JOSH GREEN, M.D. GOVERNOR KE KIA'ĀINA



#### 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

January 27, 2024

CATHY BETTS
DIRECTOR
KA LUNA HO'OKELE

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DEPUTY DIRECTOR

KA HOPE LUNA HO'OKELE

TRISTA SPEER
DEPUTY DIRECTOR
KA HOPE LUNA HO'OKELE

To: The Honorable Representative Scot Z. Matayoshi, Chair

House Committee on Labor & Government Operations

FROM: Cathy Betts, Director

SUBJECT: <u>HB 2552</u> – RELATING TO EMPLOYEE BENEFITS.

Hearing: January 30, 2024, 9:30 a.m.

Conference Room 309, State Capitol & Video Conference

**DEPARTMENT'S POSITION**: The Department of Human Services (DHS) appreciates the intent of this measure and provides comments. Extending the family leave period for employees whose child is required to stay in a neonatal intensive care unit is a prime example of the importance of family leave.

However, currently, only one in four private sector workers have access to a single day of paid leave in Hawaii. Low-wage workers have the least access to paid leave and often struggle financially to provide care without losing employment. As we witnessed during the pandemic, working families need support and strong public policies to remain employed and self-sufficient and care for their family members. DHS looks forward to the day when Hawaii will have a paid family leave program available to all residents.

<u>PURPOSE</u>: This bill extends, under certain conditions, the family leave period for up to eight additional weeks for employees who are unable to perform their employment duties due to the birth of a child who is required to stay in a neonatal intensive care unit. Requires the

January 27, 2024 Page 2

Civil Rights Commission to amend its rules to include neonatal care as a related medical condition whenever certain phrases are used.

Thank you for the opportunity to provide comments on this measure.

JADE T. BUTAY DIRECTOR

WILLIAM G. KUNSTMAN DEPUTY DIRECTOR



#### STATE OF HAWAI'I KA MOKU'ĀINA O HAWAI'I DEPARTMENT OF LABOR AND INDUSTRIAL RELATIONS KA 'OIHANA PONO LIMAHANA

January 30, 2024

To: The Honorable Scot Z. Matayoshi, Chair,

The Honorable Andrew Takuya Garrett, Vice Chair, and

Members of the House Committee on Labor & Government Operations

Date: Tuesday, January 30, 2024

Time: 9:30 a.m.

Place: Conference Room 309, State Capitol

From: Jade T. Butay, Director

Department of Labor and Industrial Relations (DLIR)

### Re: H.B. 2552 RELATING TO EMPLOYEE BENEFITS

### I. OVERVIEW OF PROPOSED LEGISLATION

The **DLIR supports** this proposal that amends the Hawaii Family Leave Law (HFLL), Chapter 398, Hawaii Revised Statutes, by providing up to eight weeks of additional family leave for the birth of a child who is required to stay in a neonatal intensive care unit (NICU). The additional family leave (up to 8 weeks after discharge from the NICU) shall be equivalent to the duration the child is in a NICU if during the additional period of family leave the employee provides kangaroo care or expresses breast milk for the child. The measure defines "kangaroo care."

#### II. CURRENT LAW

Chapter 398, HRS, requires employers with one hundred or more employees to provide eligible employees with four weeks of unpaid, job-protected leave for the birth or adoption of a child or to care for a child, spouse, reciprocal beneficiary, sibling, grandchild, or parent with a serious health condition. The employee may elect to substitute any of the employee's accrued paid leaves for any part of the four-week period.

#### III. COMMENTS ON THE HOUSE BILL

For the birth of a child who is required to stay in a NICU, this measure provides additional family leave of up to eight weeks that starts from the date that the child is discharged from the NICU so long as the employee provides the child kangaroo care or expresses breast milk. The additional family leave is equivalent to the duration the child is in a NICU up to a maximum of eight weeks. For example, if the child stays in the NICU for two weeks, the employee would be entitled to an

HB2552 January 30, 2024 Page 2

additional two weeks of family leave, or a total of 6 weeks of family leave. If the child stays in the NICU for ten weeks, the employee would be entitled to an additional eight weeks of family leave, or a total of twelve weeks of Hawaii family leave.

