

SB2323

Measure Title: RELATING TO INSURANCE COVERAGE OF HEALTH SCREENINGS.

Report Title: Women's Caucus; Health Insurance Coverage; Sexually Transmitted Diseases; Human Immunodeficiency Virus; Acquired Immunodeficiency Syndrome

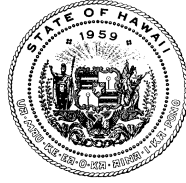
Description: Ensures insurance coverage for sexually transmitted disease screenings, including screenings for human immunodeficiency virus and acquired immunodeficiency syndrome, during a female insured's annual pelvic exam.

Companion:

Package: Women's Legislative Caucus

Current Referral: CPH, WAM

Introducer(s): BAKER, CHUN OAKLAND, ESPERO, GREEN, INOUYE, KIDANI, SHIMABUKURO, L. THIELEN, TOKUDA, Ihara, Kim, Riviere



STATE OF HAWAII
DEPARTMENT OF HEALTH
P. O. Box 3378
Honolulu, HI 96801-3378
doh.testimony@doh.hawaii.gov

Testimony in SUPPORT of SB2323
RELATING TO INSURANCE COVERAGE OF HEALTH SCREENINGS

SENATOR ROSALYN H. BAKER, CHAIR
SENATE COMMITTEE ON COMMERCE, CONSUMER PROTECTION, AND HEALTH
Hearing Date: February 2, 2016 Room Number: 229

1 **Fiscal Implications:** None.

2 **Department Testimony:** The Department supports increasing women’s access to STD and HIV
3 screening. This measure will address situations in which lack of insurance reimbursement or the
4 perception of such is the reason “certain healthcare providers do not screen specifically for
5 sexually transmitted diseases (STDs), including human immunodeficiency virus (HIV) and
6 acquired immunodeficiency syndrome (AIDS) at annual screenings, even though the Patient
7 Protection and Affordable Care Act requires health insurance to cover those screenings without a
8 co-pay.” The Department has no data nor anecdotal reports that limitations in insurance
9 coverage are reducing women’s access to STD screening. Thus, it is not clear the degree of
10 benefit offered through the screening mandated in this measure. This bill, however, would
11 remove any possible gaps in covered screening services under grandfathered policies from pre-
12 Affordable Care Act (ACA) implementation.

13 The Department recommends that women be screened in accordance with national STD
14 guidelines for risk of infection, in consultation with her health provider. This may not
15 correspond with annual gynecological exams as stated in the bill. Currently, the U.S. Preventive
16 Services Task Force (USPSTF) Recommendations are the basis for STD and HIV screening
17 reimbursement by insurance policies without co-pay under the ACA.

18 Thank you for the opportunity to testify.



DAVID Y. IGE
GOVERNOR
SHAN S. TSUTSUI
LT. GOVERNOR

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CATHERINE P. AWAKUNI COLÓN
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TO THE SENATE COMMITTEE ON
COMMERCE, CONSUMER PROTECTION, AND HEALTH

TWENTY-EIGHTH LEGISLATURE
Regular Session of 2016

Tuesday, February 2, 2016
8:30 a.m.

**TESTIMONY ON SENATE BILL NO. 2323 – RELATING TO INSURANCE
COVERAGE OF HEALTH SCREENINGS.**

TO THE HONORABLE ROSALYN H. BAKER, CHAIR, AND MEMBERS OF THE
COMMITTEE:

My name is Gordon Ito, State Insurance Commissioner, testifying on behalf of
the Department of Commerce and Consumer Affairs (“Department”).

The purpose of this bill is to ensure insurance coverage for sexually transmitted
disease screenings during a woman’s annual pelvic exam. The Department submits the
following comments.

Section 2 to 4 of this bill would require all health policies, plans, contracts, or
agreements (except limited benefit and specified diseases policies) to cover sexually
transmitted disease screenings during a female insured’s annual gynecological exam. It
would also require reimbursement to the health care provider of all costs associated
with such coverage.

