporting the intent of HB 1776 HD2 and consideration to include dental examinations as part of the proposed pilot project.**

Sincerely,

Waynette K.Y. Cabral, MSW Executive Administrator

4. Minut

J. Curtis Tyler, III Chair

Hearing in Conference Room 308 at 1:00 p.m.

February 21, 2014

House Committee on Finance

Re: HB 1776 HD2 Relating to Education

Dear Chair Luke and Members of the Committee:

I am writing in strong support of HB 1776 HD2 with one amendment, and that is, to remove the language regarding the creation of a pilot program and require this of all public schools.

Prior to taking my current position with Hale Kipa, a youth services agency, I spent three decades working in health care in Hawaii. During that time, I watched the health status of Hawaii's youth worsen despite attempts to encourage more physical activity, eating "5-a-Day", reduce smoking, avoid drugs, etc. As well-intended—and often successful-- as these initiatives were, they often lost funding due to the shifting priorities of private funders, lack of staff or other support. Ultimately, the improvements made were not able to be sustained. We need a sustainable solution to what has become a large and growing problem—the poor health of Hawaii's young people.

The link between a child's health status and their ability to do well in school is indisputable. As the Director of Education/Vocational Services at Hale Kipa, I see firsthand the strong relationship between a youth's lifestyle and their academic performance. If Hawaii is to achieve its goals of improving childhood health as well as its academic performance, it makes sense to require more regular physical and dental exams of school-aged youth to ensure that the gambit of physical, social and emotional issues can be addressed early, and in so doing, youth can be helped to be as mentally and physically prepared for school as possible

I believe we need to take a more systems-oriented and coordinated approach to improving the health of Hawaii's youth. HB 1776 HD2 will require two major systems—education and health care—to work together to address adolescent health issues early enough to make a positive difference in the (worsening) health status of Hawaii's youth. Significantly, this youth-centered early intervention strategy can also help identify developmental and other social/emotional issues that, if addressed early enough, can keep youth on track at school and doing what comes naturally to them—being active and engaged learners. HB 1776 HD2 represents an opportunity to establish a more efficient, coordinated approach to addressing two problems for Hawaii.

I respectfully ask that you amend this bill to require more regular physical and dental exams of school-aged youth in all public schools by removing the pilot program language and pass HB 1776 HD2 on to the next committee.

Sincerely,

Stacy Evensen

Stacy Evensen

NEIL ABERCROMBIE GOVERNOR





KATHRYN S. MATAYOSHI SUPERINTENDENT

STATE OF HAWAI'I DEPARTMENT OF EDUCATION P.O. BOX 2360 HONOLULU, HAWAI'I 96804

Date: 02/21/2014

Committee: House Finance

Department:	Education
Person Testifying:	Kathryn S. Matayoshi, Superintendent of Education
Title of Bill:	HB 1776, HD2 (hscr511-14) RELATING TO EDUCATION.
Purpose of Bill:	Adds a dental examination to existing medical requirements for initial entry into school in the State. Requires Board of Education to establish a pilot program to require a physical examination for entry into seventh grade in one complex area. Appropriation. Effective July 1, 2050.

Department's Position:

The Department of Education (Department) opposes HB 1776 HD2 for several reasons including (1) its fiscal impact and (2) it creates obstacles to students enrolling in school. The fiscal impact results from needing, at minimum, a support staff at each school (255) to be responsible for tracking, recordkeeping, and ensuring compliance with the new requirement that a student must present proof of a dental examination with first enrollment. Schools already have limited staffing and asking them to do more will require additional resources. In addition, there are areas in the state where dental care is not available.

Also, the new requirement for a pilot program to require proof of a physical examination for entry into seventh grade has fiscal impacts as there are new responsibilities imposed on the Department to educate parents and students on information beyond what the Department is capable of providing. For example, the Department is required to provide information on health care provider options and wellness visits and screenings as a health insurance covered benefit under the federal PPACA. Although there is a provision that other stakeholders may assist the Department with implementation, the Department is nevertheless the lead and must deliver. To do so, funding to hire resources with expertise and to coordinate preparation and implementation are necessary. There are also additional responsibilities to track, recordkeep, and ensure compliance that will be the onus of those schools in the pilot and supplemental funding should also be considered for these schools.

The Department is in the process of determining the exact funding needs resulting from this measure and will be prepared to provide this as the bill moves forward.

Lastly, as the Department has previously testified, we wish to reiterate that increasing requirements such as those proposed by this measure will serve as a deterrent to enrollment and regular attendance and may negatively impact student learning and achievement outcomes. Further, without access to services, the requirements will be a barrier to students attending school.

Thank you for consideration of our testimony and the opportunity to testify.



February 21, 2014

TO: <u>House Committee on Finance</u> Representative Sylvia Luke, Chair Rep. Scott Y. Nishimoto, Vice Chair Rep. Aaron Ling Johanson, Vice Chair



FROM:Dr. Vija Sehgal, Pediatrician and Chief Quality Office / Associate Medical Officer
Waianae Coast Comprehensive Health Center / 697-3457 or wcchc@wcchc.com

RE: <u>HB1776: Relating to Education</u>

Thank you for the opportunity to submit testimony regarding HB1776 HD2 to establish a pilot program mandating a physical examination for entry into seventh grade and adds a dental examination to existing medical requirements for initial entry into school.

