



EXECUTIVE CHAMBERS

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NEIL ABERCROMBIE  
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**SENATE COMMITTEE ON WAYS AND MEANS**

**The Hon. David Y. Ige, Chair**

**The Hon. Michelle N. Kidani, Vice Chair**

**April 2, 2014, 9:20 a.m., Room 211**

**Testimony in Support: HOUSE BILL 1752, HD 1, SD 1 RELATING TO HEALTH**

**Submitted by Beth Giesting, Healthcare Transformation Coordinator, Office of the Governor**

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Thank you for the opportunity to provide strong support for HB 1752, HD 1, SD 1 Relating to Health. Our network of Federally Qualified Health Centers is a significant part of our plan for transforming Hawai'i's health care system. Their comprehensive approach to health care delivery is a model for patient-centered care since they feature an integrated care experience offering primary care, behavioral health, and dental care, plus a wide variety of access, care coordination, and case management services. They have long experience in chronic disease management strategies and have adopted electronic health records to support their practices. Laudably, FQHCs are going beyond clinical and support services and also breaking ground in addressing social determinants and improving the health of their communities.

We ask your support especially for restoring funds to provide primary dental services for adults covered by Medicaid, as provided in Section 3. Dental care is an important health service that, if unaddressed, can lead to more serious health problems, especially for pregnant women and people with diabetes and heart disease. Unfortunately, Hawaii has not provided basic oral health services for Medicaid adults in years, even as other states have been restoring this benefit. Adults who qualify for Medicaid are, by definition, low income and so are unable to pay for adequate, timely dental care. Our failure to support this program not only leaves this group without access but also reduces the capacity of FQHCs to provide care and cripples the FQHC dental residency program that is producing competent,

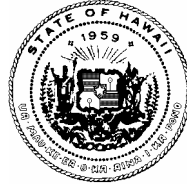
compassionate dentists to meet seriously unmet needs. The \$4 million appropriation requested for that program will be matched by \$7,664,000 in federal funds to support these essential services.

We are strongly supportive of Sections 5 and 6, which will enable us to bring in significant federal resources to go beyond the standard patient-centered medical home to build what's called a "health home." This model provides critical care coordination, case management, and other services needed by Medicaid patients with especially complex medical and socio-economic conditions. This is a significant step toward understanding and better meeting needs that will improve lives and save substantial dollars in our health care system. The amount needed for Section 5 is \$1 million, which will be doubled by federal funds to support the many administrative requirements for the health home state plan amendment.

Section 6 would appropriate funds from the health center special fund to attract a 9 to 1 federal match to pay for services tailored to the needs of complex patients using FQHCs. This is a tremendous opportunity to bring in significant federal funds that will change people's lives, support the FQHCs, and further the goals of healthcare transformation well beyond this project.

The general funds needed for the health home amounts to \$1 million, which will bring in \$19 million in federal funds. These funds do require a substantial amount of system development and oversight on the part of the MedQUEST Division, hence the need for administrative funds. For all the tremendous potential and advantageous federal match for this program, it cannot be set-up without the \$1 million investment on the part of the State.

Thank you for the opportunity to testify.



STATE OF HAWAII  
**DEPARTMENT OF HUMAN SERVICES**

P. O. Box 339  
Honolulu, Hawaii 96809-0339

April 2, 2014

TO: The Honorable David Y. Ige, Chair  
Senate Committee on Ways and Means

FROM: Patricia McManaman, Director

SUBJECT: **H.B. 1752, H.D.1, S.D.1 - RELATING TO HEALTH**

Hearing: Wednesday, April 2, 2014; 9:20 a.m.  
Conference Room 211 State Capitol

**PURPOSE:** The purpose of this bill is to appropriate unspecified funds to the Department of Health and the Department of Human Services to expand certain health care services to qualified individuals.

**DEPARTMENT'S POSITION:** The Department of Human Services (DHS) appreciates the intent of this measure. .

The sections that apply to DHS are sections 3, 4, and 5. Section 3 would fund the restoration of adult dental benefits; section 4 would fund out-stationed eligibility workers; and section 5 would fund a health homes program. Section 6 would fund health homes for Medicaid enrollees at Federally Qualified Health Centers (FQHCs) through the Department of Health's (DOH) Community Health Centers Special Fund with the funding transferred to the DHS.

