

JOSH GREEN, M.D.
GOVERNOR
KE KIA'ĀINA



CATHY BETTS
DIRECTOR
KA LUNA HO'OKELE

JOSEPH CAMPOS II
DEPUTY DIRECTOR
KA HOPE LUNA HO'OKELE

STATE OF HAWAII
KA MOKU'ĀINA O HAWAI'I
DEPARTMENT OF HUMAN SERVICES
KA 'OIHANA MĀLAMA LAWELawe KANAKA
Office of the Director
P. O. Box 339
Honolulu, Hawaii 96809-0339

February 12, 2023

TO: The Honorable John M. Mizuno, Chair
House Committee on Human Services

FROM: Cathy Betts, Director

SUBJECT: [HB 786](#) – RELATING TO THE DEPARTMENT OF HUMAN SERVICES.

Hearing: February 14, 2023, 9:30 a.m.
Conference Room 329 & Videoconferencing, State Capitol

DEPARTMENT'S POSITION: The Department of Human Services (DHS) appreciates the intent of this bill and offers comments.

PURPOSE: The bill appropriates funding for the Med-QUEST division of the Department of Human Services (HMS401) for non-covered or undercovered behavioral health services for med-QUEST beneficiaries.

DHS appreciates the commitment of the Legislature to invest in behavioral health services for the most vulnerable in the State. When this measure was first introduced during the 2022 Legislative session (HB 2055), the Med-QUEST Division (MQD) identified several behavioral health services that Medicaid typically cannot cover, such as services in "Institutions of Mental Disease" such as those provided in State Hospitals. In the intervening year, MQD has researched opportunities to cover various behavioral services that had been uncovered. Additionally, in the last several months, the Centers for Medicare & Medicaid Services has approved several states' 1115 Demonstration Waivers that include novel behavioral health and social determinant of health services that previously had never been authorized. In the

upcoming year, MQD will be starting the 1115 Waiver renewal process and will have the opportunity to incorporate some of these behavioral health services in the renewal of their Hawaii 1115 Waiver. For these reasons, we believe it is premature to appropriate funding at this time.

Thank you for the opportunity to provide comments on this bill.

HB-786

Submitted on: 2/10/2023 3:41:30 PM

Testimony for HUS on 2/14/2023 9:30:00 AM

Submitted By	Organization	Testifier Position	Testify
Leslie Allison Schurtz	BAYADA	Support	Written Testimony Only

Comments:

I support HB786 to increase funding for ABA services so that our Med-Quest families impacted by autism may have better access to providers and RBTs who work with these families can have higher wages.

HB-786

Submitted on: 2/10/2023 4:28:39 PM

Testimony for HUS on 2/14/2023 9:30:00 AM

Submitted By	Organization	Testifier Position	Testify
Pamela Wood	BAYADA Behavioral Analysis	Support	Written Testimony Only

Comments:

SUPPORT HB786 RELATING TO THE DEPARTMENT OF HUMAN SERVICES

Chair Mizuno, Vice Chair Terez, and members of the Committee, I support HB786 to increase funding for ABA services so that our Med-Quest families impacted by autism may have better access to providers and RBTs working with these families can have higher wages.

HB-786

Submitted on: 2/10/2023 7:45:04 PM

Testimony for HUS on 2/14/2023 9:30:00 AM

Submitted By	Organization	Testifier Position	Testify
Louis Erteschik	Hawaii Disability Rights Center	Support	Written Testimony Only

Comments:

HDRC is in support of increased funding across the board for all these services. Specifically, we see the need to increase the QUEST rates for applied behavior analysis (ABA) services. This is a greatly under-covered service because the current rates are below market reimbursement. This has added to the problem of the shortage of providers of ABA services in the state and has prevented children from accessing this necessary medically necessary care.

HDRC has been in the forefront on the issue of expanding the provision of ABA services. We “fought” hard for the legislation that passed some years ago which mandated insurance coverage of ABA services. We sued the Department of Human Services and successfully obtained a result whereby they now cover ABA under the Medicaid program. Yet, we continue to hear of clients who are on a “waitlist” for services because there are not enough ABA providers to fulfill all the need. It is our hope that a bill like this will help remedy that situation.

HB-786

Submitted on: 2/11/2023 6:49:03 PM

Testimony for HUS on 2/14/2023 9:30:00 AM

Submitted By	Organization	Testifier Position	Testify
Nikos Leverenz	Hawaii Health & Harm Reduction Center	Support	Written Testimony Only

Comments:

Chair Mizuno, Vice Chair Amato, & Committee Members:

Hawai‘i Health & Harm Reduction Center (HHHRC) supports HB 786, which appropriates funding for the Med-QUEST division of the Department of Human Services (HMS401) for non-covered or under-covered behavioral health services for Med-QUEST beneficiaries.

