DAVID Y. IGE GOVERNOR OF HAWAII



BRUCE S. ANDERSON, PHD DIRECTOR OF HEALTH

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

Testimony in SUPPORT of HB1447 RELATING TO PALLIATIVE CARE.

REP. JOHN M. MIZUNO, CHAIR HOUSE COMMITTEE ON HEALTH

Hearing Date: January 31, 2019

Room Number: 329

1 **Fiscal Implications:** General fund appropriation request of \$350,000.

2 **Department Testimony:** The Department of Health supports HB1447 provided that any

3 appropriations do not displace any Executive Budget requests. The purpose of this measure is to

4 adopt recommendations from the palliative care working group, including testing the hypotheses

5 of recent local research on culturally competent approaches to staff and patient engagement.

6 Palliative care is a recent medical specialty focused on comfort care and quality of life for

7 patients, including their family, suffering from serious health conditions. Palliative care may be

8 employed while the patient is continuing active treatment through different phases of their life

9 limiting condition. All hospice care is palliative in nature, but not all palliative care is hospice.

10 In 2018, the department convened a working group pursuant to SCR142 HD1 SLH 2018 which

11 tasked the community to recommend strategies to expand palliative care in Hawaii. In

12 partnership with the American Cancer Society Cancer Action Network and Kokua Mau, as well

13 as industry partners, the top recommendations were to:

14 1) Increase public and health care provider education;

15 2) Support with public funds demonstration projects in the State; and

16 3) Evaluate new and existing data sources to further establish community standards of care.

17 Mainland-based research reveals clear disparities such that "in every ethnic subgroup studied,

18 Asian Americans and Pacific Islanders were less likely than whites to enroll in hospice" (Ngo-

1	Metzger, et al. 2007). Local research from the University of Hawaii School of Nursing,
2	"Culturally Competent Palliative and Hospice Care Training for Ethnically Diverse Staff in
3	Long-Term Care Facilities," (Kataoka-Yahiro, et al. 2016) suggests that culturally competent
4	approaches to Asian Americans and Pacific Islanders improve patient and staff knowledge and
5	satisfaction with palliative and hospice care services.
6	This research may have real-world implications since non-enrollment or late enrollment in
7	palliative care, including but not limited to hospice, increases direct health care costs and the
8	emotional burden of patients and their families.
9	Offered Amendments: N/A.
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UNIVERSITY OF HAWAI'I SYSTEM

Legislative Testimony

Testimony Presented Before the House Committee on Health Thursday, January 31, 2019 at 9:30 a.m. By Jerris Hedges, MD, MS, MMM Professor and Dean Lee E. Buenconsejo-Lum, MD, FAAFP Designated Institutional Official and Graduate Medical Education Director John A. Burns School of Medicine And Michael Bruno, PhD Interim Vice Chancellor for Academic Affairs and Vice Chancellor for Research University of Hawai'i at Mānoa

HB 1447 - RELATING TO PALLIATIVE CARE

Chair Mizuno, Vice Chair Kobayashi, and members of the committee:

Thank you for the opportunity to provide testimony <u>in support</u> of HB 1447 which would establish a culturally competent palliative care pilot program that is aimed to ultimately increase the utilization of palliative care in Hawai'i for our citizens who suffer from life-threatening illness.

At the University of Hawai'i John A. Burns School of Medicine (JABSOM), we strive to teach and train high-quality physicians, biomedical scientists, and allied health workers for Hawai'i and the Pacific by providing an opportunity for a medical education previously unavailable to residents of Hawai'i and other Pacific nations. Core to our mission of training the next generation of doctors for Hawai'i is to do so with respect for diversity and for conducting training and delivering care with integrity and intent to eliminate health disparities faced by many of our Hawai'i residents throughout the State. These health disparities include timely receipt of palliative care services.

JABSOM was the fourth medical school in the country to establish a Department of Geriatric Medicine. Within the department is a Division of Palliative Medicine. JABSOM's curriculum for all medical students includes required training in geriatrics and palliative care, as well as delivering that care as part of an interprofessional team. Similarly, JABSOM residents and fellows in geriatric medicine, internal medicine, family medicine and pediatrics also receive extensive training in palliative care as this is critical to reduce the physical and emotional suffering faced by patients and families when a loved one is diagnosed with a life-threatening illness. The collective clinical experiences of JABSOM faculty and residents/fellows who promote and/or provide palliative care services are consistent with the numerous studies cited in HB 1447 – that palliative care services are woefully underutilized, that there is confusion between palliative care and

hospice and that, when patients are finally enrolled, they are only able to benefit from services for less than 2 months.

