



March 27, 2014

Thank you for an opportunity to testify *in strong support* of HB 1776 SD1, which will establish a policy mandating documentation of a physical examination, by a licensed physician or advanced practice registered nurse, at entry to the 7th grade.

I am a pediatrician, who has been practicing with Kaiser Permanente in the Nanaikeola Clinic for the past 25 years. I have been actively involved in the issue of pediatric obesity for many years.

Too many adolescents are now *only* seen by their primary care provider for the occasional sick visit. The reasons are many. Prior to the Affordable Care Act, some health insurance policies did not cover preventive healthcare visits for children. The Hawaii Department of Education has mandated documentation of a comprehensive physical exam *only* at kindergarten entry. In turn, many busy, over-taxed parents have not prioritized preventive healthcare visits. It should not be surprising then that many public school students have not had a comprehensive physical exam for years.

Adolescents need to be seen for a comprehensive physical which will screen for obesity, high-risk health behaviors (including smoking, alcohol and drug use, and sexual issues), and address important physical and emotional changes that occur at this age period. Many of these health issues are linked to academic achievement. Once identified, these issues can be addressed before they get out of control. Well-child visits are a covered benefit under the affordable care act, so cost will not be an issue for families.

HB 1776 SD1 will ensure that all youth attending public school in Hawaii have a well child preventive health care visit at 7th grade entry. While we know this is just the start, we think this bill strongly supports the medical home, optimal adolescent health and student achievement. In addition, the bill enhances the working relationship between adolescents, their parents, and the health and educational systems in Hawaii.

Thank you,

Cristeta Ancog MD, FAAP
Pediatrician
98-1941 F Kaahumanu St
Aiea, HI 96701
808-291-1131
weeklyupdate@hawaii.rr.com



March 28, 2014

TO: Senate Committee on Ways and Means
Senator David Ige, Chair
Senator Michelle Kidani, Vice Chair

FROM: Dr. Vija Sehgal, Pediatrician and Chief Quality Office / Associate Medical Officer
Waianae Coast Comprehensive Health Center / 697-3457 or wcchc@wcchc.com

RE: **HB1776 HD2 SD1: Relating to Education**

Thank you for the opportunity to submit testimony regarding HB1776 HD2 SD1 to mandate a physical examination for entry into seventh grade and require a dental examination prior to entry into the public school system.

The Waianae Coast Comprehensive Health Center (WCCHC) is a Federally Qualified Health Center serving over 31,000 patients in Leeward Oahu. Our main campus in Waianae has a pediatric clinic that serves 8,485 of the school age children along the Leeward Coast. To better meet the dynamic physical, emotional and social needs of our adolescent patients, a new adolescent clinic at the Waianae Mall is under development.

It is during adolescence that youth can develop numerous health issues, the majority of which are preventable. High-risk health behaviors that contribute to the most common causes of morbidity and mortality among young adults are often established in childhood and adolescence. These include smoking, drinking/drug use, high-risk sexual practices, unhealthy nutrition, lack of sleep and physical inactivity. These behaviors are also intimately linked to academic achievement.

Establishing a health care home, where primary care practitioners, pediatricians, family physicians and nurse practitioners have a long-standing relationship with families, is a factor in preventing these problem behaviors. The adolescent well child visit creates a safe environment where adolescents can feel comfortable talking to their doctor about their health and wellness. They should receive appropriate screening and guidance for alcohol and drug use, depression and suicide, sexuality and reproductive health issues as well as obesity, diabetes and cardiovascular disease. However, this cannot be done in a 10-minute sick visit for a cold. The Waianae Coast Comprehensive Health Center supports the American Academy of Pediatrics standard that regular "Well Child" physical exams should occur throughout childhood.

There are many reasons that adolescents are *only* seen by their primary care provider for the occasional sick visit. Prior to the Affordable Care Act, some health insurance policies did not cover preventive healthcare visits for children. The Hawaii Department of Education has mandated documentation of a comprehensive physical exam *only* at kindergarten entry. Thus, busy parents have not prioritized preventive healthcare visits. It should not be surprising then that many public school students have not had a comprehensive physical exam for years. It should also not be a surprise that depression, obesity, pre-diabetes and substance abuse too often go undiagnosed until a crisis occurs.

In a recent study of children seeking care at our Waianae Pediatric Clinic, 52% of the 11-14 year olds are overweight or obese and 55% of the 15-19 year olds are overweight or obese. We know that obesity is the primary risk factor for type 2 diabetes and cardiovascular disease. And, studies have shown that 80% of children who are overweight at 10-15 years become obese adults. This recent study indicates increasing rates of adult obesity on the Waianae Coast when compared to 2012 data (from the Hawaii Primary Care Needs Assessment Data Book, DOH.). This data on obesity alone is cause for alarm and a motivating factor for the health center to support mandatory physicals for adolescents.

