

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

SYLVIA LUKELIEUTENANT GOVERNOR | KA HOPE KIA'ĀINA

STATE OF HAWAII | KA MOKUʻĀINA 'O HAWAIʻI OFFICE OF THE DIRECTOR DEPARTMENT OF COMMERCE AND CONSUMER AFFAIRS KA 'OIHANA PILI KĀLEPA

NADINE Y. ANDO DIRECTOR | KA LUNA HO'OKELE

DEAN I. HAZAMADEPUTY DIRECTOR | KA HOPE LUNA HO'OKELE

335 MERCHANT STREET, ROOM 310 P.O. BOX 541 HONOLULU, HAWAII 96809 Phone Number: (808) 586-2850 Fax Number: (808) 586-2856

Testimony of the Department of Commerce and Consumer Affairs

cca.hawaii.gov

Before the
House Committee on Health
Wednesday, March 12, 2025
9:00 a.m.
State Capitol, Conference Room 329 & via Videoconference

On the following measure: S.B. 838, S.D. 2, RELATING TO HEALTH INSURANCE

Chair Takayama 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, beginning January 1, 2026, 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.

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

Testimony of DCCA S.B. 838, S.D. 2 Page 2 of 2

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 6-7, (emphasis added). We note that the health care professional who is authorized to prescribe the device is unclear.

Thank you for the opportunity to testify.



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

JOSH GREEN, M.D. GOVERNOR OF HAWAI'I KE KIA'ĀINA O KA MOKU'ĀINA 'O HAWAI'I

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

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

ADMINISTRATOR

March 10, 2025

TO: REPRESENTATIVE COMMITTEE ON HEALTH

Representative Gregg Takayama, Chair

Representative Sue L. Keohokapu-Lee Loy, Vice Chair, and

Honorable Members

FROM: Jack Lewin MD, Administrator, SHPDA, and

Sr. Advisor to Governor Josh Green MD on Healthcare Innovation

RE: SB 838, SD2 -- RELATING TO HEALTH INSURANCE

HEARING: Wednesday, March 12, 2025 @ 9:00 am; Conference Room 329

POSITION: SUPPORT with COMMENTS

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



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

JOSH GREEN, M.D. GOVERNOR OF HAWAI'I KE KIA'ĀINA O KA MOKU'ĀINA 'O HAWAI'I

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

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

ADMINISTRATOR

March 10, 2025

To: House Committee on Health Representative Gregg Takayama, Chair; Representative Sue Keohokapu-Lee Loy, Vice Chair; and Honorable Members

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

Re. SB 838 SD2 – RELATING TO HEALTH INSURANCE (Continuous Glucose Monitors)

Position: SUPPORT with COMMENTS

Testimony:

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

SB 838 SD2 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



Hawai'i State House Committee on Health

Wednesday, March 12, 2025, at 9:00 am Conference Room 329 & Videoconference Hawai'i State Capitol

SB 838 SD2 RELATING TO HEALTH INSURANCE

Good morning, Chair Takayama, Vice Chair Keohokapu-Lee Loy, and Members of the House Committee on Health.

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. The Sisters of St. Francis pioneered dialysis care in Hawai'i and entrusted us with the honor of continuing their legacy of care.

Liberty Dialysis Hawai'i stands in <u>STRONG SUPPORT of SB 838 SD2</u> 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, 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. 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. Residents in rural areas face barriers to diabetes care, such as limited availability of endocrinologists and diabetes management resources.

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.

" diabetes.org, health.Hawai'i.gov

i Kidneyfund.org

iii https://pmc.ncbi.nlm.nih.gov/articles



PRESIDENT

March 10, 2025

Rodney Powell

VICE PRESIDENT

To: Chair Takayama and Vice Chair Keohokapu-Lee Loy and Members of the Committee,

Brad Kinoshita

SECRETARY Dean Fuke Re: Testimony in Support of SB838_SD2

TREASURER

Eunice Muramoto Center in s

My name is Lisa Rantz and I am submitting testimony on behalf of **Hilo Benioff Medical Center** in **strong support** of **SB838_SD2**.

TRUSTEES

Chris Brilhante
Jerry Chang
Lynda Dolan, M.D.
Paul Franklin
Kerry Glass
Ryan Kadota
James Lambeth, M.D.
Ami Lamson

As a healthcare organization committed to improving health outcomes for our community, we see firsthand the devastating impact of **inconsistent access to continuous glucose monitors (CGMs)** for diabetes patients.

