

SCR 105

Measure Title: REQUESTING THE AUDITOR TO ASSESS THE SOCIAL AND FINANCIAL EFFECTS OF REQUIRING HEALTH INSURERS, MUTUAL BENEFIT SOCIETIES, AND HEALTH MAINTENANCE ORGANIZATIONS TO PROVIDE COVERAGE FOR MEDICALLY NECESSARY COGNITIVE REHABILITATION THERAPY FOR SURVIVORS OF TRAUMATIC BRAIN INJURY.

Report Title: Mandated Coverage; Cognitive Rehabilitation Therapy; Traumatic Brain Injury; Auditor; Impact Assessment Report

Description:

Companion: [HCR165](#)

Package: None

Current Referral: CPH, WAM

Introducer(s): BAKER, ENGLISH, INOUYE, KEITH-AGARAN, KIDANI, NISHIHARA, K. RHOADS, RUDERMAN, S. Chang, Espero, Galuteria, Harimoto, Ihara, Kim, Shimabukuro



DISABILITY AND COMMUNICATION ACCESS BOARD

919 Ala Moana Boulevard, Room 101 • Honolulu, Hawaii 96814
Ph. (808) 586-8121 (V/TDD) • Fax (808) 586-8129

March 23, 2017

TESTIMONY TO THE SENATE COMMITTEE ON COMMERCE, CONSUMER PROTECTION AND HEALTH

Senate Concurrent Resolution 105 – Requesting the Auditor to Assess the Social and Financial Effects of Requiring Health Insurers, Mutual Benefit Societies, and Health Maintenance Organizations to Provide Coverage for Medically Necessary Cognitive Rehabilitation Therapy for Survivors of Traumatic Brain Injuries

The Disability and Communication Access Board (DCAB) is a statewide Governor-appointed Board with a majority of its members being persons with disabilities or family members. The Board's mission is to advocate and promote full inclusion, independence, equal access, and quality of life for persons with disabilities in society. This testimony represents a position voted upon by the Legislative Committee of the Board.

DCAB supports Senate Concurrent Resolution 105 Requesting the Auditor to Assess the Social and Financial Effects of Requiring Health Insurers, Mutual Benefit Societies, and Health Maintenance Organizations to Provide Coverage for Medically Necessary Cognitive Rehabilitation Therapy for Survivors of Traumatic Brain Injuries. We have worked with the Brain Injury Association of Hawaii by providing community educational and awareness activities over the past two decades.

Through our interactions with the sponsors and survivors of traumatic brain injuries (TBI), we have first-hand experience with the devastating impact TBI has on individuals. We have also seen that over the years, if a survivor of TBI has access to cognitive rehabilitation services that recovery does occur allowing the individual to lead a productive life. It is different for each individual depending on the severity of the injury, age, support network, and access to and types of services the person has that makes a difference in the rate and level of recovery.

Hopefully, the various studies that have been published, since the 2004 Auditor's Report Number 04-11, will provide the information necessary to allow survivors of TBI to obtain more insurance coverage for medically necessary cognitive rehabilitation therapy.

Thank you for the opportunity to testify.

Respectfully submitted,

BARBARA FISCHLOWITZ-LEONG
Chairperson
Legislative Committee

FRANCINE WAI
Executive Director

From: mailinglist@capitol.hawaii.gov
Sent: Monday, March 20, 2017 1:34 PM
To: CPH Testimony
Cc: louis@hawaiidisabilityrights.org
Subject: Submitted testimony for SCR105 on Mar 23, 2017 09:30AM

SCR105

Submitted on: 3/20/2017

Testimony for CPH on Mar 23, 2017 09:30AM in Conference Room 229

Submitted By	Organization	Testifier Position	Present at Hearing
Louis Erteschik	Hawaii Disability Rights Center	Support	No

Comments: We have been involved with this issue for more than a decade. During that time the prevalence of brain injuries has increased exponentially. Everyone has heard the expression that traumatic brain injury is the signature wound of the wars around the world. Our understanding is that while receiving immediate acute hospital care has not been a particular issue, what has been lacking has been coverage for rehabilitation care and further treatment such as cognitive therapy. Based upon the testimony submitted this year on SB 225 , it seems unclear as to exactly what is covered or not covered either by private insurers or by Medicaid. Additionally, the prior Report from the Legislative Auditor in 2004 expressed that there was not a clear definition of what constitutes cognitive rehabilitation therapy. For those reasons, it seems like a very good next step would be to request the Auditor to update the 2004 report and so we urge the Committee to advance this measure. We also would like to encourage further stakeholder discussion in the hope that the parties can either achieve consensus or at least come to a baseline understanding of specifically what gaps currently exist in the service delivery and coverage system so that the legislature next session can then assess the rationale for any gaps in coverage and make a comprehensive policy decision as to what further steps are needed.

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To: CPH Testimony
Cc: tjdavies@juno.com
Subject: *Submitted testimony for SCR105 on Mar 23, 2017 09:30AM*

SCR105

Submitted on: 3/20/2017

Testimony for CPH on Mar 23, 2017 09:30AM in Conference Room 229

Submitted By	Organization	Testifier Position	Present at Hearing
T.J. Davies	Individual	Support	No

Comments:

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To: CPH Testimony
Cc: mendezj@hawaii.edu
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Testimony for CPH on Mar 23, 2017 09:30AM in Conference Room 229

Submitted By	Organization	Testifier Position	Present at Hearing
Javier Mendez-Alvarez	Individual	Support	No

Comments:

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