

DEPARTMENT OF HEALTH

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Testimony in SUPPORT of SB2487 RELATING TO HEALTH.

REP. JOHN MIZUNO, CHAIR HOUSE COMMITTEE ON HEALTH AND HUMAN SERVICES

Hearing Date: March 8, 2018 Room Number: 329

- 1 Fiscal Implications: N/A.
- 2 **Department Testimony:** The Department of Health supports the intent of SB2487, which
- 3 amends tort law to create a quality assurance committee outside of a single health plan or
- 4 hospital. Entities across the health care continuum will likely benefit from enhanced case review
- 5 to better plan, coordinate, and manage a patient's care as they move within the continuum of care
- 6 is in the patient's best interest and consistent with emerging best practices of patient-centered
- 7 care.
- 8 The department respectfully urges the joint committee pass SB2487 to continue the public
- 9 debate.
- 10 Offered Amendments: N/A.



DAVID Y. IGE
GOVERNOR

DOUGLAS S. CHIN

STATE OF HAWAII OFFICE OF THE DIRECTOR DEPARTMENT OF COMMERCE AND CONSUMER AFFAIRS

JO ANN M. UCHIDA TAKEUCHI

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TO THE HOUSE COMMITTEE ON HEALTH AND HUMAN SERVICES

TWENTY-NINTH LEGISLATURE Regular Session of 2018

Thursday, March 8, 2018 9:30 a.m.

TESTIMONY ON SENATE BILL NO. 2487 – RELATING TO HEALTH.

TO THE HONORABLE JOHN M. MIZUNO, CHAIR, AND MEMBERS OF THE COMMITTEE:

The Department of Commerce and Consumer Affairs ("Department") appreciates the opportunity to testify on S.B. 2487, Relating to Health. My name is Gordon Ito, and I am the Insurance Commissioner for the Department's Insurance Division. The Department supports this bill, and provides the following comments.

The purpose of this bill is to amend the definition of "quality assurance committee" to include committees established by long-term facilities, skilled nursing facilities, assisted living facilities, home care agencies, hospice, and authorized state agencies, thereby allowing for the creation of a quality assurance committee outside of a single health plan or hospital.

The Department supports efforts to reduce healthcare cost drivers by improving the care of high-need, complex patients. Better coordination will lead to improved health outcomes for patients, thereby helping to reduce healthcare costs and health insurance premium increases.

Thank you for the opportunity to testify on this matter.



The state of

March 8, 2018 at 9:30 AM Conference Room 312

House Committee on Health and Human Services

To: Chair John M. Mizuno

Vice Chair Bertrand Kobayashi

From: Paige Heckathorn

Senior Manager, Legislative Affairs Healthcare Association of Hawaii

Re: Testimony in Support

SB 2487, Relating to Health

The Healthcare Association of Hawaii (HAH), established in 1939, serves as the leading voice of healthcare on behalf of 170 member organizations who represent almost every aspect of the health care continuum in Hawaii. Members include acute care hospitals, skilled nursing facilities, home health agencies, hospices, assisted living facilities and durable medical equipment suppliers. In addition to providing access to appropriate, affordable, high quality care to all of Hawaii's residents, our members contribute significantly to Hawaii's economy by employing over 20,000 people statewide.

We would like to thank the committee for the opportunity to **support** SB 2487, which would standardize the definition of a quality assurance committee in Hawaii Revised Statute. This measure would also enable medical and social service providers to work together, discuss, and propose solutions for the most difficult and complex cases they encounter. It is increasingly apparent that the needs and most pressing healthcare issues facing our communities require a multi-disciplinary response. Enabling dedicated providers and community members to collaborate more fully will promote the information-sharing needed to successfully address the medical and social reasons people fall into poor health.

This legislation will help providers address health disparities, bring down costs, and treat the non-medical determinants of health, and we would ask for your support of this measure. Thank you for your consideration of this matter.

Submitted on: 3/6/2018 9:12:49 AM

Testimony for HHS on 3/8/2018 9:30:00 AM

| Submitted By | Organization | Testifier Position | Present at Hearing |
|------------------|--------------------|-----------------------|-----------------------|
| Carol R. Ignacio | Blue Zones Project | Support | No |

Comments:

Honorable legislators,

SB2487 Quality Assurance Bill is very important to effective and efficient health care for our residents. Please support the passage of this Bill. Mahalo

Carol R. Ignacio

Government and Community Affairs Manager

Blue Zones Project - Hawaii Island

BUILD BETTER



MICHAEL K. FUJIMOTO – CHAIRMAN, PRESIDENT & CEO SHIPMAN BUSINESS PARK • 16-166 MELEKAHIWA STREET • KEAAU, HAWAII 96749 OFFICE (808) 966-5636 • CELL (808) 936-2373 • FAX (808) 966-7564

