



To: Committee on Ways and Means
Senator David Y. Ige, Chair

Date: February 28, 2012, Conference Room 211, 9:00 a.m.

Re: **SB2779 SD1 – RELATING TO THE AGING AND DISABILITY RESOURCE CENTERS**

Chair Ige and Committee Members:

My name is Barbara Kim Stanton, State Director of AARP Hawaii. AARP is a membership organization of people 50 and older with nearly 150,000 members in Hawaii. We are committed to championing access to affordable, quality health care for all generations, providing the tools needed to save for retirement, and serving as a reliable information source on issues critical to Americans age 50+.

AARP **strongly supports** SB2779 SD1 which creates Aging and Disability Resource Centers (ADRC) in each county to streamline access to long-term supports and services for older adults, persons with disabilities and caregivers; and appropriates funds for its establishment.

However, the ADRCs need to be properly resourced and funded to make ADRCs an effective single point of entry for individuals seeking information on their long-term care (LTC) options. The ADRC is a navigational tool that connects individuals to appropriate long-term care options. Critical to the success of an ADRC is ensuring the availability of services (e.g., Kupuna Care) when individuals are directed to them.

Hawaii's ADRC program is in various stages of development in each county, needs to be expanded statewide, and needs improvement. AARP's recently published State Long-Term Services and Support Scorecard ranks Hawaii 41st in ability to access LTC through an ADRC or other single entry point.

ADRCs will address consumer frustration when trying to determine how to obtain long-term supports and services, if appropriately resourced, funded, and services are available. Otherwise, this frustration will be magnified with the increasing demand for service due to a rapidly aging population:

- Approximately one out of every five (20%) Hawaii residents are over 60 years old.
- Hawaii's population over age 65 is increasing rapidly and projected to increase by 71% between 2010 and 2030.
- Approximately 247,000 family caregivers are the backbone of Hawaii's long-term care system and currently provide nearly \$2 billion a year of unpaid caregiving services.
- The number of family caregivers is declining. The primary family caregiver group is 50-64 years old. This group will decline by 10% by 2030, and cause further strain on seniors and remaining caregivers.

Thank you for the opportunity to provide comments.



SENATE COMMITTEE ON WAYS AND MEANS

Senator David Ige, Chair

Conference Room 211

February 28, 2012 at 9:00 a.m.

Supporting SB 2779 SD 1: Relating to the Aging and Disability Resource Centers

The Healthcare Association of Hawaii advocates for its member organizations that span the entire spectrum of health care, including all acute care hospitals, as well as long term care facilities, home care agencies, and hospices. In addition to providing quality care to all of Hawaii's residents, our members contribute significantly to Hawaii's economy by employing over 40,000 people. Thank you for this opportunity to testify in support of SB 2779 SD 1, which establishes an Aging and Disability Resource Center in each county to improve access to long term care.

This bill is one of many that are designed to strengthen the infrastructure that cares for the elderly or reduces elder abuse. Hawaii's elderly population is growing faster than even the national average. Since statehood, the proportion of elderly to Hawaii's total population has increased three-fold, from roughly 5% in 1960 to 15% in 2009. By comparison, the nation's population stands at 13%. Between 1990 and 2009, the number of elderly aged 75 and older increased 115% in Hawaii compared to 44% nationally. By 2030, the elderly population will represent 20% of the population in Hawaii.

There is a clear relationship between age and the prevalence of chronic conditions and level of disability, so the elderly are the heaviest users of health care resources. Hawaii's existing resources are not sufficient to satisfy the current high demand for care for the elderly, which is increasing further as the population ages, and these resources should be expanded. In addition, these resources are fragmented, and the Aging and Disability Resource Center will create a single point of entry to enable easier access to these resources and help to coordinate them.

Thank you for the opportunity to testify in support of SB 2779 SD 1.

