



2016 LEGISLATION

Maternal & Child
Health Focus Bills

CHILD & MATERNAL DEATH REVIEWS- S.B.2234 / H.B. 1788

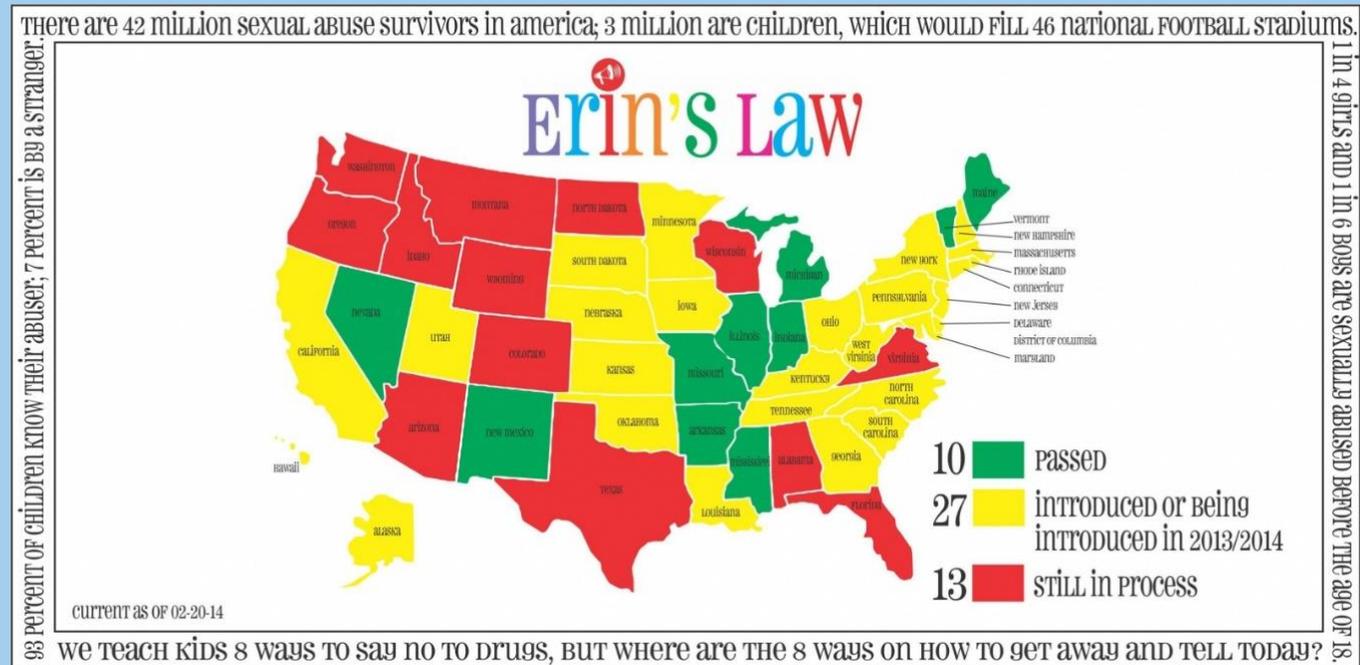
- Appropriates funds to the Department of Health to conduct child death reviews and implement a program to perform maternal death reviews.
- Requires the Department of Health to submit an annual report to the legislature relating to child and maternal deaths and death reviews in the State.



ERIN'S LAW (SEXUAL ABUSE PREVENTION)

- S.B. 2232 / H.B. 1782

- Establishes a sexual abuse prevention instructional program for public schools. Sets out guidelines of instruction. Modeled after Erin's law.
- S.B. 2232 SD2 HD2 is currently alive in the House.



ERIN'S LAW TASK FORCE: S.B. 2235 / H.B. 1787

- Creates and appropriates funds for the Erin's Law task force to guide the establishment of a program to educate public school students on sexual abuse prevention through use of age appropriate curricula.
- Provide relevant training to school teachers and staff.
- Inform parents about important child sexual abuse topics.
- H.B. 1787 HD2 SD1 is currently alive in the Senate.

PHARMACIST PRESCRIPTIVE AUTHORITY FOR CONTRACEPTIVE SUPPLIES- S.B. 2320 / H.B. 1896

- Authorizes pharmacists to prescribe and dispense contraceptive supplies to persons eighteen years of age or older.
- Specifies requirements pharmacists must meet prior to prescribing and dispensing contraceptive supplies.
- Requires all insurers in the State, including health benefits plans under chapter 87A, Hawaii Revised Statutes, and Medicaid managed care programs, to reimburse pharmacists who prescribe and dispense contraceptive supplies.
- S.B. 2320 SD1HD1 is currently alive in the House.

INSURANCE COVERAGE FOR HIV & AIDS SCREENING- S.B. 2323 / H.B. 1897

- 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.
- Both S.B. 2323 SD2 & H.B. 1897 HD1 SD1 are currently alive in the Senate and the House.