March 6, 2018

COMMITTEE ON HEALTH and HUMAN SERVICES Representative John M. Mizuno, Chair Representative Bertrand Kobayashi, Vice Chair

Testimony in Support of SB 2487

Aloha Committee Members,

Thank you for the opportunity to give testimonial support of **SB 2487**, related to the definition of Quality Assurance Committees. We support this legislation which would help to more clearly define what agencies and organizations are included in the definition Quality Assurance Committees to allow for a community to have QA discussions with *both* medical and social services providers. This would allow for "an interdisciplinary committee composed of representatives of organizations" to have protected QA discussions to improve the treatment of patients with complex medical and social needs, which is vital for patient wellbeing *and* to keep health care cost down. Since the top 1% of high cost patients consume 20% of the total national medical spend, there is also a compelling fiscal reason to improve healthcare outcomes while lowering costs by effectively addressing both the medical and non-medical needs of these patients.

This legislation would provide consistent definitions of a QA Committee in two separate but related sections of Hawaii law. As you know, currently representatives of organizations may have QA discussions, but these discussions are not protected. This undermines the essential purpose of the QA statutes which is to create a protected forum where providers can openly and straightforwardly identify areas for improvement in the treatment of patients.

We understand how important an organized and coordinated health network of medical and social service organizations can be for delivering more effective care to those with complex medical and social needs in East Hawaii and in particular the high cost and high needs patients. We respectfully ask for your support of **SB 2487**, which we feel will result in a healthier East Hawaii.

Mahalo,

Robert M. Fujimoto, Chairman of the Board Emeritus

Michael K. Fujimoto, Chairman and Chief Executive Officer

Jason R. Fujimoto, President & Chief Operating Officer

Submitted on: 3/6/2018 10:25:35 AM

Testimony for HHS on 3/8/2018 9:30:00 AM

| Submitted By | Organization | Testifier Position | Present at Hearing |
|-----------------|---|-----------------------|-----------------------|
| Darryl Oliveira | Representing Community Action Network | Support | No |

Comments:

March 6, 2018

John M. Mizuno, Chair

House Committee on Health and Human Services

Hawaii State Capitol

415 S. Beretania Street

Honolulu, Hawaii 96813

Dear Chair Mizuno,

As the co-chair of the Community Action Network, a steering committee under the oversight of the Community First non-profit organization, I would like to provide this testimony on behalf of our members in support of Senate Bill 2487.

The Community Action Network or CAN is comprised of representatives of the various health care service providers in the East Hawaii region of Hawaii Island along with many of the social service and non-profit service providers.

Over the past year, our organization has been meeting regularly with the goal of identifying issues and gaps in the health care system and how they may be causing or contributing to complex health issues of community members. These complex health conditions often result in high costs and significantly impact the limited available resources. The collective efforts and participation of the many organizations has demonstrated that assessing the problems from a truly comprehensive and all-inclusive perspective is invaluable. In many cases it has revealed that it is the social determinants or non-medical needs of patients that may be greatly affecting their health and health care needs.

The Community Action Network would like to continue to provide the forum and venue for our member organizations to assess and evaluate the challenges and gaps within the health care system and expand upon our objectives to include the conducting of case review under the concept of "quality assurance". In order to provide for that objective and activity, the current statute language defining Quality Assurance Committees would need to be amended to provide for consistency between the respective chapters and to include the provisions for an "interdisciplinary committee". As previously mentioned, the opportunity and platform for medical and non-medical or social service providers to convene to review and discuss health care in the most comprehensive and holistic manner is not only effective but essential and invaluable to identifying the problems and developing and implementing the best solutions with the ultimate goal of improving the quality of care and life for our community members.

Therefore, I strongly request your support of Senate Bill 2487 amending the definition of "Quality Assurance Committee". I would also welcome the opportunity to address any question or concerns you may have and can be reached at (808)987-8615 or by email at oliveiradarryl@gmail.com.

Sincerely,

Darryl Oliveira

Submitted on: 3/6/2018 5:42:07 PM

Testimony for HHS on 3/8/2018 9:30:00 AM

| Submitted By | Organization | Testifier Position | Present at Hearing |
|--------------|--------------|-----------------------|-----------------------|
| Carolyn Ma | Individual | Support | No |

Comments:

I strongly support this bill as a health care professional (pharmacist) and as a leader/administrator (Dean for the Daniel K. Inouye College of Pharmacy, UH Hilo) of a health professional academic program. Pharmacy practice is one of the professions that have become a key partner on inter-disciplinary health care teams. Certainly, pharmacists have long been in practice in the hospital and clinic setting. Other types of health care facilities are now either required by law, to have a pharmacist consultation to review medications in LTC's, or by an institution's desire to achieve "best practice" standards include pharmacy expertise on a regular basis. Establishing quality assurance and monitoring adherence to safety guidelines, adverse drug reactions, safe and effective drug choices, and monitoring for best outcomes is key in assuring highest level of care especially in vulnerable, high need and often times pharmacuetically and medically complex populations such as the elderly, and patients in the palliative care and hospice facilities. Establishing quality assurance committees is a standard method and is absolutely necessary and assures ongoing review and adjustments in best practice can be implemented on a timely and consistent basis.