Ami Lamson Candace Moore Craig Shikuma, M.D. Julie Tulang Diabetes affects over **200,000** adults in Hawai'i, with rural residents facing the greatest barriers to care. CGMs provide critical real-time glucose monitoring that helps prevent dangerous fluctuations, reduces hospitalizations, and improves long-term health outcomes. While CGMs are technically covered by most insurers, the approval process is inconsistent, arbitrary, and often inaccessible.

HONORARY TRUSTEES

Phoebe Lambeth Hoon Park, M.D. Richard Robbins, M.D. At our **Diabetes Community Care Gatherings**, we heard heartbreaking stories from patients who desperately need CGMs but are routinely denied coverage. One such case involved a **husband and wife on the same health plan**—the husband, who had **advanced diabetes with amputations**, was denied a CGM, while his **newly diagnosed wife** was approved with no issue.

EXECUTIVE DIRECTOR

Lisa Rantz

Josh Vierra

PROGRAM MANAGER Jessica DeCamp These discrepancies are unacceptable. SB838_SD2 ensures that all insurers, including managed care plans, provide consistent coverage for CGMs, allowing patients to manage their diabetes effectively, prevent complications, and live healthier lives.

HI AHEC ASSOCIATE DIRECTOR Jude "JD" Domizio

We urge the committee to **pass SB838_SD2** to protect our community members from unnecessary suffering and provide equitable healthcare access for all.

Mahalo for your time and consideration,

Lisa Rantz

Executive Director

Lisa Rantz





TESTIMONY IN SUPPORT OF SB838 SD2
Relating to Health Insurance Coverage for Continuous Glucose Monitors
Submitted by Randy Kurohara, Executive Director
On Behalf of Community First Hawai`i

Aloha Chair Takayama, Vice Chair Keohokapu-Lee Loy, and Members of the Committee,

Community First Hawai`i strongly supports SB838 SD2, which would require all health insurers in Hawai`i to cover the cost of continuous glucose monitors (CGMs) and related supplies under certain conditions.

About Community First Hawaii

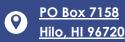
Community First Hawai`i is a nonprofit organization dedicated to improving healthcare access, affordability, and outcomes for the people of Hawaii Island. Our mission is to serve as a trusted neutral forum for problem-solving in healthcare, convening stakeholders to drive meaningful change. Our vision is a Hawaii where everyone has the opportunity to live a healthy life, supported by a healthcare system that is accessible, sustainable, and community-centered.

Why We Support SB838 SD2

Diabetes is a major public health challenge in Hawaii, affecting over **108,600 adults** statewide. The burden of diabetes is particularly severe in rural communities, where residents face **higher rates of diabetes complications** due to limited healthcare access, fewer specialists, and geographic barriers to consistent care.

Continuous glucose monitors (CGMs) are a proven, cost-effective tool that helps individuals manage their blood sugar levels, reduce complications, and prevent costly emergency interventions. Studies show that CGMs significantly improve **HbA1c levels, reduce hypoglycemic events, and enhance overall quality of life** for individuals with diabetes. Despite their benefits, **inconsistent insurance coverage creates unfair barriers**, leaving many residents, especially in rural and underserved communities without access to this life-changing technology.

As a community-based organization focused on collaborative solutions, we believe that expanding access to CGMs aligns with our mission to create a healthcare system that prioritizes prevention and health equity. Ensuring comprehensive insurance coverage for CGMs will not only improve health outcomes but also reduce long-term healthcare costs by preventing complications such as **kidney disease**, **amputations**, **and hospitalizations** related to uncontrolled diabetes.







By passing SB838 SD2, the Legislature will take a critical step toward ensuring that all residents, regardless of income or insurance type, have the tools they need to manage their health effectively.

We urge your support for SB838 SD2 and appreciate your leadership in advancing policies that improve healthcare access and outcomes for Hawaii's communities.

Mahalo for your time and consideration. Sincerely,

Randy Kurohara

Executive Director

Community First Hawai'i

Kandreith





SB-838-SD-2

Submitted on: 3/10/2025 12:06:51 PM

Testimony for HLT on 3/12/2025 9:00:00 AM

Submitted By	Organization	Testifier Position	Testify
Scott Grosskreutz, M.D.	Hawaii Provider Shortage Crisis Task Force	Support	Written Testimony Only

Comments:

Nearly 10% of Hawaii's population has diabetes. Our Neighbor Islands have a higher percentage of our population with this disease. Inadequate monitoring of blood glucose levels has a catastrophic effort on health and results in stoke, MI, renal failure and amputations. Many of our severely ill diabetes patients in our rural areas has very limited access to medical care due to a lack of providers and the long distances between rural communities and healthcare centers. Please pass this bill.