The Waianae Coast Comprehensive Health Center is a Federally Qualified Health Center serving over 31,000 patients in Leeward Oahu. Our main campus in Waianae has a pediatric clinic that serves 8,485 of the school age children along the Leeward Coast. To better meet the dynamic physical, emotional and social needs of our adolescent patients, a new adolescent clinic at the Waianae Mall is under development.

It is during adolescence that youth can develop numerous health issues, the majority of which are preventable. High-risk health behaviors that contribute to the most common causes of morbidity and mortality among young adults are often established in childhood and adolescence. These include smoking, drinking/drug use, high-risk sexual practices, unhealthy nutrition, lack of sleep and physical inactivity. These behaviors are also intimately linked to academic achievement.

Establishing a health care home, where primary care practitioners, pediatricians, family physicians and nurse practitioners have a long-standing relationship with families, is a factor in preventing these problem behaviors. The adolescent well child visit creates a safe environment where adolescents can feel comfortable talking to their doctor about their health and wellness. They should receive appropriate screening and guidance for alcohol and drug use, depression and suicide, sexuality and reproductive health issues as well as obesity, diabetes and cardiovascular disease. However, this cannot be done in a 10-minute sick visit for a cold. The Waianae Coast Comprehensive Health Center supports the American Academy of Pediatrics standard that regular "Well Child" physical exams should occur throughout childhood.

There are many reasons that adolescents are *only* seen by their primary care provider for the occasional sick visit. Prior to the Affordable Care Act, some health insurance policies did not cover preventive healthcare visits for children. The Hawaii Department of Education has mandated documentation of a comprehensive physical exam *only* at kindergarten entry. Thus, busy parents have not prioritized preventive healthcare visits. It should not be surprising then that many public school students have not had a comprehensive physical exam for years. It should also not be a surprise that depression, obesity, pre-diabetes and substance abuse too often go undiagnosed until a crisis occurs.

In a recent study of children seeking care at our Waianae Pediatric Clinic, 52% of the 11-14 year olds are overweight or obese and 55% of the 15-19 year olds are overweight or obese. We know that obesity is the primary risk factor for type 2 diabetes and cardiovascular disease. And, studies have shown that 80% of children who are overweight at 10-15 years become obese adults. This recent study indicates increasing rates of adult obesity on the Waianae Coast when compared to 2012 data (from the Hawaii Primary Care Needs Assessment Data Book, DOH.). This data on obesity alone is cause for alarm and a motivating factor for the health center to support mandatory physicals for adolescents.

HB1776 HD2 was amended to mandate a physical assessment during 7th grade rather than in the 6th and 9th grades. The Waianae Coast Comprehensive Health Center supports this amendment because immunization updates occur at the same age, thus lessening the additional burden for parents. Further amending the bill to



implement the 7th grade physical assessment across the system rather than as a pilot is also recommended. Finally, allowing the physical to occur within the 12 months surrounding the 7th grade school year could help to address the Department of Education (DOE) concern about creating a barrier to school entry.

The Waianae Coast Comprehensive Health Center, along with our working group of healthcare stakeholders, will continue to discuss additional opportunities to address the barrier to entry concern raised by the DOE. The amendment to HB1776 HD2 requiring notice of the exam requirement to sixth grade students and their parents is a great start. We all can do a better job of reaching out to students and their parents to come in for a physical assessment throughout the school year. Bringing together health plans, medical providers, school health personnel, families, and others is exactly the model of wrap around services we've all been saying that our students need.

Reconnecting our adolescents with their primary care provider embraces the whole child to assure they are healthy and ready to learn. The suggested amendments to HB1776 HD2 will ensure that all youth attending public school in Hawaii have a well-child preventive health care visit during 7th grade. While we know this amended bill is just a start, we think it strongly supports our patient centered medical home model, optimal adolescent health and student achievement. **Most importantly, the bill strengthens the relationship between our health and educational systems, as well as adolescents and parents in Hawaii.**

American Academy of Pediatrics



DEDICATED TO THE HEALTH OF ALL CHILDREN™

Hawaii Chapter

AAP - Hawaii Chapter 5414 Kirkwood Place Honolulu, HI 96821

Hawaii Chapter Board

President

R. Michael Hamilton, MD, MS, FAAP Department of Pediatrics, Hawaii Permanente Medical Group 2828 Paa Street Mapunapuna Clinic, 2nd Floor Honolulu, HI 96819 Phone : 808/432-5604 Fax : 808/432-5601 Email: Michael. R. Hamilton@kp.org

Vice President

Mae S. I. Kyono, MD, FAAP 1319 Punahou Street, 7th Floor Honolulu, HI 96826 Phone: 808/780-5286 Fax: 808/983-6109 Email: mkyono@hawaii.edu

Secretary

Josephine Quensell, MD, FAAP 1319 Punahou Street, Suite 1050 Honolulu, HI 96826 Phone: 808/942-8144 Fax: 808/955-3827 Email: quensell@hawaii.edu

Treasurer

Milette Oliveros, MD, FAAP 1319 Punahou Street Honolulu, HI 96826 Email: Milette.Oliveros@kapiolani.org

Chapter Executive Director

Kathryn Sthay 5414 Kirkwood Place Honolulu, HI 96821 Phone: 808/377-5738 Fax: 808/377-3683 E-mail: ksthay@aap.net

Immediate Past President

Kenneth T. Nakamura, MD, FAAP 1319 Punahou Street, Room 743 Honolulu, HI 96826 Phone: 808/983-8020 Fax: 808/983-6343 E-mail: kennethn@kapiolani.org

Chapter Web site www.hawaiiaap.org

AAP Headquarters

141 Northwest Point Blvd Elk Grove Village, IL 60007-1098 Phone: 847/434-4000 Fax: 847/434-8000 E-mail: kidsdocs@aap.org www.aap.org February 20, 2014

TO: Representative Della Au Belatti, Chair Representative Dee Morikawa, Vice Chair Members of House Committee on Health

Testimony for HB 1776

Thank you for an opportunity to testify in strong support of HB 1776, which will establish a policy mandating documentation of a physical examination, by a licensed physician or advanced practice registered nurse, at entry to 7th grade entry.