Mahalo for allowing me to submit testimony on behalf of this bill.

Submitted on: 3/6/2018 11:21:39 PM

Testimony for HHS on 3/8/2018 9:30:00 AM

| Submitted By | Organization | Testifier Position | Present at Hearing |
|--------------|-----------------|-----------------------|-----------------------|
| Mike | Community First | Support | Yes |

Comments:

Community First **STRONGLY SUPPORTS** SB 2487. Quality Assurance (QA) Committees provide hospitals, health plans, long term care facilities, and other healthcare organizations with a mechanism to evaluate, monitor and improve quality of care; reduce patient risk and error; and assess the overall effectiveness of care provided to patients. **QA committees are well established and essential to our healthcare delivery system.**

QA committees can already be established in a licensed hospital, clinic, longterm care facility, skilled nursing facility, assisted living facility, home care agency, hospice, health maintenance organization, preferred provider organization, preferred provider network providing medical, dental, or optometric care, or an authorized state agency. HRS § 624-25.5.

SB2487 merely provides liability protection for QA discussions for key healthcare organizations currently not covered in HRS § 624-25.5. In doing so, QA and peer review activities to evaluate and improve health care can be conducted in a wider array of health care facilities and providers.

Over the past three years, Community First has sought feedback and guidance from businesses, community organizations, health plans, healthcare providers, hospitals, social service organizations, consumers and other key stakeholders on ways to evaluate and improve our QA and peer review process. We strongly believe that SB 2487 will enable more organizations and stakeholders to better evaluate and improve our health delivery system.

Please support SB 2487. Thank you for the opportunity to testify.

Submitted on: 3/7/2018 8:45:01 AM

Testimony for HHS on 3/8/2018 9:30:00 AM

| Submitted By | Organization | Testifier Position | Present at Hearing |
|---------------|---|-----------------------|-----------------------|
| Melodie Aduja | OCC Legislative Priorities Committee, Democratic Party of Hawai'i | Support | No |

Comments:

PRESENTATION OF THE
OAHU COUNTY COMMITTEE ON LEGISLATIVE PRIORITIES
DEMOCRATIC PARTY OF HAWAII
TO THE COMMITTEE ON HEALTH & HUMAN SERVICES
THE HOUSE OF REPRESENTATIVES
TWENTY-NINTH LEGISLATURE
REGULAR SESSION OF 2018
Thursday, March 8, 2018
9:30 a.m.

Hawaii State Capitol, Conference Room 312
RE: Testimony in Support of **SB2487** RELATING TO HEALTH
To the Honorable John M. Mizuno, Chair; the Honorable Bertrand Kobayashi, Vice-Chair and the Members of the Committee on Health and Human Services:

Good morning, my name is Melodie Aduja. I serve as Chair of the Oahu County Committee ("OCC") Legislative Priorities Committee of the Democratic Party of Hawaii. Thank you for the opportunity to provide written testimony on **SB2487** relating to Health; Quality Assurance Committees; and its definition.

The OCC Legislative Priorities Committee is in favor of **SB2487** and supports its passage.

SB2487 is in alignment with the Platform of the Democratic Party of Hawai'i ("DPH"), 2016, as it amends the definition of "quality assurance committee" to include committees established by long-term care facilities, skilled nursing facilities, assisted living facilities, home care agencies, hospices, and authorized state agencies and allows for the creation of a quality assurance committee outside of a single health plan or hospital.

Specifically, the Platform of the Democratic Party of Hawai'i provides that "[a]ccess to health care is a basic human need. Our citizens and visitors have an inherent right to high quality, high standard health care. The state legislature and the federal government should take all appropriate steps to create and support a health care system of public, for-profit, and nonprofit hospitals and other medical facilities that follow best practices to enhance and protect and preserve life.

We support the development of long-term care financing solutions, better pay and working conditions for all health care providers, parity of mental and physical health coverage, and appropriate regulation of health care delivery systems. We also support the development of empirically validated prevention programs targeted at major public health issues." (Platform of the DPH, P. 7, Lines 361-369 (2016)).

Given that **SB2487** amends the definition of "quality assurance committee" to include committees established by long-term care facilities, skilled nursing facilities, assisted living facilities, home care agencies, hospices, and authorized state agencies and allows for the creation of a quality assurance committee outside of a single health plan or hospital, it is the position of the OCC Legislative Priorities Committee to support this measure.

Thank you very much for your kind consideration.