HB1776 HD2 SD1 was amended to mandate a physical assessment during 7th grade rather than in the 6th and 9th grades. The Waianae Coast Comprehensive Health Center supports this amendment because immunization updates occur at the same age, thus lessening the additional burden for parents. Further amending the bill to implement the 7th grade physical assessment in a way that doesn't create a barrier to



entry is ideal. Allowing the physical to occur within the 12 months surrounding the 7th grade school year could help to address this concern from the Department of Education (DOE) about the bill.

The Waianae Coast Comprehensive Health Center, along with our working group of healthcare stakeholders, has continued to discuss additional opportunities to address the barrier to entry concern raised by the DOE. The amendment to HB1776 HD2, requiring notice of the exam mandate to sixth grade students and their parents, is a great start. We all can do a better job of reaching out to students and their parents to come in for a physical assessment throughout the school year. Bringing together health plans, medical providers, school health personnel, families, and others is exactly the model of wrap around services we've all been saying that our students need.

An earlier draft of HB1776 contained an amendment to add a dental exam requirement prior to entry into public school. The WCCHC fully supports regular dental care as a part of our health care home model. However, we are still seeking to better understand whether this dental requirement would be affordable for everyone based on ACA and MedQUEST health insurance coverage for students.

Finally, the WCCHC supports the Senate version of HB1776 implementing the 7th grade physical assessment across the school system rather than as a pilot. This amended version would more efficiently roll-out the program universally while a pilot could diminish the impact of all 7th grade students reconnecting with their medical provider.

Reconnecting our adolescents with their primary care provider embraces the whole child to assure they are healthy and ready to learn. Refining amendments to HB1776 HD2 SD1 can help to ensure that all youth attending public school in Hawaii have a well-child preventive health care visit during 7th grade. While we know this amended bill is just a start, we think it strongly supports our patient centered medical home model, optimal adolescent health and student achievement. **Most importantly, the bill strengthens the relationship between our health and educational systems, as well as adolescents and parents in Hawaii.**



From: mailinglist@capitol.hawaii.gov
To: [WAM Testimony](#)
Cc: dkapua@gmail.com
Subject: Submitted testimony for HB1776 on Mar 28, 2014 09:35AM
Date: Friday, March 28, 2014 10:04:17 AM

HB1776

Submitted on: 3/28/2014

Testimony for WAM on Mar 28, 2014 09:35AM in Conference Room 211

Submitted By	Organization	Testifier Position	Present at Hearing
Kapua Keliikoa-Kamai	Individual	Support	No

Comments: HB1776 HD2 SD1 - RELATING TO EDUCATION Testimony in Support of requiring children to undergo a physical examination (PE) prior to attending seventh grade beginning with the 2015-2016 school year. As you may know, many children only see the doctors when needed (sick). And the DOE only requires a PE upon entry or desire to play sports. Children should be seen at regular intervals, and sad to say, many don't unless compelled to by other entities. I believe this bill leads us into the direction of addressing health concerns before they become health issues. How can we say, lets teach them about their Sexuality but ignore their medical & dental well being (mental & psychological should be included too)? Furthermore, I'd like to suggest the Wai'anae-Nanakuli Complex be highly considered for the Pilot Program. Especially, since this area of the state has the highest overall rates of poor health & well-being. Mahalo for this opportunity to SUPPORT HB1776 HD2 SD1 and I URGE YOU TO PASS THIS BILL. Me ka ha'aha'a, Kapua Keliikoa-Kamai

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STATE OF HAWAII
DEPARTMENT OF HEALTH
P.O. Box 3378
HONOLULU, HAWAII 96801-3378

In reply, please refer to:
File:

**SENATE COMMITTEE ON WAYS AND MEANS
HB1776 HD2 SD1, RELATING TO EDUCATION**

LATE

**Testimony of Linda Rosen, M.D., M.P.H.
Director of Health**

March 28, 2014

1 **Department's Position:** The Department of Health (DOH) supports House Bill 1776 House Draft 2
2 Senate Draft 1 (HB1776 HD2 SD1).

3 **Fiscal Implications:** None for DOH.

4 **Purpose and Justification:** The purpose of HB1776 HD2 SD1 is to connect adolescents back to their
5 healthcare provider by expanding the school physical examination requirement. Currently, physical
6 examinations are only required upon entry into the school system which is usually for kindergarten.
7 HB1776 HD2 SD1 expands the physical examination requirement to also include entry into seventh
8 grade. This bill follows the lead of other states and Hawaii private schools who have multiple physical
9 examination requirements throughout a child's educational journey.