Section 3 requests an unspecified appropriation for basic adult dental benefits to Medicaid enrollees. The DHS has requested \$4,000,000 in State funds and \$7,664,163 in federal

funds in the Supplemental Executive Budget in HMS 401 (Health Care Payments) to re-establish an adult dental program for Med-QUEST adults. The Department believes dental care is important to an individual's overall health and proposed to provide dental benefits up to \$500 per person per benefit year and also provide medically needed dentures up to \$500 each for upper and lower dentures. The current budget bill, H.B. 1700, H.D.1, S.D.1, appropriates \$1 to restore adult dental benefits.

Section 4 of this measure requests an unspecified appropriation to provide outreach and eligibility services at FQHCs. The Governor's budget, under HMS 902 - General Support for Health Care Payments, included \$320,000 to support out-stationed eligibility workers (OEWs). The budget bill, H.B. 1700, H.D.1 includes the \$320,000 requested in HMS 902 while H.B. 1700, H.D.1, S.D. 1, does not include funding for the Administration's request.

In addition to the requested \$320,000 in the Executive Supplemental Budget, the DHS will continue to fund 23 OEWs at FQHCs and hospitals with \$667,000 already included in the DHS base budget. The FQHCs also receive funding for outreach workers through the Hawaii Primary Care Association (HPCA) from the Hawaii Health Connector, federal agencies, or other sources.

For the additional OEW funding request, the Department will be able to obtain only a 50% match from the federal government. Previously the Department had been able to receive 90% federal match. The HPCA had a contract for OEWs that ended December 31, 2013, for which the last year of funding was \$800,000 (\$80,000 general funds and \$720,000 federal funds).

Section 5 of the bill requests an unspecified appropriation to establish health homes. The Governor's Executive Supplemental Budget includes requests for \$2,016,000 in State funds and \$18,144,000 in federal funds for HMS 401 (Health Care Payments) and \$1,000,000 in state

funds and \$1,000,000 in federal funds for HMS 902 (General Support for Health Care Payments) to establish a Health Homes Program under the Medicaid program. H.B. 1700, H.D.1, S.D.1, does not include funding for the Department's request for the \$2,016,000 nor the \$1,000,000 to administer the program. The intent of the funding request in the Executive Supplemental Budget is for non-FQHC providers.

If Section 6 of the bill is funded from the DOH's Community Health Centers Special Fund for health homes for Medicaid enrollees at the FQHCs, the DHS will still need the \$1,000,000 in general funds and \$1,000,000 in federal matching funds in HMS 902 to administer the health homes initiative through the FQHC providers.

The DHS respectfully requests the Legislature to support the funding requests for dental services, out-stationed eligibility workers, and health homes included in the Executive Supplemental Budget.

Thank you for the opportunity to testify on this measure.



**STATE OF HAWAII**  
STATE COUNCIL  
ON DEVELOPMENTAL DISABILITIES  
919 ALA MOANA BOULEVARD, ROOM 113  
HONOLULU, HAWAII 96814  
TELEPHONE: (808) 586-8100 FAX: (808) 586-7543  
April 2, 2014

The Honorable David Y. Ige, Chair  
Senate Committee on Ways and Means  
Twenty-Seventh Legislature  
State Capitol  
State of Hawaii  
Honolulu, Hawaii 96813

Dear Senator Ige and Members of the Committee:

**SUBJECT: HB 1752 HD1 SD1 – RELATING HEALTH**

The State Council on Developmental Disabilities (DD) **SUPPORTS HB 1752 HD1 SD1**. The bill appropriates funds to provide primary medical, dental, and behavioral health care to uninsured and underinsured patients and restores basic adult dental benefits to Medicaid enrollees. Additionally, the bill appropriates moneys to community health centers to provide outreach and eligibility services, as well as behavioral services, and to establish health care homes for Medicaid enrollees.