We fully support this bill and are happy to participate by designating a representative to participate in administration of the program with the Department of Health and others, as well as to continue to support public and healthcare professional education about end-of-life conversations and options, palliative care and hospice, and this pilot program. Many of our JABSOM faculty have developed culturally competent curricula in end-of-life care and are happy to continue collaborating with others to strengthen the curricula and their long-term impact for patients and families.

Mahalo for the opportunity to testify on this matter.



ONLINE SUBMITTAL Submitted on January 29, 2019

HEARING DATE: January 31, 2019

TO: House Committee on Health Rep. John Mizuno, Chair Rep. Bertrand Kobayashi, Vice-Chair

FROM: Eva Andrade, President

RE: <u>Strong Support for HB 1447 Relating to Palliative Care</u>

Hawaii Family Forum is a non-profit, pro-family education organization committed to preserving and strengthening life, family and religious freedom in Hawaii. We support this bill that supports activities to increase the utilization of palliative care in Hawaii by requiring the Department of Health to establish a culturally competent palliative care pilot program to promote public education and the development of practices specific to the State's unique cultural norm.

When someone we love faces the fear of a terminal diagnosis—and all the emotions and decisions that come with it—more than ever, they need to know that we believe their life is worth fighting for.

The National Hospice and Palliative Care Organization describes palliative care as "patient and family-centered care that optimizes quality of life by anticipating, preventing, and treating suffering. Palliative care throughout the continuum of illness involves addressing physical, intellectual, emotional, social, and spiritual needs to facilitate patient autonomy, access to information and choices." Palliative care focuses on treating the **person**, as well as the disease, and helps provide support and inclusion for family members.

Palliative care improves quality of life and survival and creates care efficiencies that curb costs. Although we believe that Hawai'i leads the way in many aspects because of the hard work of groups like Queens Medical Center, Hospice Hawai'i, St. Francis Hospice, Kokua Mau, and others, there are often barriers to getting patients with serious illness access to palliative care. These include:

- Lack of knowledge and understanding about palliative care;
- Variability in access based on geographic location, physician training, and services offered;
- Inadequate workforce to meet the needs of patients and families especially in some of our local cultural groups;
- Insufficient research to guide and measure quality of care.

We strongly support activities that increase public education. The effort will ensure that comprehensive and accurate information about palliative care is available to the wider public, and that benefits the entire community. By passing this bill, Hawai'i legislators will be taking a significant step towards helping our sickest patients get access to the best care for them and their families.

Let's work together to make sure those with the most serious illnesses in our community know we're not giving up on them. Mahalo for the opportunity to testify.



To:	The Honorable John M. Mizuno, Chair
	The Honorable Bertrand Kobayashi, Vice Chair
	Members, Committee Health
	apula yr
From:	Paula Yoshioka, Vice President, Government Relations and External Affairs, The
	Queen's Health Systems
Date:	January 29, 2019
Hrg:	House Committee on Health Hearing; Thursday, January 31, 2019 at 9:30 AM in Room
	329

Re: Support for H.B. 1447, Relating to Palliative Care

The Queen's Health Systems (Queen's) is a not-for-profit corporation that provides expanded health care capabilities to the people of Hawai'i and the Pacific Basin. Since the founding of the first Queen's hospital in 1859 by Queen Emma and King Kamehameha IV, it has been our mission to provide quality health care services in perpetuity for Native Hawaiians and all of the people of Hawai'i. Over the years, the organization has grown to four hospitals, 66 health care centers and labs, and more than 1,600 physicians statewide. As the preeminent health care system in Hawai'i, Queen's strives to provide superior patient care that is constantly advancing through education and research.

Queen's appreciates the opportunity to testify in support of H.B. 1447, Relating to Palliative Care, which establishes a culturally competent palliative care pilot program. Palliative care is a proven approach that improves the quality of life of our patients and their families facing challenges associated with life-threatening illness. Through prevention and relief of suffering, palliative care address and manages the physical symptoms, as well as the emotional and spiritual hardship our patients face due to their serious, chronic, and/or terminal conditions.

Thank you for your time and attention to this important issue.

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.

Written Testimony Presented Before the House Committee on Health Hearing: January 31, 2019, 9:30 AM

By Members of



HB 1447 RELATING TO PALLIATIVE CARE

Chair John M. Mizuno, Vice Chair Bertrand Kobayashi, and members of the House Committee on Health, thank you for this opportunity to provide testimony <u>in strong support</u> for HB 1447, Relating to Palliative Care, <u>with a suggested addition</u>.

We are members of the American Nurses Association in Hawaii, who are registered professional nurses practicing in this state.

