

STATE OF HAWAII  
DEPARTMENT OF HEALTH  
P. O. Box 3378  
Honolulu, HI 96801-3378  
doh.testimony@doh.hawaii.gov

**Testimony COMMENTING on HB1897  
RELATING TO INSURANCE COVERAGE OF HEALTH SCREENINGS**

REPRESENTATIVE DELLA AU BELATTI, CHAIR  
HOUSE COMMITTEE ON HEALTH

Hearing Date: February 5, 2016

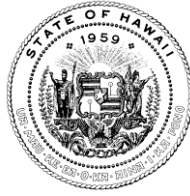
Room Number: 329

1 **Fiscal Implications:** None.

2 **Department Testimony:** The Department supports increasing women's access to STD and HIV  
3 screening and is providing comments on HB1897. This measure will address situations in  
4 which lack of insurance reimbursement or the perception of such is the reason "certain healthcare  
5 providers do not screen specifically for sexually transmitted diseases (STDs), including human  
6 immunodeficiency virus (HIV) and acquired immunodeficiency syndrome at annual screenings,  
7 even though the Patient Protection and Affordable Care Act (ACA) requires health insurance to  
8 cover those screenings without a co-pay." The Department has no data or anecdotal reports that  
9 limitations in insurance coverage are reducing women's access to STD screening. Thus, it is not  
10 clear the degree of benefit offered through the screening mandated in this measure. This bill,  
11 however, would remove any possible gaps in covered screening services under grandfathered  
12 policies from pre-Affordable Care Act implementation.

13 The Department recommends that women be screened in accordance with national STD  
14 guidelines for risk of infection, in consultation with her health provider. This may not  
15 correspond with annual gynecological exams as stated in the bill. Currently, the U.S. Preventive  
16 Services Task Force recommendations are the basis for STD and HIV screening reimbursement  
17 by insurance policies without co-pay under the ACA.

18 Thank you for the opportunity to testify.



DAVID Y. IGE  
GOVERNOR  
  
SHAN S. TSUTSUI  
LT. GOVERNOR

**STATE OF HAWAII**  
**OFFICE OF THE DIRECTOR**  
**DEPARTMENT OF COMMERCE AND CONSUMER AFFAIRS**  
335 MERCHANT STREET, ROOM 310  
P.O. Box 541  
HONOLULU, HAWAII 96809  
Phone Number: 586-2850  
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CATHERINE P. AWAKUNI COLÓN  
DIRECTOR  
  
JO ANN M. UCHIDA TAKEUCHI  
DEPUTY DIRECTOR

TO THE HOUSE COMMITTEE ON HEALTH

TWENTY-EIGHTH LEGISLATURE  
Regular Session of 2016

Friday, February 5, 2016  
8:30 a.m.

**TESTIMONY ON HOUSE BILL NO. 1897 – RELATING TO INSURANCE COVERAGE  
OF HEALTH SCREENINGS.**

TO THE HONORABLE DELLA AU BELATTI, CHAIR, AND MEMBERS OF THE  
COMMITTEE:

My name is Gordon Ito, State Insurance Commissioner, testifying on behalf of  
the Department of Commerce and Consumer Affairs (“Department”).

The purpose of this bill is to ensure insurance coverage for sexually transmitted  
disease screenings during a woman’s annual pelvic exam. The companion bill is  
Senate Bill 2323. The Department submits the following comments.

Sections 2 to 4 of this bill would require all health policies, plans, contracts, or  
agreements (except limited benefit and specified diseases policies) to cover sexually  
transmitted disease screenings during a female insured’s annual gynecological exam. It  
would also require reimbursement to the health care provider of all costs associated  
with such coverage.

Pursuant to the federal Patient and Affordable Care Act (2010) (“ACA”), the  
federal Department of Human Services adopted guidelines for ACA compliant plans  
regarding coverage for women’s preventative services, including annual well-woman  
visits and HIV/AIDS screening without cost sharing. ACA compliant plans currently  
cover these screenings.