This bill represents a comprehensive package of medical, dental, and behavioral health care services with emphasis on obtaining the maximum Federal matching funds available for the appropriations. The Council is pleased that Section 3 on Page 5, lines 8-15, for Fiscal Year 2014-2015 restores basic adult dental benefits to Medicaid enrollees. This provision would directly benefit adults with DD in providing oral health services that includes preventive, restorative, and prosthetic services.


The Council cannot emphasize enough the importance of comprehensive dental care services that include preventive, restorative, prosthetic, and emergency services for people with DD. We are all aware of how oral health, or the lack thereof, affects all aspects (emotional, psychological, and social) of our lives. Numerous individuals can share with you their experience of having a tooth or teeth extracted or acquiring serious health problems because necessary dental services were not available as a result of the termination of the Medicaid adult dental benefit coverage in 1996. Compounding the challenges is the limited number of dentists on the Neighbor Islands who are available and accessible to serve Medicaid and QUEST recipients.

We applaud the Legislature's initiative in restoring basic adult dental benefits to Medicaid enrollees through HB 1752 HD1 SD1.

The Honorable David Y. Ige  
Page 2  
April 2, 2014

Thank you for the opportunity to submit testimony **supporting HB 1752 HD1 SD1.**

Sincerely,



Waynette K.Y. Cabral, M.S.W.  
Executive Administrator



J. Curtis Tyler, III  
Chair



**HO'OLA LĀHUI HAWAI'I**  
*P.O. Box 3990; Līhu'e, Hawai'i*  
*Phone: 808.240.0100 Fax: 808.246.9551*

March 31, 2014

**COMMITTEE ON WAYS AND MEANS**

Senator David Y. Ige, Chair

Senator Michelle N. Kidani, Vice Chair

**Testimony in Support of HB 1752, HD1, SD1**  
**Relating to Health**

**March 20, 9:20am**  
**Conference Room 211**

Ho'ola Lahui Hawaii the only Federally Qualified Health Center and Native Hawaiian Health Care System on Kauai is strongly **SUPPORTING** this bill to provide community health centers additional resources to care for the underserved, uninsured, and residents without dental coverage.

We are encouraged that there are dental funds in this bill to restore to the adult dental benefit. It is very important that oral health be at the forefront of health care as many dental problems lead to more serious health deficits and basic dental is not just for cosmetic effect. It is vital to support the dental benefit restoration to Medicaid to those who are most in need. Prevention will save millions in restorative care services in the long term.

Given the critical need to address health care disparities, it is vital that the state maximize its resources by transferring \$2 million out of the community health center fund to bring in additional revenue from the federal government for Patient Centered Health Care Homes. This is a win as no additional funds from the state are required to support this effort.

Lastly, we believe that expanded outreach services are critical to bring people into care earlier rather than later. It is extremely important to assure that this occurs as it saves lives and money.

Respectfully Requested,

David Peters  
Chief Executive Officer



## LĀNA'I COMMUNITY HEALTH CENTER

P. O. Box 630142  
Lāna'i City, HI 96763-0142



Phone: 808-565-6919 x114  
Fax: 808-565-9111  
dshaw@lanaicommunityhealthcenter.org

*The Community is our Patient -- men, women, children, uninsured, insured!*

### Senate Committee on Ways and Means

The Hon. David Y. Ige, Chair

The Hon. Michelle N. Kidani, Vice Chair

### Testimony in Support of House Bill 1752 HD1 SD1

Relating to Health

Submitted by Diana M. V. Shaw, PhD, MPH, MBA, FACMPE

Lanai Community Health Center

April 2, 2014, 9:20 AM, Room 211

The Lanai Community Health Center supports **House Bill 1752 HD1 SD1**, making appropriations to the Departments of Health and Human Services for services to qualified individuals and families. We offer the following comments with amounts contained in the original measure HB 1752 and companion measure SB 2009 which was previously approved by this committee:

- Section 2 of this measure appropriates \$6 million dollars in general funds to provide direct health care for uninsured and underinsured individuals.
- Section 3 of this measure appropriates \$4 million dollars to restore an adult dental benefit in Medicaid. All fourteen of our community health centers provide dental services. Given the correlation between dental health with other health conditions, and the fact that 50% of community health centers patients are Medicaid enrollees, we have long advocated for the restoration of adult dental benefits (aside from emergency procedures) and see this as a start.
- Section 4 appropriates \$800,000 in outreach funding for community health centers. **This funding request is different from the Out-stationed Eligibility Worker funding contained in HB 1700 HD1.** Historically health centers have received funding for comprehensive outreach work from the State, however this ended in December 2013. Comprehensive outreach workers at community health centers provide an essential service to the State and communities by assisting individuals and families in applying for State assistance programs (including Medicaid) such as housing assistance, child care, food assistance (SNAP eligibility); we help identify services that may help the individual or family to stabilize their situation and improve the health of not only their person, but their circumstances...in other

*E Ola nō Lāna'i*

**LIFE, HEALTH, and WELL-BEING FOR LĀNA' I**

words this is one way in which we work to address the social determinants of health. The appropriation in Section 4 provides for a need in our communities that is not provided by any other service or existing funding stream.

- Section 6 provides \$2 million dollars from the community health center special fund as an interdepartmental transfer from the Department of Health, to the Department of Human Services, to be used as the state match for a Medicaid health home state plan amendment to provide health home services to qualified patients at community health centers. Community health centers have been involved in health homes for over six years and completed our own health home pilot project last year with positive results. Thirteen of Hawaii's fourteen health centers have applied for NCQA recognition as patient centered medical homes and six have been awarded Level 1, 2, or 3 (3 being the highest) recognition in the past few months. Health centers are ready to implement health homes and appreciate the opportunity to leverage \$2 million dollars from the community health center special fund to draw down a federal match of \$18 million dollars. **We request that an amendment be added to this bill that provides for administrative costs for implementing health care homes for eligible patients; we defer to the Governor's office on the amount but note that the Governor's budget request did contain an appropriation request for this program.**
- Section 7 provides funding for behavioral health services at community health centers. We recognize the critical need for these services in our communities; we are in crisis. Community health centers provide integrated primary care and behavioral health services and appreciate the support offered by Section 7. Behavioral health and its integration with primary care are key elements of the Governor's healthcare transformation plan and we look forward to continuing the discussion on how community health centers can support that effort.

Thank you for the opportunity to testify.

A handwritten signature in brown ink, appearing to read "D/H", is located below the text "Thank you for the opportunity to testify."



March 31, 2014

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

**FROM:** Dr. Vija Sehgal, Pediatrician, Chief Quality Officer and Associate Medical Officer  
Waianae Coast Comprehensive Health Center / 697-3457 or wcchc@wcchc.com

**RE:** **Support for HB1752, HD1, SD1: Relating to Health**

The Waianae Coast Comprehensive Health Center (WCCHC) strongly supports HB1752, HD1, SD1: Relating to Health. Of WCCHC's 31,152 patients, 67% are at 100% of the federal poverty level or below, 11% are uninsured, and 58% are receiving coverage under QUEST, the State's Medicaid program. Morbidity and mortality indicators show that the Waianae coast ranks highest in the City and County of Honolulu, as well as the state, for obesity (43.5%), adults who smoke (26%), adults with diabetes (13.7%), diseases of the heart (260.4 deaths per 100,000), and cancer (197 deaths per 100,000).

The WCCHC has found from its own experience that an effective means of improving these dire statistics is through implementing the Patient-Centered Health Care Home (PCHCH) model, which has been shown to improve health outcomes, reduce long-term cost, and enhance the patient experience.

There are multiple and important components of this bill, all critical to improving the health and well-being of patients we serve throughout Leeward Oahu.

Related to the uninsured, 13.3% of the population on the Waianae coast is uninsured, which is the highest in the City & County of Honolulu.

Related to adult dental health services, 44% of the adult population on the Waianae Coast has not had a dental visit, which is the highest in the state. It is critical to restore adult dental benefits to address dental health needs and its relationship to other health conditions.

Outreach and eligibility is an essential component of the PCHCH. Restoration of state funding is needed to support our patients and families to stabilize not only their health care needs but also their life circumstances that often negatively impact their health.

