LATE *Testimony submitted late may not be considered by the Committee for decision making purposes.

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GOVERNOR OF HAWAII
KE KIAʻĀINA O KA MOKUʻĀINA ʻO HAWAIʻI

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LATE

Testimony COMMENTING on HB1575
RELATING TO ACCESS TO MOVEMENT DISORDER CARE.

REPRESENTATIVE GREGG TAKAYAMA, CHAIR
HOUSE COMMITTEE ON HEALTH

February 11, 2026
Room 329

Fiscal Implications: $100,000 general fund appropriation to the Department of Health.

Department Testimony: The Department of Health (DOH) appreciates the intent of HB1575, which is to improve access to healthcare for residents with conditions that impact physicial movement.

The prevalence of Parkinson's Disease, one of the more recognizable forms of neurodegenerative movement disorders, has not been well established. According to the Parkinson's Foundation, this disorder affects over 1.1 million people currently, with nearly 90,000 people newly diagnosed each year, which is projected to rise with aging of the population. Best available estimates place Parkinson's Disease roughly about 100 – 400 cases per 100,000 people nationwide, while an older study using medical claims data in Hawaii estimated about 145 cases per 100,000 Hawaii residents.

Given the paucity of rigorous data, DOH recommends the appropriation be redirected to a research university to improve the quality and quantity of movement disorder-related disease prevalence data in Hawaii, on which future public policy investments and community health interventions may be based.

Thank you for the opportunity to testify.

HB-1575
Submitted on: 2/6/2026 5:09:21 PM
Testimony for HLT on 2/11/2026 9:00:00 AM

Submitted By	Organization	Testifier Position	Testify
Louis Erteschik	Hawaii Disability Rights Center	Support	Written Testimony Only

Comments:

In support.

THE MICHAEL J. FOX FOUNDATION
FOR PARKINSON'S RESEARCH

Chair, Vice Chair, and members of the committee,

Thank you for the opportunity to testify in strong support of H.B. 1575 on behalf of The Michael J. Fox Foundation for Parkinson's Research.

Parkinson's disease is a progressive neurological condition that affects movement, independence, and quality of life. Access to specialized care is essential for people living with the disease. In Hawaiʻi, that access is uneven. With the state's only designated movement disorder center located on Oʻahu, many patients and caregivers from neighbor islands must travel long distances at significant financial and physical cost to receive care.

This bill takes an important and practical step toward addressing that gap by evaluating how the state can improve access to care, including the potential for an air transport assistance fund and partnerships across government, health care, nonprofits, and industry.

From our work with patients across the country, we know that distance to care can delay treatment, increase complications, and place extraordinary strain on families. Exploring solutions that reduce transportation barriers is a meaningful investment in health equity and in the well-being of Hawaiʻi residents living with Parkinson's and related movement disorders.

The Foundation stands ready to be a partner in this effort, bringing patient insight, research expertise, and connections to national best practices as the committee conducts its work.

We respectfully urge your support for H.B. 1575. Thank you for your leadership and for prioritizing access to care for Hawaiʻi's Parkinson's community.

HB-1575
Submitted on: 2/10/2026 7:52:48 AM
Testimony for HLT on 2/11/2026 9:00:00 AM

Submitted By	Organization	Testifier Position	Testify
Glen Higa	Hawaii Parkinson Association	Support	In Person

Comments:

My name is Glen Higa, and I live in Kalihi. I am the President of the Hawaii Parkinson Association and have been diagnosed with Young Onset Parkinson's Disease since 2018. I am in strong support of HB1575 which would form a temporary committee to study the feasibility of creating a fund that includes the cost of implementation, funding sources, and potential models for transporting neighbor island patients with Parkinson's disease by air to O'ahu.

Hawai'i is seeing a rise in Parkinson's disease diagnoses. More than 8,000 Hawai'i residents are living with Parkinson's disease, and this number is expected to double by 2030. Many families, especially on neighbor islands and in rural communities, struggle to afford access to care as just one of the five movement disorder specialists in Hawaii is located on a neighbor island. In addition, the State's only designated movement disorder center is located on the island of O'ahu, requiring residents of neighbor islands to travel long distances at great personal cost.