This bill endeavors in part to establish two pilot programs to be established for home and community based palliative care that is responsive to our unique cultural considerations in Hawaii. This measure is in keeping with our mission as a group of professional healthcare providers to advocate for vulnerable populations in our community. As nurses practicing in Hawaii, we are well aware of the effectiveness of support and management services to maintain and improve quality of life for the seriously ill and their families. The argument laid out in this Bill is well supported with research and data from the current literature, providing evidence that early engagement of the patient and family with a palliative care team is effective. Palliative care training of ethnically diverse, culturally competent staff has also been shown to improve satisfaction with palliative care services such as discussions about patient and family goals of care, advance care planning, pain relief, and relationship negotiations.

To this end, and since most care provided in palliative care home and community settings is managed by professional nurses, we would suggest that the addition of a registered nurse (RN) or advanced practice RN with experience in providing such care in the particular county be included in the proposed advisory group. We believe this inclusion would benefit the process significantly by bringing face-to-face perspective to the table.

We respectfully request that HB1447 pass out of this committee. Thank you for your continued support for measures that address the needs of the seriously ill in our community, with an eye not only on reducing costs for preventable complications but improving the quality of life for these patients and their families.

Contact information: Dr. Linda Beechinor, APRN-Rx, FNP-BC 500 Lunalilo Home Road, #27-E Honolulu Hawaii USA 96825

phone (808) 779-3001 e-mail: <u>L.Beechinor@hawaiiantel.net</u>

RE: HB1447, RELATING TO PALLIATIVE CARE

Dear Chair Mizuno, Vice-Chair Kobayashi and Other Members of this Committee,

My name is Uri Martos, and I am writing to express my support for HB1447, which would create a pilot program that would increase the utilization of palliative care through public education and the development of practices specific to the cultural norms of Hawaii's patients and families.

As a recent breast cancer survivor, I can tell you firsthand how important palliative care is. HB1447 will make palliative care more available to people like me who need this special care to help them through their health conditions.

Palliative care was essential to my success in completing treatment with a more positive state of mind. The special care that I received made such a difference and I want all cancer & those suffering chronic illnesses to also have this special care.

Please support HB1447 and help others in our community receive this same care. The pilot program formed under HB1447 would aim toward allowing palliative care to be accessible for all Hawaii residents by promoting cultural competency among our health professionals. A consistent finding of various studies on palliative care show that culturally competent palliative and hospice training is a promising practice to increase patient, family, and provider engagement with end-of-life conversations.

I urge you to support HB1447. Thank you for the consideration of my testimony.

Mahalo, Uri Martos

RE: HB1447, RELATING TO PALLIATIVE CARE

Dear Chair Mizuno, Vice-Chair Kobayashi and Other Members of this Committee,

My name is Gary Tanimitsu, and I am writing to express my support for HB1447. I believe this bill and the pilot program it supports is one big step in allowing the general public and those touched by a chronic or terminal disease to learn more about palliative care, regardless of their socio-economic status or ethnicity.

I am reminded of my uncle, my father's oldest brother, who successfully lived with cancer in the 1980's and 1990's. When he got older he eventually needed to be hospitalized and languished in Queen's Medical Center, suffering painfully every day. When my father and I went to visit him, he spoke to my father and said "Shinitai", which is Japanese for "I want to die."

As soon as a bed opened up at a Skilled Nursing Facility, he was transferred and remained there until he finally and mercifully passed away.

HB1447 is a step in the right direction in ensuring that any patient, regardless of their ethnicity, knows that palliative care is an option that they can pursue in the course of their treatment. In my uncle's case, a conversation about palliative care could have been made with cultural competency taking into account his Japanese American ancestry.

There is also a personal stake in this for me. I'm a Boomer, a member of the largest demographic group in the United States. I'm no longer the bullet proof, invincible young man who thought he would outrun pain and suffering to live forever. I'm older now and facing my mortality with a sober realization that I, too, could have an experience similar to that of my uncle.

HB1447 is a step in the right direction for many reasons. We all deserve to have our need for balanced, compassionate care addressed, but for too many individuals, palliative care is a foreign concept that they may be unfamiliar with. With this bill, we can move forward in promoting education around palliative care in our communities.

Sincerely, Gary Tanimitsu House Committee on Health

Rep. John M. Mizuno, Chair

RE: HB1447, RELATING TO PALLIATIVE CARE

Dear Chair Mizuno and Members of the Committee,

My name is Natalie Nimmer, and I strongly support HB1447, which would establish a culturally competent palliative care pilot program to promote palliative care, gather health care utilization data, and conduct bidding for at least two pilot programs for home or community based palliative care. All cancer patients—regardless of financial status, age, or any other factor—should have access to palliative care; this pilot project could lead greater awareness and access.

