

**JOSH GREEN, M.D.**  
GOVERNOR | KE KIA'ĀINA

**SYLVIA LUKE**  
LIEUTENANT GOVERNOR | KA HOPE KIA'ĀINA

**STATE OF HAWAII | KA MOKU'ĀINA 'O HAWAI'I**  
**OFFICE OF THE DIRECTOR**  
**DEPARTMENT OF COMMERCE AND CONSUMER AFFAIRS**  
**KA 'OIHANA PILI KĀLEPA**  
335 MERCHANT STREET, ROOM 310  
P.O. BOX 541  
HONOLULU, HAWAII 96809  
Phone Number: (808) 586-2850  
Fax Number: (808) 586-2856  
cca.hawaii.gov

**NADINE Y. ANDO**  
DIRECTOR | KA LUNA HO'OKELE

**DEAN I. HAZAMA**  
DEPUTY DIRECTOR | KA HOPE LUNA HO'OKELE

## **Testimony of the Department of Commerce and Consumer Affairs**

**Before the**  
**Senate Committee on Commerce and Consumer Protection**  
**Thursday, February 20, 2025**  
**9:30 a.m.**  
**State Capitol, Conference Room 229 & via Videoconference**

**On the following measure:**  
**S.B. 838, S.D.1, RELATING TO HEALTH INSURANCE**

### **WRITTEN TESTIMONY ONLY**

Chair Keohokalole and Members of the Committee:

My name is Jerry Bump, and I am the Acting Insurance Commissioner of the Department of Commerce and Consumer Affairs' (Department) Insurance Division. The Department offers comments on this bill.

The purpose of this bill is to require all health insurers in the State, excluding Medicaid managed care programs, to cover the cost of continuous glucose monitors and related supplies under certain conditions. Applies to insurance policies, contracts, plans, or agreements issued or renewed in the State after 12/31/2025.

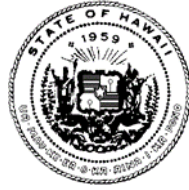
We note that it is unclear whether the amendments in sections 2 through 4 of this bill would be construed as "in addition to the essential health benefits" within the meaning of 45 Code of Federal Regulations (CFR) § 155.170(a), or subject to defrayment provisions under 45 CFR § 155.170(b) which apply to benefits "in addition to the essential health benefits."

For the Committee's information, Hawaii Revised Statutes section 23-51 provides, in part, that "[b]efore any legislative measure that mandates health insurance coverage for specific health services, specific diseases, or certain providers of health care services as part of individual or group health insurance policies, [sic] can be considered, there shall be concurrent resolutions passed requesting the auditor to prepare and submit to the legislature a report that assesses both the social and financial effects of the proposed mandated coverage." The assessment report under Hawaii Revised Statutes 23-52 is required to include, in part, the extent to which such insurance coverage is already generally available, the extent to which insurance coverage of the health care service can be reasonably expected to increase or decrease the insurance premium, and the impact of this coverage on the total cost of health care.

Finally, continuous glucose monitors are to be "prescribed by a health care professional **authorized to prescribe** the device", Page 4, lines 4-5, (emphasis added). We note that the health care professional which is authorized to prescribe the device is unclear.

Thank you for the opportunity to testify.

JOSH GREEN, M.D.  
GOVERNOR  
KE KIA'ĀINA



RYAN I. YAMANE  
DIRECTOR  
KA LUNA HO'OKELE

JOSEPH CAMPOS II  
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

TRISTA SPEER  
DEPUTY DIRECTOR  
KA HOPE LUNA HO'OKELE

February 17, 2025

TO: The Honorable Senator Jarrett Keohokalole, Chair  
Senate Committee on Commerce and Consumer Protection

FROM: Ryan I. Yamane, Director

SUBJECT: **SB 838 SD1 – RELATING TO HEALTH INSURANCE.**

Hearing: Thursday, February 20, 2025, Time 9:30 a.m.  
Conference Room 229 & Via Videoconference, State Capitol

**DEPARTMENT'S POSITION:** The Department of Human Services (DHS) appreciates the intent of the bill and the Senate Committee on Health and Human Services' amendments regarding Medicaid managed care plans and Medicaid financing. DHS provides comments and respectfully requests a technical amendment.