Hawai'i Children's Action Network Speaks! is a nonpartisan 501c4 nonprofit committed to advocating for children and their families. Our core issues are safety, health, and education.

To: House Committee on Labor

Re: HB 2552 – Relating to Employee Benefits

Hawai'i State Capitol & Via Videoconference

January 30, 2024, 9:30 AM

Dear Chair Matayoshi, Vice Chair Garrett, and Committee Members,

On behalf of Hawai'i Children's Action Network Speaks!, I am writing in **SUPPORT of HB 2552**. This bill extends, under certain conditions, the family leave period for up to eight additional weeks for employees who are unable to perform their employment duties due to the birth of a child who is required to stay in a neonatal intensive care unit.

Neonatal intensive care is for infants who are born prematurely or have such serious health or developmental issues that that require intensive medical attention. In Hawai'i, the only high-risk neonatal intensive care unit (NICU) is on O'ahu, which means that parents from other islands often must relocate to O'ahu, away from their employment, for the period of time that their babies need NICU care. Even parents on O'ahu often are unable to fulfill their work duties because they need to care for their babies while they are in the NICU.

This bill would amend the Hawaii Family Leave Law<sup>1</sup> to allow parents to receive up to eight weeks of additional unpaid, but protected, time off when their babies are in the NICU, in order to enable parents to provide kangaroo care and/or breast milk expression for their preterm infant during that time. There is much research supporting the benefits of breastfeeding and kangaroo care to babies, mothers, and society.<sup>2</sup>

This policy is intended to give additional support to parents who face the unique challenge of combining work with caring for an infant who requires neonatal intensive care. The leave provided by this bill would allow more parents to provide such crucial care to their preterm infants.

Mahalo for the opportunity to provide this testimony. Please pass this bill.

Thank you,

Nicole Woo

Director of Research and Economic Policy

<sup>&</sup>lt;sup>1</sup> https://labor.hawaii.gov/wsd/hawaii-family-leave/

<sup>&</sup>lt;sup>2</sup> https://www.hsph.harvard.edu/news/press-releases/mothers-holding-newborns-skin-to-skin-linked-with-lower-death-risk/

#### **HB-2552**

Submitted on: 1/29/2024 4:45:56 PM

Testimony for LGO on 1/30/2024 9:30:00 AM

Submitted By	Organization	<b>Testifier Position</b>	Testify
Todd Taniguchi	Individual	Support	Written Testimony Only

#### Comments:

Dear Chair Matoyoshi, Vice Chair Takuya, and LGO Committee members,

My wife and I are writing in strong support of this bill as parents of two children who were born prematurely and had extended hospital stays of weeks and months in the neonatal intensive care unit (NICU).

Overall, as parents, having time away from work for TWO periods of time would be beneficial:

- 1. To support the child's development in the NICU. This a daily effort requiring hours each day and week spent at the hospital similar to that of a full time job.
- 1. To have a period of bonding and post-discharge adjustment. During the post-discharge period, parents are often asked to attend multiple follow-up visits that go above and beyond that required for a typical newborn. Examples include:
  - 1. Additional follow-ups with other specialized care based on the child's condition
  - 2. Getting eye exams to ensure vision has not been impacted by the NICU stay
  - 3. Getting additional vaccines for RSV (respiratory syncytial virus)

While the bill has changed since it's first draft, we continue to agree with the entirety of Section 1 of the legislation. This bill would provide more robust job protection to families during a time of need. If we can make this work, families would feel less pressure to choose between their livelihood and supporting the development of their infant hospitalized in the NICU.

