DAVID Y. IGE GOVERNOR

EMPLOYEES' RETIREMENT SYSTEM HAWAI'I EMPLOYER-UNION HEALTH BENEFITS TRUST FUND

OFFICE OF THE PUBLIC DEFENDER



CRAIG K. HIRAI DIRECTOR

GLORIA CHANG DEPUTY DIRECTOR

STATE OF HAWAI'I DEPARTMENT OF BUDGET AND FINANCE P.O. BOX 150 HONOLULU, HAWAI'I 96810-0150

ADMINISTRATIVE AND RESEARCH OFFICE BUDGET, PROGRAM PLANNING AND MANAGEMENT DIVISION FINANCIAL ADMINISTRATION DIVISION OFFICE OF FEDERAL AWARDS MANAGEMENT (OFAM)

WRITTEN ONLY TESTIMONY BY CRAIG K. HIRAI DIRECTOR, DEPARTMENT OF BUDGET AND FINANCE TO THE SENATE COMMITTEE ON WAYS AND MEANS ON SENATE BILL NO. 3367, S.D. 1

February 22, 2022 10:00 a.m. Room 211 and Videoconference

RELATING TO HEALTH

The Department of Budget and Finance (B&F) offers comments on this bill.

Senate Bill No. 3367, S.D. 1, establishes an early lung cancer screening task

force within the Department of Health (DOH); allows the task force to contract with

consultants and exempts the task force from Chapter 103D, HRS; requires the task

force to submit interim and final reports to the Legislature; and appropriates \$250,000 in

general funds in FY 23 to DOH for the task force.

B&F notes that, with respect to the general fund appropriation in this bill, the federal Coronavirus Response and Relief Supplemental Appropriations Act requires that states receiving Elementary and Secondary School Emergency Relief (ESSER) II funds and Governor's Emergency Education Relief II funds must maintain state support for:

 Elementary and secondary education in FY 22 at least at the proportional level of the state's support for elementary and secondary education relative to the state's overall spending, averaged over FYs 17, 18 and 19; and Higher education in FY 22 at least at the proportional level of the state's support for higher education relative to the state's overall spending, averaged over FYs 17, 18 and 19.

Further, the federal American Rescue Plan (ARP) Act requires that states receiving ARP ESSER funds must maintain state support for:

- Elementary and secondary education in FY 22 and FY 23 at least at the proportional level of the state's support for elementary and secondary education relative to the state's overall spending, averaged over FYs 17, 18 and 19; and
- Higher education in FY 22 and FY 23 at least at the proportional level of the state's support for higher education relative to the state's overall spending, averaged over FYs 17, 18 and 19.

The U.S. Department of Education has issued rules governing how these maintenance of effort (MOE) requirements are to be administered. B&F will be working with the money committees of the Legislature to ensure that the State of Hawai'i complies with these ESSER MOE requirements.

Thank you for your consideration of our comments.

DAVID Y. IGE GOVERNOR



CATHY BETTS DIRECTOR

JOSEPH CAMPOS II DEPUTY DIRECTOR

STATE OF HAWAII DEPARTMENT OF HUMAN SERVICES

P. O. Box 339 Honolulu, Hawaii 96809-0339

February 17, 2022

TO: The Honorable Senator Donovan M. Dela Cruz, Chair Senate Committee on Ways & Means

FROM: Cathy Betts, Director

SUBJECT: SB 3367 SD1– RELATING TO HEALTH.

HEARING: February 18, 2022, 10:00 a.m. Via Videoconference, State Capitol

DEPARTMENT'S POSITION: The Department of Human Services (DHS) supports the measure's intent, defers to the Department of Health (DOH), and offers comments. DHS respectfully requests that any appropriation not reduce or replace budget priorities identified in the executive budget.

PURPOSE: The purpose of the bill is to create an early lung cancer screening task force to research what steps and resources are necessary to increase early lung cancer screening in Hawaii. Appropriates funds. (SD1) The SD1 amended the measure by (1) requiring that a representative from the Hawaii Primary Care Association be selected to sit on the Task Force; and (2) making technical, nonsubstantive amendments for the purposes of clarity and consistency.