<u>SB-838-SD-2</u> Submitted on: 3/10/2025 4:42:32 PM

Testimony for HLT on 3/12/2025 9:00:00 AM

Submitted By	Organization	Testifier Position	Testify
Juliette Tulang	Hilo Benioff Medical Center Foundation	Support	Written Testimony Only

Comments:

I had personal experience with a friend who needed this help.

SB-838-SD-2

Submitted on: 3/10/2025 5:54:17 PM

Testimony for HLT on 3/12/2025 9:00:00 AM

Submitted By	Organization	Testifier Position	Testify
Summer Mochida-Meek	Hawaii State Rural Health Association	Support	Written Testimony Only

Comments:

The Hawaii State Rural Health Association is in strong support of SB838:

• Diabetes is a Major Public Health Concern:

- o Over 108,600 adults in Hawai'i (9.5% of the population) have diabetes.
- Rural residents face higher rates of diabetes complications due to limited healthcare access.

• CGMs Improve Health Outcomes:

- o Provide **real-time blood glucose tracking**, reducing severe fluctuations.
- Help patients avoid hypoglycemia (low blood sugar) and dangerous hospitalizations.
- Studies show fewer emergency visits and lower A1C levels for patients using CGMs.

• Inconsistent Insurance Coverage Creates Unfair Barriers:

- o CGMs are technically a **covered benefit** under most insurance plans.
- o However, approval processes are unpredictable and denials are common.
- **Patients give up trying to obtain CGMs** due to excessive administrative burdens.



Testimony of John M. Kirimitsu Counsel

Before:

House Committee on Health The Honorable Gregg Takayama, Chair The Honorable Sue L. Keohokapu-Lee Loy, Vice Chair

> March 12, 2025 9:00 am Conference Room 329

Re: SB 838 SD2 Relating to Health Insurance

Chair, Vice Chair, and committee members, thank you for this opportunity to provide testimony on SB 838 SD2 mandating coverage for continuous glucose monitors and related supplies.

Kaiser Permanente Hawaii would like to offer comments.

Kaiser supports continuous glucose monitoring to help people stay close to their glucose targets, which can reduce emergency department visits and hospitalizations for chronic health issues, including hypoglycemia.

However, this proposed bill mandating glucose monitors is duplicative of Hawaii's existing diabetes mandate¹ requiring coverage for diabetes equipment and supplies, *which includes glucose monitors*. Accordingly, we believe that this bill is unnecessary.

Should this bill move forward, Kaiser requests an impact assessment report, as statutorily required under Sections 23-51 and 23-52 of the Hawaii Revised Statutes, since this is a new mandate for coverage.

Thank you for the opportunity to comment.

¹ §431:10A-121 Coverage for diabetes. Each policy of accident and health or sickness insurance providing coverage for health care, other than an accident-only, specified disease, hospital indemnity, medicare supplement, long-term care, or other limited benefit health insurance policy, that is issued or renewed in this State, shall provide coverage for outpatient diabetes self-management training, education, equipment, and supplies, if:

⁽¹⁾ The equipment, supplies, training, and education are medically necessary; and

⁽²⁾ The equipment, supplies, training, and education are prescribed by a health care professional authorized to prescribe.



March 12, 2025

To: Chair Takayama, Vice Chair Keohokapu-Lee Loy, and Members of the House Committee on Health

From: Hawaii Association of Health Plans Public Policy Committee

Date/Location: March 12, 2025; 9:00 am/Conference Room 329 & Videoconference

Re: Testimony with comments on SB838 SD2- Relating to Health Insurance

The Hawaii Association of Health Plans (HAHP) appreciates the opportunity to share our comments on SB 838 SD2. 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 SB838 SD2.

Sincerely,

HAHP Public Policy Committee cc: HAHP Board Members

SB-838-SD-2

Submitted on: 3/11/2025 7:35:50 AM

Testimony for HLT on 3/12/2025 9:00:00 AM

Submitted By	Organization	Testifier Position	Testify	
Esther Smith	Mohala Health	Support	Remotely Via Zoom	

Comments:

Hypoglycemic episodes can be immediately deadly to any diabetic. Hyperglycemia causes chronic illness in most but also can result in hospitalization or death.

