

LATE Testimony

Aloha Rep. Mizuno & Committee,

My name is Scott Wall and I am speaking on behalf of the Consumer, Family, & Youth Alliance in support of SB126. I personally have been working on this measure for over three years.

I know that in this time of austerity the Legislature is careful in stepping into new ventures but this bill, according to the Medicaid Infrastructure Grant, will be revenue neutral.

Most of all this bill will at roughly one thousand of Hawai'i's disabled to return to work and begin once again to be taxpayers. I say again because the Medicaid Buy In only applies to SSDI recipients. These are people who once were in the workforce and desperately want to return to it.

These people, myself included, became disabled through no fault of their own. Stopped working through no fault of their own, and they would do anything to get out of their houses and return to work to the best of their ability.

They want to pay taxes, spend that extra money, and help Hawai'i out of its' bind. All that needs to happen is to have SB126 passed.

Mahalo,

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LATE Testimony

Rep. John M. Mizuno, Chair
rep. Jordan, Vice Chair
The committee on Human Service

I would first like than the committee for this opportunity to provide Comment SB 126.

I am a person with a mental disorder, a member of the Board of Directors of United Self Help, and a facilitator of peer support groups with that organization. Therefore I feel that I bring a unique perspective on that bill and SB 126.

While I and the Board of Directors applaud this effort to enrich the lives of those of us who every day fight the battle against our disorders, we feel that there are some problems with the bills as they now stand. These bills are an effort to facilitate the entry or reentry of us to the workforce and to the rolls of tax payers of our fair state of Hawai'i.

The most important problem with thees bill is that lack of protection for the Section 8 benefits that many of us receive. The rules of the Section 8 program place a cap on the amount of income that a person may have and still receive benefits. If the recipient's income exceeds the cap that person not only looses his or her benefits but is remove from the rolls of those who can apply for those benefits.

That removal is permanent! There is long waiting list for addition to that list and no one is being added to the list.

This by itself does not, at first glance appear to be that bad. But I would like to draw your attention to a few facts.

First by taking jobs and taking a Medicaid insurance policy they will bill assuming a new monthly financial obligation. This still doesn't sound to bad. But they will also incur an obligation to assume the foll burden of the cost of their housing. That cost will also the cost of electric service

at this time and for the foreseeable future there is a shortage of affordable low cost housing on Oahu and perhaps on the other island of our state.

As people just entering the workforce, and people who employers will regard as a grater per employee cost they will undoubtedly find them selves working in low paying jobs. That is low paying jobs in Hawai'i

Under the provisions of these bills a person with mental difficulties will most likely wind up with less income and more financial obligations than the have at this time.

Why would anyone want to participate under the conditions?

There is also a probable additional cost to the state that has not been addressed. One of our board members has recently gone through the equivalent process for a widow to enter the same workforce. She found through her experience and the experiences of others she as contacted that this process must be handled on a case by case basis. There no "one size fits all" process.

I and the members of our board feel that this measure should be reexamined in light of these conditions.

There was one other provision in the Senate version of this bill that provided for a task force to be organized to advise the state on this process and other matters that may come up regarding mental health. The makeup of this task force was to consist of members of the Legislature, the medical and psychiatric profession, and member of the service provider community. We find both insulting and counter productive!

It is our experience that people who do not battle these conditions have shall we say a less than full understanding of what that battle entails for those of us who fight it on a daily basis. The ramifications of this battle are not in the life experience of those who do not live it. I know of one psychiatrist who when experiencing a "virtual reality" program depicting what a person goes through while having schizophrenia, commented that he had been treating the people upon the experiences the program for thirty years and the "virtual reality" program was the first understanding he had had of what they go through. It took months of patient, persistent, and intense questioning to gather the descriptions of the experience of having schizophrenia to gather enough information to construct the program. If you are wondering about the validity of the program, while the doctor had to be interrupted after half an hour not one of the people with schizophrenia was able to last even five minutes "under the hood."

We have been told that the days of treating those with persons with mental disorders so as to lessen the effect on those around them and make them "more manageable" for the staff handling them but doing little or nothing to make the consumer's life any better.

The makeup of the proposed task force would seem to indicate that we have been sadly misinformed. The treatment community, the state, and rest of society seem to be intent on continuing in the same manner as always.

This task force must have at least one member of the consumer community in its makeup. To do otherwise would be grossly unfair and it would also be less effective. More importantly from a cost perspective it would, in the long run, be more expensive for all involved. Including the state.

Again I would like to thank the members of the committee for the opportunity to speak on this matter and to participate in the workings of government.

Grayson L. Wideman

Consumer

Member of the Board of Directors of United Self Help