

GOV. MSG. NO. 1263

EXECUTIVE CHAMBERS

DAVID Y. IGE GOVERNOR

June 27, 2022

The Honorable Ronald D. Kouchi, President and Members of the Senate Thirty-First State Legislature State Capitol, Room 409 Honolulu, Hawai'i 96813 The Honorable Scott K. Saiki, Speaker and Members of the House of Representatives Thirty-First State Legislature State Capitol, Room 431 Honolulu, Hawai'i 96813

Dear President Kouchi, Speaker Saiki, and Members of the Legislature:

This is to inform you that on June 27, 2022, the following bill was signed into law:

SB3367 SD2 HD1 CD1

RELATING TO HEALTH. ACT 162

Sincerely,

DAVID Y. IGE Governor, State of Hawai'i

Approved by the Governor JUN 2 7 2022

THE SENATE THIRTY-FIRST LEGISLATURE, 2022 STATE OF HAWAII

ACT 1 6 2 S.B. NO. ³³⁶⁷ ^{S.D. 2} ^{H.D. 1}

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A BILL FOR AN ACT

RELATING TO HEALTH.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF HAWAII:

SECTION 1. The legislature finds that, according to the 1 Centers for Disease Control and Prevention, lung cancer is the 2 leading cause of cancer deaths for men and women in the United 3 States. In 1987, lung cancer surpassed breast cancer to become 4 the leading cause of cancer deaths in women. The National 5 Institutes of Health estimated that medical expenditures for 6 cancer cost the United States an overall \$147,500,000,000 in 7 2015, \$13,400,000,000 of which was due to lung cancer. Lost 8 9 productivity due to early death from cancer cost the United 10 States an additional \$134,800,000,000 in 2005, \$36,100,000,000 11 of which was caused by lung cancer.

12 The legislature further finds that, according to the National Cancer Institute's SEER Cancer Statistics Review, 13 between 2011 and 2017, the five-year survival rate for lung 14 cancer was approximately 21.7 per cent. This is lower than the 15 16 survival rates of many other leading cancers, including colorectal cancer (64.7 per cent), breast cancer (90.3 per 17 18 cent), and prostate cancer (97.5 per cent). The five-year 2022-3180 SB3367 CD1 SMA.doc



1 survival rate for lung cancer is 59.8 per cent for cases 2 detected when the disease is still localized, meaning the cancer 3 is found only in the part of the body where it started. 4 However, only 17.8 per cent of lung cancer cases are diagnosed 5 at an early stage. For distant tumors, which are tumors spread 6 to other organs, the five-year survival rate is only 6.3 per 7 cent. More than half of people with lung cancer die within one 8 year of diagnosis.

9 According to the American Lung Association's 2021 State of 10 Lung Cancer report, in Hawaii lung cancer is also the number one 11 killer of men and women. The report ranks Hawaii last in the 12 nation for the early diagnosis of lung cancer. The study found 13 that just 2.8 per cent of high-risk people in Hawaii undergo 14 annual computerized tomography scans that capture detailed 15 pictures of the lungs, compared to 5.7 per cent nationally. In 16 a state-by-state analysis, the American Lung Association also 17 found that just nineteen per cent of lung cancer cases in Hawaii 18 are diagnosed early, compared to 24.5 per cent nationally. The 19 American Lung Association report further found that the rate of 20 new lung cancer cases for Native Hawaiians in Hawaii is one 21 hundred twenty-six per one hundred thousand, dramatically higher

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than the rates for indigenous peoples nationally and for
Caucasians in Hawaii.

3 The legislature also finds that the United States 4 Preventive Services Task Force has recommended that smokers and 5 former smokers who are at high risk of developing lung cancer 6 undergo computerized tomography scans. In March 2021, the United States Preventive Services Task Force expanded its 7 recommendation for screening to include a larger age range and 8 9 more current and former smokers. An annual lung cancer 10 screening with low-dose computed tomography is now recommended 11 for adults ages fifty to eighty years who have a twenty pack-12 year smoking history and currently smoke or have quit within the 13 past fifteen years. This expansion will dramatically increase 14 the number of Hawaii residents considered at high risk for lung 15 cancer.