HHHRC’s mission is to reduce harm, promote health, create wellness, and fight stigma in Hawai‘i and the Pacific. We work with many individuals impacted by poverty, housing instability, and other social determinants of health. Many have behavioral health problems, including those related to substance use and mental health conditions. Many of our program clients and participants have also been deeply impacted by trauma, including histories of physical, sexual, and psychological abuse.

Thank you for the opportunity to testify on this measure.



HB786 Underfunded and uninsured MedQuest Behavioral Health

COMMITTEE ON HUMAN SERVICES

Rep. John M. Mizuno, Chair

Rep. Terez Amato, Vice Chair

Tuesday, Feb. 14, 2023: 9:30: Room 329

Hawaii Substance Abuse Coalition Supports HB786:

ALOHA CHAIR, VICE CHAIR AND DISTINGUISHED COMMITTEE MEMBERS. My name is Alan Johnson. I am the current chair of the Hawaii Substance Abuse Coalition (HSAC), a statewide organization of over 30 substance use disorder and co-occurring mental health disorder treatment and prevention agencies.

The COVID-19 pandemic has negatively impacted people's mental health, creating a great need for support during a difficult, fraught time.

- Great overarching demand for mental health support
- Most vulnerable in our society might not always have the greatest access to mental health services to begin with.¹

The Kaiser Family Foundation (KFF) revealed that during this same period when our mental health needs increased, Medicaid enrollment exponentially rose. Our nation's mental health resources are historically underfunded and strained to begin with. Add on top of that the realities of shortages in mental health care providers and barriers to accessing mental health care for many on Medicaid.

The system has deficiencies in infrastructure and support for providers:

- KFF reported that about 4 in 10 adults in the United States reported symptoms of depressive disorder or anxiety over the course of the pandemic.
- Nationwide shortages in providers offering behavioral health care underscores a large problem, especially for underserved, economically disadvantaged populations.
- The number of people enrolled in Medicaid coverage has risen at the same time that poor funding, relatively low compensation, and job burnout are leaving a lot of providers strained during a very difficult time.

¹ Healthline: Why It's Not Easy to Access Mental Health Care When You're Covered by Medicaid, August 21, 2021 <https://www.healthline.com/health-news/why-its-not-easy-to-access-mental-health-care-when-youre-covered-by-medicaid#The-demand-for-mental-health-services-is-high>

The more likely providers are to receive adequate reimbursement for their services, the greater their capacity to accept various forms of coverage.

Otherwise, coverage expansion will not be able to contribute to the need for increased access to behavioral health services because providers can't afford to increase behavioral health provider capacity.

And while much work remains to be done to ensure **adequate reimbursement rates for providers of SUD treatment, evidence from states that increased Medicaid rates in recent years shows that these increases also contributed to greater provider participation in Medicaid.**

The more providers that accept Medicaid, the easier it is for enrollees to get the services they need when and where they need them. Closing the Medicaid coverage gap would benefit not only low-income patients but also the under-resourced providers that support them.²

With the additional challenges that have been brought on by the COVID-19 pandemic, we need to do more.

We appreciate the opportunity to provide testimony and are available for questions.

² Center of Budget and Policy Priorities: To Improve Behavioral Health, Start by Closing the Medicaid Coverage Gap October 4, 2022: Jennifer Sullivan, Miriam Pearsall and Anna Bailey. <https://www.cbpp.org/research/health/to-improve-behavioral-health-start-by-closing-the-medicaid-coverage-gap>



Committee on Human Services

Tuesday, February 14, 2023
9:30 a.m.

VIA VIDEOCONFERENCE
Conference Room 329
State Capitol
415 South Beretania Street

SUPPORT HB786 RELATING TO THE DEPARTMENT OF HUMAN SERVICES

Chair Mizuno, Vice Chair Amato, and members of the Committee:

On behalf of the Hawai'i Association for Behavior Analysis (HABA) we thank you for the opportunity to submit testimony in **strong support** of HB786, which appropriates funding for the Med-QUEST division of the Department of Human Services (HMS401) for non-covered or under-covered behavioral health services for med-QUEST beneficiaries. Applied behavior analysis (ABA) is a medically necessary service provided for QUEST beneficiaries under the age of 21 with an autism diagnosis for intensive behavioral therapy (IBT), as mandated by section 1905(r) of the Social Security Act for Early and Periodic Screening, Diagnostic and Treatment (EPSDT). Autism is classified as a mental health condition, included in the Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition (DSM-5) and ABA treatment is the leading behavioral health treatment to ameliorate symptoms associated with this diagnosis and focuses on improving independence and decreasing the level of supports and services needed over the lifetime.

Providers across the state have reported they are not able to meet the needs of QUEST members largely due to difficulty hiring and retaining providers given our high cost of living and the demand for increased wages. Reimbursement rates for QUEST services were set in 2015 and have not increased, creating a hardship for behavioral health providers. This has resulted in significant delays for beneficiaries to access services, as well as not being able to meet the full service needs for children and families in our state.

