



**STATE OF HAWAII**  
**DEPARTMENT OF HEALTH**  
**KA 'OIHANA OLAKINO**  
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**Testimony COMMENTING on H.B. 1977**  
**RELATING TO HEALTH**

REPRESENTATIVE GREGG TAKAYAMA, CHAIR  
HOUSE COMMITTEE ON HEALTH

Hearing Date, Time and Room Number: 02/11/26 9:00 am; CR 329 & Videoconference

1 **Fiscal Implications:** The Department of Health (“Department”) requests that this measure,  
2 which appropriates \$150,000 in general funds for fiscal year 2026-2027, be considered a vehicle  
3 to provide this needed funding so long as it does not supplant the priorities and requests  
4 outlined in the Governor’s executive budget request.

5 **Department Position:** The Department offers comments.

6 **Department Testimony:** The Family Health Services Division (FHSD) provides the following  
7 testimony on behalf of the Department:

8 The Department appreciates the importance of this measure, which seeks to improve maternal  
9 and infant health outcomes by leveraging technology to provide timely information and  
10 resources to prenatal, pregnant, and postpartum individuals and their families.

11 The Department recognizes the value of access to accurate health information aligned with  
12 clinical standards; multilingual availability to ensure equity for the state’s diverse population;  
13 and data collection that can inform program improvements and identify service gaps.

14 Several elements will require careful planning and evaluation:

1 **Procurement and Vendor Standards:** The timeline in Sections 321-B and 2 may be challenging  
2 given state procurement requirements and the need for vendors to meet clinical, technical,  
3 privacy, and security standards.

4 **Fiscal Sustainability:** While \$150,000 is identified for initial implementation, ongoing costs  
5 could be significant. In 2025, Hawai'i had approximately 14,300 births, with about 4,680 (34%)  
6 covered by Medicaid. At \$10 per user per month, annual costs for Medicaid families alone  
7 would be about \$561,600. If 50% of families enrolled, costs could reach \$858,000 annually—  
8 excluding maintenance and updates.

9 **System Integration and Data Privacy:** Aligning the application with existing systems across  
10 state agencies may be complex. Additionally, de-identified data requires the development of  
11 strong safeguards to maintain confidentiality and public trust.

12 The Department looks forward to collaborating with state agencies and community partners to  
13 maximize benefits while addressing these considerations.

14 **Offered Amendments: None**

15 Thank you for the opportunity to testify on this measure.



February 9, 2026

Position: **SUPPORT** of **HB1977**, Relating to Health

**To:** Representatives Gregg Takayama, Chair  
Representatives Sue L. Keohokapu-Loy, Vice Chair  
Members of the House Committee on Health

**From:** Llasmin Chaine, LSW, Executive Director, Hawaii State Commission on the Status of Women

**Re:** Testimony in **SUPPORT** of **HB1977**, Relating to Health

Hearing: Wednesday, February 11, 2026, 9:00 a.m.  
Conference Room 329, State Capitol

The Hawaii State Commission on the Status of Women is committed to advancing the health, safety, and well-being of girls and women throughout Hawaii, and is in **support of HB1977**. This measure is of significant interest to the Commission, as it seeks to increase access to critical maternal and infant health information through a mobile application, directly supporting those who are prenatal, pregnant, or postpartum.

**Access to timely, accurate information is a key determinant of positive health outcomes for mothers and infants.** This bill facilitates the Department of Health's leverage of technology to bridge gaps in awareness and access and aligns with best practices in public health, which emphasize the importance of accessible, culturally relevant, and user-friendly information delivery, especially for populations that may face barriers to care or support.

The Commission recognizes that digital tools, when thoughtfully designed, can empower individuals to make informed decisions about their health and access available services. We appreciate the Legislature's attention to this issue, its support of efforts that advance maternal and infant health statewide and respectfully urge this Committee to **pass HB1977**.

Thank you for this opportunity to submit testimony.



Committee on Health

February 9, 2026

From: The Hawai'i Affiliate of the American College of Nurse-Midwives (HAA)

Re: HB1977 RELATING TO HEALTH

To: Honorable Gregg Takayama, Chair and Sue L. Keohokapu-Lee Loy, Vice Chair

### **SUPPORT FOR HB1977 WITH CONSIDERATION OF AMENDMENT SUGGESTIONS**

Mahalo for the opportunity to comment on HB1977. We submit this testimony on behalf of our professional member organization, the Hawai'i Affiliate of the American College of Nurse-Midwives (HAA). Our mission is to promote the health and well-being of women and newborns within their families and communities through the development and support of the profession of midwifery, as practiced by Certified Nurse-Midwives (CNMs) and Certified Midwives (CMs). In alignment with this pilot, our testimony is offered as a source of information to the public and to government agencies, reinforcing the value of midwifery and women's health care practices and services — including professional and educational resources available through the American College of Nurse-Midwives.