The Department supports efforts to increase cancer screening and prevention efforts. Lung and bronchus cancer is the leading cause of cancer death in men and women in Hawaii. The United States Preventive Services Task Force has found that the early detection and treatment of lung cancer improves the 5-year survival rate for smokers and former smokers. A task force on early lung cancer screening can propose opportunities to improve the early screening. Currently, a representative from the DHS Med-QUEST Division participates in the Hawaii Comprehensive Cancer Coalition and would likely participate in this lung cancer screening task force.

Thank you for the opportunity to testify on this measure.

ELIZABETH A. CHAR, M.D. DIRECTOR OF HEALTH

DAVID Y. IGE GOVERNOR OF HAWAII



WRITTEN TESTIMONY ONLY

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

Testimony in SUPPORT of S.B. 3367, S.D. 1 RELATING TO HEALTH

SENATOR DONOVAN M. DELA CRUZ, CHAIR SENATE COMMITTEE ON WAYS AND MEANS

Hearing Date: February 22, 2022

Room Number: Videoconference

1 **Fiscal Implications:** The Department of Health (DOH) defers to the priorities of the Governor's

2 Executive Budget request. The bill appropriates out of the general revenues \$250,000 for fiscal

3 year 2022-2023.

4 **Department Testimony:** The DOH supports Senate Bill 3367, Senate Draft 1 (S.B. 3367,

5 S.D. 1). Lung and bronchus cancer is the leading cause of cancer death in men and women in

6 Hawaii. The United States Preventive Services Task Force recommends annual screening for

7 lung cancer with low-dose computed tomography (CT scan) in adults 50 to 80 years who have a

8 20 pack-year smoking history and currently smoke or have quit within the past 15 years. The

9 recommendation is based on research that the early detection and treatment of lung cancer

10 improves the 5-year survival rate for smokers and former smokers.

In Hawaii, 3% of high-risk people undergo annual CT scans that capture detailed pictures
of the lungs, compared to 6% nationally. In addition, only 19% of new lung cancer cases in
Hawaii are diagnosed at an early stage, which is significantly lower than the national rate of
24%.¹

15 The Department concurs with the recommendations of the measure to convene an early 16 lung cancer screening task force to research what steps and resources are necessary to increase

¹ American Lung Association, State of Lung Cancer, Hawaii. 2021 Accessible at: <u>https://www.lung.org/research/state-of-lung-cancer/states/hawaii</u>

- 1 lung cancer screening in Hawaii. The proposed task force includes many of the partners in the
- 2 Hawaii Comprehensive Cancer Coalition that supports the Hawaii Cancer Plan 2030 objective to
- 3 increasing lung cancer screenings.
- 4 Thank you for the opportunity to testify on this measure.

DAVID Y. IGE GOVERNOR



BONNIE KAHAKUI ACTING ADMINISTRATOR

STATE OF HAWAII STATE PROCUREMENT OFFICE

P.O. Box 119 Honolulu, Hawaii 96810-0119 Tel: (808) 586-0554 email: <u>state.procurement.office@hawaii.gov</u> <u>http://spo.hawaii.gov</u>

TESTIMONY OF BONNIE KAHAKUI, ACTING ADMINISTRATOR STATE PROCUREMENT OFFICE

TO THE SENATE COMMITTEE ON WAYS AND MEANS FEBRUARY 22, 2022, 10:00 AM

> SENATE BILL 3367, SD1 RELATING TO HEALTH

Chair Dela Cruz, Vice Chair Keith-Agaran, and members of the committee, thank you for the opportunity to submit testimony on Senate Bill 3367, SD1. The State Procurement Office (SPO) provides comments to the exemption language on page 6, SECTION 2, lines 12 to 18 set forth below.

"(g) The task force may contract with consultants to conduct studies as it deems necessary for the purpose of recommending an early lung cancer screening program and funding mechanism. **Any contract executed pursuant to this Act shall be exempt from chapter 103D**, Hawaii Revised Statutes; provided that the early lung cancer screening task force shall ensure transparency when executing the contract."

The SPO objects to the procurement exemption for contracting with consultants and recommends removing this exemption language.

Chapter 103D, Hawaii Revised Statutes (HRS), the Hawaii Public Procurement Code (Code), is the single source of public procurement policy to be applied equally and uniformly, while providing fairness, open competition, a level playing field, government disclosure and transparency in the procurement and contracting process vital to good government.

Public procurement's primary objective is to provide everyone equal opportunity to compete for government contracts, to prevent favoritism, collusion, or fraud in awarding of contracts. To legislate that any one entity should be exempt from compliance with both HRS chapter 103D and 103F conveys a sense of disproportionate equality in the law's application.

