

**HB2157**

**HD1**

LINDA LINGLE  
GOVERNOR OF HAWAII



CHIYOME LEINAALA FUKINO, M.D.  
DIRECTOR OF HEALTH

STATE OF HAWAII  
DEPARTMENT OF HEALTH  
P.O. Box 3378  
HONOLULU, HAWAII 96801-3378

In reply, please refer to:  
File:

**WRITTEN TESTIMONY ONLY**

**SENATE COMMITTEES ON HEALTH AND HUMAN SERVICES**

**H.B. 2157, HD 1 RELATING TO EXPANDED ADULT RESIDENTIAL CARE HOMES**

**Testimony of Chiyome Leinaala Fukino, M.D.  
Director of Health**

**March 8, 2010**

1 **Department's Position:** The department respectfully OPPOSES this bill as unnecessary.

2 **Fiscal Implications:** This bill appropriates no money for the department's time and effort that will be  
3 required under this bill.

4 **Purpose and Justification:** H.B. 2157, HD 1 amends HRS §321-15.62 by raising the ceiling on the  
5 number of nursing facility level residents who reside in Type I Expanded ARCHs from two patients to  
6 three. However, the current statute already permits the DOH to allow more nursing level residents at its  
7 discretion, and this bill leaves this provision intact.

8 There are a grand total of 498 ARCHs with 2,643 beds in Hawaii. There are 254 Type I facilities  
9 with 1,161 beds and 221 Type I Expanded facilities with 1,089 beds. About 40% of the Type I  
10 Expanded beds (or 437 beds) are at the nursing level. The department's professional nurse consultant  
11 surveyors estimate that 10% of the nursing level beds are vacant at any given time. In addition, virtually  
12 all of the requests for additional nursing level beds are approved when the reputation of the home  
13 operator and the quality of care they provide can be validated and since virtually all of the requests are  
14 for residents to age in place. As a result, this bill appears to be unnecessary. Finally, any legislatively

1 mandated increase in the number of nursing level beds would require more licensing oversight, the costs  
2 of which are neither appropriated in this bill nor available at the department's current funding level.

3 Thank you for the opportunity to testify.

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**From:** Hokulaki [hokulaki1@hawaii.rr.com]  
**Sent:** Monday, March 08, 2010 8:38 AM  
**To:** HTHTestimony  
**Subject:** Testimony for Finance HB 2157 HD1 (HSCR604-10)

Testimony for Finance: March 8, 2010 2:55PM HB2157 HD1 (HSCR604-10)  
E-mail address: [hokulaki1@hawaii.rr.com](mailto:hokulaki1@hawaii.rr.com)

To the Hon. Committee Chairs, Vice Chairs and Committee Members:

My name is Myriam Tabaniag, a Registered Nurse for 24 years, President of the Alliance of Residential Care Administrators (ARCA) and also President and owner of two residential carehomes here in Hawaii.

I strongly support HB2157 HD1, its content and purpose.

Community-based facilities like carehomes have been saving the State and families of our state, millions of dollars yearly by providing our frail kupunas quality care services in our homes. We are a safe and highly regulated industry. Care homes are licensed by the Dept. of Health, Office of Health Care Assurance Branch with regulations under the State of Hawaii Title 11 Section 100.1 (HAR). There's a shortage of SNF beds in hospitals and Long Term Care facilities as we all know. Passing this Bill will allow more beds to open for our elderly. The State pays \$2500 for each SNF resident in the community based facility (i.e. care homes) while Long Term Care facility like Nursing Homes averages between \$8,000.00 to \$9,000.00 per month, **three times the amount paid to the carehomes.**

Passing this measure will also help to protect the health, safety, civil rights and the rights of choice of the residents who are already living in the carehomes for many years. At present, carehomes are allowed only two (2) expanded or skilled nursing facility (SNF) level residents in the home. If one of the other residents who is already living in the care home gets hospitalized and upon discharge, the level of care changes into SNF level, that resident is not allowed to come back into the same carehome, even though he/she has been living in the same carehome for 5-20 years, if the carehome already has 2 SNF level residents. This causes transfer trauma to the resident, the families and to us, caregivers.