To the extent that the proposed legislation mandates new coverage benefits for non-ACA compliant plans, the Department takes no position. The Department defers to the Legislature to determine the appropriate health coverage mandates. Pursuant to Section 23-51, Hawaii Revised Statutes, any proposed mandatory health insurance coverage may also require the passage of a concurrent resolution requesting the State Auditor to prepare and submit a report assessing the social and financial impacts of the proposed mandate.

We thank this Committee for the opportunity to present testimony on this matter.

DAVID Y. IGE  
GOVERNOR



**STATE OF HAWAII**  
**HAWAII EMPLOYER-UNION HEALTH BENEFITS TRUST FUND**

P.O. BOX 2121  
HONOLULU, HAWAII 96805-2121  
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**ADMINISTRATOR**  
DEREK M. MIZUNO

**TESTIMONY BY DEREK MIZUNO**  
**ADMINISTRATOR, HAWAII EMPLOYER-UNION HEALTH BENEFITS TRUST FUND**  
**DEPARTMENT OF BUDGET AND FINANCE**  
**STATE OF HAWAII**  
**TO THE HOUSE COMMITTEE ON HEALTH**  
**ON**  
**HOUSE BILL NO. 1897**

February 5, 2016, 8:30 a.m.

**RELATING TO INSURANCE COVERAGE OF HEALTH SCREENINGS**

Chair Belatti, Vice Chair Creagan, and Members of the Committee:

The Hawaii Employer-Union Health Benefits Trust Fund (EUTF) Board of Trustees has not had an opportunity to take a position on this bill. However, the Committee should be aware that the current EUTF medical plans provide coverage at no cost for sexually transmitted disease screenings, including screenings for human immunodeficiency virus and acquired immunodeficiency syndrome, during a female insured's annual gynecological exam.

Thank you for the opportunity to testify.

**EUTF's Mission:** We care for the health and well being of our beneficiaries by striving to provide quality benefit plans that are affordable, reliable, and meet their changing needs. We provide service that is excellent, courteous, compassionate, and informative.

**From:** mailinglist@capitol.hawaii.gov  
**Sent:** Wednesday, February 03, 2016 12:13 PM  
**To:** HLTtestimony  
**Cc:** laurie.field@ppvnh.org  
**Subject:** \*Submitted testimony for HB1897 on Feb 5, 2016 08:30AM\*

**HB1897**

Submitted on: 2/3/2016

Testimony for HLT on Feb 5, 2016 08:30AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Laurie Field	Planned Parenthood Votes Northwest and Hawaii	Support	No

**Comments:**

Please note that testimony submitted less than 24 hours prior to the hearing, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

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### COMMITTEE ON HEALTH

Rep. Della Au Belatti, Chair

Rep. Richard P. Creagan, Vice Chair

DATE: Friday, February 05, 2016

TIME: 8:30 AM

PLACE: Conference Room 329

From: Hawaii Medical Association

Dr. Scott McCaffrey, MD, President

Dr. Linda Rasmussen, MD, Legislative Co-Chair

Dr. Ronald Keinitz, MD, Legislative Co-Chair

Dr. Christopher Flanders, DO, Executive Director

Lauren Zirbel, Community and Government Relations

### **Re: HB 1897, Relating to Insurance Coverage of Health Screenings**

#### **Position: Support with Amendments**

The Hawaii Medical Association support the position of the Hawaii Section of the American Congress of Obstetricians and Gynecologists (HI ACOG) in support of SB2323 and other legislative proposals that promote insurance coverage for sexually transmitted infection (STI) testing in accordance with national professional guidelines.