When we rang in the new year in 2015, I was a 36-year-old vegan marathon runner. Then in March, I was diagnosed with Stage 3 breast cancer. In addition to pointing out the shock of the news, just about everyone around me said that I needed to get used to a "new normal."

I endured 7 different chemo drugs over two separate multi-month periods of treatment, as well as 1 minor and 2 major surgeries, and 33 rounds of radiation. In the midst of this, I suffered from debilitating nausea, extreme fatigue, and neutropenic fever (a condition sparked by a compromised immune system in when everything goes wrong—rash from head to toe, high fever, and a range of other maladies). There were many days during the year and a half of treatment when I could not stay awake for more than 2 hours a day and could not walk without assistance to the bathroom.

But I was self-employed and a doctoral candidate at UH-Mānoa, so I did not have the option to drop out of life for 18 months. My nurse practitioner Christa Braun-Ingles and oncologist Keola Beale, performed magic through the use of palliative care treatments. I was able to continue working and attend classes on my good days—even if it meant bringing a pillow and blanket to camp out on the floor when I didn't have the energy to sit up. In fact, I completed the Hibiscus Half-Marathon between my 3rd and 4th rounds of chemo and presented my graduate research at a conference in the Marshall Islands 2 weeks after my 6th round of chemo. I was bald and weak, but I was still *living* life. Without palliative care treatments, none of this would have been possible. It was a "new normal", but could still easily be classified as "normal."

HB1447 would raise awareness about palliative care and increase access to these options. Palliative care is about dignity, but it is also about ensuring that anyone with serious, chronic, or terminal conditions can still *live* while they are on this earth. Please support this "new normal" for Hawai'i, by supporting HB1447.

Thank you for considering my testimony.

Mahalo, Natalie Nimmer

RE: HB1447, RELATING TO PALLIATIVE CARE

Dear Chair Mizuno, Vice-Chair Kobayashi and Other Members of this Committee,

My name is Misty Figuera, and I am writing to express my support for HB1447, which would create a pilot program that would increase the utilization of palliative care through public education and the development of practices specific to the cultural norms of Hawaii's patients and families.

As a young twenty one year old student who has a chronic disease and has been caregiver for the father figure in my life who has cancer, I see the benefits of Palliative care clearly.

Life doesn't stop when cancer and chronic illness comes knocking on the door. Bills still need to be paid, children still have volleyball games that need to be attended, and term papers still need to be written by a due date. Life is stressful in the first place – being sick only makes it worse. For those of us with busy schedules struggling to make it financially, being sick is just not the icing of the top of stress made cake; Suddenly, your schedule becomes filled by trying to find the write doctors, paying to see the wrong ones, and being exhausted physically and mentally. This is why palliative care is so important.

Palliative care is about improving life for cancer patients and those who live with chronic illnesses. When you are given the news that you are very sick, your life Kobayashies. Life becomes harder – for you AND especially your loved ones – after all, they are the ones who watch over you and take care of you. It becomes easy to give up to want to die, because that would be easier.

Palliative care is not only needed and extremely beneficial, but it is NECESSARY. It makes life easier, better, and makes it enjoyable again. What makes Hawaii a great state is the aloha we share – through our daily interactions, through giving our time, and through palliative care. The pilot program formed under HB1447 would be the first step in allowing palliative care to be accessible for all Hawaii residents by promoting cultural competency among our health professionals. A consistent finding of various studies on palliative care show that culturally competent palliative and hospice training is a promising practice to increase patient, family, and provider engagement with quality of life conversations.

I urge you to support HB1447. Thank you for the consideration of my testimony.

Mahalo, Misty Figuera

RE: HB1447, RELATING TO PALLIATIVE CARE

Dear Chair Mizuno, Vice-Chair Kobayashi and Other Members of this Committee,

My name is Jenny Hausler, and I am writing to express my support for HB1447, which would create a pilot program that would increase the utilization of palliative care through public education and the development of practices specific to the cultural norms of Hawaii's patients and families.

My sister Lucy was diagnosed with Stage 4 breast cancer at 58 and passed away at age 63. During the course of her disease she suffered much pain and stress and at the end of her life, especially fear. Had coordinated palliative care been available at the time, her cancer journey and passing would have been eased so much.

Her one wish would be that no one would ever have to go through the pain and suffering she did. This is one of the main reasons I support HB1447.

The pilot program formed under HB1447 would be the first step in allowing palliative care to be accessible for all Hawaii residents by promoting cultural competency among our health professionals. A consistent finding of various studies on palliative care show that culturally competent palliative and hospice training is a promising practice to increase patient, family, and provider engagement with quality of life conversations.

I urge you to support HB1447. Thank you for the consideration of my testimony.

