

**STATE HEALTH PLANNING
AND DEVELOPMENT AGENCY**
DEPARTMENT OF HEALTH - KA 'OIHANA OLAKINO

JOSH GREEN, M.D.
GOVERNOR OF HAWAII
KE KIA'AINA O KA MOKU'AINA 'O HAWAII

KENNETH S. FINK, MD, MGA, MPH
DIRECTOR OF HEALTH
KA LUNA HO'OKELE

John C. (Jack) Lewin, M.D.
ADMINISTRATOR

1177 Alakea St., #402, Honolulu, HI 96813 Phone: 587-0788 Fax: 587-0783 www.shpda.org

Senate Committee on Health and Human Services
Senator Joy A. San Buenaventura, Chair,
Senator Henry J.C. Aquino, Vice Chair,
and Committee Members

SCR 15/SR 7 Requesting the Department of Health's State Health Planning and Development Agency to Convene a Health Data Sharing Working Group to Accelerate and Expand the Sharing of Real Time Health Information Among Health Care Entities and Government Agencies in the State.

Testimony of John C. (Jack) Lewin, M.D.
SHPDA Administrator

Friday, March 22, 2024
1:00 p.m.

1 **Agency's Position: SUPPORT**

2 **Fiscal Implications: none**

3 **Purpose and Justification:** The State Health Planning and Development Agency (SHPDA)
4 welcomes and supports the intent of SCR 15 / SR 7, which requests the convening of a health
5 data sharing working group to accelerate and expand the sharing of real-time health
6 information among health care entities and government agencies in Hawai'i. Real-time data is
7 produced across the state today from numerous health care sources.

8 Insurance claims (which are usually issued in less than a week as claims, or as "clinical
9 encounters" from capitated insurers) describe the diagnosis or diagnoses for patients being
10 treated along with other administrative information that represents nearly all the health care
11 provided and reimbursed by insurers of health and dental care here. This includes data from
12 the federal Medicaid and Medicare claims or encounter sources. The Veterans Administration

1 here could also someday participate in such data sharing. The legislature has mandated
2 under SHPDA's authority the collection of all such claims from all insurers licensed in the state
3 for Medicaid (Med-QUEST), Medicare and Medicare Advantage, and from commercial
4 insurance for beneficiaries of the Employee-Union Trust Fund (EUTF), the state's largest
5 employer and its retirees. SHPDA, working with its contracted partners Med-QUEST and the
6 University of Hawai'i, is responsible for developing the All-Payer Claims Database (APCD).
7 The APCD already has the de-identified and privacy-assured claims of one million out of 1.4
8 million total citizens under management. When the Medicare Advantage claims are added by
9 2026, the APCD will have 1.15 million claims undermanagement. Only about 250,000 of other
10 commercial lives, not included in the mandate, are needed to be able to track the health of the
11 entire population for health status monitoring and public health purposes. This missing data
12 will be added over time through collaboration with insurers, by broadening the mandate, or
13 from other sources of privacy-assured data. This data reveals comprehensive information
14 about health care services in the state, including all the diagnoses and conditions treated.
15 Claims data is considered "administrative" data.

16 Clinical data is also very valuable for health status monitoring and public health
17 surveillance purposes. Clinical data can help understand the quality of care provided in more
18 detail. It includes data from electronic health records (EHRs), laboratory results, prescriptions,
19 and imaging data. Sources of such privacy-assured data here are collected by the Hawai'i
20 Health Information Exchange (HHIE), and the Healthcare Association of Hawaii's Lualaba
21 database. Other sources are available through the Hawai'i Department of Health, the US
22 Center for Disease Control (CDC), and the National Institutes of Health (NIH). Real-time
23 clinical data in Hawai'i is potentially available from the state's laboratories, pharmacies, and HI
24 HIE. The Lualaba database can also contribute valuable clinical data from hospital discharge

1 summaries. We also need to develop better and more timely data from long-term care
2 sources. And Hawai'i needs more timely data about health care workforce issues and
3 shortages, which create access to care and quality gaps. And we also need to better track
4 behavioral and mental health data, and data related to social determinants of health, to
5 understand the full picture of the health care needs of the people of Hawai'i.

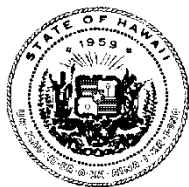
6 Administrative data and clinical data together, when available real-time, can help
7 coordinate care and improve health outcomes. This will also help reduce unnecessary health
8 care spending and cost increases. And this will help us better understand where we need to
9 invest resources to improve the health of the population.

10 While most of the data collected from all these sources is theoretically available real-
11 time, in reality it is shared typically with huge time lags and is all too often not shared at all.
12 Privacy and confidentiality of such data is now technologically possible and manageable. We
13 need to work to build trust and collaboration on improving the health of Hawai'i through data
14 sharing.