Below market reimbursement rates—the current reimbursement rate for Registered Behavior Technicians (RBTs) is below market rate. Other states, with lower costs of living, have increased their reimbursement rates over the years while the QUEST reimbursement rates have remained the same. The American Medical Association (AMA) Current Procedural Terminology (CPT®) codes for ABA services are carrier priced, meaning the [Centers for Medicare & Medicaid Services \(CMS\) Medicare Physician Fee Schedule \(MPFS\)](#) does not currently set rates for our services. This has resulted in a lack of parity for these intensive behavioral health services in our state. A sample of Medicaid state rates for RBTs is included in Table 1.

Funder	RBT rate per hour
Alaska Medicaid	\$76.08
Arizona Medicaid	\$81.48
Nevada Medicaid	\$52.04
Oregon Medicaid	\$55

Table 1. Medicaid rates in other states for comparison with links to state fee schedules.

Additionally, other payors in the state, including the Department of Education (DOE) and Department of Health (DOH) Development Disabilities Division (DDD) pay higher rates for these services, with a difference of \$25 per hour for DOE and \$19.45 for DOH-DDD respectively.

Waitlist for services, limited provider network—QUEST beneficiaries are too often faced with a lack of access to services across the state, especially on neighbor islands. Providers report having to maintain waitlists, with families sometimes waiting for years to access their medically necessary behavioral health treatment. Research demonstrates that early intensive intervention and provision of services in line with the [professional standards of care](#) for treatment dosage produce the best gains for individuals and can decrease the costs of care over the lifetime.

Due to low reimbursement rates and the high cost of living here in the islands, there is a shortage of providers, creating provider network adequacy issues. An increase in reimbursement rates would allow providers to pay livable wages and create additional jobs to serve QUEST beneficiaries.

We respectfully offer the following proposed amendments to the preamble at page 1, lines 7-8 to clarify that this measure is intended to cover under-covered services in addition to non-covered services:

SECTION 1. The legislature finds that the med-QUEST division of the department of human services offers standard behavioral health services to all medicaid beneficiaries. In addition, individuals with serious mental illness or serious and persistent mental illness receive additional specialized behavioral health services through their QUEST health plans. However, the legislature also finds that various behavioral health services are not currently covered under med-QUEST, or are covered at rates that are below market reimbursement rates resulting in provider network adequacy and access to care issues.

Mahalo,



Kristen Koba-Burdt, BCBA, LBA
Legislative Chair
Hawai'i Association for Behavior Analysis



Committee on Human Services

Tuesday, February 14, 2023

9:30 a.m.

VIA VIDEOCONFERENCE

Conference Room 329

State Capitol

415 South Beretania Street

SUPPORT HB786 RELATING TO THE DEPARTMENT OF HUMAN SERVICES

Chair Mizuno, Vice Chair Amato, and members of the Committee:

Thank you for the opportunity to submit testimony in **support of HB786**. BAYADA is a not-for-profit health care company committed to serving our community. We provide services across the state, with behavioral health services for QUEST members on Oahu and Maui.

As a behavioral health service provider, we have struggled to meet the needs of children with autism on Med-QUEST due to the increased costs of operating a business without increased rates for our services. QUEST rates for the coverage of intensive behavioral therapy (IBT) for treatment of children under 21 years of age with autism spectrum disorder (ASD), also referred to as applied behavior analysis (ABA), were set in 2015 and have not increased, despite the increased costs of living and increased costs for employers over the last 8 years. Wages have gone up nearly 30% since 2015 in Hawai'i, forcing businesses to shoulder the cost without proportionate rate increases, making it harder to attract candidates and businesses to the field of supporting individuals with autism and their families.

- **Rate differences**—There is a significant disparity in reimbursement between Med-QUEST other departments and funding sources within the state who pay a higher rate for Registered Behavior Technicians (RBT), who are an integral part of providing applied behavior analysis (ABA) services. In the table below, publicly available rates in the state are included for comparison. Additionally, these other funding sources allow for more service activities to be billed in comparison to QUEST, resulting in even lower reimbursement.

Funder	RBT rate per hour
TRICARE Hawai'i	\$65.56
DOH-DD Waiver	\$69.48
DOE for neighbor islands	\$75
QUEST	\$50

Table 1. Publicly available rates for the same service in Hawai'i.

- **Difficulty hiring and retaining providers**—as an organization, we have struggled to hire and retain providers to meet the needs of QUEST members and other clients in need of services. Often during the recruitment process, providers are asking for wages we are not able to provide due to the current reimbursement rates. We're receiving more applications than ever, and offering more conditional offers, however we're seeing lower position acceptance or transition to hired.