Mahalo, Jenny Hausler

RE: HB1447, RELATING TO PALLIATIVE CARE

Dear Chair Mizuno, Vice-Chair Kobayashi and Other Members of this Committee,

My name is Molly Pierce, and I serve as a volunteer for the American Cancer Society, Cancer Action Network. I would like to submit my testimony in support of HB1447, which would create a pilot program that would increase the utilization of palliative care through public education and the development of practices specific to the cultural norms of Hawaii's patients and families.

Palliative care involves treating the whole patient, not just their disease. Ensuring that someone's mental health is as closely monitored as their physical health or treating pain conditions that arise from the treatment of chronic illness can make all the difference in quality of life. It is not solely reserved for those who are at the end of their lives. Palliative care can improve health outcomes for all patients fighting life threatening or chronic illnesses.

Having seen many family members go through cancer treatments, I can attest that those who were fortunate enough to have doctors who fought for them to receive palliative care were far better prepared to fight their cancer battle. Treating the cancer alone didn't treat the pain, the shortness of breath, or the fragility of mental health that come along with facing a life threatening illness. Access to holistic palliative care helped give my mother the strength and piece of mind I truly believe allowed her to survive. Treating her lack of appetite, helping her regain physical strength, and caring for her mental state instead of just focusing on killing her cancer helped give her the motivation to fight.

Please pass HB1447, which would aim toward allowing palliative care to be accessible for all Hawaii residents by promoting cultural competency among our health professionals. Give Hawaii the chance to improve quality of life for our loved ones fighting life threatening or chronic illnesses.

Mahalo, Molly Pierce

RE: HB1447, RELATING TO PALLIATIVE CARE

Dear Chair Mizuno, Vice-Chair Kobayashi and Other Members of this Committee,

My name is Gay Okada, and I am writing to express my support for HB1447, which would create a pilot program that would increase the utilization of palliative care through public education and the development of practices specific to the cultural norms of Hawaii's patients and families.

Living in Kona, on the island of Hawaii, health care and palliative care is at the none existence level in some areas.

To form a palliative care work group would help my friends with rheumatoid arthritis and bone cancer. One friend with rheumatoid arthritis (severe) had moved to Kentucky to live with her brother and passed away already. We desperately need your help with this situation.

I urge you to support HB1447. Thank you for the consideration of my testimony.

Mahalo, Gay Okada

RE: HB1447, RELATING TO PALLIATIVE CARE

Dear Chair Mizuno, Vice-Chair Kobayashi and Other Members of this Committee,

My name is Alberto Rodriguez, and I am writing to express my support for HB1447, which would create a pilot program that would increase the utilization of palliative care through public education and the development of practices specific to the cultural norms of Hawaii's patients and families.

I have witnessed a loved one's fight against cancer and I want to make sure that others that go through this fight are able to access the holistic care provided by palliative care.

My aunty passed away from cancer and lacked access to palliative care services that would have allowed for a higher level of care for both herself and our family. I now want to make sure that we do everything we can to promote awareness about palliative care services in our state.

In 2014, my aunt was diagnosed with kidney cancer. At the time, she wasn't sure where to turn to and who we could talk to about the services and care as her disease progressed. We often were forced to travel two hours to see a doctor. The appointment was on a first-come/first-served basis. Long lines outside the doctor's office starting at 4 o'clock in the morning, waiting for the secretary to open the door at 8 o'clock and waiting for the doctor to arrive at 12 o'clock or later.

My aunt's health deteriorated quickly and we were a prisoner of the process and health access. She passed away in less than 6 months after diagnosis.

The pilot program formed under HB1447 would be the first step in allowing palliative care to be accessible for all Hawaii residents by promoting cultural competency among our health professionals. A consistent finding of various studies on palliative care show that culturally competent palliative and hospice training is a promising practice to increase patient, family, and provider engagement with quality of life conversations.

I urge you to support HB1447. Thank you for the consideration of my testimony.

Mahalo, Alberto Rodriguez Senate Committee on Commerce, Consumer Protection and Health Rep. John M. Mizuno, Chair Rep. Bertrand Kobayashi, Vice Chair

RE: HB1447, RELATING TO PALLIATIVE CARE

Dear Chair Mizuno, Vice-Chair Kobayashi and Other Members of this Committee,

My name is Kyle Loui, and I am writing to express my support for HB1447, which would create a pilot program that would increase the utilization of palliative care through public education and the development of practices specific to the cultural norms of Hawaii's patients and families.

My family has been personally been affected by cancer and I wish that we could do more palliative care. My mother has been personally been affected by breast cancer. I personally witnessed her go through chemotherapy, and felt her pain as she struggled to go about doing day to day tasks.

