

NEIL ABERCROMBIE  
GOVERNOR



PATRICIA MCMANAMAN  
DIRECTOR

BARBARA A. YAMASHITA  
DEPUTY DIRECTOR

STATE OF HAWAII  
**DEPARTMENT OF HUMAN SERVICES**

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

January 28, 2014

TO: The Honorable Mele Carroll, Chair  
House Committee on Human Services

FROM: Patricia McManaman, Director

SUBJECT: **H.B. 1754 - RELATING TO PERSONS WITH DISABILITIES**

Hearing: Tuesday, January 28, 2014; 9:30 a.m.  
Conference Room 329, State Capitol

**PURPOSE:** The purpose of this bill is to establish and appropriate funds for a Medicaid Buy-In program for workers with disabilities.

**DEPARTMENT'S POSITION:** The Department of Human Services (DHS) appreciates the intent of this measure and strongly supports eliminating barriers for individuals with disabilities to gain employment.

The DHS has actively participated in the Medicaid Buy-in Task Force and has in good faith provided technical assistance and support to the efforts of the group seeking to implement a Medicaid buy-in program. The DHS provided input and the Task Force has reached consensus on a proposed S.D.1 to establish a Medicaid buy-in program. Although funding is not necessary until the 2017-2018 fiscal year, the DHS estimates that an additional appropriation of \$3.4 million annually will be needed for the buy-in program, which the DHS would intend to seek.

The main goal of the proposed Medicaid buy-in program is to allow individuals with disabilities to gain employment with increased income and assets, and have Medicaid coverage. Only Medicaid covers home and community based services and specialized behavioral health services. A Medicaid buy-in program would meet the goal of allowing workers with disabilities to have greater earnings while continuing to have access to these important services. The DHS believes that the proposed S.D.1 is a good bill for establishing a Medicaid buy-in program.

In a buy-in program, Medicaid would provide coverage for all medical costs including hospitalization, procedures, and medications— in addition to home and community based services and specialized behavioral health services— for individuals who could also or would otherwise have Medicare or insurance through a health insurance exchange.

The DHS has been consistent in its position that there are other options that can be considered to expand access to home and community based services and specialized behavioral health services for workers with disabilities that may reduce general fund requirements, increase federal funding, and be able to be implemented more quickly. These include the federal Affordable Care Act (ACA), state-only funded programs, and services through the Department of Health's Adult Mental Health Division and the Executive Office on Aging's Aging and Disability Resource Centers, and the Counties Area Agencies on Aging.

Thank you for the opportunity to testify on this measure.

NEIL ABERCROMBIE  
GOVERNOR OF HAWAII



GARY L. GILL  
ACTING DIRECTOR OF HEALTH

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

In reply, please refer to  
File:

**House Committee on Human Services**  
**HB 1754, Relating to Persons with Disabilities**

**Testimony of Gary L. Gill**  
**Acting Director of Health**

**January 28, 2014**

1 **Department's Position:** The Department of Health strongly supports this measure to develop a  
2 Medicaid Buy-in option for persons with disabilities.

3 **Fiscal Implications:** The fiscal implications to the Department of Health are lowered costs for Home  
4 and Community Based Services for persons already receiving services within the developmental  
5 disabilities program as persons are able to be employed and less dependent upon day services. The  
6 Department of Health Developmental Disabilities Division may experience some increase in eligible  
7 participants in this same program as the income limit is raised. However, the overall cost to the Division  
8 is not anticipated to increase. The Department of Health defers to the Department of Human Services on  
9 the total costs of the bill upon the Medicaid program.

10 **Purpose and Justification:** Employment is a key determinant of self determination and quality of life  
11 for persons with developmental disabilities and a priority goal for the Department. This measure will  
12 increase opportunity for persons being served by the Developmental Disabilities Division to sustain  
13 employment without losing their other supports in the Medicaid Home and Community Based Services  
14 program.