- **Staffing differences:** for comparison, at our Maui location we have been able to hire double the amount of RBTs in the last year to work in the DOE (which has a higher reimbursement rate) than we have been able to hire for our QUEST and insurance-funded services.
- **Waitlist to access services**—currently we must maintain a waitlist for clients to access services because there is more demand than we are able to meet with our current providers. At our Oahu location, 40% of those on our waitlist are QUEST members. At our Maui location, 66% are QUEST members. We closed our Big Island and Kauai insurance-based services, despite ongoing community need, due to losses based on unsustainable rates in 2018. These waitlists are only representative of our organization and are similar across providers.
- **Access to care** — behavioral health services provided during critical early years can decrease the overall costs to the state by preventing children and families needing to remain reliant on state resources for care as they grow. Current waitlists and provider adequacy limitations, prevent access to access to behavioral healthcare that allows children to build needed skills and decrease symptoms that reduce the need supports from DOE, DHS, and DOH-DDD as they age.
- **Career and Workforce Development**—With improved funding in behavioral health organizations such as ours, providers can increase access to jobs for our local community with livable wages in healthcare careers supporting QUEST members here in Hawai'i. With adequately funded and competitive reimbursement rates we believe we can improve member access to much needed services not only on Maui and Oahu, but to Big Island and Kauai as well.

We respectfully request the Committee pass this bill in support of increasing rates for what we believe are under-covered behavioral health services.

Thank you,

Rachel Miller, BCBA, LBA
Manager of Behavioral Operations
BAYADA Behavioral Health

Written Testimony

House Committee on Human Services

Tuesday, February 14, 2023 / 9:30 am
Conference Room 329, Hawai'i State Capitol

By

Christine K. Walton, PhD, BCBA-D, LBA
President, Behavior Analysis No Ka Oi, Inc.

HB786 – RELATING TO THE DEPARTMENT OF HUMAN SERVICES

Chair Mizuno, Vice Chair Amato and members of the committee:

Thank you for the opportunity to submit testimony in **support of HB786** which appropriates funding for Med-Quest division for non-covered or under-covered behavioral health services for med-Quest beneficiaries.

I am the President of Behavior Analysis No Ka Oi, Inc., a Kaka'ako-based clinic that has been serving people with autism for over 15 years. At our clinic, we provide applied behavior analysis (ABA), which is a medically necessary, empirically validated treatment approach for children diagnosed with autism and other related disorders. Since the passing of Luke's Law in 2015, which requires health insurance coverage for the diagnosis and treatment of autism, there has been no change to the Medicaid fee schedule for ABA.

The operational costs of running a clinic have increased significantly since 2015. Specifically, costs related to rent, health insurance for employees, the IRS standard mileage reimbursement rate for employees who commute to the families' homes or other community sites, have all increased.

As a direct result of no increases to the Medicaid fee schedule for ABA, we have been struggling with hiring. Interviewees request competitive wages, comparable to school-based services which reimburse at a higher rate. We not only struggle with recruiting the best providers, but also in retaining our most qualified providers, where several have relocated to the mainland where the cost of living is lower and fee schedules are higher. We are simply not able to serve clients due to the challenges of recruiting and retaining providers, resulting in a current wait list for services of approximately 3 years. While the passage of Luke's Law was a monumental advancement in securing services for the people of Hawai'i, it is not impactful if those it was meant to ensure services for cannot find providers.

In conclusion, in order to provide medically necessary services, funding for Med-Quest division for non-covered or under-covered behavioral health services for Med-Quest beneficiaries must be increased.

February 13, 2023

Committee on Human Services
Tuesday, February 14, 2023 9:30 a.m.
VIA VIDEOCONFERENCE Conference
Room 329 State Capitol 415 South Beretania Street

SUPPORT HB786 RELATING TO THE DEPARTMENT OF HUMAN SERVICES

Dear Chair Mizuno, Vice Chair Amato, and Members of the Committee:

I write to you today on behalf of The Council of Autism Service Providers (CASP) in support of HB786. CASP is a non-profit association of organizations committed to providing evidence-based care to individuals with autism. CASP represents the autism provider community to the nation at large, including government, payers, and the general public. We provide information and education and promote standards that enhance quality of care.

Of particular interest to our members is the coverage of evidence-based care in both private health insurance plans as well as through Medicaid. Timely access to medically necessary treatment, including applied behavior analysis, is critical for children with autism spectrum disorder (ASD).¹

The State of Hawaii took an important step in 2015, when it passed legislation requiring coverage of medically necessary care for ASD. Since then, individuals diagnosed with ASD have had access to meaningful interventions, reducing their need for special education services, improving their quality of life, and opening doors for further education and employment.

