

Honolulu, Hawaii

March 25, 2010

RE: H.C.R. No. 319

Honorable Calvin K.Y. Say
Speaker, House of Representatives
Twenty-Fifth State Legislature
Regular Session of 2010
State of Hawaii

Sir:

Your Committees on Human Services and Health, to which was referred H.C.R. No. 319 entitled:

"HOUSE CONCURRENT RESOLUTION REQUESTING A MANAGEMENT AND FINANCIAL AUDIT OF ALL COMMUNITY-BASED PROGRAMS AND SERVICES RECEIVING MEDICAID FUNDING OR SUBSIDIZING INDIVIDUALS ELIGIBLE FOR MEDICAID,"

beg leave to report as follows:

The purpose of this concurrent resolution is to request a management and financial audit of all community-based programs and services receiving Medicaid funding or subsidizing individuals eligible for Medicaid.

Universal Case Management and Nightingale Case Management submitted testimony in opposition to this measure.

Your Committees realize that the current fiscal crisis has necessitated a re-evaluation of government-provided programs and services. We also believe that preserving the existing social safety net programs and services is paramount for Hawaii's vulnerable populations.

One of the largest means of funding these programs and services is the federal Medicaid program. Ensuring the proper use and maximization of the federal and state Medicaid funds will preserve the social safety net programs and services. It will also allow the State to remain fiscally responsible.

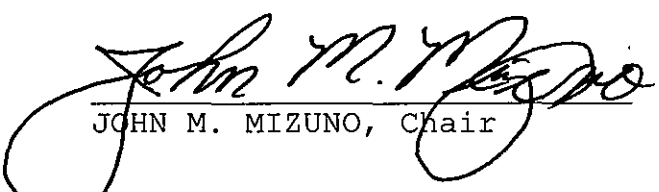


Therefore, your Committee feels it is important to request a management and financial audit of all community-based programs and services receiving Medicaid funding or subsidizing individuals eligible for Medicaid.

As affirmed by the records of votes of the members of your Committees on Human Services and Health that are attached to this report, your Committees concur with the intent and purpose of H.C.R. No. 319 and recommend that it be referred to the Committee on Legislative Management.

Respectfully submitted on behalf of the members of the Committees on Human Services and Health,


RYAN I. YAMANE, Chair


JOHN M. MIZUNO, Chair

State of Hawaii
House of Representatives
The Twenty-fifth Legislature

Record of Votes of the Committee on Human Services

Bill/Resolution No.: HCR 319	Committee Referral: HUS, HLT, LMG	Date: 3/18/10		
<input type="checkbox"/> The committee is reconsidering its previous decision on the measure.				
The recommendation is to: <input checked="" type="checkbox"/> Pass, unamended (as is) <input type="checkbox"/> Pass, with amendments (HD) <input type="checkbox"/> Hold <input type="checkbox"/> Pass short form bill with HD to recommit for future public hearing (recommit)				
HUS Members	Ayes	Ayes (WR)	Nays	Excused
1. MIZUNO, John M. (C)	/			
2. BROWER, Tom (VC)	/			
3. BELATTI, Della Au				/
4. BERTRAM, Joe, III	/			
5. CARROLL, Mele				/
6. NISHIMOTO, Scott Y.	/			
7. SHIMABUKURO, Maile S.L.				/
8. YAMANE, Ryan I.	/			
9. WARD, Gene				/
TOTAL (9)	5	0	0	4
The recommendation is: <input checked="" type="checkbox"/> Adopted <input type="checkbox"/> Not Adopted If joint referral, _____ did not support recommendation. committee acronym(s)				
Vice Chair's or designee's signature: <u>Tom Brower</u>				
Distribution: Original (White) – Committee Duplicate (Yellow) – Chief Clerk's Office Duplicate (Pink) – HMSO				

State of Hawaii
House of Representatives
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HSCR 1009-10

Record of Votes of the Committee on Health

Bill/Resolution No.: HCR 319	Committee Referral: HUS/HLT, LMG	Date: 3/18/10		
<input type="checkbox"/> The committee is reconsidering its previous decision on the measure.				
The recommendation is to: <input checked="" type="checkbox"/> Pass, unamended (as is) <input type="checkbox"/> Pass, with amendments (HD) <input type="checkbox"/> Hold <input type="checkbox"/> Pass short form bill with HD to recommit for future public hearing (recommit)				
HLT Members	Ayes	Ayes (WR)	Nays	Excused
1. YAMANE, Ryan I. (C)	/			
2. NISHIMOTO, Scott Y. (VC)	/			
3. BELATTI, Della Au				/
4. BERTRAM, Joe, III	/			
5. BROWER, Tom	/			
6. CARROLL, Mele				/
7. MIZUNO, John M.	/			
8. SHIMABUKURO, Maile S.L.				/
9. FINNEGAN, Lynn				/
TOTAL (9)	5			4
The recommendation is: <input checked="" type="checkbox"/> Adopted <input type="checkbox"/> Not Adopted If joint referral, _____ did not support recommendation. <small style="margin-left: 150px;">committee acronym(s)</small>				
Vice Chair's or designee's signature: _____ 				
Distribution: Original (White) – Committee Duplicate (Yellow) – Chief Clerk's Office Duplicate (Pink) – HMSO				