The Hawaii Chapter of the American Academy of Pediatrics is a voluntary organization of over 200 pediatricians in Hawaii. Our mission is to attain optimal physical, mental and social health and well being for infants, children, adolescents and young adults in Hawaii.

Adolescence is a period of tremendous physical, emotional and social change. During this period youth can develop numerous health issues, the majority of which are preventable. High-risk health behaviors that contribute to the most common causes of morbidity and mortality among young adults are often established in childhood and adolescence. These include smoking, drinking/drug use, high-risk sexual practices, unhealthy nutrition, lack of sleep and physical inactivity. These behaviors are also intimately linked to academic failure and achievement.

Primary care practitioners, pediatricians, family physicians and nurse practitioners who have a long-standing relationship with families, are ideally suited for preventing problem behaviors. The adolescent well child visit creates a safe environment where adolescents can feel comfortable talking to their doctor about their health and wellness. The American Academy of Pediatrics has advocated that child should have regular "Well Child" physical exams throughout childhood. In adolescence, they should receive appropriate screening and guidance for alcohol and drug use, depression and suicide, sexuality and reproductive health issues as well as obesity, diabetes and cardiovascular disease. However, this cannot be done in a 10-minute sick visit for a cold.

Too many adolescents are now only seen by their primary care provider for the occasional sick visit. The reasons are many. Prior to the Affordable Care Act, some health insurance policies did not cover preventive healthcare visits for children. The Hawaii Department of Education has mandated documentation of a comprehensive physical exam *only* at kindergarten entry. In turn, many busy, over-taxed parents have not prioritized preventive healthcare visits. It should not be surprising then that many public school students have not had a comprehensive physical exam for years. It should also not be a surprise that depression, obesity, pre-diabetes, substance abuse too often go undiagnosed until a crisis occurs.

In order align this policy with current recommendations for yearly well child examinations, we strongly suggest one modification to the proposed bill– that physical examination be performed within twelve months of the date of attendance, rather than 6 months. We also support that the implementation of this program across the state, rather than limiting it to a pilot program for only one school complex.



HB 1776, and the suggested amendments, will ensure that all youth attending public school in Hawaii have a well child preventive health care visit at 7th entry. While we know this is just the start, we think this bill strongly supports the medical home, optimal adolescent health and student achievement. In addition, the bill enhances the working relationship between adolescents, their parents, and the health and educational systems in Hawaii.

Sincerely,

R. Michael Hamilton, MD, FAAP President

NEIL ABERCROMBIE GOVERNOR OF HAWAII



STATE OF HAWAII DEPARTMENT OF HEALTH P.O. Box 3378 HONOLULU, HAWAII 96801-3378 DIRECTOR OF HEALTH

In reply, please refer to: File:

HOUSE COMMITTEE ON FINANCE

HB1776 HD2, RELATING TO EDUCATION

Testimony of David Sakamoto, MD, MBA Deputy Director of Health Resources Administration

February 21, 2014

Department's Position: The Department of Health (DOH) supports the intent and respectfully submits

2 amendment suggestions on House Bill 1776 HD2.

3 **Fiscal Implications:** None for DOH.

4 Purpose and Justification: The purpose of House Bill 1776 House Draft 2 (HB1776 HD2) is to create

5 a requirement for dental examinations upon entry into the school system for the first time. HB1776

6 HD2 also connects adolescents back to their healthcare provider by expanding the school physical

7 examination requirement. Currently, physical examinations are only conducted upon entry into the

8 school system. HB1776 HD2 would establish a pilot program to expand the requirement for physical

9 examinations to include entry into seventh grade in one complex area of the Board of Education's

10 (BOE) choosing. The pilot program would begin in the 2015-2016 school year and the BOE is asked to

submit a report of its findings, recommendations, and proposed legislation from the pilot program to the

12 2016 Legislature. The Department provides recommended amendments to HB1776 HD2 as outlined

13 below and in the attached document.

The Department appreciates the intent to improve the oral health of children by requiring that students have a dental examination prior to entrance to any school in the state. However, the Department *Promoting Lifelong Health & Wellness*



has concerns regarding implementation, including the potential impact on the dental service delivery 1 system and potential barriers to school entrance. To ensure the measure does not create an unintended 2 impediment to school entrance, the Department is willing to work with the Department of Education 3 (DOE), oral health providers and other stakeholders to implement a dental examination pilot program 4 5 for the 2016-2017 school year. The Department offers suggested amendments with recommendations for a dental examination pilot program in the 2016-2017 school year. This staged pilot rollout will also 6 allow DOH to conduct a statewide assessment of dental health of all grade 3 students in the 2015-2016 7 school year. 8

The Department also offers suggested amendments for the physical examination pilot program 9 and recommends implementation as a statewide pilot in seventh grade. In the current version of 10 HB1776 HD2, problems would arise from conducting the pilot in a single school complex area. These 11 problems include; confusion for families in other complex areas about whether a physical exam was 12 required; problems arising from students transferring into the complex area without receiving a physical 13 exam in seventh grade; and whether a pilot in one complex area would provide the information 14 necessary to assess the feasibility of statewide implementation. Implementation as a statewide pilot in 15 16 seventh grade aligns with immunization requirements and provides a broader, systematic approach to connecting children back to their primary care physicians. 17

The Department's suggests deleting the BOE responsibility for establishing and monitoring the physical examination pilot program. The suggested amendments remove the BOE requirements and revert the bill language to follow current Chapter 302A-1159 and -60, HRS, DOE role and requirements, and Title 11 Chapter 157, HAR DOH role and requirements.

