

NEIL ABERCROMBIE  
GOVERNOR



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STATE OF HAWAII  
**DEPARTMENT OF HUMAN SERVICES**

P. O. Box 339  
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February 9, 2012

TO: The Honorable John M. Mizuno, Chair  
House Committee on Human Services

FROM: Patricia McManaman, Director

SUBJECT: **H.B. 2292 - RELATING TO FOSTER YOUTH**  
Hearing: Thursday, February 9, 2012; 8:30 a.m.  
Conference Room 329, State Capitol

**PURPOSE:** The purpose of the bill is to require the Department of Human Services to automatically enroll former foster youth in an appropriate medical assistance program and automatically re-enroll former foster youth until they reach age twenty-six.

**DEPARTMENT'S POSITION:** The Department of Human Services (DHS) appreciates the intent of this bill but finds it unnecessary as DHS is already working toward this goal.

Under the federal Affordable Care Act, beginning in 2014, individuals who aged out of foster care and are younger than twenty-six years will be eligible for Medicaid. DHS is already pursuing a phase-in of this by seeking federal approval to cover individuals who aged out of foster care and are younger than twenty-four years in 2012 and those younger than twenty-five years in 2013.

A phased-in approach allows identification of the cohort of individuals to be covered in 2014 and begin their coverage now. It also permits a gradual increase in enrollment that was

budgeted. Expanding immediately to all individuals younger than twenty-six would require an appropriation.

The current language of the bill would also suggest that any individual who was at some point in foster care, even if briefly, would be eligible under its provisions. This would be far more expansive than the Affordable Care Act, which targets individuals who age out of foster care, and would require a significant appropriation.

Thank you for the opportunity to testify on this bill.



**HB2292**  
**RELATING TO FOSTER YOUTH**  
**House Committee on Human Services**

February 9, 2012

8:30 a.m.

Room 329

The Office of Hawaiian Affairs (OHA) **SUPPORTS** HB2292, which would require the department of human services to automatically enroll former foster youth in an appropriate medical assistance program and re-enroll them until they reach the age of twenty-six.

Approximately 52 percent of the children placed in foster care in Hawai'i are of Native Hawaiian ancestry, and often times these children are not provided with a foundation to succeed before they exit the system. When foster youth age out of the system, they no longer have a support mechanism to maintain their healthcare coverage. Enrolling and re-enrolling former foster youth in an appropriate medical assistance program would significantly benefit these children and society as a whole. This measure would provide a safety net for former foster youth to maintain their health needs and become productive and self-sufficient adults.

OHA urges the Committee to **PASS** HB2292. Mahalo for the opportunity to testify.

# HAWAII YOUTH SERVICES NETWORK

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Big Brothers Big Sisters of Honolulu  
Big Island Substance Abuse Council  
Blueprint for Change  
Bobby Benson Center  
Catholic Charities Hawaii  
Central Oahu Youth Services Assn.  
Child and Family Service  
Coalition for a Drug Free Hawaii  
Domestic Violence Action Center  
EPIC, Inc.  
Family Support Hawaii  
Friends of the Missing Child Center of HI  
Hale Kipa, Inc.  
Hale 'Opio Kauai, Inc.  
Hawaii Behavioral Health  
Hawaii Student Television  
Healthy Mothers Healthy Babies Coalition  
Hina Mauka Teen Care  
Hui Malama Learning Center  
Kahi Mohala Behavioral Health  
Kama'aina Kids, Inc.  
KEY (Kualoa-Heeia Ecumenical Youth)  
Project  
Kids Behavioral Health  
Kids Hurt Too  
Kokua Kalihi Valley  
Kula No Na Poe Hawaii  
Lanai Community Health Center  
Life Foundation  
Marimed Foundation  
The Maui Farm, Inc.  
Maui Youth and Family Services  
Palama Settlement  
P.A.R.E.N.T.S., Inc.  
Parents and Children Together (PACT)  
Planned Parenthood of Hawaii  
Queen Liliuokalani Children's Center  
Kona Unit  
REAL  
Salvation Army Family Intervention Svcs.  
Salvation Army Family Treatment Svcs.  
Sex Abuse Treatment Center  
Susannah Wesley Community Center  
The Catalyst Group  
The Children's Alliance of Hawaii  
Waikiki Health Center  
Women Helping Women  
YouthVision  
YWCA of Kauai

February 7, 2012

To: Representative John Mizuno, Chair  
And members of the Committee on Human Services

## TESTIMONY IN SUPPORT OF HB 2292 RELATING TO FOSTER YOUTH

Hawaii Youth Services Network (HYSN), a statewide coalition of youth-serving organizations, supports HB 2292 Relating to Foster Youth.