From: mailinglist@capitol.hawaii.gov
To: [WAM Testimony](#)
Cc: jkealoha@ilwulocal142.org
Subject: Testimony for SB2779 on 2/28/2012 9:00:00 AM
Date: Monday, February 27, 2012 9:13:41 AM
Attachments: [2012SB2779.rtf](#)

Testimony for WAM 2/28/2012 9:00:00 AM SB2779

Conference room: 211
Testifier position: Support
Testifier will be present: No
Submitted by: Joanne Kealoha
Organization: ILWU Local 142
E-mail: jkealoha@ilwulocal142.org
Submitted on: 2/27/2012

Comments:

The Twenty-Sixth Legislature
Regular Session of 2012

THE SENATE

Committee on Ways and Means
Senator David Y. Ige, Chair
Senator Michelle N. Kidani, Vice Chair
State Capitol, Conference Room 211
Tuesday, February 28, 2012; 9:00 a.m.

**STATEMENT OF THE ILWU LOCAL 142 ON S.B. 2779, SD1
RELATING TO AGING AND DISABILITY RESOURCE CENTERS**

The ILWU Local 142 supports S.B. 2779, SD1, which establishes and appropriates funds for Aging and Disability Resource Centers in each county to streamline access to long-term care supports and services for older adults, persons with disabilities, and family caregivers.

The ILWU has 20,000 members statewide, many of whom are caring for elderly parents or will in the near future. They often contact the union for information about resources when their parents require long-term care or other services. We do the best we can to refer them to agencies that may be able to help them on every island, but we have always believed that a “one-stop shop” would be the most efficient and effective way to provide individuals with information about the services they need.

The Aging and Disability Resource Center in Hilo has been a good resource for people living in East Hawaii. Instead of searching for resources on the computer or making numerous “cold calls,” Hilo residents can drop in to the ADRC and speak face-to-face with a person who will listen to their needs and help them find the resources that will be most helpful to them. We believe a resource like this on every island will be invaluable to family caregivers who may not have the time or energy to research programs for their parents while holding down full-time jobs.

The ILWU urges passage of S.B. 2779, SD1. Thank you for the opportunity to offer our support for this measure.

From: mailinglist@capitol.hawaii.gov
To: [WAM Testimony](#)
Cc: arparker@hcoahawaii.org
Subject: Testimony for SB2779 on 2/28/2012 9:00:00 AM
Date: Monday, February 27, 2012 11:58:22 AM

Testimony for WAM 2/28/2012 9:00:00 AM SB2779

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Testifier position: Support
Testifier will be present: No
Submitted by: Alan Parker
Organization:
E-mail: arparker@hcoahawaii.org
Submitted on: 2/27/2012

Comments:
February 27, 2012

TO: Senate Committee on Ways and Means
Senator David Y. Ige, Chair
Senator Michelle N. Kidani, Vice Chair

FROM: Hawaii County Office of Aging (HCOA)

RE: S.B. 2779, SD1
Tuesday, February 28, 2112
9:00 a.m.; Conference Room 211

S.B. 2779 is critical for the continuation of our demonstration project to enable full development and implementation of the programmatic aspects of Hawaii County's Aging and Disability Resource Center Project.

The County of Hawaii has invested heavily in the development of a physical site and has been depending on federal grants that are due to expire at the end of this year to develop the programmatic aspects (nuts and bolts - how things will work and integrate into our existing service network) to improve access to needed information and services.

The Hilo ADRC is co-located by nine major service providers and programs serving the elderly and people with disabilities. The \$240,000 for Hawaii County contained in S.B. 2779 covers personnel costs for four critical positions that are demonstrating our ACCESS model developed to improve our intake, assessment, and care coordination functions of the pilot project that is still being demonstrated and evaluated.

The Aging and Disability Resource Center concept is indeed a noble and needed service empowering individuals to make informed choices and streamline access to long term supports and services. Vital options counseling to be provided will enable informed decision making and enable many individuals to remain at home at great savings to the state.

HCOA urges passage of S.B. 2779, SD1. Thank you for allowing comments on this very important piece of legislation.