Hawaii promotes price transparency by maintaining an All-Payer Claims Database, which collects healthcare claims data from commercial payers, Medicaid, and Medicare. Hawaii also continues to use the Hawaii Health Information Exchange, the state’s private sector non-profit designee for the receipt of federal funds to create a statewide health information exchange that will ultimately feed into the nationwide eHealth Exchange technology network.

Additionally, Hawaii has consistently supported legislation that increase access to telehealth services. State telehealth parity laws require Medicaid and private payers to cover appropriate telehealth services equivalent to reimbursement for the same services provided in-person.

In support of the ACA, Hawaii passed legislation that established the Affordable Health Insurance Working Group to plan for and mitigate adverse effects of the potential repeal of the federal Affordable Care Act by Congress. Regardless of what happens on the federal level, the bill calls for the preservation of the primary provisions of the individual mandate, to ensures that certain benefits under the Affordable Care Act are preserved under Hawaii law, including prohibiting health insurance entities from imposing a preexisting condition exclusion and prohibiting health insurance entities from using an individual’s gender to determine premiums or contributions.

Hawaii exercises strong antitrust oversight in the healthcare market by mandating that all healthcare transactions provide notice to and obtain approval from the state attorney general and the state Health Planning and Development Agency, with concurrent review by the AG, determines whether the proposed acquisition is in the public interest and if the transaction might significantly impact the accessibility of affordable healthcare services in the community.

See below for an overview of existing Hawaii state mandates. Click on citation tab for detailed information of specific statutes (click link to download statute text).