CGM's are invaluable tools to manage diabetes day to day. They provide information and education for every diabetic fortunate enough to have one.

CGM's are essential tools for diabetics with severe fluctuations in glucose levels and those who cannot communicate how they are feeling.

I will provide further examples and details via zoom.



March 12, 2025

The Honorable Gregg Takayama, Chair The Honorable Sue L. Keohokapu-Lee Loy, Vice Chair House Committee on Health

Re: SB 838 SD2 – RELATING TO HEALTH INSURANCE

Dear Chair Takayama, Vice Chair Keohokapu-Lee Loy, and Members of the Committee:

Hawaii Medical Service Association (HMSA) appreciates the opportunity to provide comments on SB 838 SD2, which beginning 1/1/2026, 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



March 10, 2025

To: Rep. Gregg Takayama, Chair; Rep. Sue L. Keohokapu-Lee Loy, Vice Chair

House Committee on Health (HLT)

From: East Hawaii Independent Physicians Association (dba Big Island Docs)

Subject: Testimony in Strong Support of SB838 – Expanding Access to Continuous Glucose Monitors

Dear Chair Takayama, Vice Chair Keohokapu-Lee Loy, and Members of the Committee,

We appreciate the opportunity to submit testimony in strong support of SB838, which will require health insurers, including Medicaid, to cover continuous glucose monitors (CGMs) for individuals diagnosed with diabetes.

Big Island Docs represents 45 independent private practice providers on Hawai'i Island delivering care to over 35,000 patients. As healthcare providers in Hawai'i, we see firsthand the growing challenges in patient access to care, particularly in rural and underserved communities. Diabetes is a major public health concern, with over 108,600 adults in Hawai'i (9.5% of the population) currently living with the disease. Rural residents, in particular, face higher rates of complications due to limited healthcare access, making it even more critical that we provide every available tool to improve their health.

SB838 will ensure that everyone with diabetes, regardless of income or location, has access to CGMs, improving their health outcomes and reducing the burden on our healthcare system. CGMs provide real-time blood glucose tracking, which helps patients avoid severe fluctuations and potentially dangerous episodes of hypoglycemia (low blood sugar). Studies have shown that patients using CGMs experience fewer emergency visits and lower A1C levels, leading to improved long-term health outcomes. These devices not only improve the quality of life for those with diabetes but also reduce hospitalizations and the overall strain on healthcare resources.

Currently, CGMs are technically covered under most insurance plans. However, the approval processes are often unpredictable, and denials are all too common. The administrative burdens placed on patients seeking CGMs are excessive, and many give up trying to obtain these essential devices. SB838 will eliminate these barriers, making it easier for patients to get the care they need.

On behalf of our membership, we strongly urge the Committee to support and pass SB838 to make continuous glucose monitoring accessible for all who need it. Thank you for your time and consideration.

Mahalo,

Lynda Dolan, MD

President

Brenda Camacho, MD

Brude Cem

VP & Treasurer

Craig Shikuma, MD

Medical Director, BIHC

Erin Kalua, MD Secretary

www.bigislanddocs.com



Hawaii Medical Association

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

HOUSE COMMITTEE ON HEALTH Representative Gregg Takayama, Chair Representative Sue Keohokapu-Lee Loy, Vice Chair

Date: March 12, 2025

From: Hawaii Medical Association (HMA)

Jerald Garcia MD - Chair, HMA Public Policy Committee

Re: SB 838 SD 2 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

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?articleld=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

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

Testimony to support SB838 SD2: Relating to health insurance-cover the cost of continuous glucose monitors and related supplied Committee on Health (HLT)

March 12, 2025

To the Honorable Chair Takayama, Vice Chair Keohokapu-Lee Loy, and Members of the Committee,

My name is Camlyn Masuda and I am an Associate Specialist and Clinical Pharmacist with the University of Hawai'i at Hilo Daniel K Inouye College of Pharmacy. I appreciate the opportunity to submit testimony in support of SB838 SD2, a bill to mandate health insurances to cover the cost of continuous glucose monitors and education on diabetes. My testimony does not represent the views of the University of Hawai'i at Hilo.

I currently practice in a family medicine physician office setting and I am a diabetes educator. In my role I teach patients with diabetes about their medications and ways to help prevent complications from diabetes. The use of continuous glucose (sugar) monitors (CGM) is a powerful tool that help people recognize food/drink/stress that can increase their glucose levels which empowers the patient to make changes in their lifestyle to help lower their glucose levels and prevent complications because it gives glucose readings every 5 minutes without the patient having to poke their finger everytime. The CGM also provides information to help the patient and healthcare managing the patient to make changes in their medications. The CGM should be available to all patients with diabetes to help prevent complications such as kidney failure, which Hawai'i has a higher rate than the national average.