15 SHPDA has already established a Health Data Advisory Council with representation of
16 all the state-based sources of data mentioned earlier. This group with some additional
17 representation could help achieve the intent of this resolution. To improve health care
18 outcomes and population-based outcomes for Hawai'i, much more robust sharing of privacy-
19 assured data is needed. We look forward to taking on this important and timely challenge with
20 our partners in the public and private health sector here.

21 Mahalo for the opportunity to testify.

JOSH GREEN, M.D.
GOVERNOR
KE KIA'ĀINA



CATHY BETTS
DIRECTOR
KA LUNA HO'OKELE

JOSEPH CAMPOS II
DEPUTY DIRECTOR
KA HOPE LUNA HO'OKELE

TRISTA SPEER
DEPUTY DIRECTOR
KA HOPE LUNA HO'OKELE

STATE OF HAWAII
KA MOKU'ĀINA O HAWAI'I
DEPARTMENT OF HUMAN SERVICES
KA 'OIHANA MĀLAMA LAWELAWE KANAKA
Office of the Director
P. O. Box 339
Honolulu, Hawaii 96809-0339

March 20, 2024

TO: The Honorable Senator Joy A. San Buenaventura
Committee on Health and Human Services

FROM: Cathy Betts, Director

SUBJECT: [SCR15/SR7](#) - REQUESTING THE DEPARTMENT OF HEALTH'S STATE HEALTH PLANNING AND DEVELOPMENT AGENCY TO CONVENE A HEALTH DATA SHARING WORKING GROUP TO ACCELERATE AND EXPAND THE SHARING OF REAL TIME HEALTH INFORMATION AMONG HEALTH CARE ENTITIES AND GOVERNMENT AGENCIES IN THE STATE.

Hearing: March 22, 2024, 1:00 PM
Conference Room 225 & Via Videoconference, State Capitol

DEPARTMENT'S POSITION: The Department of Human Services supports this resolution and defers to the State Health Planning and Development Agency.

PURPOSE: This resolution requests the State Health Planning and Development Agency of the Department of Health to convene a health data sharing workgroup to accelerate and expand the sharing of real-time health information among health care entities and government agencies in the State.

DHS supports the opportunities to strengthen health data sharing that the resolution provides and looks forward to having the Med-QUEST Administrator or the Administrator's designee participate in this workgroup.

Thank you for the opportunity to provide testimony on this resolution.



March 22, 2024

The Honorable Joy A. San Buenaventura, Chair
The Honorable Henry J.C. Aquino, Vice Chair
Senate Committee on Health and Human Services

Re: SCR 15 / SR 7 - Requesting the Department of Health's State Health Planning and Development Agency to convene a health data sharing working group to accelerate and expand the sharing of real time health information among health care entities and government agencies in the state.

Dear Chair San Buenaventura, Vice Chair Aquino, and Members of the Committee:

Hawai'i Medical Service Association (HMSA) appreciates the opportunity to submit testimony in support of SCR 15 / SR 7.

Health equity and access to high quality health care need to improve, especially for underserved Hawaii residents. While health data is currently shared in pockets, we lack standardization across the sector, we lag behind other industries in real-time sharing, and not everyone participates. This lack of participation creates incomplete data sets and large gaps. The ability to share standardized data in real-time is essential to improve outcomes, identify Hawaii's unique social risk factors, and lower administrative, financial, and technical burdens.

We cannot afford to delay the effort to put in place a real-time, health data sharing framework based on mandated national standards. Further delays will result in continued fragmentation of data sharing in Hawaii's health care ecosystem as each Hawaii health organization pursues its own unique data sharing strategy. Instead, we need to collaboratively work together to improve health outcomes and lower health care costs. Every dollar saved on health care is a dollar that we can put toward Hawaii's housing, education, and infrastructure. We support the legislature's intent to give our state the best chance of accomplishing this by bringing all parties to the table to create a data solution that will work for everyone.

Thank you for the opportunity to testify in support of SCR 15 / SR 7.

Sincerely,



Dawn Kurisu
Assistant Vice President
Community and Government Relations

March 22, 2024 at 1:00 pm
Conference Room 225

Senate Committee on Health and Human Services

To: Chair Joy San Buenaventura
 Vice Chair Henry Aquino

From: Wesley Lo
Chief Executive Officer
Ohana Pacific Management Company/Hale Makua Health Services

Re: Comments with Concerns
SCR 15/SR 7, Requesting the Department of Health’s State Health Planning and Development Agency to convene a Health Data Sharing Working Group to accelerate and expand the sharing of Real Time Health Information among Health Care Entities and Government Agencies in the State.