SNF level residents in the carehomes have Registered Nurses Case Managers to oversee their care in the carehomes. They are a part of the team that includes the residents' families and guardians to help plan, train and execute the individualized care plan especially made for the residents.

Lastly, there's already a safety net built-in into the carehomes rules and regulations: Title11 Section100.1 (HAR) regarding staffing, fire safety, etc.

Other community based facilities like the Foster Homes are already allowed to take care of 3 residents in their homes without structural revisions to accommodate wheelchairs.

Thank you for allowing me to testify.

**From:** Hokulaki [hokulaki1@hawaii.rr.com]  
**Sent:** Monday, March 08, 2010 9:37 AM  
**To:** HTHTestimony  
**Subject:** Testimony for HB2157 HD1 (HSCR604-10)

Testimony for HB2157 HD1 (HSCR604-10)  
March 8, 2010 2:55 PM  
Rm. 016

To the Hon. Chairs, Vice Chairs, and Committee Members:

We, the Big Island Adult Residential Care Homes and Adult Foster Homes strongly support HB 2157 HD1 (HSCR604-10) for the following reasons:

1. Care Homes is still better than an institution where caregivers ratio to a patient has more one to one attention in a true sense of care giving. Six patients is not much to ask. It is very manageable. Caregiver ratio to patients is still way better than in an institution. If you have doubts about granting six patients to care home how much more to an institution whose caregivers ratio to patient is more....1:10 or 1:15 during the morning shift; 1:13 or 1:16 ratio for the evening shift and 1:20 or 1:23 CNA to patient ratio for the night shift. Where do we draw the logic of fairness? Giving consumer more choices as to where they want to live, who they want to work with in a family environment is very ideal. Living in a home setting where residents are considered as family members where they are given the opportunity to do things within their capacity give more meaning and quality of life regardless of their handicapping conditions.
2. Majority of the residents in a Care Home are ambulatory so the number three SNF resident is not a burden to the caregivers instead it helps in the maintenance of the business financially especially now that we are experiencing economic hardships .
3. Care Homes and Foster Homes are not in competition with each other instead they complement each other. The Big Island Care Home operators whose residents are deteriorating, refer their residents to Foster Homes if the home can not accommodate that specific level of care of their residents. We are proud to say that we have good working relationships as caregivers.

THANK YOU FOR ALLOWING US TO TESTIFY.

Big Island ARCH President, Miriam Guerrero  
Big Island AFHA President, Daniel Marcos

**From:** Medy Delara [medy\_arch@yahoo.com]  
**Sent:** Monday, March 08, 2010 7:58 AM  
**To:** HTHTestimony  
**Subject:** TESTIMONY ON HB 2157 (STRONGLY SUPPORT)

TO: COMMITTEE ON HUMAN SERVICES  
SEN: SUZANNE CHUN OAKLAND - CHAIR  
SEN: LES IHARA - VICE CHAIR

TO: COMMITTEE ON HEALTH  
SEN: DAVID IGE - CHAIR  
SEN: JOSH GREEN - VICE CHAIR

NOTICE OF HEARING - MONDAY, MARCH 8, 2010; CONFERENCE ROOM 016  
RE - HB 2157, HDI - INCREASE CAPACITY OF ICF/NURSING LEVEL RESIDENTS (EXPANDED  
CARE) IN TYPE I HOMES FROM 2 TO 3.