The Department notes that pursuant to the federal Patient and Affordable Care
Act (2010), the federal Department of Human Services adopted guidelines for women’s
preventative services, including annual well-woman visits and HIV/AIDS screening
without cost sharing, for non-grandfathered and non-transitional health plans (ACA

compliant plans). Hawaii adopted a benchmark plan that contains the essential health benefits of the state's qualified health plan. The benchmark plan covers without copayment the well-woman exam and screenings for chlamydia, gonorrhea, human immune-deficiency virus, human papillomavirus, hepatitis C and B, syphilis, and sexually transmitted infections, among other covered screenings and benefits.

To the extent that the proposed legislation extends these coverage benefits to grandfathered and transitional health plans, the Department takes no position on the addition of any proposed new mandated health insurance coverage. The Department defers to the Legislature to determine the appropriate health coverage mandates. The addition of new expanded mandated coverage, however, may trigger section 1311(d)(3) of the federal Patient Protection and Affordable Care Act which requires states to defray the additional cost of any benefits in excess of the essential health benefits of the state's qualified health plan. Any proposed expanded mandated health insurance coverage may also require the passage of a concurrent resolution requesting the State Auditor to prepare and submit a report assessing the social and financial impacts of the proposed expanded mandate, pursuant to Section 23-51, Hawaii Revised Statutes.

We thank this Committee for the opportunity to present testimony on this matter.

DAVID Y. IGE
GOVERNOR



STATE OF HAWAII
HAWAII EMPLOYER-UNION HEALTH BENEFITS TRUST FUND

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TESTIMONY BY DEREK MIZUNO
ADMINISTRATOR, HAWAII EMPLOYER-UNION HEALTH BENEFITS TRUST FUND
DEPARTMENT OF BUDGET AND FINANCE
STATE OF HAWAII
TO THE SENATE COMMITTEE ON COMMERCE, CONSUMER PROTECTION, AND
HEALTH
ON
SENATE BILL NO. 2323

February 2, 2016, 8:30 a.m.

RELATING TO INSURANCE COVERGE OF HEALTH SCREENINGS

Chair Baker, Vice Chair Kidani, and Members of the Committee:

The Hawaii Employer-Union Health Benefits Trust Fund (EUTF) Board of Trustees has not had an opportunity to take a position on this bill. However, the Committee should be aware that the current EUTF medical plans provide coverage at no cost for sexually transmitted disease screenings, including screenings for human immunodeficiency virus and acquired immunodeficiency syndrome, during a female insured's annual gynecological exam.

Thank you for the opportunity to testify.

EUTF's Mission: We care for the health and well being of our beneficiaries by striving to provide quality benefit plans that are affordable, reliable, and meet their changing needs. We provide service that is excellent, courteous, compassionate, and informative.

**American Congress of Obstetricians and Gynecologists
District VIII, Hawaii (Guam & American Samoa) Section**

Greigh Hirata, MD, FACOG, Chair
94-235 Hanawai Circle, #1B
Waipahu, Hawaii 96797



To: Committee on Commerce, Consumer Protection, and Health
Senator Rosalyn H. Baker, Chair
Senator Michelle N. Kidani, Vice Chair

DATE: Tuesday, February 2, 2016
TIME: 8:30 A.M.
PLACE: Conference Room 229

FROM: Hawaii Section, ACOG
Dr. Greigh Hirata, MD, FACOG, Chair
Dr. Jennifer Salcedo, MD, MPH, MPP, FACOG, Vice-Chair
Lauren Zirbel, Community and Government Relations

Re: SB 2323, Relating to Insurance Coverage of Health Screenings

Position: Support with Amendments

The Hawaii Section of the American Congress of Obstetricians and Gynecologists (HI ACOG) supports SB2323 and other legislative proposals that promote insurance coverage for sexually transmitted infection (STI) testing in accordance with national professional guidelines.

As a Section of the Nation's leading group of physicians dedicated to improving health care for women, HI ACOG represents over 160 obstetrician/gynecologist physicians in our state. HI ACOG strongly supports measures to decrease the serious health burdens of sexually transmitted infections, of which young women in Hawaii are disproportionately affected.