Exemptions to the code mean that all procurements made with taxpayer monies will not have the same oversight, accountability and transparency requirements mandated by those

procurements processes provided in the code. It means that there is no requirement for due diligence, proper planning or consideration of protections for the state in contract terms and conditions, nor are there any set requirements to conduct cost and price analysis and market research or post-award contract management. As such, Agencies can choose whether to compete any procurement or go directly to one contractor. As a result, leveraging economies of scale and cost savings efficiencies found in the consistent application of the procurement code are lost. It also means Agencies are not required to adhere to the code's procurement integrity laws.

The National Association of State Procurement Officials state: "Businesses suffer when there is inconsistency in procurement laws and regulations. Complex, arcane procurement rules of numerous jurisdictions discourage competition by raising the costs to businesses to understand and comply with these different rules. Higher costs are recovered through the prices offered by a smaller pool of competitors, resulting in unnecessarily inflated costs to state and local governments."

When public bodies, are removed from the state's procurement code it results in the harm described above. As these entities create their own procurement rules, businesses are forced to track their various practices. Moreover, a public body often can no longer achieve the benefits of aggregation by using another public body's contract because different state laws and regulations may apply to the various public bodies making compliance more difficult.

Each year new procurement laws are applied to state agencies, causing state agency contracts to become more complex and costly, while other public bodies, such as agencies with strong legislative influence, are exempted. Relieving some public bodies from some laws by exempting or excluding them from compliance with a common set of legal requirements creates an imbalance wherein the competitive environment becomes different among the various jurisdictions and the entire procurement process becomes less efficient and costlier for the state and vendors.

Thank you.



UNIVERSITY OF HAWAI'I SYSTEM

Legislative Testimony

Testimony Presented Before the Senate Committee on Ways and Means Tuesday, February 22, 2022 at 10:00 a.m. By Joe W. Ramos, PhD Interim Director University of Hawai'i Cancer Center And Jerris Hedges, MD, MS, MMM Professor & Dean John A. Burns School of Medicine And Michael Bruno, PhD Provost University of Hawai'i at Mānoa

SB 3367 SD1 – RELATING TO HEALTH

Chair Dela Cruz, Vice-Chair Keith-Agaran, and members of the Committee:

Thank you for the opportunity to provide written testimony in support of Senate Bill 3367 SD1, relating to health. This bill creates an early lung cancer screening task force, which brings the community together to determine what steps and resources are needed to increase Hawai'i's very low rate of early lung cancer screening.

Lung cancer is the number one cancer killer for men and women in the state. The American Lung Association's State of Lung Cancer Report in Hawai'i for 2021 places Hawai'i dead last in early diagnosis of lung cancer. Early diagnosis gives lung cancer patients a better chance of survival and more affordable and effective treatment options. According to the American Cancer Society, in 2022, more people will die of lung cancer in Hawai'i than breast, liver, or prostate cancer combined.

Moreover, University of Hawai'i Cancer Center epidemiologists have shown that Native Hawaiians and Pacific Islanders develop lung cancer at an earlier age and with lower lifetime exposure to cigarettes, compared to Whites and Asian Americans.

The task force proposed in this bill will take on the important duty of researching the existing information, including potential contributors to the health disparities seen, recommending the steps and resources necessary to increase early lung cancer screening in Hawai'i, recommending any additional research that is needed, and providing a report to the legislature with possible policies the state can adopt. Once a comprehensive plan for lung cancer screening is adopted by Hawai'i, the University of

Hawai'i, John A. Burns School of Medicine will be instrumental in informing practicing physicians (and those in training) of this plan, as well as actively participating in any clinical research trials related to the campaign. University of Hawai'i Cancer Center researchers will work on new projects to follow up additional research recommended by the task force. Further, the legislatively established task force will also work with the medical school and cancer center to create a public awareness campaign to inform people about lung cancer screening.

Lung cancer is one of the deadliest cancers and it is 90% preventable. Fortunately, rates have decreased due to a reduction in smoking during the past 50 years. However, it is still the most common cause of cancer death in men and women. Sixty percent of new cases now occur in former smokers, pointing to the importance of screening to diagnose these cancers early and improve survival. Low-dose computerized tomography has been shown in 2011 to lower lung cancer mortality by 20% when used with high-risk patients. However, it is still underused, especially in Hawai'i. We must do all we can to make sure that all people at high risk of lung cancer are screened early so that they are allowed all the treatment options available.