I respectfully and strongly urge the Committee to pass **SB838 SD2** and thank you for the opportunity to testify and prevent complications for the people of Hawai'i who have diabetes. Sincerely,

Carey & Marndh

Camlyn Masuda, PharmD, CDCES, BCACP

Associate Specialist, Dept. of Pharmacy Practice, Daniel K. Inouye College of Pharmacy, University of Hawai'i at Hilo

677 Ala Moana Blvd. Ste 1025A

Honolulu, HI 96813

Email: camlynm@hawaii.edu

SB-838-SD-2

Submitted on: 3/10/2025 11:16:00 AM

Testimony for HLT on 3/12/2025 9:00:00 AM

Submitted By	Organization	Testifier Position	Testify
Jessica DeCamp	Individual	Support	Written Testimony Only

Comments:

Aloha,

I am writing to express my **strong and unwavering support** for SB838-SD2, which will require health insurers to consistently cover continuous glucose monitors (CGMs). As a resident of Volcano, Hawai'i, I am deeply concerned about the barriers many individuals with diabetes face in accessing this life-changing technology.

Right now, **insurance providers do not treat all people equally**, leaving too many individuals without access to a CGM simply because of the fine print in their policy. This is not just an issue of fairness—it's a matter of **life and death** for many. CGMs empower people with diabetes to monitor their blood sugar in real time, make informed decisions, and prevent dangerous highs and lows that can lead to costly hospitalizations or even fatal complications.

The benefits of CGMs are well-documented: many individuals who gain access to this technology find they can **reduce their reliance on insulin or other expensive medications**, saving both themselves and insurance providers significant costs in the long run. Denying coverage for CGMs is not just harmful—it's financially short-sighted.

SB838-SD2 is a **crucial step toward health equity and common-sense healthcare reform**. By ensuring that all people with diabetes have access to continuous glucose monitoring, we can improve health outcomes, prevent unnecessary suffering, and ultimately save lives.

I urge you to support and pass SB838-SD2 to make CGMs **affordable**, **accessible**, **and available to all who need them**.

Mahalo for your time and consideration.

Sincerely,

Jessica DeCamp

Volcano, Hawai'i

<u>SB-838-SD-2</u> Submitted on: 3/10/2025 2:55:54 PM

Testimony for HLT on 3/12/2025 9:00:00 AM

Submitted By	Organization	Testifier Position	Testify
Ellen Awai	Individual	Support	Written Testimony Only

Comments:

I support SB838.SD2.for glucose for those who need them with diabetes.

Testimony in Support of Amending SB838 SD1 to Include Medicaid Managed Care Plans

To: House Health Committee

RE: Support for SB838_SD2 with Amendments to Include Medicaid Managed Care Plans

To: Chair Takayama and Vice Chair Keohokapu-Lee Loy, and Members of the House Health Committee,

My name is Lisa Rantz, and I am submitting testimony on behalf of Hilo Benioff Medical Center Foundation in **strong support of SB838_SD2** with an amendment to restore coverage for Medicaid Managed Care plans to align with the standards of care from the American Diabetes Association and adopted by Medicare, commercial plans and Medicaid programs in other states.

Background & Importance of SB838 SD2

SB838_SD2 mandates insurance coverage for **continuous glucose monitors (CGMs)** for individuals with diabetes. CGMs are an essential tool in **preventing severe complications**, **reducing emergency visits**, **and improving long-term health outcomes** for patients with diabetes.

However, excluding Medicaid Managed Care plans from this coverage creates a significant disparity in healthcare access, particularly for low-income and rural residents who rely on these plans. Restoring Medicaid Managed Care plans to the bill ensures health equity and aligns with national best practices.