When youth age out of foster care at 18, they are suddenly faced with coping with all of the tasks of independent living without adult support or guidance. They must obtain housing, seek employment, manage a budget, and meet many other new and often overwhelming responsibilities. It is not surprising that some fail to meet all of the complex requirements for applying for and renewing their medical assistance benefits.

When youth adults lack medical assistance coverage, it can result in serious harm resulting from untreated illness or injury, inappropriate use of emergency medical services, and unnecessary costs. The stories below illustrate what happens to former foster youth when they lack medical benefits. The stories are true, but names have been changed to protect confidentiality.

Sarah used hospital emergency rooms as her primary source of medical care. When she was sick or injured, she delayed seeking help until the pain and sickness became too much to bear. If Sarah had consistent medical coverage and could establish a relationship with a doctor who knew her history and saw her regularly, the frequency and severity of her asthma attacks could have been greatly reduced. The cost of managing her asthma and other health needs would have been much lower.

Kalani did not know why he was feeling increasingly tired and weak. When he complained to his friends, they advised him to get more sleep, take some vitamins or stop partying so much. Eventually Kalani lost his job, because he could no longer lift heavy boxes. When Kalani became desperate enough to seek medical

help, he was diagnosed with muscular dystrophy. If he had been able to see a doctor when his symptoms began, he might have been able to retain more mobility and strength as a result of prompt diagnosis and treatment.

Ensuring that former foster youth have access to medical care in their young adult years will improve the health of these young adults while reducing the costs of their medical care and avoiding inappropriate use of emergency facilities.

Thank you for this opportunity to testify.

Sincerely,

A handwritten signature in black ink, appearing to read "Judith F. Clark". The signature is written in a cursive style with a large initial "J" and a long, sweeping underline.

Judith F. Clark  
Executive Director

**To: Committee on Human Services**

**From: Delia Ulima, Statewide Initiative Coordinator**  
Hawaii Youth Opportunities Initiative, EPIC 'Ohana, Inc.

**Re: In Support of HB 2292, RELATING TO FOSTER YOUTH**

Good Afternoon Senator Chun-Oakland and Members of the Committee,

My name is Delia Ulima and I am a Statewide Initiative Coordinator for the Hawaii Youth Opportunities Initiative, the local site for the national Jim Casey Youth Opportunities Initiative. EPIC 'Ohana is the lead agency for this Initiative in Hawaii. The Initiative works with systems, such as the Department of Human Services, other service providers and partners with both the public and private sector to create and support transitioning foster youth to successfully move into adulthood and become a part of the community.

I would like to submit testimony in support of HB 2292 which extends medical coverage to former foster youth by automatic enrollment. Initiative sites across the nation have been and continue to be engaged in work with local and state agencies to extend Medicaid for former foster youth up to age 21 and beyond. To date, over 17 other states have extended Medicaid for this population. The HI H.O.P.E.S. Youth Leadership Board of the Hawaii Youth Opportunities Initiative supports the extension of Medicaid to former foster youth in Hawaii by automatic enrollment up to age 26.

A young person in the foster care system is at a higher risk for physical and mental health problems. They very often face issues of homelessness, underemployment and become parents at a young age without the support of caring adults. They have social workers to help them navigate health and mental health systems while they are in care, but once they age out, they are expected to continue to do so without adequate life experiences or the support of responsible adults. Many of them are unaware of or find it difficult to fill out an annual renewal application to receive medical coverage. In addition, this population is often transient, moving from home to home and the application will be sent to the last known address. Couple that with the fact that these young adults are not thinking about the importance of health care and why they need medical coverage until something happens and they really need it. Former foster youth who lack adequate health insurance cost states more because they put off preventative care and seek more expensive treatment in hospital emergency rooms.

In Hawaii, the majority of these youth are already eligible for coverage and extending Medicaid to these youth by automatic enrollment will ensure that they have the services they need when they need it. As parents, medical coverage is something we consider a necessity for our children, even as they reach young adulthood and head off to college. Under the current Affordable Health Care Act, parents have the opportunity to include their adult children on their medical plan up to age 26. Foster youth are wards of the state, and as such, should be provided the same parity as any parent who provides this basic necessity for their own children.

In closing, we respectfully ask this committee to pass HB 2292 and support transitioning foster youth in Hawaii by ensuring that they continue to receive medical coverage by automatic enrollment until age 26.

Mahalo nui loa.