This coverage includes children under the age of 21 who are enrolled in MedQUEST, assuring access to medically necessary care pursuant to Medicaid's Early Periodic, Screening, Diagnostic and Treatment (EPSDT) mandate and CMS' Informational

¹ The American Academy of Pediatrics has long recognized that immediate intervention is critical in the treatment of autism. Pediatrics, Vol. 120, No. 5, Management of Children with Autism Spectrum Disorders (2007), p. 1163.
46_dmhc_regs.pdf

Bulletin on Clarification of Medicaid Coverage of Services to Children with Autism.² EPSDT requires that these services be provided **without delay**. The previously referenced CMS bulletin³ states:

*EPSDT also requires medically necessary diagnostic and treatment services. When a screening examination indicates the need for further evaluation of a child's health, the child should be appropriately referred for diagnosis and treatment **without delay**. Ultimately, the goal of EPSDT is to assure that children get the health care they need, when they need it – the right care to the right child at the right time in the right setting.*

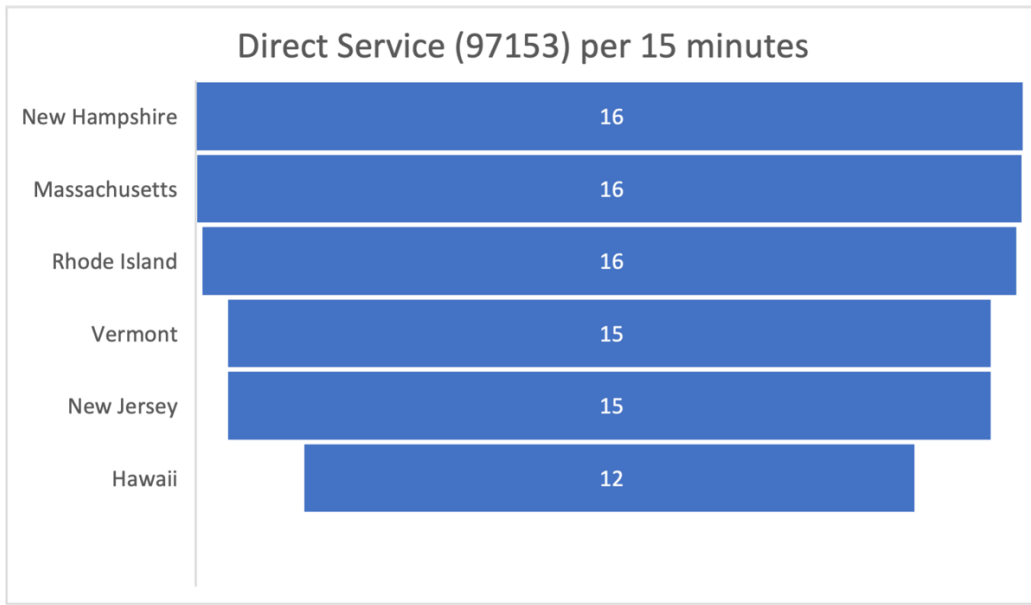
The role of states is to make sure all covered services are available as well as to assure that families of enrolled children, including children with ASD, are aware of and have access to a broad range of services to meet the individual child's needs.

Ensuring an adequate network is established by offering appropriate rates is critical. The existing MedQUEST rates have not been adjusted since 2015, even though the cost of providing these services has skyrocketed. This has caused our member organizations to maintain wait lists for children who are in dire need of services and is in direct contradiction to the requirements of EPSDT.

Additionally, as indicated below, other states with similar costs of living have rates that are more in line with economic forces:

² ¹ Center for Medicaid and CHIP Services. Informationa Bulletin, Clarification of Medicaid Coverage of Services to Children with Autism, July 7, 2014 (hereinafter “CMS Informational Bulletin”), available at <http://www.medicaid.gov/Federal-Policy-Guidance/Downloads/CIB-07-07-14.pdf>.

³ Ibid.



According to the most recent estimates from the Centers for Disease Control, 1 in every 44 children is diagnosed with autism spectrum disorder. This means that 2% of Hawaii's children who are on Medicaid have an autism spectrum disorder and to date, many are unable to access the most basic, evidence-based treatments for their diagnosis. Because of this, we respectfully request that you pass HB786 which provides a reasonable rate increase for autism service providers.

Thank you for your work in the past and moving forward to ensure that Hawaiian children with autism who are enrolled in Medicaid have access to life-changing, evidence-based care.

Respectfully,

Judith Ursitti
Vice President of Government Affairs

Committee Chair Mizuno,

In support of HB 786, I am writing to express my gratitude for introducing a bill that directs funding addressing spending shortfalls in behavioral health services for Med-QUEST beneficiaries. I can attest to the immense positive impact that this bill could have on countless students attending the University of Hawaii at Manoa.

Behavioral health services are essential to the well-being and success of our students. By directing funding towards Med-QUEST's behavioral health services, the bill may provide critical support which can impact students who may not have the means to afford necessary services.

This funding would help fill gaps in coverage and enable students to receive the care they need to thrive academically and personally. The lack of adequate behavioral health services can negatively affect our student body. With the possible implementation of this bill, you are not only addressing an urgent need in our community, but also setting an example for other states to follow.