15 Thank you for the opportunity to testify on this measure.

*Promoting Lifelong Health & Wellness*



**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  
January 28, 2014

The Honorable Mele Carroll, Chair  
House Committee on Human Services  
Twenty-Seventh Legislature  
State Capitol  
State of Hawaii  
Honolulu, Hawaii 96813

Dear Representative Carroll and Members of the Committee:

**SUBJECT: HB 1754 – RELATING TO PERSONS WITH DISABILITIES**

The State Council on Developmental Disabilities **SUPPORTS HB 1754 with proposed amendments**. This bill establishes and appropriates funds for implementing a Medicaid buy-in program for individuals with disabilities who are working to maintain their health care services. A Medicaid buy-in program would protect workers with disabilities from losing their medical benefits and supports.


Act 200, Session Laws of Hawaii 2012, established a joint legislative Task Force to assist in exploring the development and possible implementation of a Medicaid buy-in program for working individuals with disabilities based on Hawaii's current Medicaid income and asset limits subject to approval of the Federal Centers on Medicare and Medicaid Services. The Council is a member of the Task Force and has been engaged in discussions on implementing a Medicaid buy-in program for individuals with disabilities.


HB 1754 is recognized as a work in progress with input from the Task Force. The intent of the bill would encourage all State agencies working with citizens to identify and remove barriers to employment for persons with disabilities and to encourage individuals with disabilities to gain employment. It would also provide outreach and training about the Medicaid buy-in program.

In its ongoing efforts to establish the Medicaid buy-in program, the Task Force at its meeting on January 23, 2014, agreed to several amendments. We support those amendments and have attached the document as a proposed HD1.

Thank you for your consideration of the proposed amendments to HB 1754.

Sincerely,

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

  
J. Curtis Tyler III  
Chair

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## A BILL FOR AN ACT

RELATING TO PERSONS WITH DISABILITIES.

**BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF HAWAII:**

1           SECTION 1. The legislature finds that Act 200, Session  
2 Laws of Hawaii 2012, established a joint legislative task force  
3 to explore the possibility of implementing a medicaid buy-in  
4 program for individuals with disabilities who are either not  
5 working or currently working and would like to earn more income,  
6 based upon Hawaii's current medicaid income and asset limits,  
7 subject to approval of the federal Centers for Medicare and  
8 Medicaid Services. The legislature notes that a significant  
9 portion of the population in Hawaii receives federal or state  
10 benefits because of disabling conditions. Additionally, current  
11 state programs and policies, including state-designed medicaid  
12 waiver programs, create disincentives for persons with  
13 disabilities to become employed, maintain employment, or  
14 increase their employment income.

15           The legislature also finds that from 2005 through 2012,  
16 Hawaii was the recipient of a grant from the federal Centers for  
17 Medicare and Medicaid Services for the development of a medicaid  
18 infrastructure program to design and implement a medicaid buy-in



1 program for individuals with disabilities who are employed or  
2 desire to become employed and purchase medicaid coverage  
3 authorized under the Ticket to Work and Work Incentives  
4 Improvement Act of 1999 (P.L. 106-170). Prior to 1999, other  
5 potential federal options for the creation of a medicaid buy-in  
6 program included the 1997 Balanced Budget Act and a waiver  
7 pursuant to title 32 United States Code section 1115, the Social  
8 Security Act.

9 The legislature further finds that it is advantageous to  
10 economic development of the State and in the best interests of  
11 Hawaii's citizens with disabilities to establish programs and  
12 policies that encourage employment. It is the intent of the  
13 legislature that all state agencies work with citizens to  
14 identify and remove barriers to employment for persons with  
15 disabilities. Adults with disabilities need adequate health  
16 insurance, but options for insurance coverage are limited, even  
17 with the federal Patient Protection and Affordable Care Act.

18 The purpose of this Act is to encourage individuals [with  
19 disabilities] to gain employment and improve their employment opportunities by establishing a medicaid buy-  
20 in program for individuals with disabilities.