The creation of a temporary committee to study the feasibility of the creation of a state-administered fund may help offset transportation costs and provide access to care for all Hawai'i residents living with Parkinson's disease. This will include the cost of implementation, funding sources, and potential models for transporting patients by air to O'ahu.

I respectfully urge you to support this legislation. Thank you.

House of Representatives
The Thirty-Third Legislature, 2026
Committee on Health
Wednesday, February 11, 2026
9:00 a.m.

To: Representative Gregg Takayama, Chair
Re: HB 1575, Relating to Access to Movement Disorder Care

Aloha Chair Gregg Takayama, Vice-Chair Sue L. Keohokapu-Lee, and Members of the Committee,

Mahalo for the opportunity to testify in **strong support of HB 1575**.

Parkinson's disease (PD) is now the fastest-growing neurological disease in the world, and its impact on patients, families, and public resources is accelerating. PD is a progressive neurodegenerative disorder marked by motor and nonmotor symptoms that steadily erode a person's physical function, cognitive capacity, and independence. While current treatments can reduce some symptoms, there is no cure and no therapy that stops disease progression. As a result, patients face increasing disability over time, along with rising medical needs and sharply reduced quality of life.

The burden of Parkinson's disease extends far beyond the individual diagnosis. People with PD require significantly more medical care, frequently lose the ability to remain in the workforce, and often depend on both paid and unpaid caregivers. Family care partners — most often spouses — provide an average of more than 20 hours of care per week, frequently reducing their own work hours or leaving employment entirely. These realities create a cascading economic effect: lost productivity, increased health expenditures, caregiver absenteeism, and long-term financial strain on households and communities.

My husband was diagnosed with Parkinson's disease approximately eighteen months ago. From the outset, obtaining appropriate care proved difficult and expensive. It took considerable time to secure an appointment with a neurologist, followed by multiple rounds of complex diagnostic testing because PD can be challenging to confirm clinically. Since then, his care has required ongoing visits with a movement disorder specialist and continuous courses of physical, occupational, and speech/swallowing therapy, along with consultations from additional specialists. This level of coordinated care is not optional — it is medically necessary to preserve function and safety.

Parkinson's disease has not only taken my husband's health; it has taken his income. The disabling symptoms of PD directly ended his ability to work. That loss compounds the medical costs and increases long-term financial vulnerability for families already managing a serious illness.

Our ability to access appropriate treatment has depended entirely on living in Honolulu, where specialists and therapy services are available. For residents of the neighbor islands, the barriers are far greater — including travel costs, scheduling delays, and limited specialist access. With Parkinson's disease, delayed diagnosis and delayed treatment mean faster functional decline and higher long-term costs. Early access to specialty care materially improves outcomes and reduces downstream burden.

The economic impact of Parkinson's disease is measurable and substantial. A 2022 Academy of Managed Care Pharmacy study of 27,394 Medicare beneficiaries found that because PD is progressive, costs accumulate rapidly over time. Incremental additional costs attributable to PD averaged $9,625 after one year, $20,832 after two years, and $27,466 after five years — per patient. These figures do not fully capture indirect costs such as lost wages, caregiver time, and reduced productivity.

These pressures are especially acute in Hawaii, consistently ranked the least affordable state in the nation. Neighbor island residents generally earn less than those on Oahu while facing higher access barriers to specialty medical care. Without targeted policy support, neighbor island Parkinson's patients and their families will continue to face unequal access, escalating financial strain, and preventable declines in health.

Legislative action that improves access to timely diagnosis, specialty treatment, and supportive therapies for Parkinson's disease is not only compassionate — it is fiscally responsible. Early, accessible care reduces long-term costs, preserves independence, and protects families from avoidable economic hardship.

Please vote for this measure. Mahalo.

Lila Mower

HB-1575
Submitted on: 2/9/2026 4:10:15 PM
Testimony for HLT on 2/11/2026 9:00:00 AM

Submitted By	Organization	Testifier Position	Testify
Marshall Mower	Individual	Support	Written Testimony Only

Comments:

I support this bill. Thank you,