To: Committee on Human Services

From: Robyn Finai

Member of the Hawaii Youth Opportunity Initiative HI H.O.P.E.S Board and Former Foster Youth

Re: In Support of HB 2292, RELATING TO FORMER FOSTER YOUTH

My name is Robyn Finai and I am a member of the Hawaii Youth opportunity Initiative's HI H.O.P.E.S. Board. We provide support, awareness, opportunity, and help pave the path for future and transitional foster youth. I would like to extend my support for HB 2292 which will automatically enroll aged out foster youth into Medicaid as well as extending their coverage to the age of 26.

When Obama took Office he had passed the law that allows parents to cover their children under their medical health insurance up to the age of 26. This being said I believe, with the State of Hawaii being the Legal Guardian of foster youth in Hawaii, we should have the same opportunity. Transitional foster youth are also at higher risk of chronic health problem, mental illness as well as psychiatric disorder. Therefore the need for Medical Coverage is imperative. Youth coming of age will not be able to afford this kind of care.

I am respectfully asking the committee to pass HB 2292 to help support transitioning foster youth and automatically enrolling them in Medicaid until they reach the age of 26.

Thank You

To: Committee on Human Services

From: Tiffany "Ipo" Lynch-Ma'e  
President, HI H.O.P.E.S. Youth Leadership Board, East Hawaii

Re: In Support of HB 2292, RELATING TO FORMER FOSTER YOUTH

Welina mai kakou,

My name is Tiffany "Ipo" Lynch Ma'e, I am 22 years old and currently the President of the East Hawaii HI H.O.P.E.S Board with the Hawaii Youth Opportunities Initiative.

Today, I would like to present supportive testimony for HB 2292, which calls for automatic enrollment for all youth who age out of care into medical and dental coverage up until the age of 26.

Health Care plays a vital role in the success and stability in not only Foster Youth, but, all youth. Youth who are not in care have the opportunity to remain on their biological parents medical up until age 26.

Now, I'm all for equality, Foster Youth in many ways are already at a disadvantage, the State of Hawaii is our parents and I don't understand why there are still handfuls of us who are forced to live without medical coverage.

Like I said, I am 22 years old, I have yet to have my wisdom teeth removed and have certain health issues that go unattended, I don't have medical or dental. My story is far from unique I can scroll through my phone and find at least 13 youth who aged out of care who don't have medical or dental either. America is the only industrial country in the world that does not offer universal coverage. Now that's a different argument, but I can't help but think how much of an injustice we're doing to the next leaders of our Country. Oppression continues, inequality continues, why is it okay for a typical adolescent to receive health coverage beyond their teen years, but foster youth have to struggle and compete with other adults in the general population? Why are we not allowed to receive extended medical coverage from OUR parents?

Personally I feel that, out of all the struggles that youth who age out of care face, this is not only one of the easiest to fix, but one that would show the greatest positive results.

My brothers and sisters who age out of care are six times more likely to suffer from post traumatic stress disorder than that of the general population, and twice as likely as returning war veterans, yet more than half of us do not receive the proper mental health services we need.

When I'm in college, and can't go to class because I'm in pain or at free health clinics, only to get denied, I fail my course. Only 3 percent of youth who age out of care graduate with a 4-year degree.

When I'm sick or in pain, I can't go to work. If I can't go to work, I can't pay my bills. 25% percent of youth who age out of care experience at least 1 day of homelessness by the age of 24.

Everybody needs medical and dental, foster youth don't have mommy's to bring us soup, our mother tells us that it cost too much money to make sure we're healthy.



No offense sir or ma'am, but would you deny your child proper health coverage?

The passing of this bill would allow Foster Youth to have one less thing to worry about. The passing of this bill will promote healthy living to me and my brothers and sisters. I'll bet my life on it that this bill will help decrease some of the negative statistics and stigmas that haunt all youth who aged out of Child Welfare Services.

We're not asking for much, just for you to think two things;

1. What would I do for my child? Would I allow my child to go without medical and dental? And
2. What if you didn't have medical?

Please support the passage of HB 2292.

Thank You For Your Time,

Ipo Ma'e

To: Committee on Human Services;  
From: Jo-Lynn Kahala-Minczer

Re: In Support of HB 2292

My name is Jo-Lynn Kahala-Minczer, I am a former foster youth and an active member of the Hawaii Foster Youth Coalition, where I get to interact with so much other foster youth throughout the state.

I would like to submit testimony in support of HB 2292, which extends medical coverage to former foster youth by automatic enrollment.