#### **Burden of Sexually Transmitted Infections**

- Hawaii has the 15<sup>th</sup> highest rate of chlamydial infection in the country with significant disparities across age and racial and ethnic groups in disease prevalence.<sup>1</sup>
- Despite clear national recommendations for STI testing, rates of STI testing in young women are troublingly low. A study of adolescents seen for routine health check-ups found that only 34% had received any STI counseling or screening at their visit.<sup>2</sup> Among sexually active women ages 16-25, only 42% with commercial PPOs and 58% with Medicaid had received chlamydia screening within the past year.<sup>3</sup> Of six health plans in Hawaii reporting chlamydia screening data for sexually active women ages 16-25 in 2008, a 56.2% screening rate was reported.<sup>4</sup>
- Unrecognized and untreated sexually transmitted infections can result in pelvic inflammatory disease, ectopic pregnancy, infertility, and chronic pelvic pain, as well as infections of sexual partners and neonates.
- Unrecognized and untreated sexually transmitted infections in male partners results in infection and reinfection of women.
- Infection with one STI predisposes a person to contracting other STIs.

#### **OFFICERS**

**PRESIDENT – D. SCOTT MCCAFFREY , MD, PRESIDENT ELECT – BERNARD ROBINSON, MD**

**IMMEDIATE PAST PRESIDENT – ROBERT SLOAN, MD, SECRETARY - THOMAS KOSASA, MD,**

**TREASURER – MICHAEL CHAMPION, MD, EXECUTIVE DIRECTOR – CHRISTOPHER FLANDERS, DO**

## Insurance Coverage for Sexually Transmitted Infection Testing

- Under the Affordable Care Act (ACA), private health plans are required to cover recommended preventive health services without any patient cost-sharing. This includes A and B level recommendations by the U.S. Preventive Services Task Force (USPSTF).
- ACOG and the USPSTF recommend screening for chlamydia and gonorrhea in sexually active women age 24 years or younger, and in older women who are at increased risk for infection, at least annually or when new risk factors develop since the last negative result.<sup>5,6</sup>
- ACOG and the USPSTF recommend screening for HIV in women 15-65, and in younger and older women at increased risk. Need for repeat screening is recommended to be assessed at least annually.<sup>5,6</sup>
- More frequent STI testing is recommended by national STI testing guidelines for pregnant women, those with symptoms of STIs, and those whom have recently tested positive for an STI.
- Since some women are covered by 'grandfathered' plans not currently subject to ACA-mandated coverage of preventive health services, not all non-'grandfathered' plans are compliant with ACA coverage requirements, and it is extremely difficult to efficiently determine a woman's insurance coverage for STI testing, many health care providers and women are hesitant to perform STI testing as recommended due to coverage and cost concerns.

## Requested Amendments

For the reasons that: many women may not have an annual gynecologic exam, STI testing is often indicated outside of an annual gynecologic exam, STI testing may be medically indicated more often than annually, and male partners serve as sources of STI infection and re-infection for women, **we respectfully request that this committee change the bill's language from (line 15 page 2) 'shall provide insurance coverage for sexually transmitted disease screenings, including screenings for human immunodeficiency virus and acquired immunodeficiency syndrome, during a female insured's annual gynecological exam' to as follows, "shall provide insurance coverage for sexually transmitted disease testing in accordance with national professional guidelines, such as those of the U.S. Preventive Services Task Force and the Centers for Disease Control and Prevention."**

For these reasons, **HI HMA supports SB2323 with the above requested amendments** and urges the Legislature to work toward decreasing the health burdens of sexually transmitted infections in Hawaii. We stand ready to provide you with factual information on medical issues that come before the Legislature, and hope you will contact us at any time.

<sup>1</sup>STD Surveillance 2013: Table 2: Chlamydia- reported cases rates by state, ranked by state, United States, 2013. (Accessed January 8, 2015, at <http://www.cdc.gov/std/stats13/tables/2.htm>.)

<sup>2</sup>Rietmeijer CA, Bull SS, Ortiz CG, et al. Patterns of general health care and STD services use among high risk youth participating in community-based urine chlamydia screening. Sex Transm Dis 1998;25:457-63.

<sup>3</sup>The State of Health Care Quality 2006; Chlamydia Testing. (Accessed January 10, 2015, at <http://www.ncqa.org/tabid/447/Default.aspx>.)