The expansion of physical exam requirements to seventh grade promotes utilization of the covered preventive health benefits established by the Affordable Care Act (ACA). The proposed increase in the physical exam requirements is congruent with the policy priority set forth by the Obesity

1	Prevention Task Force. The Task Force, co-chaired by our late Director Loretta Fuddy developed and
2	recommended legislation pursuant to Act 269 (SB2778 CD1), Session Laws of Hawaii 2012. The
3	policy to expand physical examination requirements for public school students was proposed to help
4	reinforce the adoption of a culture of wellness and preventive health care. Due to the ACA, annual well
5	child examinations are a required covered benefit in all health plans. The requirements are in addition to
6	the existing immunization requirements for grade seven which can be done within twelve months before
7	first attending school.

8 The adoption of this measure will require parental and community engagement. The additional 9 physical exam requirements provide physicians and healthcare providers together with parents and 10 adolescents the opportunity to address developmentally relevant physical and mental health issues. 11 Regular visits are preventive, so health needs can be assessed and addressed early. The policy change 12 embraces the whole child to assure they are healthy and ready to learn.

13 Thank you for the opportunity to provide testimony.

NEIL ABERCROMBIE GOVERNOR OF HAWAII



STATE OF HAWAII DEPARTMENT OF HEALTH P.O. Box 3378 HONOLULU, HAWAII 96801-3378 DIRECTOR OF HEALTH

In reply, please refer to: File:

HOUSE COMMITTEE ON FINANCE

HB1776 HD2, RELATING TO EDUCATION

Testimony of David Sakamoto, MD, MBA Deputy Director of Health Resources Administration

February 21, 2014

1 **Department's Position:** The Department of Health (DOH) supports the intent and respectfully submits

2 amendment suggestions on House Bill 1776 HD2.

3 **Fiscal Implications:** None for DOH.

4 **Purpose and Justification:** The purpose of House Bill 1776 House Draft 2 (HB1776 HD2) is to create

5 a requirement for dental examinations upon entry into the school system for the first time. HB1776

6 HD2 also connects adolescents back to their healthcare provider by expanding the school physical

7 examination requirement. Currently, physical examinations are only conducted upon entry into the

8 school system. HB1776 HD2 would establish a pilot program to expand the requirement for physical

9 examinations to include entry into seventh grade in one complex area of the Board of Education's

10 (BOE) choosing. The pilot program would begin in the 2015-2016 school year and the BOE is asked to

submit a report of its findings, recommendations, and proposed legislation from the pilot program to the

12 2016 Legislature. The Department provides recommended amendments to HB1776 HD2 as outlined

13 below and in the attached document.

The Department appreciates the intent to improve the oral health of children by requiring that students have a dental examination prior to entrance to any school in the state. However, the Department *Promoting Lifelong Health & Wellness*



has concerns regarding implementation, including the potential impact on the dental service delivery 1 system and potential barriers to school entrance. To ensure the measure does not create an unintended 2 impediment to school entrance, the Department is willing to work with the Department of Education 3 (DOE), oral health providers and other stakeholders to implement a dental examination pilot program 4 5 for the 2016-2017 school year. The Department offers suggested amendments with recommendations for a dental examination pilot program in the 2016-2017 school year. This staged pilot rollout will also 6 allow DOH to conduct a statewide assessment of dental health of all grade 3 students in the 2015-2016 7 school year. 8

The Department also offers suggested amendments for the physical examination pilot program 9 and recommends implementation as a statewide pilot in seventh grade. In the current version of 10 HB1776 HD2, problems would arise from conducting the pilot in a single school complex area. These 11 problems include; confusion for families in other complex areas about whether a physical exam was 12 required; problems arising from students transferring into the complex area without receiving a physical 13 exam in seventh grade; and whether a pilot in one complex area would provide the information 14 necessary to assess the feasibility of statewide implementation. Implementation as a statewide pilot in 15 16 seventh grade aligns with immunization requirements and provides a broader, systematic approach to connecting children back to their primary care physicians. 17

The Department's suggests deleting the BOE responsibility for establishing and monitoring the physical examination pilot program. The suggested amendments remove the BOE requirements and revert the bill language to follow current Chapter 302A-1159 and -60, HRS, DOE role and requirements, and Title 11 Chapter 157, HAR DOH role and requirements.

The expansion of physical exam requirements to seventh grade promotes utilization of the covered preventive health benefits established by the Affordable Care Act (ACA). The proposed increase in the physical exam requirements is congruent with the policy priority set forth by the Obesity

1	Prevention Task Force. The Task Force, co-chaired by our late Director Loretta Fuddy developed and
2	recommended legislation pursuant to Act 269 (SB2778 CD1), Session Laws of Hawaii 2012. The
3	policy to expand physical examination requirements for public school students was proposed to help
4	reinforce the adoption of a culture of wellness and preventive health care. Due to the ACA, annual well
5	child examinations are a required covered benefit in all health plans. The requirements are in addition to
6	the existing immunization requirements for grade seven which can be done within twelve months before
7	first attending school.