1 SECTION 2. Chapter 346, Hawaii Revised Statutes, is  
2 amended by adding a new section to be appropriately designated  
3 and to read as follows:

4 "§346- Medicaid buy-in program; [disabled] workers <sup>with disabilities</sup> (a)

5 There is established within the department of human services the  
6 medicaid buy-in program for workers with disabilities. The  
7 purpose of the medicaid buy-in program for workers with  
8 disabilities is to <sup>Support employment of individuals with disabilities by</sup> provide health care services to eligible  
9 individuals who: <sup>Expanding their access to Medicaid.</sup>

- 10 (1) Currently receive Medquest benefit services;
- 11 (2) Are employed or desire to become employed; and
- 12 (3) Currently have a disability.]

13 (b) To qualify for the medicaid buy-in program for workers  
14 with disabilities, a person shall:

- 15 (1) Be a resident of the State;
- 16 (2) Be at least eighteen years of age;
- 17 <sup>3</sup> Meet Medicaid citizenship requirements;
- 18 <sup>4</sup> Have a disability, as defined by the Social Security  
Administration;

19 <sup>5</sup> [ (4) Be gainfully employed, including part-time or full-  
20 time work; provided that <sup>all earnings shall be reported to the</sup> the employment shall be  
21 verified by the department;] <sup>department of labor and industrial relations;</sup>



1 (5) Have [a gross] income that does not exceed three hundred  
 2 per cent of the federal poverty level;

3 (6) Not be disqualified for having assets above any  
 4 allowable limits that may be established under  
 5 Medquest; and]

6 (7) Pay a monthly premium of up to ten per cent of  
 7 earnings for earnings in excess of one hundred thirty-  
 8 eight per cent of the federal poverty level, using the  
 9 Social Security Administration's counting method and  
 10 as determined by the department, pursuant to

11 administrative rules.]  
 12 (c) Enrollment in the medicaid buy-in program for workers  
 13 with disabilities shall be limited to two hundred participants.  
 14 The program shall be evaluated periodically by the department  
 15 with the assistance of the University of Hawaii.]

16 (d) The department may require a person participating in  
 17 the medicaid buy-in program for workers with disabilities to pay  
 18 a premium or other cost-sharing charges in a manner [that is  
 19 consistent with federal law.]

20 (e) For purposes of this section, "medicaid buy-in program  
 21 for disabled workers" means a program that provides health care  
 22 services through Medquest for individuals with disabilities who





1 are employed and earning more than the allowable limits under  
2 current Medquest eligibility guidelines.]

3 <sup>(e)</sup>  
4 [(f)] The department shall adopt rules pursuant to chapter  
5 91 necessary for the purposes of this section."

6 SECTION 3. The department of human services shall  
7 implement the medicaid buy-in program for workers with  
8 disabilities no later than July 1, 2017.

9 SECTION 4. The department of human services, with the  
10 assistance of the University of Hawaii center on disabilities,  
11 shall submit a report to the legislature no later than twenty  
12 days prior to the convening of the regular session of 201<sup>5</sup>6,  
13 detailing its progress in implementing the medicaid buy-in  
14 program for workers with disabilities. The report shall also  
15 include any proposed recommendations, <sup>and resources needed to imple</sup>  
16 [or] legislation [for] the  
17 medicaid buy-in program for workers with disabilities.

18 SECTION 5. [T]here is appropriated out of the general  
19 revenues of the State of Hawaii the sum of \$ \_\_\_\_\_ or so  
20 much thereof as may be necessary for fiscal year 2014-2015 to  
21 establish the medicaid buy-in program for workers with  
22 disabilities and for disability benefits and work incentives  
23 education and planning associated with the program.



1 The sum appropriated shall be expended by the department of  
2 human services for the purposes of this Act.

3 SECTION 6.] There is appropriated out of the general  
4 revenues of the State of Hawaii the sum of \$165,000 or so much  
5 thereof as may be necessary for fiscal year 2014-2015 for the  
6 [department of human services, with the assistance of the]  
7 University of Hawaii center on disability studies,] to prepare,  
8 [evaluate the progress of,] and conduct outreach and training  
9 programs relating to the medicaid buy-in program for workers  
10 with disabilities.