**PURPOSE:** This bill requires all health insurers in the State, excluding Medicaid managed care programs, to cover the cost of continuous glucose monitors and related supplies under certain conditions. Applies to insurance policies, contracts, plans, or agreements issued or renewed in the State after 12/31/2025. (SD1)

The Senate Committee on Health and Human Services amended this measure by:

- (1) Deleting language that would have:
  - (A) Required insurance coverage for CGMs to apply to plans under Medicaid managed care programs in the State;
  - (B) Required the Department of Human Services to seek federal authorization and waivers as necessary to implement this measure and to allow for full alignment with federal standards and optimization of Medicaid resources; and
  - (C) Allowed the Department of Human Services to accept and expend funds from gifts, grants, and donations from individuals, private organizations, foundations,

or other governmental agencies to support the expansion of CGM access under certain conditions;

- (2) Inserting language stating that section 23-51, Hawaii Revised Statutes, which requires a sunrise analysis by the Auditor for certain insurance coverage mandates, does not apply to this measure; and
- (3) Making technical, nonsubstantive amendments for the purposes of clarity and consistency.

DHS notes that GCMs can be an important tool for individuals with diabetes to monitor their blood glucose levels with real-time data, which could help them avoid blood sugar fluctuations. DHS is supportive of access to GCMs. Currently, the Med-QUEST Medicaid program, including all of the Medicaid managed care plans, covers CGM when medically necessary without co-pays or costs to Medicaid members.

Given that the requirement for Medicaid managed care plans to cover CGMs has been deleted from the measure, we respectfully request that the purpose of the bill be aligned accordingly. Thus, DHS recommends that page 2, lines 20-21, be stricken "~~including medicaid managed care programs,~~".

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

**SB-838-SD-1**

Submitted on: 2/16/2025 4:01:44 PM

Testimony for CPN on 2/20/2025 9:30:00 AM

Submitted By	Organization	Testifier Position	Testify
Ruth Love	Individual	Support	Written Testimony Only

Comments:

By keeping blood glucose levels within or closer to normal ranges with continuous glucose monitoring units or CGM you will:

Decrease costs for amputations

Decrease costs for visual deficits

Decrease costs for kidney dialysis

Decrease hospitalizations for elevated blood sugar levels including ICU stays

Decrease costs for ER visits for hypoglycemia.

Decrease the number of future heart attacks, strokes and nerve damage to feet and stomachs.

The potential savings for the state going forward and the improvement in quality of life for patients is excellent.

As an ER nurse of 35 years I wholeheartedly approve of this bill.

I wish it also included those with Medicare supplemental plans as well.

Thank you

Mrs Ruth Love



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

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

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

**JOHN C. (JACK) LEWIN, M.D.**  
ADMINISTRATOR

**LATE**

February 10, 2025

To: Senate Committee of Health and Human Services  
Chair Joy San Buenaventura,  
Vice Chair Henry JC Aquino, and  
Honorable Members

From: Jack Lewin MD, Administrator, SHPDA, and Sr. Advisor to Governor  
Josh Green MD on Healthcare Innovation

Re. SB 838 – RELATING TO HEALTH INSURANCE

Position: SUPPORT with COMMENTS

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Testimony:

SHPDA strongly supports the intent of this act, but with comments.

SB 838 requires all health insurers in the State, including Medicaid managed care programs, to cover the cost of continuous glucose monitors and related supplies under certain conditions after 12/31/2025.

Continuous glucose monitors or CGMs are clinically valuable and potentially lifesaving medical devices that monitor blood glucose levels with real time readings that can be conveniently observed on the patient's cell phone and avoid the having the patient undergo multiple finger stick tests. They are most useful with insulin-dependent persons with diabetes, in children with Type 1 Diabetes, and in persons with unstable and highly variable blood sugar levels.

Because the CGM sensors (attached to the body) typically need to be replaced every two weeks and come with an expense of about \$150 or more for two weeks, or between \$2,500-3,000 annually, they are not needed for all persons with diabetes.

However, because they are truly lifesaving for some patients, and are very powerful means of helping many patients with diabetes adjust their

lifestyles to better control their diabetes and avoid progression of the hugely expensive complications of diabetes, they should be covered by insurers for those patients who can benefit. They are, however, frequently denied in the prior authorization process. Traditional Medicare has tended to make these devices more available than commercial insurers nationally.

SHPDA defers to the DHS/Med-QUEST program to comment on their rules and regulations with respect to how this coverage should be applied to them.

Mahalo for the opportunity to testify.