8 The adoption of this measure will require parental and community engagement. The additional 9 physical exam requirements provide physicians and healthcare providers together with parents and 10 adolescents the opportunity to address developmentally relevant physical and mental health issues. 11 Regular visits are preventive, so health needs can be assessed and addressed early. The policy change 12 embraces the whole child to assure they are healthy and ready to learn.

13 Thank you for the opportunity to provide testimony.



House Committee on Finance The Hon. Sylvia Luke, Chair The Hon. Scott Y. Nishimoto, Vice Chair The Hon. Aaron Ling Johnson, Vice Chair

Testimony on House Bill 1776 HD 2 <u>Relating to Education</u> Submitted by Robert Hirokawa, Chief Executive Officer February 21, 2014, 1:00 pm, Room 308

The Hawaii Primary Care Association (HPCA), which represents the federally qualified health centers/community health centers in Hawaii, supports the intent of House Bill 1776 House Draft 2, requiring the Board of Education to establish a pilot program in one complex area under which children are required to undergo a physical and dental examination within six months of attending kindergarten, sixth grade, and ninth grade.

In Hawaii, public education is student centered and grounded in a commitment to equity. Part of that equity depends squarely on ensuring all children having the opportunity to pursue, and excel in, their education. The number one cause most often provided by parents of children experiencing chronic absenteeism from our public schools is healthcare. As a community, we must do more to ensure our students have **access** to health care, and **utilize** that access through wellness checkups and preventive visits so they can reduce their incidents of chronic absenteeism by identifying and addressing health issues early-on. Asthma, poor oral health, vision, hearing, depression, and many other health issues can be identified through dental and physical examinations. If you can't see clearly, if you can't breathe well, or if you're experiencing depression...it can be overwhelming, perhaps impossible, for a child to succeed in school. A child's health undeniably affects their ability to attend and thrive at school. In addition, people in Hawaii with a high school degree or less are TWICE as likely to be OBESE and THREE times as likely to SMOKE. For the sake of our health and our future, our kids must stay in school ... and in order to stay in school, our kids must have their health.

We ask the committee to consider amending this measure to so that the program should commence at the end of a student's sixth grade year with educating parents and students on: 1) the physical examination requirement for grade seven; 2) provider options; and 3) wellness visits and screenings as a health insurance covered benefit under the Affordable Care Act. Community stakeholders, including providers and health insurance plans, may be able to assist with the sixth grade educational component of the program in addition to implementation.

We would like to offer comment though on relegating these examinations to any one provider group, which could overburden capacity and resources. Thank you for your consideration and the opportunity to testify.



A BILL FOR AN ACT



RELATING TO EDUCATION.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF HAWAII:

SECTION 1. Section 302A-1159, Hawaii Revised Statutes, is amended to read as follows:

"\$302A-1159 Physical examination required. (a) Beginning with the 2015-2016 school year, no child shall attend seventh grade unless the child presents to the appropriate school official a report from a licensed physician or advanced practice registered nurse of the results of a physical examination performed within a year of the date of attendance. A child may attend school provisionally upon submitting written documentation from a licensed physician, advanced practice registered nurse, or other authorized representative of the department of health stating that the child is in the process of undergoing a physical examination. Further documentation showing that the required physical examination has been completed shall be submitted to the appropriate school official no later than three months after the child first attends seventh grade.

(b) No child shall [be admitted to] attend any school for the first time in the State unless the child presents to the appropriate school official a report from a licensed physician or advanced practice registered nurse of the results of a physical examination performed within a year of the date of [entry into] attendance at school. A child may [enter] attend school provisionally upon submitting written documentation from a licensed physician, advanced practice registered nurse, or other authorized representative of the department of health stating that the child is in the process of undergoing a physical examination. Further documentation showing that the required physical examination has been completed shall be submitted to the appropriate school official no later than three months after the child first [entered] attends the school."

SECTION 2. (a) The department of health, no later than twenty days prior to the convening of the regular session of 2017 and 2018 shall submit a progress report to the legislature on the pilot implementation of the additional seventh grade physical examination requirement.

(b) Further, no later than twenty days prior to the convening of the regular session of 2019, the department of health shall submit a summary report to the legislature on the pilot implementation of the additional seventh grade physical exam requirement. The report shall:

(1) Provide a brief summary of the three year implementation of the seventh grade physical exam requirement; (2) Provide measures of compliance;

(3) Identify barriers and opportunities for implementation; and(4) Provide recommendations and proposed legislation if any, toassist with the implementation of the seventh grade physicalexam requirement.

SECTION 3. (a) The department of health in collaboration with the department of education shall establish a pilot program in one complex area, under which no child shall attend any school for the first time in the State unless the child presents to the appropriate school official a report from a licensed dentist of a dental examination performed within a year of entry into school.

(b) The pilot program shall educate parents and students on the:

- (1) Dental examination requirements for school entry;
- (2) Dental provider options; and
- (3) Dental examination visits as a health insurance covered benefit under the federal Patient Protection and Affordable Care Act.

Community stakeholders, including oral health providers and health insurance plans, may assist with the implementation of the educational component of the pilot program.

