

HAWAII HEALTH SYSTEMS
C O R P O R A T I O N

"Quality Healthcare For All"

Senate Committee on Health
Senator Josh Green, Chair
Senator Glenn Wakai, Vice Chair

Committee on Higher Education and the Arts
Senator Brian T. Taniguchi, Chair
Senator Lorraine R. Inouye, Vice Chair

March 20, 2015
Conference Room 414
1:45 p.m.
Hawaii State Capitol

**Testimony Supporting House Bill 285 (HD1),
Relating To The John A. Burns School of Medicine.
(John A. Burns School of Medicine Scholarship Program; Appropriation).**

Linda Rosen, M.D., M.P.H.
Chief Executive Officer
Hawaii Health Systems Corporation

On behalf of the Hawaii Health Systems Corporation (HHSC) Corporate Board of Directors, thank you for the opportunity to present testimony **in support of HB 285 (HD1)**, which establishes the John A. Burns School of Medicine Scholarship Program, which covers the cost of tuition and fees for a full course of study at the John A. Burns School of Medicine in exchange for a service commitment of five years in the State upon the completion of residency.

Meeting the healthcare needs in Hawaii has historically been challenging primarily because of the unique problems posed by the geographical nature of our islands. These challenges have resulted in a critical shortage of medical professionals – particularly physicians. It is estimated that Hawaii's shortage of physicians has sharply increased to nearly 20% from 2013 to 2014. That shortage is expected to increase by more than 68% by 2020. This is a critical problem particularly on the neighbor islands where our facilities serve as a "safety net" for thousands of residents.

Passage of this bill will provide much needed incentives for future physicians to serve in Hawaii for five years post-completion of the recipient's residency. It offers a prospective recipient the ability to reduce the staggering debt incurred from pursuing a medical degree. The State benefits by strengthening its ability to address critical areas of healthcare to the public while stabilizing and/or reducing the shortage of physicians.

Because of the severity of this shortage, and the critical need for physicians on the neighbor islands, we offer the following proposed revisions to the bill's current form:

- (b) . . . Recipients shall be required to remain in or return to the State and practice in **a medically underserved area of** the State for five years following the completion of the recipient's residency.

Thank you for the opportunity to testify before this committee. We respectfully recommend the Committee's support of this measure.



HAWAII MEDICAL ASSOCIATION

1360 S. Beretania Street, Suite 200, Honolulu, Hawaii 96814
Phone (808) 536-7702 Fax (808) 528-2376 www.hmaonline.net

TO

COMMITTEE ON HEALTH

Senator Josh Green, Chair

Senator Glenn Wakai, Vice Chair

COMMITTEE ON HIGHER EDUCATION AND THE ARTS

Senator Brian T. Taniguchi, Chair

Senator Lorraine R. Inouye, Vice Chair

DATE: Friday, March 20, 2015

TIME: 1:45PM

PLACE: Conference Room 414

FROM: Hawaii Medical Association

Dr. Christopher Flanders, DO, Executive Director

Lauren Zirbel, Community and Government Relations

Re: HB 285, HD1

STRONG SUPPORT

The HMA is in strong support of this measure. We strongly believe that the state is in a crisis situation. We must do something to address our shortage of Physicians.

Hawaii's doctor shortage jumped 20 percent over the past year as more physicians left the field amid a growing demand for medical services.

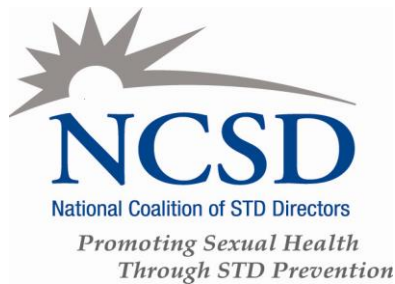
New estimates on physician supply and demand peg the current shortage at 890, and that's expected to jump as high as 1,500 by 2020, according to the latest figures from the University of Hawaii John A. Burns School of Medicine's Area Health Education Center.

This bill will help to ease our growing shortage by establishing a John A. Burns School of Medicine Scholarship Program, which covers the cost of tuition and fees for a full course of study at the John A. Burns School of Medicine in exchange for a service commitment of five years in the State upon the completion of residency.

Thanks so much for your support.

Officers

*President - Robert Sloan, MD, President-Elect – Scott McCaffrey, MD
Immediate Past President – Walton Shim, MD, Secretary - Thomas Kosasa, MD
Treasurer – Brandon Lee, MD Executive Director – Christopher Flanders, DO*



February 10, 2015

To: Representative Della Au Belatti, Chair, Committee on Health
Representative Richard P. Creagan, Vice Chair, Committee on Health
Members of the House Health Committee

Thank you to the Chair, Vice Chair, and members of the Committee on Health for the opportunity to offer written testimony regarding human papillomavirus (HPV).

