
SENATE RESOLUTION

REQUESTING A STUDY OF VARIOUS UNRESOLVED ISSUES RELATING TO
AGING.

1 WHEREAS, the Center on Aging at the University of Hawaii at
2 Manoa was established in 1988 to:

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4 (1) Stimulate and coordinate gerontological and aging
5 instruction, research, and community services; and
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7 (2) Promote collaboration between the University and other
8 organizations concerned with aging; and
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10 WHEREAS, the Executive Office on Aging is the designated
11 lead agency in the coordination of a statewide system of aging
12 and caregiver support services in the State of Hawaii, as
13 authorized by federal and state laws; and
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15 WHEREAS, the general rule under Medicaid and Medicare is to
16 pay only if asset and income requirements are met; and
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18 WHEREAS, for purposes of Medicaid and Medicare, assets are
19 divided into two categories: exempt and non-exempt; and
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21 WHEREAS, exempt assets are not counted in calculating the
22 maximum asset level and include the home (of any value),
23 Individual Retirement Accounts or IRAs in the name of the "at
24 home" spouse, real property "essential for self support",
25 property used in a trade or business, household items used to
26 furnish a home, all personal effects, burial insurance, plots,
27 trusts, vaults and crypts, certain life insurance policies,
28 musical instruments, automobiles, reparation payments, and crime
29 victim payments; and
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31 WHEREAS, non-exempt assets, such as cash, stocks, bonds,
32 mutual funds, and money market accounts are counted in
33 calculating the asset limit; and
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35 WHEREAS, as a general rule, Medicare pays for one hundred
36 days of nursing home care after a three-day hospital stay, and

1 only so long as the ill person is making progress on
2 rehabilitation; but if Medicare runs out after one hundred days,
3 the recipient must turn to Medicaid, the processing of which can
4 take a significant time since there may be a re-qualification
5 process to ensure that a person qualifies; and

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7 WHEREAS, "Cash and Counseling" is a non-traditional
8 Medicaid program, pioneered by New Jersey, Florida, and
9 Arkansas, with seed grants from the United States Department of
10 Health and Human Services, the United States Administration on
11 Aging, and the Robert Wood Johnson Foundation; and

12
13 WHEREAS, today, grants from Cash and Counseling programs
14 are also available in at least twelve additional states:
15 Alabama, Illinois, Iowa, Kentucky, Michigan, Minnesota, New
16 Mexico, Pennsylvania, Rhode Island, Vermont, Washington, and
17 West Virginia; and

18
19 WHEREAS, Cash and Counseling participants may use their
20 Medicaid-provided personal assistance budgets to hire their own
21 personal care aides as well as purchase items or services,
22 including home modifications that help them live independently.
23 By redirecting personal assistance funds from agencies to
24 consumers themselves, Cash and Counseling allows people to hire
25 whomever they want to provide their care and decide for
26 themselves if they would rather hire a home health aide to cook
27 for them, or pay a friend or relative to do it; and

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29 WHEREAS, the services paid for by the State are all part of
30 the elder's authorized Medicaid care plan, and in many cases,
31 family members and friends chosen by the elder are providing
32 those services instead of an agency worker; and

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34 WHEREAS, according to the Cash and Counseling website, the
35 program was created because, "[f]amily caregivers are the
36 backbone of our country's long-term care system, providing
37 millions of hours of care every year for no compensation and
38 frequently at great cost to their own emotional health. They're
39 burned out and exhausted from juggling work, family
40 responsibilities, and caregiving. In addition, many caregivers
41 have to reduce their work hours or even give up their jobs to
42 take care of their loved ones. By supporting caregivers, we're
43 helping them hang in longer, and, hopefully, relieving some of
44 their stress"; and

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2 WHEREAS, even with Cash and Counseling support, family
3 caregivers are typically paid lower-than-average wages and, in
4 most cases, are paid for only a small fraction of the hours of
5 service they provide; and
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7 WHEREAS, individuals who apply for the Cash and Counseling
8 program apply through Medicaid; are assessed in the same way
9 they would be for traditional agency-provided services; and if
10 they choose the Cash and Counseling option, work with the
11 program's staff to develop an individual budget and care plan;
12 and
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14 WHEREAS, according to the National Aging in Place Council,
15 the American Association of Retired Persons recently released a
16 new report stating that eighty-seven per cent of people aged
17 fifty and older with disabilities want to receive long-term care
18 services in their own homes; and
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20 WHEREAS, the term "aging in place" is used in reference to
21 allowing a person to live where the person has lived for many
22 years, or to living in a non-healthcare environment, and using
23 products, services, and conveniences that enable individuals to
24 not have to move as they grow older or as circumstances change;
25 and
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27 WHEREAS, the term "respite care" means a service provided
28 in a least-restrictive environment for short-term care to meet
29 the needs, ranging from simple to complex, of the aging or
30 disabled; and
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32 WHEREAS, the purpose of respite care is to avoid, if
33 possible, the necessity for long-term institutional care or to
34 provide relief to families and care providers; and
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36 WHEREAS, caregivers who are friends or relatives usually
37 are not compensated for their invaluable services, oftentimes
38 having to give up regular employment to stay at home full-time
39 or otherwise to visit the home frequently in the day to ensure
40 the aging person is safe and comfortable; now, therefore,
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42 BE IT RESOLVED by the Senate of the Twenty-fifth
43 Legislature of the State of Hawaii, Regular Session of 2009,
44 that the Executive Office on Aging and the Center on Aging at

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1 the University of Hawaii at Manoa are requested to continue
2 their research and analyses to:

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- 4 (1) Develop a cash and counseling model and to apply for
5 related grants;
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- 7 (2) Determine how best to compensate caregivers for
8 necessary personal services;
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- 10 (3) Determine best practices for state agencies to
11 collaborate and coordinate with area agencies on aging
12 and local community service providers (including those
13 for the disabled community);
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- 15 (4) Enhance funding from all sources for Medicaid and
16 Medicare services, including but not limited to,
17 removing or adjusting income limits and non-exempt
18 asset limitations;
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- 20 (5) Determine how best to accommodate language barriers;
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- 22 (6) Determine how best to overcome access to long-term
23 care services barriers; and
- 24
- 25 (7) Identify more funding sources for long-term care
26 services; and
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28 BE IT FURTHER RESOLVED that the Executive Office on Aging
29 and the Center on Aging at the University of Hawaii at Manoa
30 submit a report on their findings and recommendations to this
31 body no later than twenty days prior to the convening of the
32 Regular Session of 2010; and

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34 BE IT FURTHER RESOLVED that certified copies of this
35 Resolution be transmitted to the Director of the Executive
36 Office on Aging and the Center on Aging at the University of
37 Hawaii at Manoa.