On behalf of the University of Hawai'i Cancer Center and John A. Burns School of Medicine, we urge the committee's passage of SB 3367 SD1 and ensure we are doing all we can to help people with lung cancer get an early diagnosis and another chance at life.



COMMITTEE ON WAYS AND MEANS Senator Donovan M. Dela Cruz, Chair Senator Gilbert S.C. Keith-Agaran, Vice Chair

Tuesday, February 22, 2022, 10:00AM

Testimony in Support of SB 3367, SD1 Relating to Health

The American Lung Association is the leading organization working to save lives by improving lung health and preventing lung disease, through research, education, and advocacy. The work of the American Lung Association in Hawai'i and across the nation is focused on four strategic imperatives: to defeat lung cancer; to improve the air we breathe; to reduce the burden of lung disease on individuals and their families; and to eliminate tobacco use and tobacco-related diseases.

The American Lung Association strongly supports Senate Bill 3367, Senated Draft 1, relating to health. This bill would create an early lung cancer screening taskforce to determine the best ways to increase early lung cancer screenings in Hawai'i.

In 2019, there were approximately 37,500 people who me the criteria of the U.S. Preventive Taskforce (USPST) guidelines for being at high risk for lung cancer. Of those people, only 1,400 of them were screened using a low-dose CT scan of their lungs. That is less than 4% of the population, even though the USPST guide recommends these high-risk individuals receive lung cancer screening every year. In 2020, the percent of people at high risk for lung cancer was lower than 3%.

According to the American Lung Association's 2021 State of Lung Cancer report, the low levels of CT scans have contributed to Hawai'i being last in the nation for early detection of lung cancer. Hawai'i also has one of the lowest 5-year survival rates for lung cancer. Of the nearly 1000 people that are expected to be diagnosed with lung cancer in Hawai'i in 2022, more than half of them are expected to die from the disease. These are more deaths than breast, prostate, and colorectal cancer combined.

The burden does not fall equally amongst Hawai'i 's populations. Native Hawaiians and Pacific Islanders have higher rates of lung cancer than other groups in Hawai'i. In fact, the State of Lung Cancer Report noted that Native Hawaiians in Hawai'i have an over 200% higher incidence rate of new lung cancer cases than other Indigenous populations across the nation, one of the highest rates of lung cancer for any group. Based on new research, in March of 2021, the USPTF expanded its recommendation for screening to include a larger age range and more current and former smokers. This will dramatically increase the number of people of color considered at high risk for lung cancer.

The taskforce proposed in this bill will help bring together stakeholders who can help make a difference in increasing lung cancer screening in the state. The taskforce will include representatives from state agencies, stakeholders, advocates, healthcare professionals, health systems, and insurers to do review all available research; conduct or initiate new studies as it deems necessary; and create a public awareness campaign to inform Hawai'i residents about early lung cancer screening.

The taskforce will also submit a report to the legislature of its findings and recommendations, including any proposed legislation. The report will also address cultural and social barriers associated with completing lung cancer screening and will create a work plan that identifies needed steps for the next five years to increase lung cancer screening in the State.



The loss associated with lung cancer is too much for our state to bare. The assemblance of the taskforce proposed in SB 3367 is the first step towards reducing the burden of lung cancer on our state and on our most vulnerable populations. We urge you to please support and pass SB 3367, Senate Draft 1.

Feder Haw

Pedro Haro Executive Director American Lung Association in Hawai'i pedro.haro@lung.org

Senator Donovan M. Dela Cruz Senator Gilbert S.C. Keith-Agaran, Vice Chair Members of the Committee on Ways and Means

TESTIMONY IN SUPPORT OF SB 3367, SD1, RELATING TO HEALTH

My name is Julian Lipsher, a member of the American Lung Association of Hawaii's Local Leadership Board testifying in support of SB 3367, SD1 This measure creates an early lung cancer screening task force, bringing together essential components of the community to determine steps needed to increase Hawaii's low rate of lung cancer screening.

Annual lung cancer screening with low-dose computed tomography (CT scan) is the recommended method in detecting lung cancer at an early stage. At that point the cancer is more treatable and the 5 year survival rate is higher, particularly among smokers, former smokers and those having been exposed to secondhand smoke.