<sup>4</sup>Chlamydia Screening Percentages Reported by Commercial and Medicaid Plans by State. (Accessed February 10, 2015, at Chlamydia Screening Percentages Reported by Commercial and Medicaid Plans by State and Year.)

<sup>5</sup>American College of Obstetricians & Gynecologists Guidelines for Women's Health Care: A Resource

Manual. 4<sup>th</sup> Edition. 2014.

<sup>6</sup> *Final Recommendation Statement: Chlamydia and Gonorrhea: Screening*. U.S. Preventive Services Task Force. December 2014.

<http://www.uspreventiveservicestaskforce.org/Page/Document/RecommendationStatementFinal/chlamydia-and-gonorrhea-screening>



February 5, 2016

The Honorable Della Au Belatti, Chair  
The Honorable Richard P. Creagan, Vice Chair  
House Committee on Health

Re: HB 1897 – Relating to Insurance Coverage of Health Screenings

Dear Chair Au Belatti, Vice Chair Creagan, and Members of the Committee:

The Hawaii Medical Association (HMSA) appreciates the opportunity to testify on HB 1897 which would require health plan coverage of screenings for sexually transmitted diseases. HMSA supports this Bill.

Research has shown that preventive health services can save lives and improve health by identifying illnesses earlier, managing them more effectively, and treating them before they develop into more complicated, debilitating conditions, and that some services are also cost-effective. In recognition of this, the Affordable Care Act (ACA) mandates coverage for a range of preventive services without cost-sharing. The required preventive services come from recommendations made by four expert medical and scientific bodies – the U.S. Preventive Services Task Force (USPSTF), the Advisory Committee on Immunization Practices (ACIP), the Health Resources and Services Administration's (HRSA's) Bright Futures Project, and HRSA and the Institute of Medicine (IOM) Committee on Women's Clinical Preventive Services.

In compliance with the ACA, all of HMSA's non-grandfathered plans currently provide coverage for all USPSTF grade a and b recommendations which include: chlamydia screening: gonorrhea screening: HIV screening, and syphilis screening. In addition we offer coverage for sexually transmitted infections counseling.

Thank you for allowing us to testify in support of HB 1897.

Sincerely,



Jennifer Diesman  
Vice President, Government Relations.

***American Congress of Obstetricians and Gynecologists  
District VIII, Hawaii (Guam & American Samoa) Section***

Greigh Hirata, MD, FACOG, Chair  
94-235 Hanawai Circle, #1B  
Waipahu, Hawaii 96797



To: Committee on Health  
Representative Della Au Bellati, Chair  
Representative Richard P. Creagen, Vice Chair

DATE: Friday, February 5, 2016  
TIME: 8:30 A.M.  
PLACE: Conference Room 229

FROM: Hawaii Section, ACOG  
Dr. Greigh Hirata, MD, FACOG, Chair  
Dr. Jennifer Salcedo, MD, MPH, MPP, FACOG, Vice-Chair  
Lauren Zirbel, Community and Government Relations

**Re: HB 1897, Relating to Insurance Coverage of Health Screenings**

**Position: Support with Amendments**

The Hawaii Section of the American Congress of Obstetricians and Gynecologists (HI ACOG) supports HB1897 and other legislative proposals that promote insurance coverage for sexually transmitted infection (STI) testing in accordance with national professional guidelines.

As a Section of the Nation's leading group of physicians dedicated to improving health care for women, HI ACOG represents over 160 obstetrician/gynecologist physicians in our state. HI ACOG strongly supports measures to decrease the serious health burdens of sexually transmitted infections, of which young women in Hawaii are disproportionately affected.

