THE SENATE THIRTY-FIRST LEGISLATURE, 2022 STATE OF HAWAII S.B. NO. $^{3367}_{S.D.2}$

A BILL FOR AN ACT

RELATING TO HEALTH.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF HAWAII:

1 SECTION 1. The legislature finds that, according to the 2 Centers for Disease Control and Prevention, lung cancer is the 3 leading cause of cancer deaths for men and women in the United 4 States. In 1987, lung cancer surpassed breast cancer to become the leading cause of cancer deaths in women. The National 5 Institutes of Health estimated that medical expenditures for 6 7 cancer cost the United States an overall \$147,500,000,000 in 8 2015, \$13,400,000,000 of which was due to lung cancer. Lost 9 productivity due to early death from cancer cost the United 10 States an additional \$134,800,000,000 in 2005, \$36,100,000,000 11 of which was caused by lung cancer.

12 The legislature further finds that, according to the 13 National Cancer Institute's SEER Cancer Statistics Review, 14 between 2011 and 2017, the five-year survival rate for lung 15 cancer was approximately 21.7 per cent. This is lower than the 16 survival rates of many other leading cancers, including 17 colorectal cancer (64.7 per cent), breast cancer (90.3 per

SB3367 SD2 LRB 22-1160.doc

Page 2

S.B. NO. $^{3367}_{S.D. 2}$

1 cent), and prostate cancer (97.5 per cent). The five-year 2 survival rate for lung cancer is 59.8 per cent for cases 3 detected when the disease is still localized, meaning the cancer 4 is found only in the part of the body where it started. 5 However, only 17.8 per cent of lung cancer cases are diagnosed at an early stage. For distant tumors, which are tumors spread 6 7 to other organs, the five-year survival rate is only 6.3 per 8 cent. More than half of people with lung cancer die within one 9 year of diagnosis.

10 According to the American Lung Association's 2021 State of Lung Cancer report, in Hawaii, lung cancer is also the number 11 12 one killer of men and women. The report ranks Hawaii last in 13 the nation for the early diagnosis of lung cancer. The study 14 found that just 2.8 per cent of high-risk people in Hawaii 15 undergo annual computerized tomography (CT) scans that capture 16 detailed pictures of the lungs, compared to the 5.7 per cent 17 nationally. In a state-by-state analysis, the American Lung 18 Association also found that just nineteen per cent of lung 19 cancer cases in Hawaii are diagnosed early, compared to 24.5 per 20 cent nationally. The American Lung Association report further 21 found that the rate of new lung cancer cases for native

SB3367 SD2 LRB 22-1160.doc

S.B. NO. ³³⁶⁷ S.D. 2

Hawaiians in Hawaii is one hundred twenty-six per one hundred
thousand, dramatically higher than the rates for indigenous
peoples nationally and for Caucasians in Hawaii.

Page 3

4 The legislature also finds that the United States 5 Preventive Services Task Force has recommended that smokers and 6 former smokers who are at high risk of developing lung cancer 7 undergo CT scans. In March 2021, the United States Preventives 8 Services Task Force expanded its recommendation for screening to 9 include a larger age range and more current and former smokers. 10 An annual lung cancer screening with low-dose computed 11 tomography is now recommended for adults ages fifty to eighty 12 years who have a twenty pack-year smoking history and currently 13 smoke or have quit within the past fifteen years. This 14 expansion will dramatically increase the number of Hawaii 15 residents considered at high risk for lung cancer.

16 The purpose of this Act is to establish an early lung 17 cancer screening task force to research the steps and resources 18 necessary to increase early lung cancer screening in Hawaii. 19 SECTION 2. (a) There is established within the department 20 of health chronic disease prevention and health promotion 21 division's comprehensive cancer control program, an early lung

SB3367 SD2 LRB 22-1160.doc



1	cancer sci	reening task force to research the steps and resources
2	necessary	to increase early lung cancer screening in Hawaii.
3	(b)	The task force shall consist of:
4	(1)	A representative from the office of the governor, to
5		be appointed by the governor;
6	(2)	A representative from the senate, to be appointed by
7		the president of the senate;
8	(3)	A representative from the house of representatives, to
9		be appointed by the speaker of the house of
10		representatives;
11	(4)	A representative from the department of health;
12	(5)	A representative from the department of human
13		services;
14	(6)	A representative from the University of Hawaii John A.
15		Burns school of medicine;
16	(7)	A representative from the University of Hawaii cancer
17		center; and
18	(8)	A representative from each county.
19	(c)	The chairperson of the task force shall invite the
20	following	individuals to become members of the task force:

SB3367 SD2 LRB 22-1160.doc

Page 5

S.B. NO. $^{3367}_{S.D.2}$

1	(1)	A representative from the United States Department of
2		Veterans Affairs;
3	(2)	A representative from each health insurer operating in
4		the State, including TRICARE;
5	(3)	A representative from each health care system
6		operating in the State, including but not limited to
7		The Queen's Health Systems, Hawaii Pacific Health,
8		Kaiser Permanente Hawaii, federally qualified health
9		centers, native Hawaiian health centers, and Tripler
10		Army Medical Center;
11	(4)	A representative from the American Lung Association;
12	(5)	A representative from the American Cancer Society;
13	(6)	A representative from the Hawaii Primary Care
14		Association;
15	(7)	At least one representative from an organization
16		representing health care providers with relevant
17		expertise on lung cancer screening; and
18	(8)	Any other members, including representatives from
19		state agencies, stakeholders, or advocates, as
20		recommended by a majority of the task force.

SB3367 SD2 LRB 22-1160.doc

Page 6

S.B. NO. $^{3367}_{S.D. 2}$

1	(d)	The task force shall select a chairperson from among
2	the membe	rs listed in subsection (b).
3	(e)	Members of the task force shall serve without
4	compensat	ion but shall be reimbursed for expenses, including
5	travel ex	penses, necessary for the performance of their duties.
6	(f)	The task force shall:
7	(1)	Review all available research, studies, and models for
8		increasing early lung cancer screening rates in the
9		State;
10	(2)	Conduct or initiate new studies as it deems necessary;
11		and
12	(3)	Create a public awareness campaign to inform Hawaii
13		residents about early lung cancer screening.
14	(g)	The task force may contract with consultants to
15	conduct studies as it deems necessary for the purpose of	
16	recommending an early lung cancer screening program and funding	
17	mechanism	. Any contract executed pursuant to this Act shall be
18	exempt from chapter 103D, Hawaii Revised Statutes; provided that	
19	the early lung cancer screening task force shall ensure	
20	transparency when executing the contract.	

SB3367 SD2 LRB 22-1160.doc

Page 7

S.B. NO. $^{3367}_{S.D. 2}$

1	(h)	The task force shall submit an interim report of its
2	findings	and recommendations, including any proposed
3	legislati	on, to the legislature no later than twenty days prior
4	to the co	onvening of the regular session of 2023.
5	(i)	The task force shall submit a final report of its
6	findings	and recommendations, including any proposed
7	legislati	on, to the legislature no later than July 31, 2023.
8	The repor	t shall include:
9	(1)	An analysis of the costs associated with early lung
10		cancer screening;
11	(2)	A list of qualified facilities in the State that
12		perform lung cancer screenings;
13	(3)	Protocols for health care providers and health care
14		systems to identify populations at high risk for lung
15		cancer;
16	(4)	An explanation of how health care providers are made
17		aware of available insurance coverage for early lung
18		cancer screenings;
19	(5)	Copies of guidelines used by health insurance
20		providers to determine coverage for early lung cancer
21		screening;

SB3367 SD2 LRB 22-1160.doc

Page 8

S.B. NO. $^{3367}_{S.D. 2}$

1	(6)	A discussion of cultural and social barriers	
2		associated with lung cancer screenings;	
3	(7)	Policy recommendations for increasing early lung	
4		cancer screenings; and	
5	(8)	A work plan that identifies the steps needed in the	
6		next five years to increase lung cancer screenings in	
7		the State.	
8	(j)	The task force shall cease to exist on July 31, 2023.	
9	SECTION 3. There is appropriated out of the general		
10	revenues of the State of Hawaii the sum of \$ or so muc		
11	thereof as may be necessary for fiscal year 2022-2023 for the		
12	early lung cancer screening task force to carry out its		
13	activities pursuant to this Act.		
14	The sum appropriated shall be expended by the department of		
15	health for the purposes of this Act.		
16	SECTION 4. This Act shall take effect on July 1, 2050.		



S.B. NO. $^{3367}_{S.D. 2}$

Report Title:

Early Lung Cancer Screening; Task Force; Department of Health; Comprehensive Cancer Control Program; Appropriation

Description:

Creates an early lung cancer screening task force to research the steps and resources necessary to increase early lung cancer screening in Hawaii. Appropriates moneys. Effective 7/1/2050. (SD2)

The summary description of legislation appearing on this page is for informational purposes only and is not legislation or evidence of legislative intent.