I write to you as the Executive Director of the National Coalition of STD Directors (NCS D), a partnership of public health professionals dedicated to promoting sexual health through the prevention of sexually transmitted diseases (STDs). We are a membership organization representing health department STD directors, their support staff and community-based partners across 50 states, seven large cities and eight US territories. We use the collective knowledge and experience of our members to successfully advocate for STD policies, programs and funding that helps promote and protect the sexual health of every American. We are proud to say that several employees at the Hawaii State Department of Health are NCS D members.

We unequivocally support the use of HPV vaccines and any educational efforts that would expand uptake of the vaccine. Human papillomavirus (HPV) is the most common sexually transmitted infection in the United States. It is so common that nearly all sexually active men and women will get it at some point in their lives.ⁱ About 79 million Americans are currently infected with HPV and approximately 14 million people become newly infected each year.ⁱⁱ Approximately half of those new infections occur among persons aged 15-24 years.ⁱⁱⁱ Moreover, approximately 75 percent of sexually active women will have had an HPV infection by age 50. A recent National Health and Nutrition Examination Survey study estimates that 26.8 percent of women ages 14-59 are infected with HPV.^{iv}

While most infections are asymptomatic and transient, infection with HPV can lead to the development of anogenital cancers (including cervical, vaginal, vulvar, and anal), oropharyngeal cancer, and genital warts. Virtually all cervical cancer cases are the result of HPV and approximately 90 percent of anal cancers, 40 percent of penile, vaginal, and vulvar cancers, 25 percent of oral cavity cancers, and 35 percent of oropharyngeal cancers.^v Approximately 35 percent of all cases of anal cancer and 80 percent of all cases of oropharyngeal cancer are in men.^{vi} Every year, it is estimated that over 12,000 women in the US are diagnosed with cervical cancer, and about 4,000 women will die each year from the disease.^{vii} Cervical cancer is the second leading cancer among women worldwide with 493,243 incident cases and 273,505 deaths annually.^{viii}

In 2005, the direct annual cost of HPV-related disease prevention and treatment was \$4.6 billion nationwide with infections among young women accounting for a majority of the economic

NCS D
1029 Vermont Avenue, NW – Suite 500 Washington, DC 20005
202.842.4660 202.842.4542 (Fax) www.ncsddc.org

burden.^{ix} There are also substantial direct costs associated with non-cervical disease including the treatment of other cancers and genital warts.^x Furthermore, there are substantial indirect costs associated with premature death and loss of productivity.

HPV vaccines are safe and effective and the first vaccine that can prevent certain cancers. The Centers for Disease Control and Prevention (CDC), American Academy of Pediatrics, Advisory Committee on Immunization Practices, American College of Obstetrics and Gynecology, and American Academy of Family Physicians recommend routine vaccination of females and males between 11 and 12 years old. These groups also recommend vaccination for males and females aged 13 through 26 years who have not been vaccinated previously or who have not completed the three-dose series. For vaccines to be effective, they should be provided prior to exposure to HPV.^{xi} Preteens should receive all three doses of the HPV series before they begin any type of sexual activity and are exposed to HPV. An additional reason for providing it early is that the vaccine produces a higher immune response in preteens than it does in older teens and young women. The FDA recently approved Gardasil 9, an HPV vaccine developed by Merck that protects against nine types of HPV, improving upon the prior vaccine and preventing approximately 90 percent of cervical, vulvar, vaginal, and anal cancers as well as providing protection from two types of HPV that cause approximately 90 percent of genital wart cases.

Just one-third of girls aged 13-17 have been fully vaccinated against HPV despite the fact that the vaccine is included in adolescent vaccination recommendations and the fact that the CDC safety monitoring data indicate that the vaccine is safe.^{xii} According to the CDC, for each year that vaccination coverage levels fail to improve, an additional 4,400 women will develop cervical cancer.^{xiii} In Hawaii only 34.4 percent of females aged 13-17 are fully vaccinated against HPV.^{xiv} Nationwide, over 90 percent of 13 year old girls would have received at least one dose of the HPV vaccine if they had received it at the same time as they received other recommended vaccines.^{xv}

According to the 2012 National Immunization Survey-Teen, parents reported the most common reasons for not vaccinating their children as, the “vaccine is not needed” (19 percent), “doctor did not recommend the vaccine” (14 percent), “concerns about the safety of the vaccine” (13 percent), “didn’t know about the vaccine or the disease” (13 percent), and “daughter is not sexually active and therefore does not need the vaccine” (10 percent).^{xvi} NCSD believes that an effort to educate the parents of middle school aged children about the risks of HPV and the preventative health care provided by the HPV vaccine would eliminate many of these reasons that children are not being vaccinated and ultimately increase the number of children who are receiving the HPV vaccine.