(c) The department of education shall allow a child to attend school provisionally upon submitting written documentation from a licensed dentist or other authorized representative of the department of health stating that the child is in the process of undergoing a dental examination required by the pilot program. If a child is permitted to attend school provisionally, the department of education shall require that further documentation showing that the required dental examination has been completed be submitted to the appropriate school official no later than three months after the date of attendance.

(d) The pilot program shall begin with the 2016-2017 school year.

(e) The department of health in collaboration with the department of education shall submit a report of its findings, recommendations, and proposed legislation, if any, to the legislature no later than twenty days prior to the convening of the regular session of 2018.

SECTION 4. There is appropriated out of the general revenues of the State of Hawaii the sum of \$ or so much thereof as may be necessary for fiscal year 2014-2015 to the department of education to carry out the purposes of this Act.

The sum appropriated shall be expended by the department of education for the purposes of this Act.

SECTION 5. Statutory material to be repealed is bracketed and stricken. New statutory material is underscored.

SECTION 6. This Act shall take effect on July 1, 2050.

Report Title:

Education; Physical Examination; Appropriation

Description:

Requires children to undergo a physical examination prior to attending kindergarten and seventh grade beginning with the 2015-2016 school year. Requires the department of health in collaboration with the department of education to establish a pilot program to require a dental examination for initial entry into school. Requires progress and summary reports on implementation from the department of health and the department of education. Makes an appropriation to the department of education and to the department of health. (HB1776 HD3 PROPOSED) Testimony for HB 1776 HD2 – Relating to Education From: May Okihiro, MD MS February 21, 2014



Thank you for an opportunity to testify in strong support of HB 1776, which will establish a policy mandating documentation of a physical examination, by a licensed physician or advanced practice registered nurse, at entry to 7th grade.

I am a pediatrician at the Waianae Coast Comprehensive Health Center and an assistant professor at the University of Hawaii John A. Burns School of Medicine. My area of interest and research has been childhood obesity and the early onset of chronic diseases such as diabetes. I am a member of the Obesity Taskforce, convened by the Department of Health and chair of the committee on Student Health Assessment.

Almost ³/₄ of all adolescent mortality is a result of motor vehicle accidents, homicide, suicide, and unintentional injuries (CDC, 2010). Unhealthy lifestyles and risk factors for chronic disease, such as smoking, poor nutrition, and mental health problems, begin in childhood and adolescence and track into adulthood. In 2011, among youth in Hawaii:

- 29.5% reported that they felt sad or hopeless almost every day for 2 or more weeks in a row
- 15% said they would attempt suicide in the past 12 months
- 1 in 4 are overweight or obese, and in some communities over 50% of adolescents are overweight or obese
- 37% of Hawaii youth reported that they ever had sexual intercourse

Academic success of Hawaii's youth is intimately linked to their health. Research shows that poor health such as mental health disorders, uncontrolled asthma, poor nutrition and sleep disorders are linked to poor academic outcomes. On the other hand, research shows that academic success is a primary predictor of adult health outcomes. For example, in Hawaii, the prevalence of diabetes among those who did not graduate from high school is 10.6%, twice that of those who graduated from college (4.8%).

Primary care providers are in a unique position to screen for chronic disease risk factors and behaviors and provide guidance, brief counseling and care coordination for the adolescent and his/her parents. In the ideal world, youth would see their physicians regularly throughout childhood for preventive health care. However, in today's busy world this often does not happen; physicians often only see children and adolescents when they are sick or injured.

The current bill stipulates that a physical examination is performed within six months of the first date of school attendance. We support *allowing twelve months* for the exam to take place. This change will align with current recommendations by the American Academy of Pediatrics, that adolescents receive yearly physical exams. We also support that the implementation of this program across the state, rather than limiting it to a pilot program for only one school complex.

With this bill and the suggested amendments, all youth attending public school in Hawaii will have at least one preventive health exam during their thirteen years of schooling. As such, the bill will help to enhance the link the health and education systems, systems that need to work together to support Hawaii's keiki.

Thank you for this opportunity to submit this testimony.

finance1

From: Sent: To: Subject: Leinell Coloma-Nahooikaika <leinell@mfss.org> Friday, February 21, 2014 1:17 PM FINTestimony Testimony in support of Early Learning Bills (HB1676, HD1 and HB2276)

Leinell Coloma-Nahooikaika from Wailuku, HI writes:

Dear Chair Luke and Vice-Chairs Nishimoto and Johanson, I am writing in support of two early learning bills: HB1676, HD1, which authorizes the executive office on early learning to enter into agreements with the department of education and charter schools for use of vacant or underutilized classrooms as public preschool classrooms; and HB2276, which establishes the Early Childhood Education Program within the Early Learning System established by section 302L-2. Last year, the legislature took a giant step towards laying the foundation of a high-quality early learning system for Hawaii by funding a school readiness program. The passage of these bills will build upon that foundation and further develop the capacity with both community-based preschools and our public school system required to meet the growing demand for the preschool programs our keiki so desperately need and deserve, as well as establish the assessment tools to ensure our children are prepared and ready to learn. Please support HB1676, HD1 and HB2276 and thank you for allowing me to submit this testimony in support of Hawaii's future. Mahalo!