The American Lung Association's 2021 State of Lung Cancer Report ranks Hawaii last in the nation for early diagnosis of lung cancer. The report noted that only 2.8% of high-risk people in Hawaii receive CT scans that capture detailed pictures of the lungs, compared with 5.7% nationally. This in part results in only 19% of new lung cancer cases being diagnosed at an early stage as compared with the national rate of 24% of cases. The Hawaii rate has not significantly changed in 5 years.

Lung cancer is the number one cancer killer in Hawaii. According to the American Cancer Society, more people will die of lung cancer in Hawaii than breast, liver, or prostate cancers combined.

The realities of lung cancer diagnosed at late stages leaves a heavy burden. It is a painful disease for all taking a heavy toll. At late stages there are few treatment options available save for palliative care. We can and should do more for people at high risk of lung cancer to afford those diagnosed better treatment options possible.

I urge you to consider passing SB 3367, SD1 giving those diagnosed with lung cancer a better chance at life.

Thank you for the opportunity to testify on this measure.



Testimony to the Senate Committee on Ways and Means Tuesday, February 22, 2022; 10:00 a.m. State Capitol, Conference Room 211 Via Videoconference

RE: SENATE BILL NO. 3367, RELATING TO HEALTH

Chair Dela Cruz, Vice Chair Keith-Agaran, and Members of the Committee:

The Hawaii Primary Care Association (HPCA) is a 501(c)(3) organization established to advocate for, expand access to, and sustain high quality care through the statewide network of Community Health Centers throughout the State of Hawaii. The HPCA <u>SUPPORTS</u> Senate Bill No. 3367, RELATING TO HEALTH.

By way of background, the HPCA represents Hawaii's FQHCs. FQHCs provide desperately needed medical services at the frontlines in rural and underserved communities. Long considered champions for creating a more sustainable, integrated, and wellness-oriented system of health, FQHCs provide a more efficient, more effective and more comprehensive system of healthcare.

This bill, as received by your Committee, would establish within the Department of Health, Chronic Disease Prevention and Health Promotion Division, an Early Cancer Screening Task Force (Task Force). To facilitate the work of the Task Force, this bill also appropriates \$250,000 in general funds for fiscal year 2022-2023, to carry out Task Force activities.

In an article dated November 16, 2021, Associated Press reported that Hawaii ranks last in the nation for the early diagnosis of lung cancer, and that just 19% of lung cancer cases in Hawaii are diagnosed early, compared to 24.5% nationally. (See, "Hawaii ranks last for early diagnosis of lung cancer", AP News, November 16, 2021, https://apnews.com/article/health-hawaii-honolulu-cancer-lung-cancer-b3efbb29feec279b042cf2e4d7582f09)

Community Health Centers serve on the front line providing desperately needed primary care for Hawaii's underprivileged communities throughout the State. Because our members are embedded in some of the most remote and isolated areas on all islands, the HPCA is uniquely constituted to provide insight and share information with the Task Force. Because of this, the HPCA welcomes the opportunity to partner with the Department of Health, the American Cancer Society, and all stakeholders

Senate Bill No. 3367, Senate Draft 1 Tuesday, February 22, 2022; 10:00 a.m. Page 2

The HPCA greatly appreciates inclusion to the Task Force and stands committed to serving for this cause.

Thank you for the opportunity to testify. Should you have any questions, please do not hesitate to contact Public Affairs and Policy Director Erik K. Abe at 536-8442, or eabe@hawaiipca.net.



Papa Ola Lokahi

is a non-profit Native Hawaiian organization founded in 1988 for the purpose of improving the health and well-being of Native Hawaiians and other native peoples of the Pacific and continental United States.

Board of Directors Member Organizations

Hoʻola Lahui Hawaii

Hui No Ke Ola Pono

Hui Malama Ola Na 'Oiwi

ALU LIKE

Ke Ola Mamo

E Ola Mau

University of Hawai'i

Hawai'i State Department of Health

Na Pu'uwai

Office of Hawaiian Affairs

Executive Director

Sheri-Ann Daniels, EdD

Papa Ola Lōkahi

894 Queen Street Honolulu, Hawaii 96813

Phone: 808.597.6550 ~ Facsimile: 808.597.6551

Senate Committee on Ways and Means Senator Donovan Dela Cruz, Chair Senator Gilbert Keith-Agaran, Vice-Chair Tuesday, February 22, 2022, 1:00PM, Videoconference