16 The purpose of this Act is to establish an early lung 17 cancer screening task force to research the steps and resources 18 necessary to increase early lung cancer screening in Hawaii. 19 SECTION 2. (a) There is established within the 20 comprehensive cancer control program in the department of health 21 chronic disease prevention and health promotion division an

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early lung cancer screening task force to research the steps and 1 resources necessary to increase early lung cancer screening in 2 Hawaii. 3 4 (b) The task force shall consist of: (1)A representative from the office of the governor, to 5 be appointed by the governor; 6 7 A representative from the senate, to be appointed by (2)the president of the senate; 8 A representative from the house of representatives, to 9 (3) be appointed by the speaker of the house of 10 11 representatives; (4) A representative from the department of health; 12 A representative from the department of human 13 (5) 14 services; A representative from the University of Hawaii John A. 15 (6) Burns school of medicine: 16 17 A representative from the University of Hawaii cancer (7) 18 center; and 19 (8) A representative from each county. 20 The chairperson of the task force shall invite the (C) following individuals to become members of the task force: 21

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1	(1)	A representative from the United States Department of
2		Veterans Affairs;
3	(2)	A representative from each health insurer operating in
4		the State, including TRICARE;
5	(3)	A representative from each health care system
6		operating in the State, including but not limited to
7		The Queen's Health Systems, Hawaii Pacific Health,
8		Kaiser Permanente Hawaii, federally qualified health
9		centers, Native Hawaiian health centers, and Tripler
10		Army Medical Center;
11	(4)	A representative from the American Lung Association;
12	(5)	A representative from the American Cancer Society;
13	(6)	A representative from the Hawaii Primary Care
14		Association;
15	(7)	At least one representative from an organization
16		representing health care providers with relevant
17		expertise on lung cancer screening; and
18	(8)	Any other members, including representatives from
19		state agencies, stakeholders, or advocates, as
20		recommended by a majority of the task force.

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1	(d)	The task force shall select a chairperson from among
2	the membe	rs listed in subsection (b).
3	(e)	Members of the task force shall serve without
4	compensat	ion but shall be reimbursed for expenses, including
5	travel ex	penses, necessary for the performance of their duties.
6	(f)	The task force shall:
7	(1)	Review all available research, studies, and models for
8		increasing early lung cancer screening rates in the
9		State;
10	(2)	Conduct or initiate new studies as it deems necessary;
11		and
12	(3)	Create a public awareness campaign to inform Hawaii
13		residents about early lung cancer screening.
14	(g)	The task force may contract with consultants to
15	conduct s	tudies as it deems necessary for the purpose of
16	recommend	ing an early lung cancer screening program and funding
17	mechanism	. Any contract executed pursuant to this Act shall be
18	exempt fr	om chapter 103D, Hawaii Revised Statutes; provided that
19	the early	lung cancer screening task force shall ensure
20	transpare	ncy when executing the contract.

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1	(h)	The task force shall submit an interim report of its
2	findings	and recommendations, including any proposed
3	legislati	on, to the legislature no later than twenty days prior
4	to the co	nvening of the regular session of 2023.
5	(i)	The task force shall submit a final report of its
6	findings	and recommendations, including any proposed
7	legislati	on, to the legislature no later than July 31, 2023.
8	The repor	t shall include:
9	(1)	An analysis of the costs associated with early lung
10		cancer screening;
11	(2)	A list of qualified facilities in the State that
12		perform lung cancer screenings;
13	(3)	Protocols for health care providers and health care
14		systems to identify populations at high risk for lung
15		cancer;
16	(4)	An explanation of how health care providers are made
17		aware of available insurance coverage for early lung
18		cancer screenings;
19	(5)	Copies of guidelines used by health insurance
20		providers to determine coverage for early lung cancer
21		screening;

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1	(6) A discussion of cultural and social barriers		
2	associated with lung cancer screenings;		
3	(7) Policy recommendations for increasing early lung		
4	cancer screenings; and		
5	(8) A work plan that identifies the steps needed in the		
6	next five years to increase lung cancer screenings in		
7	the State.		
8	(j) The task force shall cease to exist on July 31, 2023.		
9	SECTION 3. There is appropriated out of the general		
10	revenues of the State of Hawaii the sum of \$250,000 or so much		
11	thereof as may be necessary for fiscal year 2022-2023 for the		
12	early lung cancer screening task force to carry out its		
13	activities pursuant to this Act.		
14	The sum appropriated shall be expended by the department of		
15	health for the purposes of this Act.		
16	SECTION 4. This Act shall take effect on July 1, 2022.		



3367 S.D. 2 H.D. 1 S.B. NO. C.D. 1

APPROVED this 27th day of June , 2022

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GOVERNOR OF THE STATE OF HAWAII

THE SENATE OF THE STATE OF HAWAI'I

Date: May 3, 2022 Honolulu, Hawaii 96813

We hereby certify that the foregoing Bill this day passed Final Reading in the Senate

of the Thirty-First Legislature of the State of Hawai'i, Regular Session of 2022.

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President of the Senate

Cleurollo

Clerk of the Senate

SB No. 3367, SD 2, HD 1, CD 1

THE HOUSE OF REPRESENTATIVES OF THE STATE OF HAWAII

Date: May 03, 2022 Honolulu, Hawaii

We hereby certify that the above-referenced Bill on this day passed Final Reading in the House of Representatives of the Thirty-First Legislature of the State of Hawaii, Regular Session of 2022.

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Scott K. Saiki Speaker House of Representatives

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Brian L. Takeshita Chief Clerk House of Representatives