Presently, there are 21 states and DC with laws that either require HPV vaccination for school entry, provide funding towards the cost of the vaccines, or support public education about HPV and the vaccine.^{xvii} HPV vaccination rates significantly increased in four states between 2012 and 2013 (Illinois, Mississippi, New Mexico, and South Carolina) due to a combination of initiatives including: increased public awareness, campaigns by professional and advocacy organizations, peer-to-peer education for physicians, and general health initiatives.^{xviii} The development of accurate, education information on HPV; the connection between HPV and cancers and other diseases; and the availability of the HPV vaccine and its recommended

NCSD

1029 Vermont Avenue, NW – Suite 500, Washington, DC 20005
202.842.4660 202.842.4542 (Fax) www.ncsddc.org

provision age for the parents and guardians of students in the sixth grade would be a significant step for Hawaii towards combating HPV in the state.

Again, thank you for the opportunity to deliver testimony to your committee. We hope the information provided in this testimony is helpful in your deliberations. We are happy to answer any questions. Feel free to contact our State Policy Team at statepolicy@ncsddc.org or 202-618-4035.

Best regards,



William A. Smith
Executive Director
National Coalition of STD Directors

ⁱ Centers for Disease Control and Prevention. Genital HPV infection - fact sheet. Available at: <http://www.cdc.gov/std/HPV/STDFact-HPV.htm>.

ⁱⁱ Chesson HW, Blandford JM, Gift TL, Tao G, Irwin KL. The estimated direct medical cost of sexually transmitted diseases among American youth, 2000. Perspectives on Sexual and Reproductive Health. 2004;36:11-19.

ⁱⁱⁱ Satterwhite CL, Torrone E, Meites E, et al. Sexually transmitted infections among US women and men: prevalence and incidence estimates, 2008. Sex Transm Dis 2013;40:187-93.

^{iv} Dunne EF, Unger ER, Sternberg M, et al. Prevalence of HPV infection among females in the United States. JAMA. 2007;297:813-819.

^v Bosch FX, Burchell AN, Schiffman M, et al. Epidemiology and natural history of human papillomavirus infections and type-specific implications in cervical neoplasia. Vaccine. 2008;26:K1-K16; Watson M, Saraiya M, Ahmed F, et al. Using population-based cancer registry data to assess the burden of human papillomavirus-associated cancers in the United States: Overview of methods. Cancer. 2008;113:2841-2854.

^{vi} Centers for Disease Control and Prevention. Genital HPV infection - fact sheet. Available at: <http://www.cdc.gov/std/HPV/STDFact-HPV.htm>.

^{vii} American Cancer Society. What are the key statistics about cervical cancer? 2014.

<http://www.cancer.org/cancer/cervicalcancer/detailedguide/cervical-cancer-key-statistics>

^{viii} WHO/ICO Information Centre on Human Papilloma Virus and Cervical Cancer. Available at: <http://www.who.int/hpvcentre/statistics/dynamic/ico/DataQuerySelect.cfm>. Accessed 3/22/2009.

^{ix} Florence RL, Dixon JM, Milanova TF, Beusterien KM. Review of the economic and quality-of-life burden of cervical human papillomavirus disease. American Journal of Obstetrics and Gynecology. 2007;196:206-212; Chesson HW, Blandford JM, Gift TL, Tao G, Irwin KL. The estimated direct medical cost of sexually transmitted diseases among American youth, 2000. Perspectives on Sexual and Reproductive Health. 2004;36:11-19.

^x Alam M, Stiller M. Direct medical costs for surgical and medical treatment of condylomata acuminata. Arch Dermatol. 2001;137:337-341; Mayeaux EJ, Jr. Reducing the economic burden of HPV-related diseases. J Am Osteopath Assoc. 2008;108:S2-7.

^{xi} Centers for Disease Control and Prevention. HPV Vaccine—Questions and Answers. Available at: <http://www.cdc.gov/vaccines/vpd-vac/hpv/vac-faqs.ht>

^{xii} Centers for Disease Control and Prevention, “Human Papillomavirus (HPV) Vaccine” Available at: <http://www.cdc.gov/vaccinesafety/Vaccines/HPV/Index.html>

^{xiii} Centers for Disease Control and Prevention. “Human Papillomavirus Vaccination Coverage Among Adolescent Girls.” 2007-2012, and “Postlicensure Vaccine Safety Monitoring.” 2006-2013. Morbidity and Mortality Weekly Report, July 26, 2013. 62(29);591-595.