RE: SB 3367 SD 1 – Relating to Health Position: STRONG SUPPORT

Dear Chair Dela Cruz, Vice Chair Keith-Agaran, and Members of the Committee on Ways and Means,

Papa Ola Lōkahi **supports** SB 3367 SD 1, which would create a task force to understand what processes and resources are needed to increase early lung cancer screening in Hawai'i. Hawai'i is last in the nation for early lung cancer diagnosis; just 2.8% of high-risk smokers receive yearly screenings, compared to 5.7% nationally.¹ Early diagnosis affects the potential for patients to access effective and affordable treatment, and thus may also be linked to mortality.²

Papa Ola Lōkahi supports efforts to address health issues with appropriate specificity and nuance so that efforts to sustain the health of our communities are appropriately communitydriven and centered. This bill calls for the formation of a task force that will research what is needed to increase early lung cancer screening in Hawai'i to decrease the prevalence of the deadliest form of cancer in the State, with more than 500 resident deaths per year.¹ Additionally, the creation of a public awareness campaign to inform our communities of how to access lung cancer screening is also necessary and important to ensure this measure is fully realized.

Native Hawaiians are more likely to die of lung cancer than any other ethnic group in the State, with 126 new lung cancer cases per 100,000 people. This is significantly higher than the rate of 41 among Indigenous People in the United States, and one of the highest rates of lung cancer of any ethnic group in the nation.¹ Thus, the inclusion of cultural and social barriers associated with completing lung cancer screenings in the task force's final report is particularly important to address disparities among Native Hawaiians. This persistent trend existed when the Native Hawaiian Health Care Act was created and is one of the health outcomes that Congress intends to change through Papa Ola Lōkahi (POL) and the Native Hawaiian Health Care Systems. As such, POL continues to support addressing Native Hawaiian specific needs by uplifting the inclusion of community voices throughout the intended report processes of addressing cultural and social barriers, program development, and implementation.

Thank you for the opportunity to testify in **support** of this important legislation.

About Papa Ola Lōkahi

Papa Ola Lōkahi holds the mission of improving the health status and well-being of Native Hawaiians and others by advocating for, initiating, and maintaining culturally appropriate strategic actions aimed at improving the physical, mental, and spiritual health of Native Hawaiians and their 'ohana, and empowering them to determine their own destinies. This mission works towards Papa Ola Lōkahi's vision of a thriving Native community of health individuals, families, and communities who are informed about their rich heritage and culture living in a state of lōkahi (unity) and making informed choices and responsible decisions in a safe island society that is pono (in proper order). Created through the Native Hawaiian Health Care Improvement Act, Papa Ola Lōkahi is the designated organization charged with a variety of mandates, which include coordinating, implementing, and updating a Native Hawaiian comprehensive health care master plan; leading the five Native Hawaiian Health Care Systems; and housing the Native Hawaiian Health Scholarship Program.

¹ American Lung Association, State of Lung Cancer, Hawai'i. (2021). Accessible at: https://www.lung.org/research/state-of-lung-cancer/states/hawaii
² Hawai'i ranks last for early diagnosis of lung cancer. (2021). Associated Press News. https://apnews.com/article/health-hawaii-honolulu-cancer-lung-cancer-b3efbb29feec279b042cf2e4d7582f09



HAWAII MEDICAL ASSOCIATION 1360 S. Beretania Street, Suite 200, Honolulu, Hawaii 96814 Phone (808) 536-7702 Fax (808) 528-2376 www.hawaiimedicalassociation.org

SENATE COMMITTEE ON WAYS AND MEANS Senator Donovan M. Dela Cruz, Chair Senator Gilbert S.C. Keith-Agaran, Vice Chair

Date: February 22, 2022 From: Hawaii Medical Association Elizabeth Ann Ignacio MD, Chair, HMA Legislative Committee

Re: SB 3367 SD1 Early Lung Cancer Screening; Task Force; Department of Health; Comprehensive Cancer Control Program; Appropriation Position: Support

Lung cancer has the highest cancer related mortality in the United States. Only 19% of new lung cancer cases in Hawaii are caught at an early stage, which is significantly lower than the national rate of 24%. This metric has not significantly changed for at least the last 5 years (Figure 1)¹.