The American College of Nurse-Midwives has available to the public over 60 resources including standards of care and position statements:

<https://midwife.org/policy-position-statements/>

While our affiliate supports development of this mobile application, **we respectfully request inclusion of American College of Nurse-Midwives (ACNM)** online resources along with the CDC, NIH, ACOG, AMA, and AAP.

The purpose of HB1977 to deliver education, resources, and support to improve maternal and infant health speaks directly to core hallmarks of the art and science of midwifery:

- Empowerment of pregnant people as partners in healthcare
- Health promotion, disease prevention, and health education
- Promotion of continuity of care
- Promotion of a public health care perspective
- Care to vulnerable populations
- Advocacy for informed choice, shared decision making, and the right to self-determination
- Incorporation of evidence-based complementary and alternative therapies in education and practice
- Collaboration with other members of the interprofessional health care team

We also appreciate the value of data collection AND privacy protections put into place in the development of this mobile application. An emphasis on confidentiality will be essential in the public feeling secure in engaging with this valuable offering.

Mahalo for your consideration of our testimony. We are available for further comment, clarification, &/or to assist in engagement with ACNM national via email.

Sincerely,

The Hawai'i Affiliate of ACNM Board

Annette Manant, PhD, ARPN, CNM President

Alex Brito, CNM, WHNP, RN-BSN Vice President

Connie Conover, CNM, MSN Treasurer

Margaret Ragen Affiliate Legislative Contact

acnmhawaiiaffiliate@gmail.com

<https://hawaiimidwives.org/>

## Re: A letter of support for HB 1977

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

On behalf of Philips, I am writing to support HB 1977. This bill would require the Department of Health to procure a maternal and infant health information mobile application to provide qualified individuals with information on federal and state programs and resources for prenatal, pregnant, and postpartum individuals and their families. This bill is important because expecting families increasingly rely on their phones for pregnancy information, with millions downloading apps each year. These platforms provide critical education, resources, and support before, during, and after pregnancy. State policymakers are leveraging this growing trend to enhance maternal and infant health programs, improve health literacy, and drive better health outcomes.

Philips is a health technology company focused on improving people's lives. The company has a deep legacy in maternal and infant health as one of the largest ultrasound and fetal monitoring companies. Philips Avent is also one of the most beloved infant product brands. Philips Pregnancy+ is the most downloaded pregnancy app in the world, as nearly 4,000 expecting families used the app in Hawaii in 2025. Given this legacy, the company applauds legislation that improves maternal health.

### **Pregnancy Apps Improve Health Literacy and Maternal Health Outcomes:**

While many reasons contribute to poor maternal health outcomes, many women may simply lack awareness of healthy prenatal and postpartum behaviors. For example, over 32% of all pregnant women on Medicaid don't start care until the second trimester or later.<sup>1</sup> Many expecting moms don't take prenatal supplements, continue to smoke, miss routine checkups, don't brush their teeth properly, don't know how to manage stress, among other challenges.

However, resources exist, especially those created and funded by the state, to help families understand what it takes to have a healthy pregnancy. Yesterday's pregnancy book that educated so many families on what to expect has morphed into a pregnancy app today. For example, Philips Pregnancy+ App is used by nearly 4,000 Hawaii users last year.

Pregnancy apps provide constant education like helping expectant mothers understand the changes in their bodies, teaching healthy prenatal and postpartum behaviors and explaining the development of their babies. This leads to healthier behaviors, improved decision-making, and reduced anxiety. Women who are more educated are better equipped to advocate for themselves and seek timely care, improving outcomes:

- **Higher prenatal visit completion & reduced low birth weight:** A 2017 study of Wyoming's Medicaid population found that pregnancy apps significantly increased prenatal visit attendance and reduced the incidence of low birth weight."<sup>2</sup>

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<sup>1</sup> See [Timing and Adequacy of Prenatal Care in the United States](#), 2016