TESTIMONY - STRONGLY SUPPORT THE ABOVE HB

ICF/NURSING LEVEL RESIDENTS ARE BEING WAITLISTED IN ACUTE AND REHAB. FACILITIES DUE TO THE SHORTAGE OF THESE LEVEL BEDS IN COMMUNITY BASED FACILITIES OR CARE HOMES. PATIENTS WHO WOULD RATHER GO TO COMMUNITY BASED FACILITIES LIKE CARE HOMES END UP IN NURSING HOMES. IN THE MEANTIME THERE ARE VACANT BEDS (CARE HOME LEVEL BEDS) IN CARE HOMES THAT ARE BEING LEFT VACANT DUE TO LACK OF CARE HOME LEVEL RESIDENTS. ONE OF THE REASONS FOR THIS, IS THEY REMAIN AT HOME UNTIL THEY ARE TOO SICK TO BE TAKEN CARED BY THEIR FAMILIES. THESE VACANT BEDS IN "CARE HOMES" COULD BE BEST UTILIZED BY ALLOWING "CARE HOMES" TO CONVERT ONE "CARE HOME" LEVEL BED TO ICF/NURSING LEVEL THEREBY INCREASING CAPACITY OF ICF/NURSING LEVEL BED IN TYPE I HOMES FROM 2 TO 3.

OTHER REASONS ARE AS FOLLOWS:

1. CARE HOMES ARE MORE COST EFFECTIVE - SPECIALLY DURING THIS TIME OF FINANCIAL CRISIS. RESIDENTS IN THESE TYPE OF HOMES PROVIDE QUALITY CARE AT AFFORDABLE PRICE OF \$2,500 A MONTH, WHILE NURSING HOMES CHARGE FROM \$9,000 TO \$10,000 A MONTH, THUS SAVING THE ELDERLY THEIR FAMILIES AND THE STATE A LOT OF MONEY.
2. CARE HOMES ARE HIGHLY REGULATED BY THE DEPT. OF HEALTH, OFFICE OF HEALTH CARE ASSURANCE, THE SAME AGENCY REGULATING NURSING HOME.
3. CARE HOMES PROVIDE MORE DIRECT SUPERVISION AND CONTACT WITH RESIDENTS AND CONTINUITY OF CARE IS MORE EFFICIENT BECAUSE THERE'S MORE STAFF TO RESIDENT RATIO.
4. EACH NURSING LEVEL RESIDENT IS BEING FOLLOWED UP BY A LICENSED RN OR SW CARE MANAGER TO PROVIDE OVERSIGHT IN THE DELIVERY OF CARE.

FROM: MEDY DE LARA, RN  
ARCA

**Testimony to the Senate Committees on Health and Human Services  
Monday, March 8, 2010 at 2:55 p.m.  
Conference Room 016, State Capitol**

**RE: HOUSE BILL NO. 2157 HD1 RELATING TO EXPANDED ADULT  
RESIDENTIAL CARE HOMES**

Chairs Ige and Chun Oakland, Vice Chairs Green and Ihara, and Members of the Committees:

My name is Jim Tollefson and I am the President and CEO of The Chamber of Commerce of Hawaii ("The Chamber"). The Chamber supports House Bill 2157 relating to Expanded Adult Residential Care Homes.

The Chamber is the largest business organization in Hawaii, representing more than 1,100 businesses. Approximately 80% of our members are small businesses with less than 20 employees. As the "Voice of Business" in Hawaii, the organization works on behalf of its members, which employ more than 200,000 individuals, to improve the state's economic climate and to foster positive action on issues of common concern.

This measure increases capacity from two to three nursing facility level residents in Type I Expanded Adult Residential Care Homes. Effective January 1, 2010.

Patients who are waitlisted for long-term care are occupying acute care beds in our hospitals. This increases uncompensated costs for hospitals (\$73.5 million in 2008 alone), creates shortages of acute care beds, and decreases quality of life for patients who no longer need acute care services. We need to take a comprehensive approach to developing solutions throughout the health care delivery system, to create capacity for these patients, who do need care, by utilizing the most appropriate and cost effective setting. Public and private collaboration is essential to the success of this effort.

The Chamber supports prescriptions that will improve the quality of our health care system. Therefore, this measure will hopefully ameliorate the long-term care and acute care bed shortage issues.

In light of the above, The Chamber of Commerce of Hawaii supports HB 2157 HD1. Thank you for the opportunity to testify.