In order for screening to be effective in reducing mortality, more of the high-risk population should be screened. The challenges of access and healthcare literacy can be addressed by the proposed task force that includes patient advocates, academic institutions, health systems, providers and county and state government. HMA supports the appropriation of funds for establishment of a task force in the Hawaii Department of Health, as needed for centralized collaboration, research and public education efforts toward effective lung cancer screening.



CONTINUED

HMA OFFICERS

President – Angela Pratt, MD President-Elect – Elizabeth Ann Ignacio, MD Immediate Past President – Michael Champion, MD Treasurer – Nadine Tenn Salle, MD Secretary – Thomas Kosasa, MD Executive Director – Marc Alexander



HAWAII MEDICAL ASSOCIATION 1360 S. Beretania Street, Suite 200, Honolulu, Hawaii 96814 Phone (808) 536-7702 Fax (808) 528-2376 www.hawaiimedicalassociation.org

Thank you for allowing the Hawaii Medical Association to testify in support of this measure.

QUICK LINKS, REFERENCES

- 1. American Lung Association. State of Lung Cancer. <u>https://www.lung.org/research/state-of-lung-cancer/states/hawaii</u>
- 2. Gallo M et al. Lung Cancer Screening: A Necessary Tool Not Accessible for the Whole Population. J. Am. Coll. Radiol. <u>https://www.jacr.org/article/S1546-1440(21)00945-5/fulltext</u>

HMA OFFICERS



DATE 20 Feb 2022

To: Senator Donovan M. Dela Cruz, Chair Senator Gilbert S.C. Keith-Agaran, Vice Chair Senate Committee on Ways and Means

Re: Testimony in Support of SB 3367 SD1 RELATING TO HEALTH

Hrg: 22 Feb 2022, 10:00 AM conference room 211 & via Videoconference

Dear Chair Donovan, Vice Chair Keith-Agaran, and Members of the Committees,

The Hawai'i Public Health Association (HPHA) is a group of over 450 community members, public health professionals, and organizations statewide dedicated to improving public health. Our mission is to promote public health in Hawai'i through leadership, collaboration, education and advocacy. Additionally, HPHA aims to call attention to issues around social justice and equity in areas that extend beyond the traditional context of health (e.g., education, digital equity, cultural sensitivity), which can have profound impacts on health equity and well-being. As stewards of public health, HPHA is also advocating for equity in all policies.

HPHA strongly supports SB 3367 SD1, relating to health. This bill creates an early lung cancer screening task force, which brings the community together to determine what steps are needed to increase Hawai'i's very low rate of early lung cancer screening. Lung cancer is the number one cancer killer for men and women in the state. The American Lung Association's State of Lung Cancer Report in Hawaii for 2021 places Hawai'i dead last in early diagnosis of lung cancer. Early diagnosis gives lung cancer patients a better chance of survival and more affordable and effective treatment options. According to the American Cancer Society, in 2022, more people will die of lung cancer in Hawai'i than breast, liver, or prostate cancer combined.

Lung cancer is the number one cancer killer in Hawai'i. In terms of health disparities, Asian Americans and Pacific Islanders in Hawai'i, and Native Hawaiian populations carry a higher burden of high lung cancer rates when compared across the nation. The rate of new lung cancer cases is 45 per 100,000 people among Asian Americans and Pacific Islanders in Hawai'i, compared with the rate of 34 per 100,000 among Asian Americans and Pacific Islanders nationally. Native Hawaiians have 126 new lung cancers cases per 100,000 people, which is significantly higher than the rate of 41 per 100,000 among indigenous Peoples nationally, and one of the highest rates of lung cancer of any group in the nation.



The task force prosed in this bill will take on the important duty of researching and recommending the steps and resources necessary to increase early lung cancer screening in Hawaii, conducting any additional research that is needed, and providing a report to the legislature with possible policies the state can adopt. This task force will also create a public awareness campaign to inform people lung cancer screening.

We strongly support SB 3367 SD1, and respectfully ask that you pass this measure to ensure we are doing all we can to help people with lung cancer get an early diagnosis and another chance at life. Thank you for the opportunity to provide testimony on this important public health issue.