I aged out of the foster care in Hawaii and will be turning 20 at the end of the month. I am currently a full-time student at the University of Hawaii at Manoa as a sophomore. I recently have been re-enrolled into the Med-Quest program after being cut-off for a year after aging out of the system. The part that threw me off the most was that I did not even know that my medical insurance was expired.

It was my first year in college and I was out on my own. Although I thought I was well prepared to take on the world, the world threw me some curveballs. Away from family and out on the continental U.S., I was a small fish in a big pond. At the time, I was majoring in Graphic Design, therefore I worked late nights at the studio. One night I was working on the desk and my scalpel broke and cut a big gash in my foot. I freaked out when I realized that it was my vein I could see, which my blade nearly encountered. I rushed to the university's health center with blood heavily flowing out and got stitches. When I got the bill, I was told my medical insurance did not work, forcing me to get medical insurance with the University to cover charges. I was so confused- my medical insurance only works in Hawaii?

Upon transferring back home to the University of Hawaii at Manoa, my medications were cancelled as well. I got a call from the pharmacy that explained to me that I no longer had medical insurance and had to pay for the medications. I went to an office I have never been to in my life to get an application to apply for Med-Quest. It took me time to figure out everything but eventually I completed it. After weeks of getting documents, waiting, submitting another application and more waiting, I finally received a letter in late November of 2011 informing me of all my medical insurance information.

Now hear me good, I am an intelligent, hardworking student. I have a loving family and helpful guardian. I support and take care of myself well. But with all the preparation in high school, I still struggled with my medical insurance because I did not know anything about it, not even my guardian knew. As a foster child, once we hit 18, were thrown into the world and are expected to understand everything there is to know about being an adult. When I asked my peers, they all just said "Oh my parents still claim me, so I just go under their medical insurance." Studies show that 57% of former foster youth at age 23 and 24 are covered with medical insurance, whereas 78% of our peers receive coverage. Automatically enrolling foster youth and providing guidance in medical insurance can raise this percentage.

In closing, I would humbly ask this committee to pass HB 2292. This bill could help so many young adults in working away from a heavy past and towards a strong and healthy future by automatically enrolling in medical coverage.

Thank you very much.

## TESTIMONY IN SUPPORT OF HB 2292, RELATING TO FOSTER YOUTH

My name is Gernani Yutob, Jr. and I am the president of the Oahu HI H.O.P.E.S. Youth Leadership Board of the Hawaii Youth Opportunities Initiative. The Initiative is a national and local effort to create and support successful outcomes for transitioning foster youth.

I would like to submit testimony in support of HB 2292 which seeks to extend medical coverage to former foster youth by automatic enrollment. The HI H.O.P.E.S. Youth Leadership Board of the Hawaii Youth Opportunities Initiative supports the extension of Medicaid to former foster youth in Hawaii by automatic enrollment up to age 26.

I aged out of foster care in Hawaii and will turn 22 this April. I currently reside with my former foster parents and have been fortunate to have my former foster mother assist me in filling out my applications for Med-Quest every year. Other former foster youth are not as fortunate. They are not aware of their health care options and coverage status after they age out. The process of filling out these long applications every year can be overwhelming. Transitioning foster youth are also constantly on the move which makes it much difficult to renew application forms each year because they usually mail it to the last address the youth resided in. And to top it off, if the letter was not mailed back by the specified due date then the youth would lose medical coverage. It would be much easier if there was some sort of annual automatic enrollment for transitioning foster youth and to have the age increased to 26 with full coverage in contrast to the general population.

Since I am now 21, my medical benefits have decreased substantially and is now very limited. Last year, Med-Quest claimed they mailed a renewal application to my residence but I have not received it and was unaware of the procedures associated with it. Since I supposedly did not return the form, I was stripped of my medical benefits. Fortunately for me I was able to reapply and be eligible again but not without a four month wait. God-forbid, what if something terrible was to happen to me while I was uninsured during that period? The only way I am receiving full coverage now is through my employer but even that is difficult as well because I have to devote 20 hours weekly and at the same time manage my four classes for benefits. What if I was to lose my job or decide to focus more on school? On the contrary, not many foster youth have jobs or are able to work the 20 hours AND manage school at the same time so the chances of them obtaining coverage are slim. It would be much easier if there was some sort of annual automatic enrollment for transitioning foster youth and to have the age increased to 26 with full coverage in contrast to the general population.