All the Doctors were allowed to do was give her pain relief drugs and advice on what to do. Which was insufficient to help her get through the tough process of chemotherapy. I feel she could have benefited from palliative care when going through Chemotherapy. Besides looking up what other people are helping people through those time. She went through a near-death situation, was going through continuous pain, and was extremely depressed.

The pilot program formed under HB1447 would be the first step in allowing palliative care to be accessible for all Hawaii residents by promoting cultural competency among our health professionals. A consistent finding of various studies on palliative care show that culturally competent palliative and hospice training is a promising practice to increase patient, family, and provider engagement with quality of life conversations.

I want this bill to achieve a more personal and effective type of care. It would help to focus palliative care coverage on chronic diseases, hopefully, we can incorporate new stakeholders on this important issue.

Mahalo, Kyle Loui



January 28, 2019

Testimony in Support of HB1447

Dear Representative Mizuno, and other members of the committee,

With this testimony for HB1447, I would like to express my strong support for this bill to strengthen and expand Palliative Care in Hawaii. This bill from recommendations from the Palliative Care Task Force, created last year by resolution, and provides next steps in increasing palliative care awareness and usage in Hawaii.

I currently serve as Executive Director of Kōkua Mau, which is the Hospice and Palliative Care Organization for Hawaii. As a network of organizations and individuals around the state, we are committed to increasing palliative care as it is seen as best practice for caring well for people with serious illness, including those as the end of life. This support includes hospice care, which is a type of palliative care for those at the very end of life. Kōkua Mau is committed to creating a continuum of care for those with serious illness, including their loved ones and those who care for them, and is very encouraged by the increase interest in the opportunities that palliative care offers.

We support the main points of the bill, which include:

- 1. Education for the public and professionals
- 2. Pilot studies to show the efficacy of palliative care
- 3. Establish data points to best determine standards of care and determine unmet need

I am sorry I am not able to appear in person today. Please let me know if you have any further questions.

Best wishes,

H. J. K"

✓ Jeannette G. Koijane, MPH Executive Director Kōkua Mau jkoijane@kokuamau.org



American Cancer Society Cancer Action Network 2370 Nu`uanu Avenue Honolulu, Hawai`i 96817 808.432.9149 www.acscan.org

House Committee on Health Representative John Mizuno, Chair Representative Bert Kobayashi, Vice Chair

HB 1447 – RELATING TO PALLIATIVE CARE

Cory Chun, Government Relations Director – Hawaii Pacific American Cancer Society Cancer Action Network

Thank you for the opportunity to provide testimony in support of HB 1447, which appropriates funds for palliative care education and establish a culturally competent palliative care pilot program.

Palliative care is specialized medical care for people with serious illness. This type of care is focused on providing patients with relief from the symptoms, pain and stress of a serious illness - from point of diagnosis onward. The goal is to improve quality of life for both the patient and the family.

HB 1447 is based on research of cultural competency in palliative care conducted by the University of Hawaii in 2016. As a first step to increasing palliative care in Hawaii, people facing chronic diseases and life-threatening conditions need to know what palliative care is and how it can increase their quality of life as they go through recovery or face an end-of-life situation.

In 2018, the Legislature adopted SCR 142, HD1, which created the palliative care working group in partnership with the Department of Health, Kokua Mau, and the American Cancer Society Cancer Action Network. HB 1447 is a continuation of the working group and will allow for further discussions by increasing public awareness, gathering more information, and creating a pilot program to focus on cultural competency. We are committed to continue working with the palliative care community on this important issue for cancer patients and others facing serious illnesses.

Thank you for the opportunity to provide testimony on this important matter.



Formerly HOSPICE of HILO

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RE: TESTIMONY IN SUPPORT OF HB1447 RELATING TO PALLIATIVE CARE Hearing: January 31, 2019 at 9:30 a.m.

Dear Chair Mizuno and Members of the Committee,

Thank you for the opportunity to provide testimony in <u>support of HB 1447</u> that establishes the culturally competent palliative care pilot program to promote palliative care. I am grateful for Representative Belatti's introduction of this bill, along with each supporter – recognizing the importance of palliative care as a vital healthcare issue, and the need for expansion of palliative care services statewide.

Studies have shown that, across a range of serious illnesses (cancer, dementia, endstage renal disease, cardiopulmonary failure), palliative care services improve patients' symptoms and the quality of end of life care, allow patients to avoid hospitalization and to remain safely and adequately cared for at home, lead to better patient and family satisfaction, and significantly reduce prolonged grief and posttraumatic stress disorder among bereaved family members.