Burden of Sexually Transmitted Infections

- Hawaii has the 15th highest rate of chlamydial infection in the country with significant disparities across age and racial and ethnic groups in disease prevalence.¹
- Despite clear national recommendations for STI testing, rates of STI testing in young women are troublingly low. A study of adolescents seen for routine health check-ups found that only 34% had received any STI counseling or screening at their visit.² Among sexually active women ages 16-25, only 42% with commercial PPOs and 58% with Medicaid had received chlamydia screening within the past year.³ Of six health plans in Hawaii reporting chlamydia screening data for sexually active women ages 16-25 in 2008, a 56.2% screening rate was reported.⁴
- Unrecognized and untreated sexually transmitted infections can result in pelvic inflammatory disease, ectopic pregnancy, infertility, and chronic pelvic pain, as well as infections of sexual partners and neonates.
- Unrecognized and untreated sexually transmitted infections in male partners results in infection and reinfection of women.

- Infection with one STI predisposes a person to contracting other STIs.

Insurance Coverage for Sexually Transmitted Infection Testing

- Under the Affordable Care Act (ACA), private health plans are required to cover recommended preventive health services without any patient cost-sharing. This includes A and B level recommendations by the U.S. Preventive Services Task Force (USPSTF).
- ACOG and the USPSTF recommend screening for chlamydia and gonorrhea in sexually active women age 24 years or younger, and in older women who are at increased risk for infection, at least annually or when new risk factors develop since the last negative result.^{5,6}
- ACOG and the USPSTF recommend screening for HIV in women 15-65, and in younger and older women at increased risk. Need for repeat screening is recommended to be assessed at least annually. ^{5,6}
- More frequent STI testing is recommended by national STI testing guidelines for pregnant women, those with symptoms of STIs, and those whom have recently tested positive for an STI.
- Since some women are covered by 'grandfathered' plans not currently subject to ACA-mandated coverage of preventive health services, not all non-'grandfathered' plans are compliant with ACA coverage requirements, and it is extremely difficult to efficiently determine a woman's insurance coverage for STI testing, many health care providers and women are hesitant to perform STI testing as recommended due to coverage and cost concerns.

Requested Amendments

For the reasons that: many women may not have an annual gynecologic exam, STI testing is often indicated outside of an annual gynecologic exam, STI testing may be medically indicated more often than annually, and male partners serve as sources of STI infection and re-infection for women, we respectfully request that this committee change the bill's language from (line 15 page 2) 'shall provide insurance coverage for sexually transmitted disease screenings, including screenings for human immunodeficiency virus and acquired immunodeficiency syndrome, during a female insured's annual gynecological exam' to as follows, "shall provide insurance coverage for sexually transmitted disease testing in accordance with national professional guidelines, such as those of the U.S. Preventive Services Task Force and the Centers for Disease Control and Prevention."

For these reasons, **HI ACOG supports SB2323 with the above requested amendments** and urges the Legislature to work toward decreasing the health burdens of sexually transmitted infections in Hawaii. We stand ready to provide you with factual information on medical issues that come before the Legislature, and hope you will contact us at any time.

¹STD Surveillance 2013: Table 2: Chlamydia- reported cases rates by state, ranked by state, United States,2013. (Accessed January 8, 2015, at <http://www.cdc.gov/std/stats13/tables/2.htm>.)

²Rietmeijer CA, Bull SS, Ortiz CG, et al. Patterns of general health care and STD services use among high risk youth participating in community-based urine chlamydia screening. Sex Transm Dis 1998;25:457-63.

³The State of Health Care Quality 2006; Chlamydia Testing. (Accessed January 10, 2015, at

<http://www.ncqa.org/tabid/447/Default.aspx>.)

⁴ Chlamydia Screening Percentages Reported by Commercial and Medicaid Plans by State. (Accessed February 10, 2015, at Chlamydia Screening Percentages Reported by Commercial and Medicaid Plans by State and Year.)

⁵ American College of Obstetricians & Gynecologists Guidelines for Women's Health Care: A Resource Manual. 4th Edition. 2014.