■ -- Jack Lewin MD, Administrator, SHPDA



**LATE**

**Hawaii Medical Association**

1360 South Beretania Street, Suite 200 • Honolulu, Hawaii 96814  
Phone: 808.536.7702 • Fax: 808.528.2376 • hawaiimedicalassociation.org

**SENATE COMMITTEE ON COMMERCE AND CONSUMER PROTECTION**

Senator Jarrett Keohokalole, Chair

Senator Carol Fukunaga, Vice Chair

Date: Feb 20, 2025

From: Hawaii Medical Association (HMA)

Jerald Garcia MD - Chair, HMA Public Policy Committee

**Re: SB 838 SD 1 RELATING TO HEALTH INSURANCE.** Department of Human Services; Department of Health; Health Insurance; Medicaid; Mandated Coverage; Diabetes; Equipment and Supplies; Continuous Glucose Monitors.

**Position: Support**

This measure would require all health insurers in the State, including Medicaid managed care programs, to cover the cost of continuous glucose monitors and related supplies under certain conditions, apply to insurance policies, contracts, plans, or agreements issued or renewed in the State after 12/31/2025.

Presently 2 million Americans have type 1 diabetes, including about 304,000 children and adolescents. The prevalence of diabetes in seniors age 65 and older remains high, at 29.2%, or 16.5 million seniors (diagnosed and undiagnosed). According to the Hawaii Behavioral Risk Factor Surveillance System (BRFSS), in 2022, 134,000 (11.7%) adults in Hawaii were diagnosed with diabetes. Diabetes is 17% more prevalent in rural areas than urban, and 62% of rural counties do not have diabetes self-management education and support programs.

Diabetes detection and treatment, ongoing self-management, and improved delivery of care are critical to preventing and reducing the burden of diabetes in Hawaii. A non-adjunctive continuous glucose monitor (CGM) can be used to make treatment decisions without the need for a stand-alone blood glucose meter (BGM) to confirm testing results for diabetes patients. Effective glucose management can improve health outcomes, decreasing complication risks for worsening renal disease, non-traumatic lower extremity amputations and blindness in diabetic patients. HMA supports this measure that will improve access to diabetes care, supporting patients with this chronic disease, particularly those in underserved and rural areas of our state.

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

**2025 Hawaii Medical Association Officers**

Elizabeth Ann Ignacio, MD, President • Nadine Tenn-Salle, MD, President Elect • Angela Pratt, MD, Immediate Past President  
Jerris Hedges, MD, Treasurer • Thomas Kosasa, MD, Secretary • Marc Alexander, Executive Director

**2025 Hawaii Medical Association Public Policy Coordination Team**

Jerald Garcia, MD, Chair  
Linda Rosehill, JD, Government Relations • Marc Alexander, Executive Director



## REFERENCES AND QUICK LINKS

State of Hawaii, Department of Health. Hawaii diabetes prevention and control program. Know Your Numbers. <https://health.hawaii.gov/diabetes/diabetes-prevention-and-control-program/numbers/> Accessed Feb 11 2025.

Centers for Disease Control CDC. [Diabetes Self-Management: Rural Policy Brief](#). Accessed Feb 11 2025.

Hawaii State Health Insurance Assistance Program. (SHIP). [Chronic Disease Report 2024](#). Accessed Feb 11 2025.

Centers for Medicare and Medicaid Services. Glucose Monitor - Policy Article. CMS.gov <https://www.cms.gov/medicare-coverage-database/view/article.aspx?articleId=52464> Accessed Feb 11 2025.

Aguiar C, Hurwitz EL, Wu YY, Yamanaka AB. Examining Diabetes Status by the Social Determinants of Health Among Adults in Hawai'i. Hawaii J Health Soc Welf. 2024 Aug;83(8):216-224. doi: 10.62547/GDHV1853. PMID: 39131831; PMCID: PMC11307319.

### **2025 Hawaii Medical Association Officers**

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### **2025 Hawaii Medical Association Public Policy Coordination Team**

Jerald Garcia MD, Chair  
Linda Rosehill, JD, Government Relations • Marc Alexander, Executive Director



**LATE**

Hawai'i State Senate Committee on Commerce and Consumer Protection

Thursday, February 20, 2025 at 9:30 am  
Conference Room 229 & Videoconference  
Hawai'i State Capitol

### **SB 838 SD1 RELATING TO HEALTH INSURANCE**

Good morning, Chair Keohokalole, Vice Chair Fukunaga, and Members of the Senate Committee on Commerce and Consumer Protection.