<sup>2</sup> "[Telemedicine and E-Health Article](#)," November 1, 2017

- **Healthier behaviors during pregnancy:** A meta-analysis of 29 studies found that pregnancy apps support smoking cessation, encourage better nutrition, and promote preventive health behaviors such as asthma and infection management<sup>3</sup>
- **Lower risk of preterm birth:** Babies born to women with low health literacy face higher risks of preterm birth (before 34 weeks), small for gestational age status, and low birth weight. By improving maternal education, pregnancy apps help mitigate these risks.<sup>4</sup>

### **State Partnerships: A Proven Model for Expanding Maternal Health Access:**

As moms increasingly access pregnancy information on their phones, state policymakers are leveraging this pathway to influence positive change. For example, States are partnering with Pregnancy Apps to improve awareness of and drive participation into state maternal and infant health programs.

- State health departments and agencies offer valuable maternal and infant health programs, yet 75% of pregnant women remain unaware of these resources. Pregnancy apps provide a direct, cost-effective way to bridge this gap, ensuring more mothers are aware of and can access essential state services.<sup>5</sup>
- Example: Michigan is partnering with the Philips Pregnancy+ App to connect users with state programs such as home visiting, WIC, doula support, and mental health resources among many more. In the partnership's first 30 months, content highlighting these local resources was viewed over 2.25 million times by 32,000 Medicaid-eligible Michiganders. Nearly 3,000 users were referred to home visiting programs. A survey after 12 months found that 80% of users became more aware of Michigan's maternal health resources through the app, and 50% accessed a service after learning about it.<sup>6</sup>

### **HB 1977 Would Replicate Michigan's Successful Program**

HB 1977 would require Hawaii to issue an RFP to partner with a Pregnancy App, like Michigan's successful model. This approach would be a vital step towards addressing the information deficient and ensuring more expecting people have easy access to the critical resources that will support their and their infant's health.

For these reasons, Philips urges the committee to pass HB 1977. Thank you for your consideration.

Sincerely,



Manny Heer  
Senior Manager, State and Local Government Relations  
Philips

<sup>3</sup> ["JMIR Health Article,"](#) April 24, 2018

<sup>4</sup> ["Study: Mom's Low Health Literacy Puts Herself and Her Newborn at Risk,"](#) February 7, 2020

<sup>5</sup> Source: 2024 October study among Pregnancy+ users in Missouri

<sup>6</sup> ["Leveraging an mHealth App to Improve Maternal Outcomes in Michigan,"](#) January 22, 2024



**LATE**

**TAMARA CURRIN, MS, MCHES**  
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February 10, 2026

Hawai'i State Legislature  
415 South Beretania St.  
Honolulu, HI 96813

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

The mission of March of Dimes is to lead the fight for the health of all moms and babies. **March of Dimes supports House Bill 1977** to provide qualified individuals with a Maternal and Infant Health Information Mobile Application offering information on federal and state programs and resources related to prenatal, pregnant, and postpartum periods.

Hawai'i received a moderate grade of "C" on March of Dimes 2025 Report Card with 1,494 babies born preterm in 2024. Hawai'i ranks 21st of 52 (including all states, DC, and Puerto Rico) for preterm birth with a rate of 10.0%. Hawai'i is also among the top ten best states with the lowest rates of maternal mortality.

According to March of Dimes Perinatal Data Center, in Hawai'i:

- In 2024, **1 in 11 babies** (9.0% of live births) was low birthweight;
- In 2023, 72 infants died before reaching their first birthday, an infant mortality rate of **4.9 per 1,000 live births**;
- In 2024, **63.4% of infants** were born to women receiving adequate/adequate plus prenatal care;
- In 2024, **27.0% of live births** were Cesarean deliveries; and
- In 2023, about **1 in 30 women** of childbearing age (3.4%) was uninsured in Hawaii.

As lawmakers and health care professionals strive to address startling maternal and infant health statistics like those above, the role of technology as a key element to the solution is becoming clearer. Mobile technologies provide an opportunity to connect with individuals at greatest risk for poor maternal and infant health outcomes. While there are varying contributing factors to these outcomes, technology shows promise toward increasing access to pregnancy and postpartum information toward healthier moms and stronger babies in Hawai'i.

March of Dimes appreciates your attention and support of House Bill 1977. Please do not hesitate to contact me directly if there are any questions.

Sincerely,

A handwritten signature in black ink that reads 'Tamara Currin'.

Tamara Currin, MS, MCHES