⁶ *Final Recommendation Statement: Chlamydia and Gonorrhea: Screening*. U.S. Preventive Services Task Force. December 2014.
<http://www.uspreventiveservicestaskforce.org/Page/Document/RecommendationStatementFinal/chlamydia-and-gonorrhea-screening>



To: Committee on Commerce, Consumer Protection, and Health
Senator Rosalyn H. Baker, Chair
Senator Michelle N. Kidani, Vice Chair

DATE: Tuesday, February 2, 2016
TIME: 8:30 A.M.
PLACE: Conference Room 229

From: Hawaii Medical Association
Dr. Scott McCaffrey, MD, President
Dr. Linda Rasmussen, MD, Legislative Co-Chair
Dr. Ronald Keinitz, MD, Legislative Co-Chair
Dr. Christopher Flanders, DO, Executive Director
Lauren Zirbel, Community and Government Relations

Re: SB 2323, Relating to Insurance Coverage of Health Screenings

Position: Support with Amendments

The Hawaii Medical Association support the position of the Hawaii Section of the American Congress of Obstetricians and Gynecologists (HI ACOG) in support of SB2323 and other legislative proposals that promote insurance coverage for sexually transmitted infection (STI) testing in accordance with national professional guidelines.

Burden of Sexually Transmitted Infections

- Hawaii has the 15th highest rate of chlamydial infection in the country with significant disparities across age and racial and ethnic groups in disease prevalence.¹
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- Infection with one STI predisposes a person to contracting other STIs.

Insurance Coverage for Sexually Transmitted Infection Testing

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- Under the Affordable Care Act (ACA), private health plans are required to cover recommended preventive health services without any patient cost-sharing. This includes A and B level recommendations by the U.S. Preventive Services Task Force (USPSTF).
- ACOG and the USPSTF recommend screening for chlamydia and gonorrhea in sexually active women age 24 years or younger, and in older women who are at increased risk for infection, at least annually or when new risk factors develop since the last negative result.^{5,6}
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Requested Amendments

For the reasons that: many women may not have an annual gynecologic exam, STI testing is often indicated outside of an annual gynecologic exam, STI testing may be medically indicated more often than annually, and male partners serve as sources of STI infection and re-infection for women, **we respectfully request that this committee change the bill's language from (line 15 page 2) 'shall provide insurance coverage for sexually transmitted disease screenings, including screenings for human immunodeficiency virus and acquired immunodeficiency syndrome, during a female insured's annual gynecological exam' to as follows, "shall provide insurance coverage for sexually transmitted disease testing in accordance with national professional guidelines, such as those of the U.S. Preventive Services Task Force and the Centers for Disease Control and Prevention."**

For these reasons, **HI HMA supports SB2323 with the above requested amendments** and urges the Legislature to work toward decreasing the health burdens of sexually transmitted infections in Hawaii. We stand ready to provide you with factual information on medical issues that come before the Legislature, and hope you will contact us at any time.

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<http://www.uspreventiveservicestaskforce.org/Page/Document/RecommendationStatementFinal/chlamydia-and-gonorrhea-screening>



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February 2, 2016

The Honorable Rosalyn H. Baker, Chair
The Honorable Michelle N. Kidani, Vice Chair
Senate Committee on Commerce, Consumer Protection
and Health

Re: SB 2323 – Relating to Insurance Coverage of Health Screenings

Dear Chair Baker, Vice Chair Kidani, and Committee Members:

The Hawaii Medical Association (HMSA) appreciates the opportunity to testify on SB 2323 which would require health plan coverage of screenings for sexually transmitted diseases. HMSA supports this Bill.

Research has shown that preventive health services can save lives and improve health by identifying illnesses earlier, managing them more effectively, and treating them before they develop into more complicated, debilitating conditions, and that some services are also cost-effective. In recognition of this, the Affordable Care Act (ACA) mandates coverage for a range of preventive services without cost-sharing. The required preventive services come from recommendations made by four expert medical and scientific bodies – the U.S. Preventive Services Task Force (USPSTF), the Advisory Committee on Immunization Practices (ACIP), the Health Resources and Services Administration's (HRSA's) Bright Futures Project, and HRSA and the Institute of Medicine (IOM) committee on women's clinical preventive services.

In compliance with the ACA, all of HMSA's non-grandfathered plans currently provide coverage for all USPSTF grade a and b recommendations which include: chlamydia screening: women, gonorrhea screening: women; HIV screening, and syphilis screening. In addition offer coverage for sexually transmitted infections counseling.

Thank you for allowing us to testify in support of HB 2323.