11 The sum appropriated shall be expended by the <sup>University of Hawaii</sup> [department of  
12 Center on Disability Studies human services] for the purposes of this Act.

13 SECTION <sup>6</sup> [7] New statutory material is underscored.

14 SECTION <sup>7</sup> [8] This Act shall take effect on July 1, 2014.

15

INTRODUCED BY:

Mele Carroll

Debra A. Seltzer r. [unclear]

Richard George

Bill Kofone

G. J. [unclear]



Proposed HD1

# H.B. NO. 1754

**Report Title:**

Medicaid Buy-in Program for Workers with Disabilities;  
Appropriation

**Description:**

Establishes and appropriates funds for the medicaid buy-in program for workers with disabilities. Effective 7/1/14.

*The summary description of legislation appearing on this page is for informational purposes only and is not legislation or evidence of legislative intent.*



January 23, 2014  
Ellen K. Awai  
3329 Kanaina Ave. #304  
Honolulu, HI 96815  
Cell: (808) 551-7676  
[Awai76@aol.com](mailto:Awai76@aol.com)

TO: Representative Mele Carroll, Chair of the Human Services Committee & Members  
Hearing on Tuesday, January 28, 2014, 9:30am in Room #329

SUBJECT: HB1754 with 1/23/14 Taskforce Revisions - Please support!

I am a member of Senator Chun Oakland's Medicaid Buy-In Taskforce and strongly support HB1754 companion SB2525 and the revisions suggested by the group on January 23rd. I've assisted individuals with disabilities for over 20 years, and the Medicaid Buy-In program is greatly needed, especially for the aged, blind, and disabled. Hawaii is one of the few states that do not have such a program. For several years, I've been working with the University of Hawaii's Center on Disability Studies and others in the community developing the Buy-In program. I am one of the few that have shared my experiences and the need for such a program.

The Medicaid Buy-In would give people with disabilities an incentive to find a job that they can earn more than the federal poverty level (FPL). In 2013, the FPL for Hawaii was about \$1100 for a single person. Prior to 2005, I was dual-eligible, qualifying for both Medicare and Medicaid, since my Social Security disability benefits were less than \$900. I was dependent on Medicaid benefits, which was vital for me to receive treatment for my illness and continue my medications, which I could otherwise not afford.

In 2005, I was employed with Hawaii's Department of Health's Adult Mental Health Division in the Office of Consumer Affairs, for a position that needed an individual with my disability. But when the economy fell in 2009 and positions were cut, I lost my job. I found myself in the same situation as in 2005, unable to pay for an insurance plan to cover my medications and treatment. With a Buy-In plan, I could find a job that could get me out of the poverty level without the fear of losing my medical, medications, and falling into another episode of necessary treatments.

As a member of the Community Outreach Advisory Council for the Affordable Care Act, I saw individuals qualify for subsidized insurance plans, some for the first time. But so many more needed the services of the Medicaid or MedQuest in Hawaii. A Medicaid Buy-In program could keep expenses from being shifted to other departments at a greater cost, such as homelessness, emergency rooms, hospitals, police, public safety, and the judiciary system. Please support HB1754 and its companion bill SB2525!

Mahalo and Aloha!

Ellen K. Awai, MSCJA, BBA, CPRP  
Behavioral Health Advocate

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## A BILL FOR AN ACT

RELATING TO PERSONS WITH DISABILITIES.

**BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF HAWAII:**

1           SECTION 1. The legislature finds that Act 200, Session  
2 Laws of Hawaii 2012, established a joint legislative task force  
3 to explore the possibility of implementing a medicaid buy-in  
4 program for individuals with disabilities who are either not  
5 working or currently working and would like to earn more income,  
6 based upon Hawaii's current medicaid income and asset limits,  
7 subject to approval of the federal Centers for Medicare and  
8 Medicaid Services. The legislature notes that a significant  
9 portion of the population in Hawaii receives federal or state  
10 benefits because of disabling conditions. Additionally, current  
11 state programs and policies, including state-designed medicaid  
12 waiver programs, create disincentives for persons with  
13 disabilities to become employed, maintain employment, or  
14 increase their employment income.