**Burden of Sexually Transmitted Infections**

- Hawaii has the 15<sup>th</sup> highest rate of chlamydial infection in the country with significant disparities across age and racial and ethnic groups in disease prevalence.<sup>1</sup>
- Despite clear national recommendations for STI testing, rates of STI testing in young women are troublingly low. A study of adolescents seen for routine health check-ups found that only 34% had received any STI counseling or screening at their visit.<sup>2</sup> Among sexually active women ages 16-25, only 42% with commercial PPOs and 58% with Medicaid had received chlamydia screening within the past year.<sup>3</sup> Of six health plans in Hawaii reporting chlamydia screening data for sexually active women ages 16-25 in 2008, a 56.2% screening rate was reported.<sup>4</sup>
- Unrecognized and untreated sexually transmitted infections can result in pelvic inflammatory disease, ectopic pregnancy, infertility, and chronic pelvic pain, as well as infections of sexual partners and neonates.
- Unrecognized and untreated sexually transmitted infections in male partners results in infection and reinfection of women.

- Infection with one STI predisposes a person to contracting other STIs.

### **Insurance Coverage for Sexually Transmitted Infection Testing**

- Under the Affordable Care Act (ACA), private health plans are required to cover recommended preventive health services without any patient cost-sharing. This includes A and B level recommendations by the U.S. Preventive Services Task Force (USPSTF).
- ACOG and the USPSTF recommend screening for chlamydia and gonorrhea in sexually active women age 24 years or younger, and in older women who are at increased risk for infection, at least annually or when new risk factors develop since the last negative result.<sup>5,6</sup>
- ACOG and the USPSTF recommend screening for HIV in women 15-65, and in younger and older women at increased risk. Need for repeat screening is recommended to be assessed at least annually.<sup>5,6</sup>
- More frequent STI testing is recommended by national STI testing guidelines for pregnant women, those with symptoms of STIs, and those whom have recently tested positive for an STI.
- Since some women are covered by 'grandfathered' plans not currently subject to ACA-mandated coverage of preventive health services, not all non-'grandfathered' plans are compliant with ACA coverage requirements, and it is extremely difficult to efficiently determine a woman's insurance coverage for STI testing, many health care providers and women are hesitant to perform STI testing as recommended due to coverage and cost concerns.

### **Requested Amendments**

For the reasons that: many women may not have an annual gynecologic exam, STI testing is often indicated outside of an annual gynecologic exam, STI testing may be medically indicated more often than annually, and male partners serve as sources of STI infection and re-infection for women, we respectfully request that this committee change the bill's language from (line 15 page 2) 'shall provide insurance coverage for sexually transmitted disease screenings, including screenings for human immunodeficiency virus and acquired immunodeficiency syndrome, during a female insured's annual gynecological exam' to as follows, "shall provide insurance coverage for sexually transmitted disease testing in accordance with national professional guidelines, such as those of the U.S. Preventive Services Task Force and the Centers for Disease Control and Prevention."

For these reasons, **HI ACOG supports HB1897 with the above requested amendments** and urges the Legislature to work toward decreasing the health burdens of sexually transmitted infections in Hawaii. We stand ready to provide you with factual information on medical issues that come before the Legislature, and hope you will contact us at any time.

<sup>1</sup>STD Surveillance 2013: Table 2: Chlamydia- reported cases rates by state, ranked by state, United States, 2013. (Accessed January 8, 2015, at <http://www.cdc.gov/std/stats13/tables/2.htm>.)

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<sup>3</sup>The State of Health Care Quality 2006; Chlamydia Testing. (Accessed January 10, 2015, at

<http://www.ncqa.org/tabid/447/Default.aspx>.)

<sup>4</sup> Chlamydia Screening Percentages Reported by Commercial and Medicaid Plans by State. (Accessed February 10, 2015, at Chlamydia Screening Percentages Reported by Commercial and Medicaid Plans by State and Year.)

<sup>5</sup> American College of Obstetricians & Gynecologists Guidelines for Women's Health Care: A Resource Manual. 4<sup>th</sup> Edition. 2014.