With 35 years serving the palliative, hospice, and bereavement needs of East Hawai'i, we can attest to the power of palliative care through the example of our community-based palliative care program started in 2016. As the Nation and the state of Hawai'i look at population health, healthcare reform and physician payment reform for high-cost high need individuals – we at Hawai'i Care Choices can confirm that the models and cost-savings found in palliative care are the solutions for the future.

HB 1447 goals are an essential step to providing more comprehensive care for the communities we serve, and we are in complete support of this initiative.

Again, mahalo for the opportunity to express my support for **HB 1447** relating to Palliative Care.

Respectfully submitted,

rendo S.H

Brenda S. Ho, MS, RN Chief Executive Officer

Palliative (2) | Hospice (2) | Bereavement (2)

<u>HB-1447</u>

Submitted on: 1/29/2019 3:34:30 PM Testimony for HLT on 1/31/2019 9:30:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Douglass Adams	Individual	Support	No

Comments:

Honorable Chair Mizuno and Members of the Committee on Health,

I write in support of HB1447. This bill will help the health care industry and patients recognize the importance of palliative care as a vital element in the continuum of care.

respectfully

Doug Adams

Hilo, Hawaii

<u>HB-1447</u> Submitted on: 1/29/2019 9:13:20 AM Testimony for HLT on 1/31/2019 9:30:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Daniel Fischberg, MD, PhD	Individual	Support	No

Date: January 29, 2019

To:	The Honorable John Mizuno, Chair
	The Honorable Bertrand Kobayashi, Vice Chair
	Members of the House Committee on Health

Re: Strong Support of HB1447, Relating to Health

Hrg: Thursday, January 31, 2019 at 9:30am at Capitol Room 329

Good morning to the members of the House committee on Health. Thank you so much for the opportunity to submit testimony in SUPPORT of HB1447 relating to Palliative Care which establishes a pilot program to promote public education and establish palliative care projects.

Palliative care is a very important field yet poorly understood. While it includes, it is not limited to end of life care, it is not limited to hospice. To simply put it- it is about comfort and living well at any stage. Palliative care improves patient outcome and their satisfaction in the quality of the care that they receive.

I support this measure because I have family members that have gone through chronic illnesses such as cancer and Alzheimer's. It is critical that we recognize that palliative care goes beyond just providing curative treatment - it allows those that face chronic diseases to know that they can be provided holistic support as they go through a difficult time in their life.

Studies have demonstrated that palliative care programs that aggressively treat pain and improve care coordination result in shorter hospital stays and lower costs, particularly for the sickest patients. According to the Center to Advance Palliative Care (CAPC), if palliative care were fully penetrated into the nation's hospitals, total savings could amount to \$6 billion per year.

This bill would be the first big step in ensuring that we can have a pilot program focused on palliative care operating in a rural community. The hope is that with this program, we educate communities about the advantages of palliative care and also ensure that our diverse communities in Hawaii are able to access palliative care services despite cultural differences.

With palliative care, it becomes a little less "diseased focus", and a little more focused on life itself. I urge this committee to support an improved quality of life for patients by supporting this measure.

Mahalo, Chelsea Gonzales



O`ahu County Committee on Legislative Priorities (OCCLP)

COMMITTEE ON HEALTH Rep. John M. Mizuno, Chair Rep. Bertrand Kobayashi, Vice Chair

DATE: Thursday, January 31, 2019 TIME: 9:30 a.m. PLACE: Conference Room 329, State Capitol

RE: HB 1447 Relating to Palliative Care

Aloha mai kakou Chair Mizuno, Vice Chair Kobayashi, and Members of the Committee on Health:

The O'ahu County Committee on Legislative Priorities (OCCLP) of the Democratic Party of Hawai'i (DPH) hereby submits its testimony in **SUPPORT of HB 1447 relating to the Palliative Care.**

HB 1447 Requires the Department of Health to establish a culturally competent Palliative Care pilot program to promote public education on palliative care and establish home- or community based palliative care projects.

Hawai`i faces a long-term care crisis that prevents too many seniors and people with disabilities from being able to live with dignity at home or in their communities. The vast majority of people who are aging or living with a disability want to do so at home, but face challenges finding and affording the support they need to do so. Programs that emphasize independence rather than institutionalization must be better structured to support them. DPH will take steps to strengthen and expand the home care workforce, give seniors and people with disabilities access to quality, affordable long-term care, services, and supports, and ensure that all of these resources are readily available at home or in the community. *Democratic Party of Hawai`l Platform (2018), p. 12, In. 44-50.*

DPH believes that we must accelerate the pace of medical progress, ensuring that we invest more in our scientists and give them the resources they need to invigorate our fundamental studies in the life sciences in a growing, stable and predictable way. We must make

progress against the full range of diseases, including diabetes, obesity, Alzheimer's, HIV and AIDS, cancer, and other diseases, especially chronic ones. *Democratic Party of Hawai*'i *Platform* (2018), p. 11, In. 52-23, p. 12, In. 1-2.