15           The legislature also finds that from 2005 through 2012,  
16 Hawaii was the recipient of a grant from the federal Centers for  
17 Medicare and Medicaid Services for the development of a medicaid  
18 infrastructure program to design and implement a medicaid buy-in



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1 program for individuals with disabilities who are employed or  
2 desire to become employed and purchase medicaid coverage  
3 authorized under the Ticket to Work and Work Incentives  
4 Improvement Act of 1999 (P.L. 106-170). Prior to 1999, other  
5 potential federal options for the creation of a medicaid buy-in  
6 program included the 1997 Balanced Budget Act and a waiver  
7 pursuant to title 32 United States Code section 1115, the Social  
8 Security Act.

9 The legislature further finds that it is advantageous to  
10 economic development of the State and in the best interests of  
11 Hawaii's citizens with disabilities to establish programs and  
12 policies that encourage employment. It is the intent of the  
13 legislature that all state agencies work with citizens to  
14 identify and remove barriers to employment for persons with  
15 disabilities. Adults with disabilities need adequate health  
16 insurance, but options for insurance coverage are limited, even  
17 with the federal Patient Protection and Affordable Care Act.

18 The purpose of this Act is to encourage individuals [with  
19 disabilities] to gain employment <sup>and improve their employment opportunities</sup> by establishing a medicaid buy-  
20 in program for individuals with disabilities.



1 SECTION 2. Chapter 346, Hawaii Revised Statutes, is  
2 amended by adding a new section to be appropriately designated  
3 and to read as follows:

4 "§346- Medicaid buy-in program; workers with  
5 disabilities. (a) There is established within the department  
6 of human services the medicaid buy-in program for workers with  
7 disabilities. The purpose of the medicaid buy-in program for  
8 workers with disabilities is to support [to the continued]  
9 employment of individuals with disabilities by expanding their  
10 access to Medicaid.

11 (b) To qualify for the medicaid buy-in program for workers  
12 with disabilities, a person shall:

- 13 (1) Be a resident of the State;  
14 (2) Be at least eighteen years of age;  
15 (3) Meet medicaid citizenship requirements;  
16 (4) Have a disability, as defined by the Social Security  
17 Administration;  
18 (5) Be gainfully employed in either part-time or full-time  
19 work; provided that all earnings shall be reported to  
20 the department of labor and industrial relations;  
21 (6) Have [a gross] income that does not exceed three hundred  
22 per cent of the federal poverty level; and



S.B. NO.

1 (7) Have assets that do not exceed an amount established  
2 by the department; provided that the limitation shall  
3 not be less than \$25,000.

4 (c) [Enrollment in the medicaid buy-in program for workers  
5 with disabilities shall be determined by the department. The  
6 program shall be evaluated periodically by the department with  
7 the assistance of the University of Hawaii.]

8 (d) The department may require a person participating in  
9 the medicaid buy-in program for workers with disabilities to pay  
10 a premium or other cost-sharing charges in a manner as  
11 determined by the department.

12 (e) The department shall adopt rules pursuant to chapter  
13 91 necessary for the purposes of this section."

14 SECTION 3. The department of human services shall  
15 implement the medicaid buy-in program for workers with  
16 disabilities no later than July 1, 2017.

17 SECTION 4. The department of human services shall submit a  
18 report to the legislature no later than twenty days prior to the  
19 convening of the regular session of 201<sup>6</sup>, detailing its progress  
20 in implementing the medicaid buy-in program for workers with  
21 disabilities. The report shall also include any proposed

*The medicaid buy-in program may have an enrollment limit, as determined by the department; provided that the limitation shall not be less than 200 individuals.*





S.B. NO.