<sup>6</sup> *Final Recommendation Statement: Chlamydia and Gonorrhea: Screening*. U.S. Preventive Services Task Force. December 2014.  
<http://www.uspreventiveservicestaskforce.org/Page/Document/RecommendationStatementFinal/chlamydia-and-gonorrhea-screening>

Testimony of  
John M. Kirimitsu  
Legal and Government Relations Consultant

Before:  
House Committee on Health  
The Honorable Della Au Belatti, Chair  
The Honorable Richard P. Creagan, Vice Chair

February 5, 2016  
8:30 am  
Conference Room 329

**Re: HB 1897 Relating to Insurance Coverage of Health Screenings**

Chair, Vice-Chair, and committee members thank you for this opportunity to provide testimony on HB 1897 relating to insurance coverage for sexually transmitted disease screenings.

**Kaiser Permanente Hawaii supports this bill.**

According to the Center for Disease Control and Prevention, it is estimated that more than 1.2 million people have HIV in the United States. About 20 percent (1 in 5) don't even know they are infected because symptoms don't show up for many years. Kaiser Permanente Hawaii recognizes that the earliest possible identification and treatment of HIV is the most effective way to manage living with HIV or AIDS, for a lifetime. That being said, Kaiser Permanente Hawaii already provides the sexually transmitted disease screenings, including HIV and AIDS, proposed in HB 1897 through its base plans at no charge, and we are always proud to sponsor healthy lifestyles.

Thank you for your consideration.



Chamber of Commerce HAWAII  
*The Voice of Business*

**Testimony to the Senate Committee on Commerce, Consumer Protection, and  
Health**

**Friday, February 5, 2016 at 8:30 A.M.  
Conference Room 329, State Capitol**

**RE: HOUSE BILL 1897 RELATING TO INSURANCE COVERAGE OF HEALTH  
SCREENINGS**

Chair Belatti, Vice Chair Creagan, and Members of the Committee:

The Chamber of Commerce Hawaii ("The Chamber") **supports** HB 1897, which ensures insurance coverage for sexually transmitted disease screenings, including screenings for human immunodeficiency virus and acquired immunodeficiency syndrome, during a female insured's annual pelvic exam.

The Chamber is Hawaii's leading statewide business advocacy organization, representing about 1,000 businesses. Approximately 80% of our members are small businesses with less than 20 employees. As the "Voice of Business" in Hawaii, the organization works on behalf of members and the entire business community to improve the state's economic climate and to foster positive action on issues of common concern.

Preventative health services allow earlier identification, managing, and treating illnesses. By preventing illnesses to develop into more complicated and dangerous conditions, they can save lives and improve health, while also being cost effective. The Chamber supports ensuring insurance coverage include these preventative and early detection measures, such as human immunodeficiency virus and acquired immunodeficiency syndrome screenings.

Thank you for the opportunity to testify.

TESTIMONY OF THE AMERICAN COUNCIL OF LIFE INSURERS  
COMMENTING ON HOUSE BILL 1897, RELATING TO INSURANCE  
COVERAGE OF HEALTH SCREENINGS

February 5, 2016

Via e mail: [capitol.hawaii.gov/submittestimony.aspx](http://capitol.hawaii.gov/submittestimony.aspx)

Honorable Representative Della Au Belatti, Chair  
Committee on Health  
State House of Representatives  
Hawaii State Capitol, Conference Room 329  
415 South Beretania Street  
Honolulu, Hawaii 96813

Dear Chair Au Belatti and Committee Members:

Thank you for the opportunity to comment on HB 1897, relating to Insurance Coverage of Health Screenings.

Our firm represents the American Council of Life Insurers (“ACLI”), a Washington, D.C., based trade association with approximately 300 member companies operating in the United States and abroad. ACLI advocates in federal, state, and international forums for public policy that supports the industry marketplace and the 75 million American families that rely on life insurers’ products for financial and retirement security. ACLI members offer life insurance, annuities, retirement plans, long-term care and disability income insurance, and reinsurance, representing more than 90 percent of industry assets and premiums. Two hundred nineteen (216) ACLI member companies currently do business in the State of Hawaii; and they represent 93% of the life insurance premiums and 88% of the annuity considerations in this State.