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**From:** mailinglist@capitol.hawaii.gov  
**Sent:** Monday, March 08, 2010 9:54 AM  
**To:** HTHTestimony  
**Cc:** mbutay@aol.com  
**Subject:** Testimony for HB2157 on 3/8/2010 2:55:00 PM

Testimony for HTH/HMS 3/8/2010 2:55:00 PM HB2157

Conference room: 016  
Testifier position: support  
Testifier will be present: Yes  
Submitted by: Melody Butay Dacanay  
Organization: Capitol Consultants of Hawaii, LLP  
Address: 222 S Vineyard Street, Suite 401 Honolulu, HI  
Phone: 8085314551  
E-mail: [mbutay@aol.com](mailto:mbutay@aol.com)  
Submitted on: 3/8/2010

Comments:  
John Radcliffe, Vice President, Capitol Consultants of Hawaii will be testifying on behalf of ARCA.



February 22, 2010

Senator Suzanne Chun-Oakland, Chair  
Senator Les Ihara, Jr., Vice Chair  
Committee on Human Services

Representative David Ige, Chair  
Representative Josh Green, Vice Chair  
Committee on Health

Hawaii State Capitol, Room 016

**RE: HB2157 HD1 Relating to Expanded Adult Residential Care Homes**

Dear Chairs, Vice Chairs and Members of the Committee:

I would like to voice my strong support for House Bill #2157 (Increase of Expanded Beds from two to three in an Adult Residential Expanded Care Home).

Our state, our kupuna, and our care homes desperately need this during these demanding and uncertain economic times. Moreover, the passing of this bill will help to alleviate the problem of not having enough beds to meet the demands in our institutional healthcare facilities as we witness the coming of what many have labeled as "The Silver Tsunami". The significant savings will benefit the hospitals, the nursing homes, our elderly consumers and their families as well as the care homes.

Thank you for the opportunity to support this bill and thank you for your consideration and attention to this matter.

Sincerely,  
Rev. Patrick Koh

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**From:** Lou Marcelo [lou.marcelo@yahoo.com]  
**Sent:** Monday, March 08, 2010 9:38 AM  
**To:** HTHTestimony  
**Subject:** Re: ARCH 2 to 3 level 2 clients

Dear Senator David Ige, Senator Susan Chun Oakland, and to our Committee on Health , I would like to support the cause of the Adult Residential Care Home Administrators plight into on their petition to care of 3 level clients . Currently they are allowed to care for 2 clients in their homes .

Our care givers are dedicated staff that do what they are dedicated to do. They are caring individuals that have opened their homes to care for our elderly , so most of us could go to work , pay taxes, mortgages and send our children to school . Please vote for this bill and let our RNs and CNA provide care to the clients that need the care.

Thank you for your support.

Yours Truly ,

Lou

**President, CEO**

Lou's Quality Home Health Care Services LLC  
P.O. Box 893224  
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*Lourdes Vergara Marcelo, RN*

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Lourdes V. Marcelo, RN , CDN

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**From:** FAJOTINACAREHOME@aol.com  
**Sent:** Sunday, March 07, 2010 9:43 PM  
**To:** HTHTestimony  
**Subject:** HB2157

Lilia Fajotina  
Care Home Operator  
ARCA( alliance of Residential Care Administrators)  
94-438 Hoaeae St.  
Waipahu, Hi 96797  
Tel. 676-7399

March 8, 2010

I strongly support HB 2157. Adult Residential Care Homes save the state a lots of money. Care Homes are highly regulated by Dept. Of Health, It required us to go school including nursing modules, how to administered medications to each individual clients, and also care home operators are required us to have a hospital experience or long term care before open a care home.

Each nursing level residents is being followed up by a case manager to provide oversight in the homes.

Thank you so much for allowing me to support HB 2157

Sincerely,

Lilia Fajotina  
(owner/care home operator)

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**From:** Norma Tenorio [NormaT@cbpacific.com]  
**Sent:** Monday, March 08, 2010 10:35 AM  
**To:** HTHTestimony  
**Subject:** Testimony for HB2157, HD1 for March 8, 2010 at 2:55 PM Rm 016 Conference Room

Aloha to all,

I am Norma Tenorio, a care home operator and a Registered Nurse .

I would like to testify to please pass this Bill into a law in order to save the State tons of money ! The quality of care we provide at the care homes is excellent and the money being paid compared to a large institutions is nothing in comparable.

MahaloTenorio  
(255-6227)