Ohana Pacific Health (OPH) / Hale Makua Health Services (HMHS) is the largest provider of post-acute care services in the State of Hawai’i and also, the largest provider of Medicaid nursing facility services. Our organization employs almost 1,500 healthcare workers and manages approximately 950 nursing home beds that provide short-term rehab and long-term care, adult day health services and home health care, and Care Management/Navigation Services on all four major islands.

Thank you for the opportunity to provide Comments with Concerns on this measure.

In general, we agree that as we move to Population Health and providing the “right care at the right price at the right time”, the need for comprehensive data is compelling; however, mandating an exchange without consideration of the actual goals and use of the data and the unintended consequences of this legislation could have severe effects on the whole healthcare industry.

This Resolution, as drafted, appoints a working group, that appears to be heavily based on “Legislative and Administrative appointees”, and representatives of Insurance sector. While these are critical people in the discussion, Healthcare is delivered by providers, and health IT requires technical expertise that would be beyond the level of expertise assembled by this resolution. Before there is a discussion about data and the use of it, there needs to be an understanding of the needs, obstacles and “buy in” by the stakeholders actually delivering care.

From an operational perspective, the long-term care industry as a whole does not have robust IT systems and staffing, to accommodate any mandate for information, like many of our Hospital partners. Our Electronic Medical Record platforms are not consistent across facilities and they do not have significant capabilities with data capture. Also, the data fields that are required for operations are significantly different than for Hospitals and Physician Offices. A recent effort by a major Payor in the State for data capture, required manual entry by each of our facilities, since we did not have the ability to electronically provide the information that they needed.

Related the value and governance of this data needs to be worked out. As there is skepticism across the industry on what the information will be used for and who will own and govern the data From a financial perspective, it is anticipated that the funding to accommodate this needs to be factored in before any UNFUNDED MANDATE. The long-term care facilities in Hawaii are in somewhat of a financial crisis due to the severe staffing shortages resulting in “unfilled beds” and low occupancy numbers as well as the low reimbursement for the majority of our business (Medicaid). A recent review of the average operation margins for nursing facilities reflected a negative margin of -3%. For the facilities that take care of our more vulnerable Medicaid population have lower margins and would be faced with difficult financial decisions like closure (similar to the recent closure of Wahiawa General Hospitals long term care operations). Accordingly, to discuss a data exchange without factoring in the financial implications could lead to unintended consequences throughout Hawai'i.

Additionally we understand that the Federal Government under the Cures Act is already in motion with the 21st Century CURES Act which allow the sharing of data for purposes of improving patient care. The creation of an additional State regulatory requirements to be discussed with work being done at the Federal has the potential create additional administrative burden and confusion with the provider community.

Thank you for the opportunity to provide Comment with Concerns related to this legislation,



Friday, March 22, 2024 at 1:00 pm
Conference Room 225

Senate Committee on Health and Human Services

To: Chair Joy A. San Buenaventura
Vice Chair Henry J.C. Aquino

From: Paige Heckathorn Choy
AVP, Government Affairs
Healthcare Association of Hawaii

Re: **Oppose**
SCR 15/SR 7, Requesting the Department of Health’s State Health Planning and Development Agency to convene a health data sharing working group to accelerate and expand the sharing of real time health information among health care entities and government agencies in the State

The Healthcare Association of Hawaii (HAH), established in 1939, serves as the leading voice of healthcare on behalf of 170 member organizations who represent almost every aspect of the health care continuum in Hawaii. Members include acute care hospitals, skilled nursing facilities, home health agencies, hospices, assisted living facilities and durable medical equipment suppliers. In addition to providing access to appropriate, affordable, high-quality care to all of Hawaii’s residents, our members contribute significantly to Hawaii’s economy by employing over 30,000 people statewide.

We are writing to **oppose** this resolution. While we agree that exchanging real-time clinical data between providers is an important goal, we believe that this working group will ultimately distract from current work to implement existing strategies and recommendations that would largely achieve the goals that are outlined in this resolution.

We deeply appreciate the collaborative work that the Hawaii Health Information Exchange (HHIE) completed in 2023 to assess and discuss the current state of health information exchange and interoperability in Hawaii. Their comprehensive report¹—which includes actionable recommendations—provides much of the information, assessment, and deliberations that this working group is tasked with. Conversations regarding the future of this topic are also continuing as part of the State Health Planning and Development Agency’s (SHPDA’s) data advisory council, which consists of largely similar members as identified in this measure.

The main takeaway from the report is that data exchange and interoperability remain a priority for providers—however, there are serious resources barriers, especially for smaller providers such as physician offices and post-acute care facilities, that need to be addressed. We believe that current efforts should be supported, and that we should not distract from their focused work.

Thank you for the opportunity to provide our opposition on this measure.

¹ <https://hawaiihie.org/community-workgroup-report-on-advancing-data-sharing-in-hawaii>