DAVID Y. IGE GOVERNOR OF HAWAII



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Testimony in SUPPORT of SB1145 RELATING TO THE DISCLOSURE OF VITAL STATISTICS RECORDS.

SENATOR JARRETT KEOHOKALOLE, CHAIR SENATE COMMITTEE ON HEALTH

Hearing Date: February 3, 2021 Room Number: N/A

Department Testimony: The Department of Health (DOH) strongly supports this measure, the
purpose of which is to give the Director of Health greater discretion to share confidential data for

3 legitimate government and research functions. This bill is budget neutral.

4 Vital records include but are not limited to data about births, deaths, and marriage/civil unions

5 and contain information such as race and ethnicity, cause of death, relative health at birth, and

6 other qualitative data that is found in very few other places. The department considers

7 appropriate sharing of vital records to be in the public interest, particularly to expedite law

8 enforcement or judicial proceedings but also research to help define unique issues in Hawaii.

9 The proposed process of review by the DOH Instituional Review Committee is consistent with

10 protocols and standards in academic and scientific human subject research, and assures that

11 requests serve an ethical public good, that individual privacy is maintained, and that records are

12 transmitted, stored, and disposed of appropriately. Examples of research requiring vital records

13 include investigations on workplace deaths, cancer tumor registry, and consumer product safety.

Current statute sets a high standard for access to vital records that should be maintained but it is clear that flexibility to disclose for situations not explicitly articulated in chapter 338, HRS, is required.

17 Thank you for the opportunity to testify.

18 **Offered Amendments:** N/A.

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UNIVERSITY OF HAWAI'I SYSTEM

Legislative Testimony

Testimony Presented Before the Senate Committee on Health Wednesday, February 3, 2021 at 1:05 p.m. By Randall F. Holcombe, MD, MBA Director, University of Cancer Center University of Hawai'i at Mānoa

SB 1145 - RELATING TO THE DISCLOSURE OF VITAL STATISTICS RECORDS

Chair Keohokalole, Vice Chair Baker, and members of the Committee:

The University of Hawai'i Cancer Center supports this bill and is recommending the following amendment.

Page 3, Line 7 (Item 13) to read:

A person or agency who needs vital statistics records for a public health purpose, <u>including entities or programs with a federal or state mandate</u>, and other entities as determined by the director of health;

The Hawai'i Tumor Registry (HTR) acts as the public health authority for cancer surveillance in the State of Hawai'i and this includes surveillance of <u>both</u> cancer incidence and mortality data. This public health authority is supported by current state and federal statutes:

1) CFR 164 501: The HTR acts as a public health authority of the DOH (per CFR 164 501) in order to fulfill the statutory requirement for cancer surveillance. Acting as a public health authority, the HTR is authorized by law to collect or receive information for the purposes of preventing or controlling disease, injury, vital events such as birth or death, and the conduct of public health surveillance, public health investigations, and public health interventions (per CFR 164 512). Under this authority, central cancer registries throughout U.S. jurisdictions receive death certificate information from their state health departments.

2) HRS 321-43 requires that the DOH "engage in the collection and analysis of statistical information on the morbidity and mortality of cancer in the State. The morbidity data may be collected in cooperation with the University of Hawai'i, Hawai'i Medical Association, and the Hawai'i Cancer Society. All data collected by a cooperating agency may be shared with the department of health. The mortality data as collected from death certificates shall be analyzed by the staff of the department in order to determine the significance of cancer in the State..."

The HTR performs this latter task as a public health authority of the DOH. The DOH cannot perform this function without the HTR's involvement. Additionally, the HTR, as a component of the federal Surveillance Epidemiology and End Results (SEER) program through the University of Hawai'i Cancer Center since 1973, leverages nearly \$1 million in federal funds annually to support this effort that would otherwise need to be borne by the DOH.

Thank you for the opportunity to provide testimony in support of this proposed legislation and to offer consideration for the amendment as outlined above.

OFFICE OF INFORMATION PRACTICES

State of Hawaii No. 1 Capitol District building 250 South Hotel Street, Suite 107 Honolulu, Hawaii 96813 Telephone: 808-586-1400 Fax: 808-586-1412 EMAIL: oip@hawaii.gov

To:	Senate Committee on Health
From:	Cheryl Kakazu Park, Director
Date:	February 3, 2021, 1:05 p.m. Via Videoconference
Re:	Testimony on S.B. No. 1145 Relating to Relating to the Disclosure of Vital Statistics Records

Thank you for the opportunity to submit testimony on this bill, which would amend statutes relating to disclosure of vital statistics records. The Office of Information Practices (OIP) offers comments.

Disclosure of vital statistics records is an area that in the past has been determined by the specific statutory authority being amended in this measure, with details being to some degree left to the Director of Health to determine. Thus, disclosure of vital statistics records has not been determined by the Uniform Information Practices Act standards applicable to government records in general. However, OIP notes that this proposal would delete current subsection 338-18(d), which provides for public access to index information taken from vital records. The justification for this bill states that deleted sections are being removed because they are no longer relevant, but the bill by itself does not show where public access to index information is provided for elsewhere such that it is no longer relevant to include in section 338-18. Thus, to avoid the appearance of diminishing public access to information, OIP recommends the Committee Report specifically explain Senate Committee on Health February 3, 2021 Page 2 of 2

why current subsection 338-18(d) is no longer relevant, and defers to the Department of Health for that explanation.

Thank you for the opportunity to testify.