Form Data:

Email 1 (Primary): leinell@mfss.org

First Name: Leinell

Last Name: Coloma-Nahooikaika

City: Wailuku State: HI ZIP Code: 96793

DIRECTOR OF HEALTH



LATE TESTIMONY

NEIL ABERCROMBIE

ERNOR OF HAW

STATE OF HAWAII DEPARTMENT OF HEALTH P.O. Box 3378 HONOLULU, HAWAII 96801-3378

In reply, please refer to: File:

HOUSE COMMITTEE ON FINANCE

HB1776 HD2, RELATING TO EDUCATION

Testimony of David Sakamoto, MD, MBA Deputy Director of Health Resources Administration February 21, 2014

Department's Position: The Department of Health (DOH) supports the intent and respectfully submits
amendment suggestions on House Bill 1776 HD2.

3 Fiscal Implications: None for DOH.

Purpose and Justification: The purpose of House Bill 1776 House Draft 2 (HB1776 HD2) is to create 4 a requirement for dental examinations upon entry into the school system for the first time. HB1776 5 HD2 also connects adolescents back to their healthcare provider by expanding the school physical 6 examination requirement. Currently, physical examinations are only conducted upon entry into the 7 school system. HB1776 HD2 would establish a pilot program to expand the requirement for physical 8 examinations to include entry into seventh grade in one complex area of the Board of Education's 9 (BOE) choosing. The pilot program would begin in the 2015-2016 school year and the BOE is asked to 10 submit a report of its findings, recommendations, and proposed legislation from the pilot program to the 11 2016 Legislature. The Department provides recommended amendments to HB1776 HD2 as outlined 12 below and in the attached document. 13

Promoting Lifelong Health & Wellness

HB1776 HD2 Page 2 of 3

The Department appreciates the intent to improve the oral health of children by requiring that 1 students have a dental examination prior to entrance to any school in the state. However, the Department 2 has concerns regarding implementation, including the potential impact on the dental service delivery 3 system and potential barriers to school entrance. To ensure the measure does not create an unintended 4 impediment to school entrance, the Department is willing to work with the Department of Education 5 (DOE), oral health providers and other stakeholders to implement a dental examination pilot program 6 for the 2016-2017 school year. The Department offers suggested amendments with recommendations 7 for a dental examination pilot program in the 2016-2017 school year. This staged pilot rollout will also 8 allow DOH to conduct a statewide assessment of dental health of all grade 3 students in the 2015-2016 9 10 school year.

The Department also offers suggested amendments for the physical examination pilot program 11 and recommends implementation as a statewide pilot in seventh grade. In the current version of 12 HB1776 HD2, problems would arise from conducting the pilot in a single school complex area. These 13 problems include; confusion for families in other complex areas about whether a physical exam was 14 required; problems arising from students transferring into the complex area without receiving a physical 15 exam in seventh grade; and whether a pilot in one complex area would provide the information 16 necessary to assess the feasibility of statewide implementation. Implementation as a statewide pilot in 17 seventh grade aligns with immunization requirements and provides a broader, systematic approach to 18 19 connecting children back to their primary care physicians.

The Department's suggests deleting the BOE responsibility for establishing and monitoring the physical examination pilot program. The suggested amendments remove the BOE requirements and revert the bill language to follow current Chapter 302A-1159 and -60, HRS, DOE role and requirements, and Title 11 Chapter 157, HAR DOH role and requirements.

The expansion of physical exam requirements to seventh grade promotes utilization of the 1 covered preventive health benefits established by the Affordable Care Act (ACA). The proposed 2 increase in the physical exam requirements is congruent with the policy priority set forth by the Obesity 3 Prevention Task Force. The Task Force, co-chaired by our late Director Loretta Fuddy developed and 4 recommended legislation pursuant to Act 269 (SB2778 CD1), Session Laws of Hawaii 2012. The 5 policy to expand physical examination requirements for public school students was proposed to help 6 reinforce the adoption of a culture of wellness and preventive health care. Due to the ACA, annual well 7 child examinations are a required covered benefit in all health plans. The requirements are in addition to 8 the existing immunization requirements for grade seven which can be done within twelve months before 9 first attending school. 10

The adoption of this measure will require parental and community engagement. The additional physical exam requirements provide physicians and healthcare providers together with parents and adolescents the opportunity to address developmentally relevant physical and mental health issues. Regular visits are preventive, so health needs can be assessed and addressed early. The policy change embraces the whole child to assure they are healthy and ready to learn.

16 Thank you for the opportunity to provide testimony.

HOUSE OF REPRESENTATIVES TWENTY-SEVENTH LEGISLATURE, 2014 STATE OF HAWAII

H.B. NO. ¹⁷⁷⁶ H.D. 3 PROPOSED

A BILL FOR AN ACT

RELATING TO EDUCATION.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF HAWAII:

SECTION 1. Section 302A-1159, Hawaii Revised Statutes, is amended to read as follows:

"\$302A-1159 Physical examination required. (a) Beginning with the 2015-2016 school year, no child shall attend seventh grade unless the child presents to the appropriate school official a report from a licensed physician or advanced practice registered nurse of the results of a physical examination performed within a year of the date of attendance. A child may attend school provisionally upon submitting written documentation from a licensed physician, advanced practice registered nurse, or other authorized representative of the department of health stating that the child is in the process of undergoing a physical examination. Further documentation showing that the required physical examination has been completed shall be submitted to the appropriate school official no later than three months after the child first attends seventh grade. (b) No child shall [be admitted to] attend any school for the first time in the State unless the child presents to the appropriate school official a report from a licensed physician or advanced practice registered nurse of the results of a physical examination performed within a year of the date of [entry into] attendance at school. A child may [enter] attend school provisionally upon submitting written documentation from a licensed physician, advanced practice registered nurse, or other authorized representative of the department of health stating that the child is in the process of undergoing a physical examination. Further documentation showing that the required physical examination has been completed shall be submitted to the appropriate school official no later than three months after the child first [entered] attends the school."