Respectfully submitted,

Wesdin Culer

J. Leocadia Conlon, PhD, MPH, PA-C Legislative Committee Chair Hawaii Public Health Association

TO:	Senate Committee on Ways and Means Senator Donovan M. Dela Cruz, Chair Senator Gilbert S.C. Keith-Agaran, Vice Chair
DATE:	Tuesday, February 22, 2022
TIME:	10:00 AM
PLACE:	Via Videoconference

TESTIMONY IN SUPPORT OF SB 3367, SD1, RELATING TO HEALTH

Dear Chair Dela Cruz, Vice Chair Keith-Agaran, and Members of the Committee,

My name is Cynthia J. Goto and I am writing to express my support for SB 3367, SD1, relating to health. This bill creates an early lung cancer screening task force, which brings the community together to determine what steps are needed to increase Hawai'i's very low rate of early lung cancer screening.

Lung cancer is the number one cancer killer for men and women in the state. The American Lung Association's State of Lung Cancer Report in Hawaii for 2021 places Hawai'i dead last in early diagnosis of lung cancer. Early diagnosis gives lung cancer patients a better chance of survival and more affordable and effective treatment options. According to the American Cancer Society, in 2022, more people will die of lung cancer in Hawai'i than breast, liver, or prostate cancer combined.

The U.S. Preventive Services Task Force recommends low-dose computed tomography (LDCT) for lung cancer screening in high-risk patients, however, a minority of eligible people are screened. Research suggests that increased awareness of these guidelines by primary care physicians is associated with increased utilization of LDCT for screening, and educational interventions may improve adherence with this recommendation.¹

The task force proposed in this bill will take on the important duty of researching and recommending the steps and resources necessary to increase early lung cancer screening in Hawaii, conducting any additional research that is needed, and providing a report to the legislature with possible policies the state can adopt.

Increased early screening for lung cancer will allow people diagnosed with lung cancer to benefit from all the treatment options available. I ask you please pass SB 3367, SD1 and ensure we are doing all we can to help people with lung cancer get an early diagnosis and another chance at life.

Thank you,

Cynthia J. Goto

¹ Raz, Dan J., et al. The Effect of Primary Care Physician Knowledge of Lung Cancer Screening Guidelines on Perceptions and Utilization of Low-Dose Computed Tomography. Clinical Lung Cancer, Volume 19, Issue 1, 51-57, January 2018.



Senator Donovan M. Dela Cruz, Chair Senator Gilbert S.C. Keith-Agaran, Vice Chair Senate Committee on Ways and Means

February 22, 2022 – 10 am – Videoconference

TESTIMONY IN SUPPORT OF SB 3367 SD1, RELATING TO HEALTH

Dear Chair Dela Cruz, Vice Chair Keith0-Agaran, and Members of the Committee,

My name is Troy SIruno and I am writing to express my support for Senate Bill 3367, Senate Draft 1, relating to health. This bill creates an early lung cancer screening task force, which brings the community together to determine what steps are needed to increase Hawai'i's very low rate of early lung cancer screening.

Lung cancer is the number one cancer killer for men and women in the state. The American Lung Association's State of Lung Cancer Report in Hawaii for 2021 places Hawai'i dead last in early diagnosis of lung cancer. Early diagnosis gives lung cancer patients a better chance of survival and more affordable and effective treatment options. According to the American Cancer Society, in 2022, more people will die of lung cancer in Hawai'i than breast, liver, or prostate cancer combined.

My mother Linda is a lung cancer survivor. It is only because of early lung cancer screenings she received through Veterans Affairs clinics/Tripler Hospital that her lung cancer was able to be detected early, monitored over a period of time, and then finally, when her doctors noticed a change in a spot they had been tracking, they were able to quickly operate and remove a portion of her lung. Today, she remains cancer-free because she was able to get proper treatment through early screening. This bill will ensure others in our community get access to the same type of early screening, preventing needless suffering from the effects of late-stage lung cancer.

The task force prosed in this bill will take on the important duty of researching and recommending the steps and resources necessary to increase early lung cancer screening in Hawaii, conducting any additional research that is needed, and providing a report to the legislature with possible policies the state can adopt. This task force will also create a public awareness campaign to inform people lung cancer screening.

The burden of lung cancer is too high to bear. Lung cancer is a painful disease for all, taking loved ones very quickly at its later stages, sometimes leaving only weeks to live if diagnosed at stage 4 of the disease. At that stage, sometimes there's few treatment options. We must do all we can to make sure that all people at high risk of lung cancer are screened early so that they are allowed all the treatment options available.

I ask you please pass SB 3367, SD1, and ensure we are doing all we can to help people with lung cancer get an early diagnosis and another chance at life, just like my mom.

Thank you,

Troy Siruno Honolulu, HI tsiruno@gmail.com