CONTRACEPTIVE SERVICES- S.B. 2432 / H.B. 2133

- Requires insurance coverage for a member obtaining a three-month amount of contraceptive supplies upon the first dispensing of a prescription for the supplies, and a twelve-month amount of contraceptive supplies upon any subsequent dispensing.



INSURANCE COVERAGE FOR PRESCRIPTIVE CONTRACEPTIVES- S.B. 2319 / H.B. 1895

- Requires insurers to cover a three-month period for the first dispensing of prescription contraceptive supplies to an insured. Requires insurers to cover a twelve-month period for the subsequent dispensing of the same contraceptive supply to the insured.
- S.B. 2319 SD1 HD2 is currently alive in the House.

BREASTFEEDING JURY DUTY EXEMPTION-

S.B. 2315 / H.B. 2585

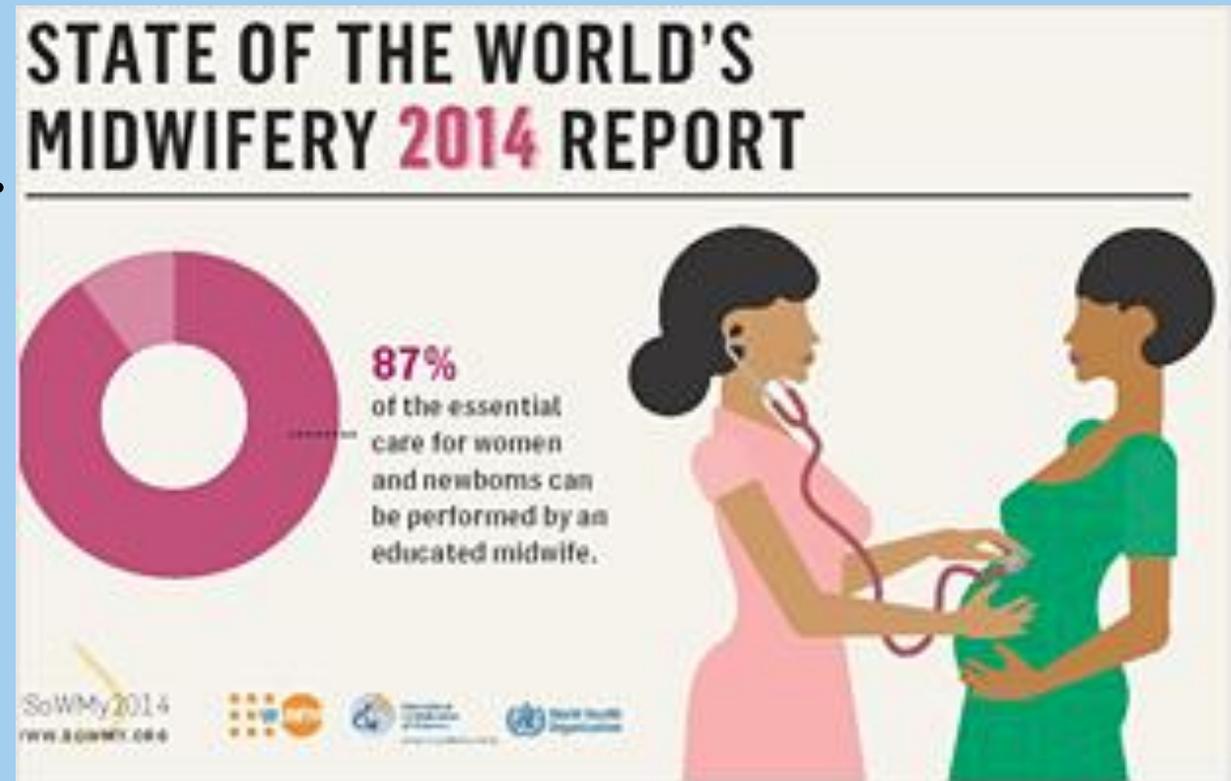
- Exempts from jury duty mothers who breastfeed or express breast milk.
- Provided that this exemption shall end when a mother is no longer breastfeeding or expressing breast milk.
- S.B. 2315 SD2 HD1 is currently alive in the House.

HPV VACCINE- S.B. 2316 / H.B. 1910

- Requires a child to receive at least one dosage of the human papillomavirus (HPV) vaccine prior to attending seventh grade, beginning with the 2017-2018 school year.
- Authorizes pharmacists to prescribe and administer the HPV vaccine to persons between 11 and 17 years of age. Specifies requirements pharmacists must meet prior to administering the HPV vaccine.
- Requires all insurers in the State, including health benefits plans under chapter 87A, Hawaii Revised Statutes, and Medicaid managed care programs, to reimburse the costs of HPV vaccination services.