On a national level, only 57% of former foster youth under 24 have health insurance, compared to 78% of their counterparts. A recent poll of 54 former foster youth in Hawaii showed that over 50% of them did not have or did not know whether or not they had medical coverage. That means they are not accessing resources that may be available to them, even if they are eligible and need it. Studies show that former foster youth suffer from post-traumatic stress disorder at six times more than the general population and twice as much as returning war veterans. Proper health care is critical for transitioning foster youth because it supports positive physical, psychological and emotional health.

In closing, I would humbly ask this committee to pass HB 2292 and take us one step closer to ensuring that former foster youth up to age 26 are automatically enrolled to receive the medical coverage they need for a healthy future.

**To: Committee on Human Services**

**From: Nellieshy Mamuad, Historian/Public Relations Chair (East Hawaii)**

HI H.O.P.E.S. Youth Leadership Board, Hawaii Youth Opportunities Initiative, EPIC 'Ohana, Inc.

**Re: In Support of HB 2292, RELATING TO FOSTER YOUTH**

My name is Nellieshy Mamuad and I am 23 years old. I am a member of the Hawaii Youth Opportunities Initiative HI H.O.P.E.S. Board in East Hawaii as well as a former foster youth. I would like to provide supportive testimony today for HB 2292, which provides extended and automatically re-enrolled Medicare benefits for all foster youth who have reached the age of majority until age 26. Medical coverage is something that is vital for everyone, but even more so for the former foster youth population. 77% of former foster youth become pregnant by the age of 23. Another 24% have reported being homeless at least once. Of these youth, only 57% have medical coverage compared to 78% of their peers. So how does all of this tie into the need for extension and re-enrollment of Medicare benefits?

If a young person becomes pregnant and does not have medical coverage, they would not be able to receive and may be hesitant to even seek out the appropriate prenatal care, as well as being stuck with a very large bill upon giving birth to their child. Looking at homelessness, many youth who transition out of foster care have transient living situations and may not be able to receive or even retrieve their mail on a regular basis. This could cause them to miss re-enrollment deadlines, which leads to breaks in medical coverage or even losing their medical coverage all together.

My experience with medical coverage after foster care was a positive one. I was fortunate enough to have assistance from my social worker in applying for adult coverage in time to ensure a seamless transition. This is not the case for many of the 100+ foster youth who age out of care in the State of Hawaii each year.

By offering extended Medicare benefits with automatic re-enrollment to these youth, we would honestly just be affording them the equal opportunity already offered to their peers in the general population. A youth who turns 18 under the care of their parents has the option to stay under their medical coverage until they are 26 years old; for a former foster youth, the State of Hawaii is our parent so we should be given that option as well. The opportunity for adequate medical coverage shouldn't be a luxury or a privilege for only the fortunate few, it should be a right.

To conclude my testimony, I humbly ask you to pass HB 2292. Transitioning foster youth already have a world of adversities they are facing. Please aid us in relieving some of that pressure by addressing their need for medical benefits.

Thank you for your time and have a great day.

**To: Committee on Human Services**

**From: Noy Worachit, Vice-President, HI H.O.P.E.S. Youth Leadership Board**  
Hawaii Youth Opportunities Initiative, EPIC 'Ohana, Inc.

**Re: In Support of HB 2292, RELATING TO FOSTER YOUTH**

Good Afternoon Senator Chun-Oakland and Members of the Committee,  
My name is Noy Worachit and I am the Vice-President of the HI H.O.P.E.S. Youth Leadership Board of the Hawaii Youth Opportunities Initiative.

I would like to submit testimony in support of HB 2292 which extends medical coverage to former foster youth by automatic enrollment. The HI H.O.P.E.S. Youth Leadership Board of the Hawaii Youth Opportunities Initiative supports the extension of Medicaid to former foster youth in Hawaii by automatic enrollment up to age 26. The federal Affordable Health Care Act allows this extension for former foster youth up to age 26, but will not be in effect until 2014. Two years is too long to wait for necessary medical coverage for many former foster youth.

I aged out of care this past year and I did not receive help to apply for medical coverage and didn't have it for several months. It is important for me to have continued medical coverage, especially because I have a young child. Extended medical coverage and automatic enrollment would be one less thing I have to worry about. As a full time student and single parent, I do not have the time to fill out lengthy and complicated forms to be able to receive medical coverage every year. This is a barrier for most foster youth.

Young people in foster care have higher rates of serious emotional and behavioral problems, chronic physical disabilities, birth defects, developmental delays, and poor school achievement when compared to children from the same socioeconomic background, so it is important for them to receive the medical services they need when they age out of care and do not have support. In closing, I would ask this committee to pass hb 2292 and to support transitioning foster youth to receive medical coverage up to age 26 by automatic enrollment.

Thank you very much.