Sincerely yours,

/s/ Melodie Aduja

Melodie Aduja, Chair, OCC Legislative Priorities Committee

Email: legislativepriorities@gmail.com, Tel.: (808) 258-8889

<u>SB-2487</u> Submitted on: 3/7/2018 7:52:14 AM

Testimony for HHS on 3/8/2018 9:30:00 AM

| Submitted By | Organization | Testifier Position | Present at Hearing |
|--------------|---------------------|-----------------------|-----------------------|
| Elena Cabatu | Hilo Medical Center | Support | No |

Comments:

Hilo Medical Center supports SB2487.

Submitted on: 3/7/2018 8:53:45 AM

Testimony for HHS on 3/8/2018 9:30:00 AM

| Submitted By | Organization | Testifier Position | Present at Hearing |
|-----------------|--------------|-----------------------|-----------------------|
| Charlene Iboshi | Individual | Support | No |

Comments:

Support Testimony for SB 2487, Relating To Health

Committee on Health and Human Services Hearing: Thursday, March 8, 2018, 9:30 AM; Conference Rm 312

Chair John Mizuno, Vice Chair Bertrand Kobayashi and Committee Members:

My name is Charlene Iboshi. After retiring as Hawaii County's Prosecuting Attorney, I actively participate on several non-profit and service organizations' Boards. We focus on improving the economic, social and health environment for Hawaii Island and the state. Community First is a non-profit whose mission is to allow the community to find solutions to improve health, while lowering healthcare costs.

I support SB 2487, which harmonizes the current definitions that provide for interdisciplinary quality assurance committees. These quality assurance committees' objectives include achieving quality outcomes for those served by the health care and service organizations. Additionally, the communications are protected to safeguard patients' interests.

Interdisciplinary models have proven effective in other models adopted by the state. When dealing with complex medical-social issues, communication is the key component to successful, long-term outcomes.

Please support the passage of SB 2487. Thank you for considering my testimony.

Charlene Iboshi

<u>SB-2487</u>

Submitted on: 3/7/2018 9:31:49 AM

Testimony for HHS on 3/8/2018 9:30:00 AM

| Submitted By | Organization | Testifier Position | Present at Hearing |
|-----------------|---|-----------------------|-----------------------|
| Susan Mochizuki | East Hawaii Independent Physicians Asociation | Support | No |

Comments:

I am the administrator of the East Hawaii Independent Physicians Association representing 84 independent healthcare providers on Hawaii Island. We have reviewed the bill and believe that passage would contribute to improved healthcare quality and cost savings to our community. Please support this measure.

Susan Mochizuki, Administrator, East Hawaii IPA



TESTIMONY OF NAHELANI WEBSTER ON BEHALF OF TH ASSOCIATION FOR JUSTICE (HAJ) IN OPPOSITION TO S.B. NO. 2487

March 8, 2018 9:30 a.m. Room 312

To: Chairperson John M. Mizuno and Members of the Senate Committee on Health & Human Services:

My name is Nahelani Webster and I am presenting this testimony on behalf of the HAJ in opposition to S.B. No. 2487 as currently drafted.

The preamble to this bill states that the purpose is to make the definition of "quality assurance committee" consistent in our laws. However, this bill changes the focus of the exception as well as its scope by broadening the definition of "quality assurance committee."

This law grants quality assurance committees immunity from civil liability in certain instances because hospitals claimed they could not look into improvements for patient care for fear that lawyers would use that information against them. For example, if the hospital quality assurance committee reviewed a bad surgical outcome and concluded that surgeries should be done in a safer way, they feared that this finding could be used against the hospital in a malpractice lawsuit. Hospitals argued that patients would be harmed if the hospital could not seek improvements without this liability exception. However, this bill seeks to unreasonably broaden the scope of the information that will be protected.

At page 4, line 15-16, we oppose deleting "and seek improvements in the patient care delivery process" and oppose the additional language at page 4, line 16 through page 6, line 10. These amendments are a drastic change from the scope and purpose of the

law, which is to protect only information related to improving patient care and not to essentially grant malpractice immunity.

This bill unreasonably broadens limitations for access to all medical care information, which would then prevent injured patients and the public from determining the nature and extent of malfeasance committed by medical providers. The additional proposed language would also be inconsistent with H.R.S. §624-25.5, which already provides adequate protection for legitimate quality assurance activities. Therefore, the amendments would actually be contrary to the bill's stated purpose.

The stated purpose of the bill is to make the term "quality assurance committee" consistent. Unfortunately, the proposed bill does the opposite of this and also unreasonably broadens quality assurance committee content protection.

Because of these concerns and the need for maximizing the protection of those injured by medical errors, as well as our basic philosophy regarding the purpose of tort law and the preservation of consumer rights, HAJ strongly opposes this bill.

Thank you for the opportunity to testify and for listening to our concerns and comments.