



TO: REPRESENTATIVE JOSH GREEN, CHAIR  
HOUSE COMMITTEE ON HEALTH

REPRESENTATIVE MAILE SHIMABUKURO, CHAIR  
HOUSE COMMITTEE ON HUMAN SERVICES AND HOUSING

MEMBERS OF THE HOUSE COMMITTEES ON HEALTH AND  
HUMAN SERVICES AND HOUSING

FROM: CHERYL VASCONCELLOS, EXECUTIVE DIRECTOR  
HANA HEALTH

DATE: January 20, 2008

**TESTIMONY IN SUPPORT OF H.B. 2062**  
**RELATING TO LONG TERM CARE**  
**Wednesday, January 23, 2008**  
**9:00 a.m.**

I am speaking in support of H.B. 2062 Relating to Long-Term Care.

In December 2000, Hana Health retained QMark Research and Polling to conduct a qualitative study in the form of focus groups to determine the needs of elders in Hana. Two groups of 10 seniors each (62 years of age and older) and one group of 10 caregivers (generally the children of seniors 62 years of age and older) were conducted. Some of the findings are as follows:

- The elderly want to stay in Hana, however Hana doesn't have the facilities or support services to care for elderly who need assistance.
- When family members and/or friends are no longer able to care for the elderly they must send them to the other side of the island for care.
- The elderly are concerned that their children will not be able to take

care of them and are afraid of leaving Hana.

- The adult children of the elderly are also concerned about their ability to care for aging parents.

There is no nursing facility, assisted living, or other community based, long term care options in the District of Hana. Currently, one in five (21%) Hana District residents is caring for an elderly parent or other family member. Half of those caring for an elderly family member do so in their own homes, thirty four percent are caring for an elderly family member who is currently living independently, and ten percent say the person they help care for lives with someone else.

More than 60% of Hana residents believe that a member of their family will need assisted living, a group home environment, respite care, adult day care and/or home health care within five years, and more than 30% of Hana residents need these services now (January 2007 Study).

Providing Medicaid funding for home and community based care for Hana's elderly would create a revenue stream to for these services that does not currently exist. Hana Health strongly urges your support of this measure. Thank you.

**TO :** HOUSE COMMITTEE ON HEALTH  
Rep. Josh Green, M.D., Chair  
Rep. John Mizuno, Vice Chair

HOUSE COMMITTEE ON HUMAN SERVICES AND HOUSING  
Rep. Maile S. L. Shimabukuro, Chair  
Rep. Karl Rhoads, Vice Chair

**FROM:** Eldon L. Wegner, Ph.D.,  
PABEA (Policy Advisory Board for Elder Affairs)

**SUBJECT:** **HB 2062 Relating to Long-Term Care**

**HEARING:** 9:00 am Wednesday January 23, 2008  
Conference Room 329, Hawaii State Capitol

**PURPOSE:** Allows persons eligible to receive Medicaid funds for care at nursing home facilities to remain at home and receive home and community-based long-term care.

**POSITION:** **PABEA supports in principle HB 2062 to use medicaid funds for home and community-based long-term care rather than nursing home facilities whenever appropriate. However, we are not certain what this bill proposes to do in this regard and whether it is needed in view of the pending implementation of the new QUEST-EX program later this year.**

**RATIONALE:**

I am offering testimony on behalf of PABEA, the Policy Advisory Board for Elder Affairs, which is an appointed board tasked with advising the Executive Office on Aging (EOA). My testimony does not represent the views of the EOA but of the Board. I am also a professor of medical sociology at UH-Manoa who has worked with elderly services in Hawaii for more than 20 years.



The population of Hawaii is aging rapidly and there is general consensus that we face a significant challenge to assure appropriate care to the frail elderly. There is a strong preference for individuals to remain at home for as long as possible, and the number of institutional beds is not likely to grow significantly.



Therefore, we must develop and finance home and community-based long-term care services. Hawaii already has Medicaid waiver programs, such as Nursing Home Without Walls, as well as the Residential Alternative Community Care (RACC) Program. The caps on these programs should be expanded, and to the extent allowable under the waivers, they should also extend services on a sliding fee scale to the non-Medicaid frail elderly.



The new Quest-X program for the Aged, Blind and Disabled will begin later this year and will fold together the existing waiver programs. It is unclear in what ways this program may expand options for clients, but it is important that this new program continue to emphasize consumer choice and consumer direction as called for in this bill.