NCSD

1029 Vermont Avenue, NW – Suite 500, Washington, DC 20005
202.842.4660 202.842.4542 (Fax) www.ncsddc.org

^{xiv} Centers for Disease Control and Prevention. HPV Vaccine—Questions and Answers. Available at:
<http://www.cdc.gov/vaccines/vpd-vac/hpv/vac-faqs.htm>

^{xv} National Institute for Health Care Management. Missed Opportunities to Prevent Cervical Cancer: Strategies to Increase HPV Vaccination. March 2014. Available at:

http://www.nihcm.org/pdf/HPV_Vaccination_Fact_Sheet_2014.pdf

^{xvi} Centers for Disease Control and Prevention, Teen Vaccination Coverage, 2013 National Immunization Survey—Teen (NIS- Teen). Available at: <http://www.cdc.gov/vaccines/who/teens/vaccination-coverage.html>

^{xvii} Kaiser Family Foundation. The HPV Vaccine: Access and Use in the US, Jan. 26, 2015. Available at:
<http://kff.org/womens-health-policy/fact-sheet/the-hpv-vaccine-access-and-use-in/>

^{xviii} Kaiser Family Foundation. The HPV Vaccine: Access and Use in the US, Jan. 26, 2015. Available at:
<http://kff.org/womens-health-policy/fact-sheet/the-hpv-vaccine-access-and-use-in/>



THE QUEEN'S HEALTH SYSTEMS

To: Chair Josh Green
Vice Chair Glenn Wakai
Senate Committee on Health

Chair Brian T. Taniguchi
Vice Chair Lorraine R. Inouye
Senate Committee on Higher Education and the Arts

From: Paula Yoshioka
Senior Vice President
The Queen's Health Systems

Re: HB 285 HD 1, Relating to the John A. Burns School of Medicine
Hearing—March 20, 2015 at 1:45 PM

The Queen's Health Systems would like to provide support for HB 285 HD 1. This legislation would help to encourage our local students to serve in the state of Hawaii upon completion of their residency through a scholarship program at the University of Hawaii's John A. Burns School of Medicine (JABSOM).

Providing financial assistance to local students to keep to their roots and practice in the state is a good investment. Incentives to keep physicians in the state could also help efforts to tackle our physician shortage. The Hawaii Physician Workforce Assessment Project estimates that, by 2020, Hawaii could be facing a shortage of 1,400 physicians. Neighbor islands often have the most acute needs, especially for primary care physicians. Supporting investments to recruit, train and retain providers in the state is critical to helping expand access to care for thousands of residents.

We must pursue a number of programs and initiatives in our efforts to expand access to necessary care for all residents of Hawaii. We would ask for your support of HB 285 HD 1 as one of those initiatives. Thank you for your time and consideration of this important matter.

The mission of The Queen's Health Systems is to fulfill the intent of Queen Emma and King Kamehameha IV to provide in perpetuity quality health care services to improve the well-being of Native Hawaiians and all of the people of Hawai'i.

From: mailinglist@capitol.hawaii.gov
To: [HTHTestimony](#)
Cc: jamesjtz@aol.com
Subject: *Submitted testimony for HB285 on Mar 20, 2015 13:45PM*
Date: Wednesday, March 18, 2015 7:21:39 PM

HB285

Submitted on: 3/18/2015

Testimony for HTH/HEA on Mar 20, 2015 13:45PM in Conference Room 414

Submitted By	Organization	Testifier Position	Present at Hearing
James Gauer	Individual	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.

Do not reply to this email. This inbox is not monitored. For assistance please email webmaster@capitol.hawaii.gov

From: mailinglist@capitol.hawaii.gov
To: [HTHTestimony](#)
Cc: nicoleapoliona@gmail.com
Subject: Submitted testimony for HB285 on Mar 20, 2015 13:45PM
Date: Wednesday, March 18, 2015 9:26:27 PM

HB285

Submitted on: 3/18/2015

Testimony for HTH/HEA on Mar 20, 2015 13:45PM in Conference Room 414

Submitted By	Organization	Testifier Position	Present at Hearing
Nicole Apoliona, M.D.	Individual	Comments Only	No

Comments: I feel an appropriation of funds to encourage physicians to work in Hawaii and decrease our physician shortage would be better accomplished by funding a loan repayment program and supporting and possibly expanding residency positions in Hawaii. Studies show that 85% of residents choose to practice where they complete residency. Supporting and appropriately funding residency training positions is a much more effective way to accomplish increasing the supply of physicians in Hawaii.