SECTION 2. (a) The department of health, no later than twenty days prior to the convening of the regular session of 2017 and 2018 shall submit a progress report to the legislature on the pilot implementation of the additional seventh grade physical examination requirement.

(b) Further, no later than twenty days prior to the convening of the regular session of 2019, the department of health shall submit a summary report to the legislature on the pilot implementation of the additional seventh grade physical exam requirement. The report shall:

(1) Provide a brief summary of the three year implementation of the seventh grade physical exam requirement;

(2) Provide measures of compliance;

(3) Identify barriers and opportunities for implementation; and(4) Provide recommendations and proposed legislation if any, toassist with the implementation of the seventh grade physicalexam requirement.

SECTION 3. (a) The department of health in collaboration with the department of education shall establish a pilot program in one complex area, under which no child shall attend any school for the first time in the State unless the child presents to the appropriate school official a report from a licensed dentist of a dental examination performed within a year of entry into school.

(b) The pilot program shall educate parents and students on the:

- (1) Dental examination requirements for school entry;
- (2) Dental provider options; and
- (3) Dental examination visits as a health insurance covered benefit under the federal Patient Protection and Affordable Care Act.

Community stakeholders, including oral health providers and health insurance plans, may assist with the implementation of the educational component of the pilot program.

(c) The department of education shall allow a child to attend school provisionally upon submitting written documentation from a licensed dentist or other authorized representative of the department of health stating that the child is in the process of undergoing a dental examination required by the pilot program. If a child is permitted to attend school provisionally, the department of education shall require that further documentation showing that the required dental examination has been completed be submitted to the appropriate school official no later than three months after the date of attendance.

(d) The pilot program shall begin with the 2016-2017 school year.

(e) The department of health in collaboration with the department of education shall submit a report of its findings, recommendations, and proposed legislation, if any, to the legislature no later than twenty days prior to the convening of the regular session of 2018.

SECTION 4. There is appropriated out of the general revenues of the State of Hawaii the sum of \$ or so much thereof as may be necessary for fiscal year 2014-2015 to the department of education to carry out the purposes of this Act.

The sum appropriated shall be expended by the department of education for the purposes of this Act.

SECTION 5. Statutory material to be repealed is bracketed and stricken. New statutory material is underscored.

_

SECTION 6. This Act shall take effect on July 1, 2050.

Report Title:

Education; Physical Examination; Appropriation

Description:

Requires children to undergo a physical examination prior to attending kindergarten and seventh grade beginning with the 2015-2016 school year. Requires the department of health in collaboration with the department of education to establish a pilot program to require a dental examination for initial entry into school. Requires progress and summary reports on implementation from the department of health and the department of education. Makes an appropriation to the department of education and to the department of health. (HB1776 HD3 PROPOSED)

LATE TESTIMONY

Testimony for HB 1776 HD2 – Relating to Education From: May Okihiro, MD MS February 21, 2014

Thank you for an opportunity to testify in strong support of HB 1776, which will establish a policy mandating documentation of a physical examination, by a licensed physician or advanced practice registered nurse, at entry to 7th grade.

I am a pediatrician at the Waianae Coast Comprehensive Health Center and an assistant professor at the University of Hawaii John A. Burns School of Medicine. My area of interest and research has been childhood obesity and the early onset of chronic diseases such as diabetes. I am a member of the Obesity Taskforce, convened by the Department of Health and chair of the committee on Student Health Assessment.

Almost ³/₄ of all adolescent mortality is a result of motor vehicle accidents, homicide, suicide, and unintentional injuries (CDC, 2010). Unhealthy lifestyles and risk factors for chronic disease, such as smoking, poor nutrition, and mental health problems, begin in childhood and adolescence and track into adulthood. In 2011, among youth in Hawaii:

- 29.5% reported that they felt sad or hopeless almost every day for 2 or more weeks in a row
- 15% said they would attempt suicide in the past 12 months
- 1 in 4 are overweight or obese, and in some communities over 50% of adolescents are overweight or obese
- 37% of Hawaii youth reported that they ever had sexual intercourse

Academic success of Hawaii's youth is intimately linked to their health. Research shows that poor health such as mental health disorders, uncontrolled asthma, poor nutrition and sleep disorders are linked to poor academic outcomes. On the other hand, research shows that academic success is a primary predictor of adult health outcomes. For example, in Hawaii, the prevalence of diabetes among those who did not graduate from high school is 10.6%, twice that of those who graduated from college (4.8%).

Primary care providers are in a unique position to screen for chronic disease risk factors and behaviors and provide guidance, brief counseling and care coordination for the adolescent and his/her parents. In the ideal world, youth would see their physicians regularly throughout childhood for preventive health care. However, in today's busy world this often does not happen; physicians often only see children and adolescents when they are sick or injured.

The current bill stipulates that a physical examination is performed within six months of the first date of school attendance. We support *allowing twelve months* for the exam to take place. This change will align with current recommendations by the American Academy of Pediatrics, that adolescents receive yearly physical exams. We diso support that the implementation of this program across the state, rather than limiting it to a pilot program for only one school complex.

With this bill and the suggested amendments, all youth attending public school in Hawaii will have at least one preventive health exam during their thirteen years of schooling. As such, the bill will help to enhance the link the health and education systems, systems that need to work together to support Hawaii's keiki.

Thank you for this opportunity to submit this testimony.