10 The Department recommends aligning the timing of the physical examination requirements with
11 immunization requirements; so students would submit documentation of a physical exam no later than
12 three months after entering seventh grade. Amending Section 1(a), page 1, line 9, "before ~~or~~ after the
13 date of attendance" provides consistency with Section 1(b), page 2, line 4 and 5. Aligning the timing of
14 physical examination requirements with immunization requirements will avoid duplication of efforts for
15 the initial review and follow up on student health records.

1 The Department offers comments in the interest of the health of our students because increasing
2 the physical exam requirement for school attendance provides a broader, systematic approach to
3 connecting children back to their primary care physicians. The policy also promotes utilization of the
4 covered preventive health benefits established by the Affordable Care Act (ACA). Due to the ACA,
5 annual well child examinations are a required covered benefit in all health plans.

6 The proposed increase in the physical exam requirements is congruent with the policy priority set
7 forth by the Obesity Prevention Task Force. The Task Force, co-chaired by our late Director Loretta
8 Fuddy developed and recommended legislation pursuant to Act 269 (SB2778 CD1), Session Laws of
9 Hawaii 2012. The policy to expand physical examination requirements for public school students was
10 proposed to reinforce a culture of wellness and preventive health care.

11 Currently, the state expends \$470 million a year on obesity-related, and \$770 million on
12 diabetes-related medical costs. In 2012 13.2% of high public school students in Hawaii (2012, Youth
13 Risk Behavior Survey), and 23.6% of adults were obese (2012, Behavioral Risk Factors Surveillance
14 Study). By 2030 half of adults in Hawaii are projected to be obese without effective interventions
15 (2013, Trust for America's Health). According to the Trust for America's Health, "Keeping people
16 healthier is one of the most effective ways to reduce health care costs," (July 2008).

17 The adoption of this measure entails parental and community engagement. The additional
18 physical exam requirements offer physicians and healthcare providers together with parents and
19 adolescents the opportunity to address developmentally relevant physical and mental health issues.
20 Regular visits are preventive, so health needs can be assessed and addressed early. Early screening and
21 health management can contribute to lowered absenteeism rates and support graduation completion.
22 The requirements of HB1776 HD2 SD1 embraces the whole child to assure they are healthy and ready
23 to learn.

24 Thank you for the opportunity to provide testimony.



American Academy of Pediatrics

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AAP - Hawaii Chapter

5414 Kirkwood Place
Honolulu, HI 96821

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R. Michael Hamilton, MD, MSc, FAAP
Department of Pediatrics,
Hawaii Permanente Medical Group
2828 Paa Street
Mapunapuna Clinic, 2nd Floor
Honolulu, HI 96819
Phone : 808/432-5604
Fax : 808/432-5601
Email: Michael.R.Hamilton@kp.org

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Mae S. I. Kyono, MD, FAAP
1319 Punahou Street, 7th Floor
Honolulu, HI 96826
Phone: 808/780-5286
Fax: 808/983-6109
Email: mkyono@hawaii.edu

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Josephine Quensell, MD, FAAP
1319 Punahou Street, Suite 1050
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Honolulu, HI 96826
Phone: 808/983-8020
Fax: 808/983-6343
E-mail: kennethn@kapiolani.org

Chapter Web site

www.hawaii.aap.org

AAP Headquarters

141 Northwest Point Blvd
Elk Grove Village, IL 60007-1098
Phone: 847/434-4000
Fax: 847/434-8000
E-mail: kidsdocs@aap.org
www.aap.org

Testimony for HB 1776 SD1

From: Hawaii Chapter of the American Academy of Pediatrics
March 28, 2014

Thank you for an opportunity to testify *in strong support* of HB 1776 SD1, which will establish a policy mandating documentation of a physical examination, by a licensed physician or advanced practice registered nurse, at entry to the 7th grade.

The Hawaii Chapter of the American Academy of Pediatrics is a voluntary organization of over 200 pediatricians in Hawaii. Our mission is to attain optimal physical, mental and social health and well being for infants, children, adolescents and young adults in Hawaii.

Adolescence is a period of tremendous physical, emotional and social change. During this period youth can develop numerous health issues, the majority of which are preventable. High-risk health behaviors that contribute to the most common causes of morbidity and mortality among young adults are often established in childhood and adolescence. These include smoking, drinking, drug use, high-risk sexual practices, unhealthy nutrition, lack of sleep and physical inactivity. These behaviors are also intimately linked to academic failure and achievement.

Primary care practitioners, pediatricians, family physicians and nurse practitioners who have a long-standing relationship with families, are ideally suited for preventing problem behaviors. The adolescent well child visit creates a safe environment where adolescents can feel comfortable talking to their doctor about their health and wellness. The American Academy of Pediatrics has advocated that child should have regular "Well Child" physical exams throughout childhood. In adolescence, they should receive appropriate screening and guidance for alcohol and drug use, depression and suicide, sexuality and reproductive health issues as well as obesity, diabetes and cardiovascular disease. However, this cannot be done in a 10-minute sick visit for a cold.