MIDWIFE LICENSURE- S.B. 2326 / H.B. 1899

- Establishes licensure requirements for certified professional midwives (CPMs).
- Requires the Director of Commerce and Consumer Affairs to adopt rules regulating the practice of midwifery.
- Became a resolution for a sunrise analysis on CPMs



EQUAL PAY- S.B. 2313 / H.B. 1909

- Amends the provisions for equal pay and sex discrimination for substantially similar work.
- Clarifies the employer defenses. Prohibits employer actions regarding wage disclosure.
- Both S.B. 2313 SD2 HD1 & H.B. 1909 HD1 are currently alive in the House & the Senate.

PAID FAMILY LEAVE- S.B. 2477 / H.B. 1911

- Establishes a family leave insurance program, which requires employees to make contributions into a trust fund to be used to provide employees with family leave insurance benefits.
- Appropriates funds to DLIR to implement the program.



PAID FAMILY LEAVE- S.B. 2961 / H.B. 2128

- Establishes a family leave insurance program, which requires employees to make contributions into a trust fund to be used to provide employees with family leave insurance benefits in order to care for a designated person.
- Appropriates funds to DLIR to implement the program.
- S.B. 2961 SD2 HD2 is currently alive in the House.



PAID FAMILY LEAVE

Only 12% of workers in the U.S. have access to paid family leave through their employers. 0% of Hawaii employees receive paid leave under the law.

Unpaid leave under the federal [Family and Medical Leave Act \(FMLA\)](#) provides important job protections, but it is available to fewer than 50% of workers—and many can't afford to take it.

Laws providing [paid family and medical leave](#) allow workers to continue to earn a portion of their pay while they take time away from work to:

- Address a serious health condition (including pregnancy);
- Care for a family member with a serious health condition; or
- Care for a newborn, newly-adopted child or newly-placed foster child.

I DON'T WANT TO
CHOOSE BETWEEN MY
JOB AND MY FAMILY



THE TRUTH ABOUT PAID FAMILY LEAVE

MYTH 1: Workers already have paid family and medical leave or can use other benefits, such as sick and vacation days, to care for themselves or family members.

FACT: The percentage of employers offering fully paid maternity leave has actually declined substantially in recent years, dropping from 17% in 2005 to 9% in 2014.

Only 50% of new mothers take any paid time away from their jobs to care for a new child. Employers may offer maternity, paternity or parental leave – as well as sick leave and other types of paid time off – to some of their workers but not to most or all. Lower-wage workers and workers of color are even less likely to have access to paid leave.

THE TRUTH ABOUT PAID FAMILY LEAVE

MYTH 2: Businesses don't support a paid family and medical leave program.

FACT: A growing number of owners of both smaller and larger businesses have offered testimonials in support of paid leave and urged adoption of a national paid family and medical leave insurance program.

According to a 2013 Small Business Majority survey of business owners with fewer than 100 workers, 45% said they strongly or somewhat supported an insurance program funded through employer and employee payroll contributions.

Business owners know it makes good business sense to take care of their employees.

THE TRUTH ABOUT PAID FAMILY LEAVE

MYTH 3: Businesses do not benefit from or cannot afford paid leave. It will cause them to lay people off or close their doors.

FACT: There is absolutely no evidence that businesses suffer when workers have paid leave. In fact, all the available research shows that employers and employees both win with paid leave.

Paid leave improves worker retention, which saves employers money through reduced turnover costs. Across all occupations, median turnover costs are estimated to be turnover costs can amount to 213% of workers' salaries.

Prominent, profitable companies know that paid leave policies help recruit and retain top talent, and that satisfied, healthy workers are more productive. In 2007, Google increased paid maternity leave to five months, helping to maintain a diverse workforce that fosters innovation. Small businesses also support paid leave because offering this benefit allows them to compete with larger companies.

THE TRUTH ABOUT PAID FAMILY LEAVE

MYTH 4: Employees abuse paid leave when it is made available to them.

FACT: Evidence shows that abuse of paid leave is rare and that such fears by employers are unfounded. 91% of California employers said they were not aware of any abuse of the state's program. Research from New Jersey revealed not a single instance of such abuse.

In addition, the experiences of employers that offer paid leave, such as Ernst & Young, the Redwoods Group and a growing list of employers, indicate that employers are rewarded with reduced turnover costs and more dedicated and productive employees when paid leave programs are in place, rather than being burdened by abuse.

THE TRUTH ABOUT PAID FAMILY LEAVE

MYTH 5: A paid leave program would be too expensive.

FACT: Paid leave offers important returns on investment, including greater workforce attachment and higher wages for mothers, retention of older employees, and reduced use of safety net programs.

Taxpayers are already paying in multiple ways because people don't have paid leave. Creating a program that provides basic paid family and medical leave benefits to everyone would cost money, but an efficiently designed program would be deficit neutral and self-sustaining. Individuals contribute small amounts and experience positive effects.