*, and resources needed to implement*

1 recommendations, *or* legislation *for* the medicaid buy-in program  
2 for workers with disabilities.

3 SECTION 5. [ There is appropriated out of the general  
4 revenues of the State of Hawaii the sum of \$ or so much  
5 thereof as may be necessary for fiscal year 2014-2015 to  
6 establish the medicaid buy-in program for workers with  
7 disabilities and for disability benefits and work incentives  
8 education and planning associated with the program.

9 The sum appropriated shall be expended by the department of  
10 human services for the purposes of this Act.

11 SECTION 6. ] There is appropriated out of the general  
12 revenues of the State of Hawaii the sum of \$165,000 or so much  
13 thereof as may be necessary for fiscal year 2014-2015 for the  
14 [department of human services, with the assistance of *the*]  
15 University of Hawaii center on disability studies, *to prepare*  
16 [evaluate the progress of,] *ae* and conduct outreach and training  
17 relating to the medicaid buy-in program for workers with  
18 disabilities.

19 The sum appropriated shall be expended by the [department of  
20 human services] *University of Hawaii center on disability studies* for the purposes of this Act.

21 SECTION 7. New statutory material is underscored.

*6*



S.B. NO.

1 SECTION <sup>7</sup> 8. This Act shall take effect on July 1, 2014.

2

INTRODUCED BY: \_\_\_\_\_



# S.B. NO.

**Report Title:**

Medicaid Buy-in Program for Workers with Disabilities;  
Appropriation

**Description:**

Establishes and appropriates funds for the medicaid buy-in program for workers with disabilities. Effective 7/1/14.

*The summary description of legislation appearing on this page is for informational purposes only and is not legislation or evidence of legislative intent.*

SB LRB 14-0851.doc



**kobayashi1-Joni**

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**From:** mailinglist@capitol.hawaii.gov  
**Sent:** Monday, January 27, 2014 2:08 PM  
**To:** HUS testimony  
**Cc:** ronald.deese@gmail.com  
**Subject:** Submitted testimony for HB1754 on Jan 28, 2014 09:30AM  
**Attachments:** HB1754-testimony.pdf

**Categories:** Orange Category

**HB1754**

Submitted on: 1/27/2014

Testimony for HUS on Jan 28, 2014 09:30AM in Conference Room 329

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Present at Hearing</b>
Ronald Deese	Individual	Support	No

Comments: Petition for Medicaid Buy-In for Workers with Disabilities.

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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**kobayashi1-Joni**

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**From:** mailinglist@capitol.hawaii.gov  
**Sent:** Monday, January 27, 2014 7:29 PM  
**To:** HUS testimony  
**Cc:** robertscottwall@yahoo.com  
**Subject:** Submitted testimony for HB1754 on Jan 28, 2014 09:30AM

**HB1754**

Submitted on: 1/27/2014

Testimony for HUS on Jan 28, 2014 09:30AM in Conference Room 329

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Present at Hearing</b>
Scott Wall	Community Alliance for Mental Health	Support	No

Comments: to: House Committee on Human Services Aloha Rep. Carroll and members of the committee, On behalf of the Community Alliance for Mental Health along with United Self Help most strongly supports HB1754. This bill is central to the states need for paraprofessional medical workforce development. We have worked for seven years to get this bill passed and the time is now. Scott Wall VP/Legislative Advocate Community Alliance for Mental Health

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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**kobayashi1-Joni**

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**From:** mailinglist@capitol.hawaii.gov  
**Sent:** Tuesday, January 28, 2014 8:37 AM  
**To:** HUS testimony  
**Cc:** anniemoriyasu@gmail.com  
**Subject:** Submitted testimony for HB1754 on Jan 28, 2014 09:30AM

**HB1754**

Submitted on: 1/28/2014

Testimony for HUS on Jan 28, 2014 09:30AM in Conference Room 329

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Present at Hearing</b>
Annie Moriyasu	Individual	Support	No

Comments: Aloha Chair Rep. Carroll and members of the Committee: Please support the HB1754 which will enable persons with disabilities to engage in work if they choose without the threat of losing their health benefits. Mahalo, Annie Moriyasu

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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January 28, 2014

Ellen K. Awai  
3329 Kanaina Ave. #304  
Honolulu, HI 96815  
Cell: (808) 551-7676  
[Awai76@aol.com](mailto:Awai76@aol.com)

TO: Representative Mele Carroll, Chair of the Human Services Committee & Members  
Hearing on Tuesday, January 28, 2014, 9:30am in Room #329

SUBJECT: Additional Testimony HB1754 with 1/23/14 Taskforce Revisions - Please support!