Sincerely,

Jennifer Diesman
Vice President, Government Relations.

**TESTIMONY OF THE AMERICAN COUNCIL OF LIFE INSURERS
COMMENTING ON SENATE BILL 2323, RELATING TO INSURANCE
COVERAGE OF HEALTH SCREENINGS**

February 2, 2016

Via e mail: cphtestimony@capitol.hawaii.gov

Honorable Senator Rosalyn H. Baker
Chair, Committee on Commerce, Consumer Protection and Health
State Senate
Hawaii State Capitol, Conference Room 229
415 South Beretania Street
Honolulu, Hawaii 96813

Dear Chair Baker and Committee Members:

Thank you for the opportunity to comment on SB 2323, relating to Insurance Coverage of Health Screenings.

Our firm represents the American Council of Life Insurers (“ACLI”), a Washington, D.C., based trade association with approximately 300 member companies operating in the United States and abroad. ACLI advocates in federal, state, and international forums for public policy that supports the industry marketplace and the 75 million American families that rely on life insurers’ products for financial and retirement security. ACLI members offer life insurance, annuities, retirement plans, long-term care and disability income insurance, and reinsurance, representing more than 90 percent of industry assets and premiums. Two hundred nineteen (216) ACLI member companies currently do business in the State of Hawaii; and they represent 93% of the life insurance premiums and 88% of the annuity considerations in this State.

As drafted, SB 2323 would amend Article 10A of Hawaii’s Insurance Code to require all individual and group accident and health or sickness providing coverage for health care to provide coverage for sexually transmitted disease screenings during a female insured’s annual gynecological exam.

By its terms, Article 10A of the Code (by reference to HRS §431:1-205) defines “accident and health or sickness insurance” to include disability insurance.

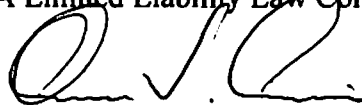
While SB 2323 is intended to cover only those policies of insurance that provide for healthcare the policies excluded are limited to those that “provide coverage for specified disease or other limited benefit coverage” and does not by its terms appear to apply to insurers issuing disability insurance.

In order to dispel any confusion as to what this bill is intended to cover, ACLI suggests that paragraph (a) of the new section proposed to be added to §431: 10A (beginning at line 11, page 2, be amended as follows:

§ 431:10A-___. Human immunodeficiency virus and acquired immunodeficiency syndrome screening coverage. (a) Each policy of accident and health or sickness insurance providing coverage for healthcare, except for policies that only provide coverage for specified diseases or other limited benefit coverage as described in §431:10A-102.5, shall provide insurance coverage for sexually transmitted disease screenings, including screenings for human immunodeficiency virus and acquired immunodeficiency syndrome, during a female insured's annual gynecological exam.

Again, thank you for the opportunity to comment on SB 2323.

LAW OFFICES OF
OREN T. CHIKAMOTO
A Limited Liability Law Company



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From: mailinglist@capitol.hawaii.gov
To: [CPH Testimony](#)
Cc: mrocca@hscadv.org
Subject: Submitted testimony for SB2323 on Feb 2, 2016 08:30AM
Date: Monday, February 01, 2016 3:14:48 PM

SB2323

Submitted on: 2/1/2016

Testimony for CPH on Feb 2, 2016 08:30AM in Conference Room 229

Submitted By	Organization	Testifier Position	Present at Hearing
Michelle Rocca	Hawaii State Coalition Against Domestic Violence	Support	No

Comments: HSCADV supports health screenings of sexually transmitted diseases to be included in insurance coverage as the current out of pocket cost of such screenings may deter women from participating in health screenings. The overall lack of screening makes individuals, and the greater community, more vulnerable to acquiring and spreading preventable illness.

Please note that testimony submitted less than 24 hours prior to the hearing, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

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Date: Wednesday, January 27, 2016 7:01:10 PM

SB2323

Submitted on: 1/27/2016

Testimony for CPH on Feb 2, 2016 08:30AM in Conference Room 229

Submitted By	Organization	Testifier Position	Present at Hearing
Dylan Armstrong	Individual	Support	No

Comments:

Please note that testimony submitted less than 24 hours prior to the hearing, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

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