This measure provides for a pilot program on palliative care which would assist those who suffer from chronic pain but want to age-in-place at home rather than be institutionalized.

For the foregoing reasons, OCCLP supports HB 1447 and urges its passage out of the Committee on Health.

Mahalo nui loa Me ka `oia`i`o

<u>|s| Melodie Aduja</u>

Melodie Aduja Chair, O`ahu County Committee on Legislative Priorities of the Democratic Party of Hawai`i Ph. (808) 258-8889 Email: legislativepriorities@gmail.com

<u>HB-1447</u> Submitted on: 1/30/2019 1:40:14 PM Testimony for HLT on 1/31/2019 9:30:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Christine	Individual	Support	No

<u>HB-1447</u> Submitted on: 1/30/2019 1:59:07 PM Testimony for HLT on 1/31/2019 9:30:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
David Kurohara	Individual	Support	No

<u>HB-1447</u> Submitted on: 1/30/2019 2:46:52 PM Testimony for HLT on 1/31/2019 9:30:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Clarysse Kami Nunokawa	Individual	Support	No



Submitted By	Organization	Testifier Position	Present at Hearing
GARY SIMON	St. Francis Healthcare System	Support	Yes

Comments:

Dear Chair Mizuno, Vice Chair Kobayashi, and Honorable Members of the House Committee on Health:

I am Gary Simon, Director of Corporate Affairs and Advocacy for St. Francis Healthcare System.

I am testifying as an individual who has worked in healthcare for over thirty years, and I am offering testimony on behalf of St. Francis Healthcare System.

St. Francis Healthcare System wholeheartedly supports HB 1447.

Our St. Francis Palliative Care Program has demonstrated positive results in assisting patients with managing their pain and symptoms as well as assisting patients and their families with psychosocial and spiritual support. Furthermore, our Palliative Care Program has been effective in helping patients and their families with the burdensome details in their daily lives, including, but not limited to, coordinating transitions of care from hospitals and care facilities to their homes, navigating the healthcare system, advocating for patients and their families, educating caregivers, assisting with health insurance (including Medicaid), and securing transportation.

St. Francis Healthcare System is pleased that the Legislature is developing a policy and program to expand palliative care and to enhance access to palliative care for those facing serious illness and for their loved ones to reduce their unnecessary suffering and to find the support and care they need.

We urge you to support HB 1447 and to recommend its passage.

We thank you for seriously considering the Bill.

Very sincerely,

Gary Simon

Director of Corporate Affairs and Advocacy

St. Francis Healthcare System



KAPI'OLANI PALI MOMI



Thursday, January 31, 2019 at 9:30 AM Conference Room 329

House Committee on Health

- To: Representative John Mizuno, Chair Representative Bertrand Kobayashi, Vice Chair
- From: Michael Robinson Vice President, Government Relations & Community Affairs
- Re: **Testimony in Support of HB 1447 Relating to Palliative Care**

My name is Michael Robinson, Vice President, Government Relations & Community Affairs at Hawai'i Pacific Health. Hawai'i Pacific Health is a not-for-profit health care system comprised of its four medical centers – Kapi'olani, Pali Momi, Straub and Wilcox and over 70 locations statewide with a mission of creating a healthier Hawai'i.

I write in support of HB 1447 which establishes a culturally competent palliative care pilot program to promote palliative care, gather health care utilization data, and conduct bidding for at least two pilot programs for home or community based palliative care, one of which must be located in a county with less than two hundred thousand residents. Requires reports to the legislature. The bill also establishes an advisory group to oversee implementation of the pilot program

Hawai'i Pacific Health in collaboration with Kokua Mau and the hospice provider community provides access to palliative care to our patients. Our palliative care programs provide interdisciplinary services that seek to prevent or relieve the physical, psychological, social and spiritual distress produced by a life-threatening medical condition or its treatment, to help patients with such conditions and their families live as normally as possible, and to provide them with timely and accurate information and support in decision-making.

Unfortunately most patients only become knowledgeable about palliative care options when confronted with serious illness or serious life threatening conditions. Therefore, the opportunity to provide greater awareness of palliative care options across the general population through access to program services would be to the benefit to all patients across our State.

Thank you for the opportunity to testify.



<u>HB-1447</u> Submitted on: 1/31/2019 1:44:50 AM Testimony for HLT on 1/31/2019 9:30:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Alan Urasaki	Individual	Support	No