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.

Do not reply to this email. This inbox is not monitored. For assistance please email webmaster@capitol.hawaii.gov



Senate Committee on Health

The Hon. Josh Green, Chair

The Hon. Glenn Wakai, Vice Chair

Senate Committee on Higher Education and the Arts

The Hon. Brian T. Taniguchi, Chair

The Hon. Lorraine R. Inouye, Vice Chair

Testimony in Support of House Bill 285 HD 1

Relating to the John A. Burns School of Medicine

Submitted by Nani Medeiros, Public Affairs and Policy Director

March 20, 2015, 1:45 pm, Room 414

The Hawaii Primary Care Association (HPCA), which represents the federally qualified community health centers in Hawaii, supports House Bill 285, establishing a scholarship fund that will attract and retain physicians in Hawaii.

The state of Hawaii has a physician workforce that is one of the oldest in the nation, causing an increasing shortage in the state of primary care providers. This bill aims to alleviate that by providing scholarship monies to qualified individuals that are willing to stay and practice medicine in the state of Hawaii for a period of time thereafter.

As this is an area of increasing need for Hawaii, the HPCA supports House Bill 285 and thanks you for the opportunity to testify.



UNIVERSITY OF HAWAII SYSTEM

Legislative Testimony

Testimony Presented Before the
Senate Committee on Health
and

Senate Committee on Higher Education and the Arts
Friday, March 20, 2015 at 1:45 pm

By

Robert Bley-Vroman, Chancellor

And

Jerris Hedges, MD, Dean

And

Naleen Andrade, MD, Designated Institutional Official for Graduate Medical Education
John A. Burns School of Medicine
University of Hawai'i at Mānoa

HB 285 HD1 – RELATING TO THE JOHN A. BURNS SCHOOL OF MEDICINE

Chairs Green and Taniguchi, Vice Chairs Wakai and Inouye, and members of the committees:

The University of Hawai'i supports HB 285 HD1 which creates a scholarship program for the medical school. The measure establishes a scholarship for a full course of study at University of Hawai'i at Mānoa John A. Burns School of Medicine (JABSOM) in exchange for which the recipient must practice in the state for five (5) years following the completion of the recipient's residency.

There is no doubt that Hawai'i is facing a significant shortage of physicians. This has been effectively documented by the Physician Workforce Assessment and research efforts of Dr. Kelley Withy at JABSOM's Area Health Education Center. According to the study, there is currently an estimated shortage of 655 physicians. Moreover, the huge amount of debt medical students face upon completion of their medical studies discourages many from remaining in Hawai'i or practicing in rural areas where the need for physicians is greatest. We believe HB 285 HD1 would be helpful in attracting the most qualified students to the field of medicine.

We respectfully request an amendment to the bill to include additional separate funding for JABSOM's graduate medical education program (GME). The amendment is attached to this testimony.

Establishing additional, separate funding on an annual basis for JABSOM's GME program, with the funds directed to the Hawai'i Medical-Council Special Fund, is an investment that would ensure Hawai'i grows new doctors who will practice here. These funds will be used toward the residency and fellowship programs within the JABSOM institutional graduate medical education program. As the 2015 Annual Report on the

Hawai'i Medical Council indicates, historically GME funding has come from the federal government and Hawaii's private teaching hospitals/clinics. However, the changing healthcare financial environment, including implementation of the Affordable Care Act, has limited the capacity of the teaching hospitals/clinics to fund GME training. The GME program is a core component of our ability to train new doctors for Hawai'i.

We respectfully offer the following additional suggestions to enhance the effectiveness of the scholarship program:

The five year post-residency practice should be performed in areas in the state that are underserved. This would direct medical care to regions where the need is urgent; and

Scholarships should be awarded to students who have expressed interest in areas of practice or specialties for which physician-shortages exist in order to effectively grow the doctors Hawai'i needs.

We appreciate the Committees' consideration of our requests.

Thank you for the opportunity to provide this testimony.

GRADUATE MEDICAL EDUCATION

PROPOSED AMENDMENTS

SECTION 1. There is appropriated out of the general revenues of the State of Hawaii the sum of \$5,000,000 or so much thereof as may be necessary for fiscal year 2015-2016 and the same sum or so much thereof as may be necessary for fiscal year 2016-2017 for increases in faculty and infrastructure of the existing family medicine residency program and development of new accredited family health centers in association with teaching hospitals.

The sums appropriated shall be expended by the University of Hawaii John A. Burns school of medicine for the purposes of this Act.

SECTION 2. This Act shall take effect on July 1, 2015.