Why Medicaid Managed Care Plans Must Be Included

- 1. CGMs Are the Standard of Care for Diabetes Management
 - The American Diabetes Association (ADA) recognizes CGMs as the standard of care for insulin-treated individuals.
 - Many states, including California, Illinois, Nebraska, Mississippi, and others have mandated CGM coverage for Medicaid patients to ensure consistent, evidence-based treatment (See map at the end of this testimony).
 - Medicare and most commercial insurers already cover CGMs for insulin-treated individuals, and Medicaid should not fall behind in providing equitable care.
- 2. Hawaii Medicaid's Inconsistent CGM Coverage Creates Barriers
 - Hawaii's Medicaid Managed Care plans lack a standardized CGM coverage policy, leading to disparate access and arbitrary denials. Providers at the Diabetes Care Community Gatherings on Hawaii Island stated that there is NO rhyme or reason for when they are able to get CGM devices for their diabetic patients. Sometimes approvals sail right through and other times CGM devices are denied (which is much more common) by the same health plan for the exact same health conditions. Providers indicated that it is the managed care plans that this happens most with.
 - Some health plans provide coverage through pharmacy benefits, while others list CGMs as durable medical equipment (DME), requiring extensive prior authorizations.

 Patients and providers face confusing and burdensome approval processes, resulting in delayed care, worsening health outcomes, and increased healthcare costs.

3. CGMs Improve Patient Health and Reduce Costs for Medicaid

- CGMs prevent complications such as hypoglycemia, amputations, kidney failure, and blindness, which are major cost drivers in Medicaid spending.
- Studies show that patients using CGMs have fewer emergency room visits, reduced hospitalizations, and better overall glucose control.
- California and Colorado have recognized these benefits and passed laws requiring Medicaid to cover CGMs, demonstrating a clear financial and health benefit to the state.

4. Hawaii's Rural and Low-Income Residents Are Disproportionately Affected

- Over 200,000 residents in Hawaii live in rural areas where access to diabetes specialists is limited.
- Medicaid enrollees already face higher rates of diabetes complications due to systemic healthcare access challenges. Excluding them from SB838_SD2 further widens existing health disparities.
- If commercial insurance covers CGMs but Medicaid does not, it creates a two-tiered system where only higher-income patients can access life-saving technology.

Requested Amendment: Restore Medicaid Managed Care Plans to SB838_SD1

To align with Medicare, commercial insurance, and best practices from other states, I urge the committee to restore Medicaid Managed Care plans to SB838_SD2 to ensure:

Equitable access to CGMs for all diabetes patients, regardless of income.

Alignment with the national standard of care.

Reduced healthcare costs through prevention of diabetes complications.

Mahalo for your time and consideration. Please pass SB838_SD2 with this critical amendment to ensure that Medicaid patients in Hawaii receive the same standard of diabetes care as their peers across the country (Please see the map on the following page).

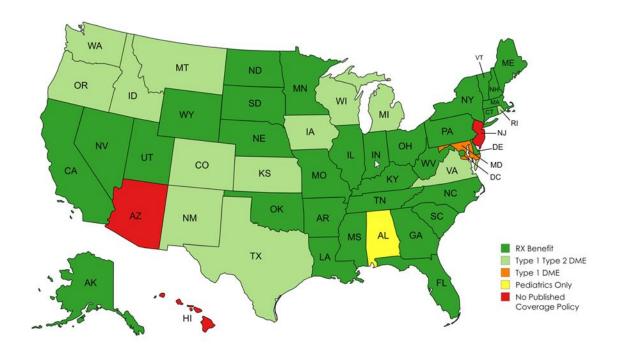
Respectfully,

Lisa Rantz

Lisa Rantz

State Association Council Chair





Created with mapchart.net

SB-838-SD-2

Submitted on: 3/11/2025 2:06:56 PM

Testimony for HLT on 3/12/2025 9:00:00 AM

Submitted By	Organization	Testifier Position	Testify
Cindy Garza Moore	Individual	Support	Written Testimony Only

Comments:

February 10, 2025

Senator San Buenaventura, Chair

Senator Henry Aquino, Vice Chair

Committee on Health and Human Services (HHS)

Hawai'i State Legislature

RE: Testimony in Strong Support of SB838 – Expanding Access to Continuous Glucose Monitors

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

My name is [Your Name], and I am a [resident of (your island)/person living with diabetes/family member of someone with diabetes/healthcare advocate]. I am writing to express my strong support for SB838, which will require health insurers, including Medicaid, to cover continuous glucose monitors (CGMs) for individuals diagnosed with diabetes.

For many individuals in Hawai'i, especially those in rural and underserved areas, accessing quality healthcare is already a challenge. SB838 will ensure that everyone with diabetes, regardless of income or location, has access to CGMs, improving their health and reducing the burden on our healthcare system.

I urge you to support and pass SB838 to make continuous glucose monitoring accessible for all who need it.

Mahalo for your time and consideration.

Sincerely,

Cindy Garza Moore

Pahoa, Hawaiʻi