My name is Palani Smith, and I serve as the Regional Vice President for Hawai'i and Guam of Liberty Dialysis. We are an affiliate of Fresenius Kidney Care.

Liberty Dialysis Hawai'i stands in **STRONG SUPPORT of SB838 SD1** which mandates all health insurers in Hawai'i to cover the cost of continuous glucose monitors (CGMs) and its related supplies. This coverage is crucial for improving patients' ability to better manage their diabetes and preventing its severe complications including end-stage renal disease (ESRD).

As a dialysis provider with a lineage tracing back to the Sisters of St. Francis, who served Hawai'i as the very first dialysis provider, we urge you to mandate coverage for continuous glucose monitors. In doing so, you will significantly help Hawai'i's people who are diabetic. Continuous glucose monitors help diabetics more effectively manage swings in their blood glucose levels. Smoothing out these swings and keeping their glucose at more consistent, healthy levels improves their ability to manage their diabetes effectively. It improves their quality of life.

Approximately 60% of all patients on dialysis have diabetes as the primary cause of their ESRD.<sup>i</sup> Diabetes is much too prevalent in Hawai'i. About 120,971 adults, or 10.6% of Hawai'i's adult population are diabetic. An additional 39,000 individuals are estimated to be living with undiagnosed diabetes and at-risk for significant health issues. About 410,000 adults in Hawai'i, 37.1% of the adult population, have prediabetes. Native Hawai'ians, Filipinos, and Japanese populations have higher prevalence rates compared to other ethnicities.<sup>ii</sup> Residents in rural areas face barriers to diabetes care, such as limited availability of endocrinologists and diabetes management resources.<sup>iii</sup>

Increasing access to continuous glucose monitors across Hawai'i will help individuals with diabetes to manage their condition more actively, reducing the risk of life-altering diabetes complications like end-stage renal disease, blindness, neuropathy, stroke, and heart attack.

Liberty Dialysis Hawai'i urges you to please pass this bill. Thank you.

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<sup>i</sup> Kidneyfund.org

<sup>ii</sup> diabetes.org, health.Hawai'i.gov

<sup>iii</sup> <https://pmc.ncbi.nlm.nih.gov/articles>

February 20, 2025

**To: Chair Keohokalole, Vice Chair Fukunaga, and Members of the Senate Committee on Commerce and Consumer Protection (CCP)**

From: Hawaii Association of Health Plans Public Policy Committee

Date/Location: February 20, 2025; 9:30 am/Conference Room 229 & Videoconference

**Re: Testimony with comments on SB 838 SD1– Relating to Health Insurance**

The Hawaii Association of Health Plans (HAHP) appreciates the opportunity to share our comments on SB 838 SD1. HAHP is a statewide partnership that unifies Hawaii's health plans to improve the health of Hawaii's communities together. A majority of Hawaii residents receive their health coverage through a plan associated with one of our organizations.

We believe that effective glucose monitoring has the potential to improve the health and well-being of many residents in our state. However, as this bill would create a new mandated benefit, we want to note that any new benefits would increase costs that could affect employers and residents in Hawaii. Furthermore, we wanted to note that since this is not a benefit included in Hawaii's EHB-benchmark Plan or required under federal law, the State may be required to defray any additional cost.

We respectfully request that the state auditor conduct an impact assessment report pursuant to HRS 23-51 and 23-52. By doing so, we can ensure that the mandate is both effective and sustainable, and that it addresses the needs of all stakeholders involved.

Thank you for the opportunity to testify on SB 838 SD1.

Sincerely,

HAHP Public Policy Committee  
cc: HAHP Board Members



Hilo Benioff  
Medical Center  
Foundation

**LATE**

**Relating to Health Insurance**

**Hearing Date: February 20, 2025**

**Committee: Commerce and Consumer Protection (CPN)**

**Dear Chair Keohokalole, Vice Chair Fukunaga, and Members of the Committee:**

I am submitting testimony in **strong support of SB838\_SD1**, which mandates health insurers in the State of Hawai'i, including Medicaid managed care programs, to provide coverage for continuous glucose monitors (CGMs) and related supplies for individuals diagnosed with diabetes.