As drafted, HB 1897 would amend Article 10A of Hawaii’s Insurance Code to require all individual and group accident and health or sickness providing coverage for health care to provide coverage for sexually transmitted disease screenings during a female insured’s annual gynecological exam.

By its terms, Article 10A of the Code (by reference to HRS §431:1-205) defines “accident and health or sickness insurance” to include disability insurance.

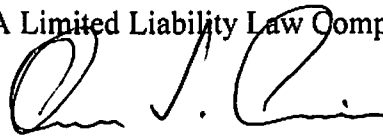
While HB 1897 is intended to cover only those policies of insurance that provide for healthcare the policies excluded are limited to those that “provide coverage for specified disease or other limited benefit coverage” and does not by its terms appear to apply to insurers issuing disability insurance.

In order to dispel any confusion as to what this bill is intended to cover, ACLI suggests that paragraph (a) of the new section proposed to be added to §431: 10A (beginning at line 11, page 2, be amended as follows:

§ 431: 10A-\_\_\_. Human immunodeficiency virus and acquired immunodeficiency syndrome screening coverage. (a) Each policy of accident and health or sickness insurance providing coverage for healthcare, except for policies that only provide coverage for specified diseases or other limited benefit coverage as described in §431: 10A-102.5, shall provide insurance coverage for sexually transmitted disease screenings, including screenings for human immunodeficiency virus and acquired immunodeficiency syndrome, during a female insured's annual gynecological exam.

Again, thank you for the opportunity to comment on HB 1897.

LAW OFFICES OF  
OREN T. CHIKAMOTO  
A Limited Liability Law Company

A handwritten signature in black ink, appearing to read 'O. T. Chikamoto', written over the company name.

Oren T. Chikamoto  
1001 Bishop Street, Suite 1750  
Honolulu, Hawaii 96813  
Telephone: (808) 531-1500  
E mail: [otc@chikamotolaw.com](mailto:otc@chikamotolaw.com)



**From:** mailinglist@capitol.hawaii.gov  
**Sent:** Wednesday, February 03, 2016 2:53 PM  
**To:** HLTtestimony  
**Cc:** mrocca@hscadv.org  
**Subject:** \*Submitted testimony for HB1897 on Feb 5, 2016 08:30AM\*

**HB1897**

Submitted on: 2/3/2016

Testimony for HLT on Feb 5, 2016 08:30AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Michelle Rocca	Individual	Support	No

Comments:

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**From:** mailinglist@capitol.hawaii.gov  
**Sent:** Wednesday, February 03, 2016 5:38 PM  
**To:** HLTtestimony  
**Cc:** joyamarshall0416@gmail.com  
**Subject:** \*Submitted testimony for HB1897 on Feb 5, 2016 08:30AM\*

**HB1897**

Submitted on: 2/3/2016

Testimony for HLT on Feb 5, 2016 08:30AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Joy Marshall	Individual	Support	No

Comments:

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## HLTtestimony

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To: HLTtestimony  
Cc: annsfreed@gmail.com  
Subject: \*Submitted testimony for HB1897 on Feb 5, 2016 08:30AM\*

Categories: Blue Category

### **HB1897**

Submitted on: 2/4/2016

Testimony for HLT on Feb 5, 2016 08:30AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Ann S Freed	Individual	Support	No

### Comments:

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## HLTtestimony

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From: mailinglist@capitol.hawaii.gov  
Sent: Thursday, February 04, 2016 7:55 PM  
To: HLTtestimony  
Cc: dylanarm@hawaii.edu  
Subject: \*Submitted testimony for HB1897 on Feb 5, 2016 08:30AM\*

### **HB1897**

Submitted on: 2/4/2016

Testimony for HLT on Feb 5, 2016 08:30AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Dylan Armstrong	Individual	Support	No

### Comments:

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