I am including a draft resolution, outlining what ASUH encourages would strengthen Med-quest.

Once again, I want to express my admiration for your leadership and advocacy for the well-being of our students. Your efforts will help create a healthier, more resilient Hawaii for all its residents. **I urge the committee to pass HB 786 with suitable funding needed that will deliver desirable outcomes.**

Mahalo,



Rudy Ramirez
ASUH President



ASUH

Associated Students of the University of Hawai'i

YOUR STUDENT GOVERNMENT

**ASSOCIATED STUDENTS OF THE UNIVERSITY OF HAWAI'I AT MĀNOA
2465 Campus Road, Campus Center 211A
Honolulu HI 96822**

**In the Senate
February 13, 2023**

**Senate Resolution 11-23
For First Reading**

A RESOLUTION

**Comprehensively Addressing the Shortage of Mental Health Providers Accepting Med-Quest
in the State of Hawaii**

BE IT ENACTED BY THE UNDERGRADUATE SENATE:

WHEREAS, the Associated Students of the University of Hawai'i (ASUH) at Mānoa Senate is the elected body representing approximately 11,000 full-time classified undergraduate students; and

WHEREAS, barriers to accessible mental health resources for students and providers at the University of Hawai'i at Manoa (UHM), such as counselor-to-student ratio, competitive compensation for future counselors, and inaccessibility of care across different states has been an ongoing issue for many years

WHEREAS, access to mental health services through Med-Quest, a government-sponsored health insurance program for low-income individuals in the state of Hawaii, reducing financial burden, and providing UHM students with the resources they need to manage their mental health to be successful in their academic pursuits, and improve their overall well-being.

WHEREAS, there is a well known shortage of mental health providers who accept Med-Quest contributing to the mental health crisis in UHM students and residents in Hawai'i,

WHEREAS, one of the main reasons for the shortage of mental health providers who accept Med-Quest is due to low reimbursement rates.

BE IT RESOLVED,

that ASUH supports efforts to address the shortage of mental health providers who accept Med-Quest in the state of Hawaii through a multi-facet and comprehensive approach leveraging effective health policy, collaboration with the community, and initiatives set by the UH System to increase overall healthcare access and health outcomes to residents and, in particular, UHM students.

BE IT FURTHER RESOLVED,

increasing net reimbursement rates could attract more providers to participate in the program. This could be done through negotiation with insurance providers or through direct funding from the state and identifying potential opportunities for providing tax breaks and tax credits to reduce overhead costs.

BE IT FURTHER RESOLVED,

ASUH supports the state to consider expanding the network of mental health providers who accept Med-Quest by offering incentives for providers to participate in the program. This could include offering continuing education credits, increasing funding for administrative support, or offering loan forgiveness programs for mental health providers who serve Med-Quest patients.

BE IT FURTHER RESOLVED,

improving the administrative and billing processes can make it easier for providers to participate in the program, leading to more providers accepting Med-Quest patients. This could involve streamlining the enrollment process, providing training and support for providers, and improving the speed and accuracy of payments.

BE IT FURTHER RESOLVED,

addressing the overall workforce shortage of mental health providers by increasing funding for mental health programs within the UH System, providing incentives for students to pursue careers in mental health, and creating a more favorable regulatory environment for mental health providers will improve mental health outcomes.

BE IT FURTHER RESOLVED,

the University of Hawaii at Manoa could also play a role in addressing the shortage of mental health providers who accept Med-Quest offering greater educational programs that prepare students for careers in the mental health field, including Bachelor's and Master's programs in psychology, counseling, and social work, as well as continuing education courses for current mental health providers. UHM could also engage in research that provides insights into the root causes of the shortage and ways to overcome it.

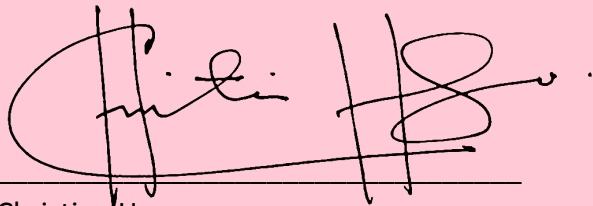
BE IT FURTHER RESOLVED,

partnering with local mental health organizations, the state of Hawaii, and other stakeholders, the university could leverage its resources and expertise to support initiatives that incentivize mental health providers to participate in the Med-Quest program. This could include offering scholarships, stipends, and other forms of financial support to providers who are committed to serving low-income and underserved populations.