Diabetes is a significant public health concern in Hawai'i, disproportionately affecting residents in rural communities. Over 200,000 individuals in the state live in rural areas where health care access is already limited. With 10.6% of adults diagnosed with diabetes, the need for effective diabetes management tools is critical. CGMs provide life-changing benefits by offering real-time glucose data, helping patients maintain safe blood sugar levels, and reducing the risk of severe complications such as hypoglycemia, emergency hospitalizations, and long-term organ damage.

Between August 2024 and January 2025, the Foundation hosted a series of **Diabetes Community Care Gatherings** across all districts of Hawai'i Island. At these gatherings, participants shared heartbreaking accounts of the challenges they face due to **inconsistent and inadequate insurance coverage for CGM devices**. Many attendees described the prolonged, burdensome process required for provider approval, with some individuals so discouraged that they no longer attempt to obtain these essential devices. Others expressed frustration that, without CGMs, they struggle to effectively manage their diabetes, leading to frequent emergency room visits and diminished quality of life.

Although it is been stated that diabetes equipment and supplies are already a covered benefit, this has not been the experience of too many patients struggling with diabetes. **Consistent and easier** access to CGMs will significantly improve health outcomes and reduce the financial burden on both individuals and the broader healthcare system. By providing **consistent and equitable** coverage for CGMs, Hawai'i can take a proactive step toward addressing health disparities and ensuring that all residents, especially those in rural and underserved areas, receive the diabetes management tools they need.

For these reasons, I urge the committee to pass SB838\_SD1 with the addition of stronger language/direction for managed care plans to mandate an easier approval process to ensure all individuals living with diabetes in Hawai'i have access to continuous glucose monitoring technology, regardless of their insurance plan or geographic location.

**Mahalo for your time and consideration.**

**Respectfully,**

Lisa Rantz

Executive Director

**Hilo Benioff Medical Center Foundation**

1190 Waiānue Avenue, Hilo, HI 96720 | 808-932-3636 | [www.hbmcfoundation.org](http://www.hbmcfoundation.org)

February 20, 2025

The Honorable Jarrett Keohokalole, Chair  
The Honorable Carol Fukunaga, Vice Chair  
Senate Committee on Commerce and Consumer Protection

Re: SB 838 SD1 – RELATING TO HEALTH INSURANCE

Dear Chair Keohokalole, Vice Chair Fukunaga, and Members of the Committee:

Hawaii Medical Service Association (HMSA) appreciates the opportunity to provide comments on SB 838 SD1, which requires all health insurers in the State, excluding Medicaid managed care programs, to cover the cost of continuous glucose monitors and related supplies under certain conditions, and applies to insurance policies, contracts, plans, or agreements issued or renewed in the State after 12/31/2025.

We support the intent of this bill as we believe that medically necessary continuous glucose monitoring has the potential to improve the health and well-being of many residents in our state, however, we believe that the mandating of continued glucose monitors, would be considered a new health mandate. We would request that a study be required first, pursuant to Section 23-51 and 23-52 of the Hawaii Revised Statutes, to study the social and financial impacts of this coverage to ensure that the mandate is both effective and sustainable and that it addresses the needs of all stakeholders involved.

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

Sincerely,



Dawn Kurisu  
Assistant Vice President  
Community and Government Relations

**LATE**

Diabetes has been a prevalent health issue throughout the Hawai'i Island community my entire life. Unfortunately, my community has lost family and friends over the years to diabetes, which thrives in our Hawai'i culture through our dietary habits. Access to essential healthcare has always been an issue, and despite improvements over the past couple of decades, there is still limited access to diabetes care. This is particularly tough for many Hawai'i Island Residents in the rural parts of Big Island and often leads to late diagnosis.

I fully support Senator Dru Kanuha's bill (SB838) and believe that improved access to consistent diagnostic prevention equipment will have an important positive impact on the health and wellness of our community. Continuous Glucose Monitors (CGMs) have evolved to be easily accessible with smartphone app access, allowing our Kupunas to actively monitor their glucose levels and adjust their dietary habits accordingly. Personally, as someone who has struggled with border-line high blood pressure and am concerned about the potential of becoming diabetic, access to insurance-covered CGM would really help me be conscious of the effects of certain foods & drinks on my overall health and wellness and help to make me accountable to myself by simply being aware of the effects of my decisions. Many of my friends and family would also benefit from access to CGMs, and I feel that this bill would help to improve the health and wellness of my community.