Please note, as amended, this bill pushes through the job protection elements of this proposal but does not offer paid leave due to the requirement of finding a funding mechanism for paid leave. Specifically, if TDI can't be implemented, please consider creating a bridge between the bill as proposed and a long-term solution of providing paid leave through an appropriate funding mechanism (direct funding of Paid Family Leave by the State or leave an option of modifying the TDI program to fund this marginal cost change. It may be feasible as it targets a relatively small group of beneficiaries likely to be in the range of hundreds or perhaps about 1500 families in a year) or approximately 10% of live births are premature in Hawaii.

Why we think this bill is important:

- It helps parents support the long-term health of their children
- It may help more women remain in the workforce with job continuity instead of dropping out or burning out during this period
- This bill effectively recognizes the added work that ONLY a mother is being asked to perform in support of their child: 6-8 hours per day, every 2-3 hours, expressing breast milk through a pump along with cleaning/sanitization/storage of the equipment and milk, for weeks on end without more than 3 hours of sleep per night. This cannot be outsourced to hospital staff or other family members.
- Travel burden relief and job security Neighbor island families and those outside of Honolulu on Oahu far from Kapiolani or other NICUs especially need the added financial support and job security. Oahu is the only island in the state with NICUs and breastmilk and kangaroo care require them to be on island and at hospital daily and in person.
- This has a financial return: Higher rates and consistency of kangaroo care and breast milk expression will lead to better health outcomes and shorter hospital stays.

Mahalo sincerely for your consideration of this bill.

Todd Taniguchi and Vivien Ong

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Todd Taniguchi and Vivien Ong



# P.O. Box 4270 Kaneohe, HI 96744 www.breastfeedinghawaii.org

TO: Representative Scott Matayoshi, Chair, Representative Andrew Takuya Garrett, Vice Chair and Members of the Committee on Labor and Government Operations

FROM: Patricia Bilyk, RN, MPH, MSN, IBCLC (retired)

Breastfeeding Hawaii Board Member and Former Lactation Consultant

RE: HB 2552 Relating to Employee Benefits

DATE: Tuesday, January 30, 2024 9:30AM

Good Morning I am Patricia Bilyk, representing Breastfeeding Hawaii and we stand in STRONG SUPPORT of HB 2552 extending paid family leave for an additional 8 weeks for employees who had a premature birth.

Breastfeeding Hawaii is a 501c3, non profit organization whose mission is to protect, support and promote breastfeeding in the State of Hawaii. We further work to educate the public, businesses and health professionals on the long-term value of breastfeeding to our society, support management of breastfeeding women and convey the importance of longer contact time in the first year of life, between mothers ,fathers and their infant.

We note in our work with families, that if the infant arrives prematurely there is even more disruption of this mother/father/infant bonding time due to possibly long hospitalizations, and continued healing of the mother postdelivery. Many women who deliver prematurely have complicating conditions that need to be further addressed for up to a full year after delivery.

We feel it is important that mothers, fathers and infants be together as much as possible to provide kangaroo and skin to skin care during the early months of the infants life. They also need to have uninterrupted time to frequently pump precious mothers milk for the infant's perfect growth, development and quicker discharge from hospital. This cannot happen when the mother needs to return to work early due to a need to have a paycheck, when she is unable to and is still recovering from childbirth.

I personally have seen the need first hand for families to be together when I was a Lactation Consultant at Kapiolani Womens and Childrens Medical Center. I worked daily with families of premature infants whose mothers were working to maintain their milk supply, provide their precious milk, bond with their infants and recover from their early childbirth delivery.



# P.O. Box 4270 Kaneohe, HI 96744 www.breastfeedinghawaii.org

We encourage you to pass this bill and further support these families with this change to employee benefits by extending the family leave period for an additional 8 weeks to accommodate employees who need more time to heal postdelivery and provide parental care and cherished mothers milk for their infants.

Mahalo for considering our testimony.