NOW, THEREFORE, BE IT FINALLY RESOLVED, that copies of this resolution shall be sent to:

the University of Hawai'i Board of Regents Chair Randolph Moore and Members, President David Lassner, Provost Michael Bruno and Provost Council Members including Vice-Provost Laura Lyons, Vice-Provost for Student Success Lori Ideta, AVP for Student Success & Dean of Students Dr. Theresa Crichfield, Kalbert Young, the Graduate Student Organization, Kualii Council, Governor Joshua Green, Lt Gov Sylvia Luke, Majority and Minority Senate Leaders, Senate Committee on Higher Education Members, Majority and Minority House Leaders, House Committee on Higher Education and Technology, Hawaii Congressional Delegation, State & National Democratic Party, State & National Republican Party, State & National Libertarian Party, State & National Green Party, Cathy Betts, Chiquita W. Brooks-LaSure, Hawaii Public Radio, Civil Beat, KHON, HNN, KITV, and Ka Leo O Hawai'i.

INTRODUCED BY



Christian Hermoso
Introducing Member
Senator-at-Large



Quinn Goo
Introducing Member
Vice-chairperson, External Affairs
Committee
Senator, College of Arts & Science



Nikhil Stewart
Introducing Member
Chairperson, Student Affairs Committee
Senator, College Arts & Science



Hayden Kasal-Barsky
Introducing Member
Vice-President



Miguel Vizcarra
Introducing Member
Chairperson, External Affairs Committee
Senator, College of Arts & Science



Hannah Sambrano
Introducing Member
Senator, College of Arts & Science



Riley Tollett
Introducing Member
Senator, Hawai'inuiakea School of Hawaiian Knowledge



Albert Yee
Introducing Member
Senator, College of Arts & Science

HB-786

Submitted on: 2/10/2023 1:30:30 PM

Testimony for HUS on 2/14/2023 9:30:00 AM

Submitted By	Organization	Testifier Position	Testify
Naomi Tachera	Individual	Support	Written Testimony Only

Comments:

Aloha,

My name is Naomi Tachera, I am an autism parent of two children who have benefited from QUEST-funded applied behavior analysis (ABA). In fact, my 12-year-old son was the very first to get QUEST-funded ABA in the state of Hawai'i. Since then, both of my sons have acquired tremendous life-changing skills that are leading to increased independence, integration in the community, and overall happiness. I have also acquired skills to better support my sons through the parent education portion of the services for continuity of care which I can bring to our extended family. I could not imagine what my sons' lives would look like had they not received quality ABA. The people working in the field of ABA are working to change the lives of the most vulnerable people in our communities, and I fully support increasing rates for this invaluable service. Their work is difficult and it deserves rates that match the level of the positive impact they are making. Mahalo for your consideration.

Mahalo,

Naomi Tachera

HB-786

Submitted on: 2/10/2023 2:46:05 PM

Testimony for HUS on 2/14/2023 9:30:00 AM

Submitted By	Organization	Testifier Position	Testify
Anastasia Keller-Collins	Individual	Support	Written Testimony Only

Comments:

Chair Mizuno, Vice Chair Terez, and members of the Committee, I support HB786 to increase funding for ABA services so that our Med-Quest families impacted by autism may have better access to providers and RBTs working with these families can have higher wages.

HB-786

Submitted on: 2/10/2023 2:47:47 PM

Testimony for HUS on 2/14/2023 9:30:00 AM

Submitted By	Organization	Testifier Position	Testify
Dallas Star	Individual	Support	Written Testimony Only

Comments:

Dear committe members,

I am in support of HB786 to increase funding behavioral health services under Med-Quest, specifically for the treatment of autism. Autism impacts 1 in 44 children and each day families in Hawaii are in need of supports and evidence-based treatment such as Applied Behavior Analysis. With improved funding of these services providers can meet the needs of many more families who are placed on waitlists during critical developmental years.

Thank you for your consideration.

HB-786

Submitted on: 2/10/2023 3:00:22 PM

Testimony for HUS on 2/14/2023 9:30:00 AM

Submitted By	Organization	Testifier Position	Testify
Tiffany Hankins	Individual	Support	Written Testimony Only

Comments:

Chair Mizuno, Vice Chair Terez, and members of the Committee, I support HB786 to increase funding for ABA services. An increase in funding will allow our Med-Quest families impacted by Autism Specitum Disorder to have increased access to ABA providers. This will directly impact the wages of Registered Behavior Technicians who work directly with clients and families. Increased wages will result in an increase of service providers which is necessary to fullfill Hawaii's need for the provision of adequate ABA services. Thank you for your time.

HB-786

Submitted on: 2/10/2023 3:17:46 PM

Testimony for HUS on 2/14/2023 9:30:00 AM

Submitted By	Organization	Testifier Position	Testify
Josliene Miller	Individual	Support	Written Testimony Only

Comments:

Chair Mizuno, Vice Chair Terez, and members of the Committee, I support HB786 to increase funding for ABA services so that our Med-Quest families impacted by autism may have better access to providers and RBTs working with these families can have higher wages.