Too many adolescents are now *only* seen by their primary care provider for the occasional sick visit. The reasons are many. Prior to the Affordable Care Act, some health insurance policies did not cover preventive healthcare visits for children. The Hawaii Department of Education has mandated documentation of a comprehensive physical exam *only* at kindergarten entry. In turn, many busy, over-taxed parents have not prioritized preventive healthcare visits. It should not be surprising then that many public school students have not had a comprehensive physical exam for years. It should also not be a surprise that depression, obesity, pre-diabetes, substance abuse too often go undiagnosed until a crisis occurs.

The HAAP, along with our working group of healthcare stakeholders, will continue to discuss opportunities to address the concerns expressed by the DOE, related to health assessment as a barrier to school entry.

HB 1776 SD1 will ensure that all youth attending public school in Hawaii have a well child preventive health care visit at 7th grade entry. While we know this is just the start, we think this bill strongly supports the medical home, optimal adolescent health and student achievement. In addition, the bill enhances the working relationship between adolescents, their parents, and the health and educational systems in Hawaii.

May Okihiro, MD, HAAP Obesity Taskforce Member for Michael Hamilton MD, HAAP President

March 28, 2014



RE: HB 1776 SD1

From: May Okihiro, MD MS

Pediatrician, Waianae Coast Comprehensive Health Center

Assistant Professor, University of Hawaii John A. Burns School of Medicine Department of Pediatrics

Thank you for an opportunity to testify *in strong support of* HB 1776 SD1, which requires children to undergo a physical examination prior to attending seventh grade beginning with the 2015-2016 school year.

Almost three-fourth (3/4) of all adolescent mortality is a result of motor vehicle accidents, homicide, suicide, and unintentional injuries (CDC, 2010). Unhealthy lifestyles and risk factors for chronic disease, such as smoking, poor nutrition, and mental health problems, begin in childhood and adolescence and track into adulthood. Youth are also at risk for suicide from underlying depression. In 2011, among youth in Hawai'i:

- 29.5% reported that they felt sad or hopeless almost every day for 2 or more weeks in a row
- 15% said they would attempt suicide in the past 12 months
- 1 in 4 are overweight or obese, and in some communities over 50% of adolescents are overweight or obese
- 37% reported that they ever had sexual intercourse

Except for routine immunizations and mandated sports physicals, many youth do not receive health screening for depression or chronic health conditions such as obesity. As academic success of Hawaii's youth is intimately linked to their health, annual health screening of school age youth has great promise for strengthening the fabric of society. Research shows that poor health such as mental health disorders, uncontrolled asthma, poor nutrition and sleep disorders are closely linked to poor academic outcomes. On the other hand, research also shows that academic success is a primary predictor of adult health outcomes. For example, in Hawai'i, the prevalence of diabetes among those who did not graduate from high school is 10.6%, twice that of those who graduated from college (4.8%).

Primary care providers are in a unique position to screen for chronic disease risk factors and behaviors and provide guidance, brief counseling and care coordination for the adolescent and his/her parents. In the ideal world, youth would see their physicians regularly throughout childhood for preventive health care. However, in today's busy world this often does not happen; physicians often only see children and adolescents when they are sick or injured.

Thus mandating annual health screening by a primary care provider as they enter their adolescent years offers great promise for advancing the health of our keiki, ensuring that they are healthy and ready to learn.

Thank you for this opportunity to testify.

A handwritten signature in black ink, appearing to read "May Okihiro".

May Okihiro, MD MS



615 Pi'ikoi Street, Suite 203 T 808 589-1829
Honolulu, Hawai'i 96814-3139 F 808 589-2610
E info@halekipa.org



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March 28, 2014

Senate Committee on Ways & Means
Hearing in Conference Room 211 at 9:35 a.m.

Re: HB 1776 HD2 SD1 Relating to Education

Dear Chair Ige and Members of the Committee:

I am writing in **support of HB 1776 HD2 SD1.**

My work at Hale Kipa, a nonprofit youth services agency, involves providing educational and vocational services to at risk youth. Many of the youth in our program have physical, mental and behavioral issues. These range from simply poor exercise and eating habits to the more severe substance abuse and mental disorders, all of which impact their overall wellbeing as well as the ability of these youth to do their best in school. As a result, most of the youth we serve are well behind their peers academically or have already dropped out of school.

Requiring a physical exam prior to attending 7th grade will provide a mechanism through which youth will be able to engage with their health care provider early enough to identify health issues and effectively intervene. This type of systematic approach to wellness for school aged children is long overdue. And, because of the clear association between health status and academic performance, we should not only expect the health of our youth to improve but their performance in school as well.

Sincerely,

Stacy Evensen
Director
Educational & Vocational Services