With the dramatic reduction of state behavioral health services over the past years, WCCHC is the critical safety net on the Waianae coast for individuals suffering from a broad scope of behavioral health conditions.

One key feature of HB1752, HD1, SD1 is the allocation of \$2 million dollars from the Community Health Center Special Fund as a interdepartmental transfer from the Department of Health to the Department of Human Services to be used as the state match for a Medicaid health care home state plan amendment to provide health care home services to qualified patients at community health centers. This \$2 million dollars (already allocated for community health centers) will be drawn down for a federal match of \$18 million dollar, for a total of \$20 Million for advanced, coordinated patient care for those with the most complex and severe illnesses – all with \$0 dollars from Hawaii's Medicaid program.

This is a tremendous opportunity that comes along very rarely. We appreciate your consideration.



TO: Senator David Y. Ige, Chair  
Senator Michelle N. Kidani, Vice Chair  
COMMITTEE ON WAYS AND MEANS

FR: Mary Oneha, APRN, PhD  
Chief Executive Officer, Waimānalo Health Center

Christina Lee, MD  
Chief Medical Officer, Waimānalo Health Center

Date: Wednesday, April 2, 2014 Room 211

RE: **Support for HB1752 HD1 SD1** - RELATING TO HEALTH.  
Appropriate unspecified funds to the Department of Health and the Department of Human Services to expand certain health care services to qualified individuals.

The Waimānalo Health Center (WHC) **supports HB1752 HD1 SD1**, making appropriations to the Department of Health and Human Services for services to qualified individuals and families. Resources to provide health services to specific populations as the uninsured and those seeking behavioral health services are critical to creating healthy communities. Similarly, critical resources are needed to support adult dental care, resources that have been severely limited. Poor oral health can quickly escalate to poor physical health. Prevention, education, and routine oral health care can impact this trajectory. Providing resources to restore basic adult dental benefits to Medicaid enrollees would increase the number of Medicaid adults who seek basic and preventative dental care.

Funding for outreach and eligibility services needs to be restored at community health centers. Historically health centers have received funding for this important work from the State, however this ended in 2013. Outreach workers at community health centers provide an essential service to the State and communities by assisting individuals and families in applying for not just Medicaid, but other State assistance programs which help to address the social determinants of health. It would be in the best interest of the community to continue having these resources and services available to assist individuals with navigating through their insurance and entitlement options.

Lastly, the Waimānalo Health Center strongly supports a CHC SPA. Section 6 of SB 2009 SD2 allocates \$2 Million in Community Health Center (CHC) funds to be used specifically for a Patient-Centered Health Care Home initiative in Medicaid. This funding to seed the project is CHC-specific, money already committed to CHCs for patient care that we will invest in this vital project. This \$2 Million, already allocated for health centers, will draw down \$18 Million in Federal matching funds, for a total of \$20 million for advanced, coordinated patient care with zero dollars from Hawaii's Medicaid program. These monies will be used to create a health home pilot in the Medicaid system targeted to patients who have a specific set of chronic illnesses. CHCs are the group to lead this effort, as they have demonstrated their focus on patient-centered care and have taken the lead in receiving NCQA recognition as patient centered medical homes.

The Waimānalo Health Center urges your support of **HB1752 HD1 SD1**. Thank you for the opportunity to provide testimony.



**HPCA**

HAWAII PRIMARY CARE ASSOCIATION

**Senate Committee on Ways and Means**

The Hon. David Y. Ige, Chair

The Hon. Michelle N. Kidani, Vice Chair

**Testimony in Support of House Bill 1752 HD1 SD1**

**Relating to Health**

**Submitted by Robert Hirokawa, Chief Executive Officer**

**April 2, 2014, 9:20 AM, Room 211**

The Hawaii Primary Care Association (HPCA), which represents the federally qualified community health centers in Hawaii, also known as “community health centers,” supports **House Bill 1752 HD1 SD1**, making appropriations to the Departments of Health and Human Services for services to qualified individuals and families. We offer the following comments with amounts contained in the original measure HB 1752 and companion measure SB 2009 which was previously approved by this committee:

- Section 2 of this measure appropriates \$6 million dollars in general funds to provide direct health care for uninsured and underinsured individuals.
- Section 3 of this measure appropriates \$4 million dollars to restore an adult dental benefit in Medicaid. All fourteen of our community health centers provide dental services. Given the correlation between dental health with other health conditions, and the fact that 50% of community health centers patients are Medicaid enrollees, we have long advocated for the restoration of adult dental benefits (aside from emergency procedures) and see this as a start.
- Section 4 appropriates \$800,000 in outreach funding for community health centers. **This funding request is different from the Out-stationed Eligibility Worker funding contained in HB 1700 HD1.** Historically health centers have received funding for comprehensive outreach work from the State, however this ended in December 2013. Comprehensive outreach workers at community health centers provide an essential service to the State and communities by assisting individuals and families in applying for State assistance programs (including Medicaid) such as housing assistance, child care, food assistance (SNAP eligibility); we help identify services that may help the individual or family to stabilize their situation and improve the health of not only their person, but their circumstances...in other words this is one way in which we work to address the social determinants of health. The appropriation in Section 4 provides for a need in our communities that is not provided by any other service or existing funding stream.
- Section 6 provides \$2 million dollars from the community health center special fund as an interdepartmental transfer from the Department of Health, to the Department of Human Services, to be used as the state match for a Medicaid health home state plan amendment to provide health home services to qualified patients at community health centers. Community health centers have been involved in health

homes for over six years and completed our own health home pilot project last year with positive results. Thirteen of our fourteen health centers have applied for NCQA recognition as patient centered medical homes and six have been awarded Level 1, 2, or 3 (3 being the highest) recognition in the past few months. Health centers are ready to implement health homes and appreciate the opportunity to leverage \$2 million dollars from the community health center special fund to draw down a federal match of \$18 million dollars. **We request that an amendment be added to this bill that provides for administrative costs for implementing health care homes for eligible patients; we defer to the Governor's office on the amount but note that the Governor's budget request did contain an appropriation request for this program.**

- Section 7 provides funding for behavioral health services at community health centers. We recognize the critical need for these services in our communities; we are in crisis. Community health centers provide integrated primary care and behavioral health services and appreciate the support offered by Section 7. Behavioral health and its integration with primary care are key elements of the Governor's healthcare transformation plan and we look forward to continuing the discussion on how community health centers can support that effort.

Thank you for the opportunity to testify.

# Community Alliance for Mental Health

April, 4, 2014

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To: Senate Committee for Ways and Means  
Re: HB1752, HD 1, SD 1

Aloha Chairs Ige, and the members of the committee,

On behalf of the Community Alliance for Mental Health along with United Self Help we support the passage of HB1752, HD1.

The passage of HN1752, HD1 is necessary to establish coverage for the uninsured before they can be registered into the Hawai'i Health Connector.

The bill will also reinstate dental coverage to the Medicaid population. If we want to see this population return to the workforce dental coverage is necessary. Hawai'i is a service economy and it is virtually impossible to find a job in the service sector with gaps in your smile. It's a simple as that.

Beyond that dental hygiene is necessary to maintain overall health and ultimately staves of increased Medicaid cost to the taxpayer.

Therefore we strongly support the passage of HB1752, HD1, SD 1.

Scott Wall  
Vice President for Policy  
Community Alliance for Mental Health  
808-349-9883  
robertscottwall@yahoo.com



**From:** [mailinglist@capitol.hawaii.gov](mailto:mailinglist@capitol.hawaii.gov)  
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**Subject:** Submitted testimony for HB1752 on Apr 2, 2014 09:20AM  
**Date:** Tuesday, April 01, 2014 8:59:37 AM

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**HB1752**

Submitted on: 4/1/2014

Testimony for WAM on Apr 2, 2014 09:20AM in Conference Room 211

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Present at Hearing</b>
Shavanna Mahoe	Hawaii Self-Advocacy Advisory Council	Support	Yes

Comments: please help Restore Basic Adult Dental Benefits.

Please note that testimony submitted less than 24 hours prior to the hearing, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

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