HB-786

Submitted on: 2/10/2023 4:14:08 PM

Testimony for HUS on 2/14/2023 9:30:00 AM

Submitted By	Organization	Testifier Position	Testify
Karen Baker	Individual	Support	Written Testimony Only

Comments:

SUPPORT HB786 RELATING TO THE DEPARTMENT OF HUMAN SERVICES

Chair Mizuno, Vice Chair Terez, and members of the Committee, I am writing to encourage you to support HB786 to increase funding for ABA services. There have been recent billing increases for ABA in locations other than insurance Medicaid-funded environments that have greatly increased the competition to attract and retain qualified Registered Behavior Technicians. Many of our children who receive ABA services funded by Medicaid have not reached school age and are therefore not able to receive services in the DOE environment where billing rates are higher and therefore pay rates are high. When families receive an autism diagnosis one of their first phone calls is to providers who are funded by insurance. The younger the age of the child, the more progress is seen as a result of early ABA intervention, affording them the opportunity to learn ways to effectively communicate and have greater success when they reach school age. I highly encourage you to allocate more funding to provide treatment for Medicaid-funded clients by staff who are able to make a decent living in an area with a very high cost of living. These well-trained, dedicated people will stay in this line of work if they are able to afford the cost of food, housing and transportation. Thank you so much for your consideration in this matter.

HB-786

Submitted on: 2/10/2023 4:20:48 PM

Testimony for HUS on 2/14/2023 9:30:00 AM

Submitted By	Organization	Testifier Position	Testify
Deborah Krekel	Individual	Support	Written Testimony Only

Comments:

SUPPORT HB786 RELATING TO THE DEPARTMENT OF HUMAN SERVICES

Dear Chair Mizuno, Vice Chair Terez, and members of the Committee,

As a parent of an autistic teenager who has been fortunate to receive appropriate services for my child over the years, I support HB786 to increase funding for ABA services so that Med-Quest families impacted by autism may have better access to providers and RBTs working with these families can have higher wages and make a living here in Hawaii. There is a shortage of providers and this increase in funding would be a first step in addressing this shortage so that ALL families impacted by autism can access these needed medically necessary ABA services.

Sincerely,

Deborah Krekel

2-12-23

Aloha,

Luke would love to be at this meeting but he is working. Yup, that is correct WORKING. I am speaking of Luke Pinnow, of Luke's Law! He was eventually able to receive ABA that helped him gain and keep employment. He learned, in his own way with the help of ABA, the things that you and I take for granted. Like what do you do with a customer who says things like it's your fault, or don't say I look like Santa (at Christmas time), etc.. He is such a valuable member of his team. They love him dearly and look out for him when they can. He would not have been able to accomplish this without the help of ABA. They broke down the social things he didn't know how to do and he is independently working now! He received ABA services through our commercial insurance. Go LUKE!

However, it is like I originally testified that we need to make sure that the therapies/treatment do not equate to "snake oil."

Medicaid is not paying the going hourly wage for RBT's I have been told. So that means that the children are A. not getting services because they can't hire RBT's because of course they would rather go to a company that hires them at a better rate. B. They are getting sub-rate services. Really? The most vulnerable among us? Why would this be?

Please fix this problem for the very Keiki who deserve our help! This is where we start to keep vulnerable people off the street. People deserve to stay in Hawaii and their community. Medicaid plays this role in getting children services that they need. I have faith in your abilities to help these vulnerable children!

Luke's Mom (Geri Pinnow M.ED.)

HB-786

Submitted on: 2/12/2023 10:38:40 PM

Testimony for HUS on 2/14/2023 9:30:00 AM

Submitted By	Organization	Testifier Position	Testify
Michael Fredeluces	Individual	Support	Written Testimony Only

Comments:

Chair Mizuno, Vice Chair Terez, and members of the Committee, I support HB786 to increase funding for ABA services so that our Med-Quest families impacted by autism may have better access to providers and RBTs working with these families can have higher wages.

HB-786

Submitted on: 2/13/2023 8:29:45 AM

Testimony for HUS on 2/14/2023 9:30:00 AM

Submitted By	Organization	Testifier Position	Testify
Brian Burdt	Individual	Support	Written Testimony Only

Comments:

I support HB786 focused on noncoverd and undercovered behavioral health services under QUEST. Access to behavioral health services is vital for a healty community. Behavioral health services covered by QUEST, including applied behavior analysis (ABA) for the treatment of autism, are under-funded creating access to care issues for QUEST members. This bill will allow greater focus on access to behavioral health services and parity for these services. I urge this committee to pass this bill.

Thank you,

Brian Burdt

Maui

HB-786

Submitted on: 2/13/2023 8:36:34 AM

Testimony for HUS on 2/14/2023 9:30:00 AM

Submitted By	Organization	Testifier Position	Testify
Rachel Koenig	Individual	Support	Written Testimony Only

Comments:

Chair Mizuno, Vice Chair Terez, and members of the Committee, I support HB786 to increase funding for ABA services so that our Med-Quest families impacted by autism may have better access to providers and RBTs working with these families can have higher wages.