I am a member of Senator Chun Oakland's Medicaid Buy-In Taskforce, with a master of science in Criminal Justice Administration (MSCJA) and a bachelor in Business Administration (BBA). I am a Certified Psychiatric Rehabilitation Practitioner (CPRP) with the U.S. Psychiatric Rehabilitation Association, which has gone international as Psychiatric Rehabilitation Association (PRA) training individuals on the integrated, person-centered recovery model. I have been a mental health advocate for over a decade, fighting for bills that are important for the disability community. But being an advocate is not helpful when you represent groups that the state agencies serve.

I heard about the Medicaid Buy-In program over 10 years ago, but Hawaii is still only one of five states that do not have this program. This was prior to becoming a member of Substance Abuse Mental Health Services Administration (SAMHSA), Center for Mental Health Services, National Advisory Council's Subcommittee on Consumer Survivor Issues. It was also before getting a job with the state's Adult Mental Health Division training people with mental illnesses to become Certified Peer Specialists for jobs in the field because of their lived experiences.

I am one of a few, who have a mental health disability, a very stigmatizing label, yet I testify on bills that I strongly believe in. I risk my own personal future in finding a career because I do not want others to go through the same barriers that I have faced. I don't want to just collect benefits because of my disability, but I have experienced a lot of challenges when losing any of these benefits. Just the recent raise in the cost of living for 2014 has kicked me off of the MedQuest Quest Expanded Access (QExA) program, which assisted in paying medical bills after Medicare.

President Obama's Affordable Care Act was important for the middle class to get insurance, but many have no clue of the impact of not having health insurance on our community, where hospitals closed; homelessness increased; and emergency rooms, hospitals, jails, and prisons are so overcrowded. Instead the Medicaid enrollment for the poor increased significantly. Please support this bill, HB1754 with the changes made by the Taskforce on January 23, 2014!

Mahalo and Aloha!



Ellen K. Awai, MSCJA, BBA, CPRP, HCPS  
Behavioral Health Advocate

**kobayashi1-Joni**

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**From:** mailinglist@capitol.hawaii.gov  
**Sent:** Tuesday, January 28, 2014 7:40 AM  
**To:** HUS testimony  
**Cc:** mihalkewm@gmail.com  
**Subject:** Submitted testimony for HB1754 on Jan 28, 2014 09:30AM

**HB1754**

Submitted on: 1/28/2014

Testimony for HUS on Jan 28, 2014 09:30AM in Conference Room 329

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Present at Hearing</b>
William Mihalke	Individual	Support	Yes

Comments: Aloha Representatives, I am writing in support of the Medicaid Buy-in provision. Nearly 1,000 persons have submitted testimony in support of this measure in previous sessions. The Medicaid Buy-in allows persons with disabilities to go back to work, and to keep their needed healthcare supports, so that they remain healthy. This is ultimately a cost savings to the state, at little cost to the Mediquest Division, as a vast majority of those on the Medicaid Buy-in are already receiving Medicaid, and the State is already paying for their QExA. Furthermore, the cost of working persons with disabilities is less because their health improves by working, particularly those with psychiatric disabilities. For example, other states have documented that the smoking rate for those on the buy-in is lower when people go to work. Hawaii is one of only five states remaining in the Union that have not yet formed a Medicaid Buy-in so persons with disabilities can work, get out of poverty and have a chance to get off benefits. Mahalo for your consideration, William Mihalke

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