

JOSH GREEN, M.D.
GOVERNOR OF HAWAII
KE KIA'ĀINA O KA MOKU'ĀINA 'O HAWAII



DEPT. COMM. 100-209
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KA LUNA HO'OKELE

STATE OF HAWAII
DEPARTMENT OF HEALTH
KA 'OIHANA OLAKINO
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In reply, please refer to:
File:

January 8, 2025

The Honorable Ronald D. Kouchi,
President and Members of the Senate
Thirty-third State Legislature
State Capitol, Room 409
Honolulu, Hawaii 96813

The Honorable Nadine K. Nakamura,
Speaker
and Members of the House of
Representatives
Thirty-third State Legislature
State Capitol, Room 431
Honolulu, Hawaii 96813

Dear President Kouchi, Speaker Nakamura, and Members of the Legislature:

For your information and consideration, I am transmitting a copy of the Annual Report on Elder Programs from the Executive Office on Aging, pursuant to Section 349-5(b)(2), Hawaii Revised Statutes.

In accordance with Section 93-16, Hawaii Revised Statutes, I am also informing you that the report may be viewed electronically at:

<https://health.hawaii.gov/opppd/departments-of-health-reports-to-2025-legislature/>

Sincerely,

A handwritten signature in black ink, appearing to read "Ken Fink".

Kenneth S. Fink, M.D., M.P.H., M.G.A.
Director of Health

Enclosures

c: Legislative Reference Bureau
Hawaii State Library System (2)
Hamilton Library

**REPORT TO THE THIRTY-THIRD HAWAI'I STATE
LEGISLATURE 2025 SESSION**

Executive Office on Aging Annual Report for SFY 2024

**IN ACCORDANCE WITH THE PROVISIONS CHAPTER 349-5(b)(2), HAWAII
REVISED STATUTES, REQUIRING THE EXECUTIVE OFFICE ON AGING TO
PROVIDE AN ANNUAL REPORT ON ELDER PROGRAMS FOR THE GOVERNOR
AND THE LEGISLATURE**

**Prepared by
Department of Health
Executive Office on Aging
State of Hawai'i**

December 2024

EXECUTIVE SUMMARY

The Executive Office on Aging (EOA), an attached agency to the Department of Health respectfully submits this annual report in accordance with Section 349-5(b)(2), Hawaii Revised Statutes (HRS). The report covers the EOA's programs, services, activities, and initiatives from July 1, 2023 through June 30, 2024 (State Fiscal Year (SFY) 2024).

The Aging Network continued to adjust following the aftermath of the COVID pandemic as well as the devastation of the Maui Wildfires on August 8, 2023. We witnessed kūpuna returning to activities such as congregate dining, senior centers, and participation in outreach and education events. We continued to address food insecurity, housing, and social isolation. EOA Director served as the co-chair for the access and functional needs of the Department of Health's Department Operations Center (DOC) following the aftermath of the wildfires. EOA worked closely with Maui County Office on Aging to identify, locate, and support those displaced by the wildfires.

EOA had an opportunity to create name recognition for the Hawai'i Dementia Initiative (HDI) as well as the State Kupuna Care (KC) program. The logos created by the University of Hawai'i had deep meaning and significance. The branding for HDI will be used in the public awareness campaign. KC will be used to promote services and supports in the community.

The Aging Network workforce challenges are ongoing. EOA in coordination with many stakeholders are moving forward long-term services and supports planning to address the many challenges facing our older adults.

In SFY 2024, the EOA received \$ 12,477,808 in State funds and \$ 8,149,908 in federal funds for a total of \$ 20,627,716. EOA contracted with the designated Area Agencies on Aging (AAAs) to procure, manage, and coordinate the delivery of long-term supports and services in their respective counties. State funds supported the Aging and Disability Resource Center and the Kūpuna Care (KC) program.

In addition, EOA manages the following direct service programs: The Long-Term Care Ombudsman Program (LTCOP) and the LTCOP Volunteer Program, the Hawai'i State Health Insurance Assistance Program (SHIP), the Senior Medicare Patrol (SMP), the Community Living Program, and the Veterans-Directed Care Programs. EOA supports the Hawai'i Healthy Aging Partnership (HHAP), No Wrong Door initiative (NWD) and the Building our Largest Dementia (BOLD) Infrastructure for Alzheimer's project.



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Part I. Background Information

A. Vision, Mission, and Statutory Basis

Vision: Hawai'i is the best place to grow old

Mission: To optimize the health, safety, and independence of Hawai'i's older adults and people with disabilities. We support kūpuna and their caregivers through planning, development, advocacy, and coordination of policies, programs, and services.

The Older Americans Act (OAA) as amended, promotes the development and implementation of a comprehensive and coordinated system of long-term services and supports (LTSS) in home and community-based settings to enable older adults and persons with disabilities to live in their homes and communities.

The U.S. Administration on Community Living (ACL) of the U.S. Department of Health and Human Services (DHHS) designates state units on aging (SUAs) to lead the implementation of the OAA.

Chapter 349, Hawaii Revised Statutes (HRS) created the Executive Office on Aging (EOA) to function as the SUA in the state and carry out the responsibilities as described in the OAA.

B. Hawai'i State Plan on Aging 2023 - 2027

The State Plan on Aging (Plan) contains the goals, objectives, strategies, and outcomes that will guide EOA to implement and evaluate a comprehensive and coordinated system of LTSS for kūpuna, caregivers, persons with disabilities, and individuals with Alzheimer's Disease and Related Dementia (ADRD). A copy of the Plan is located at www.hawaiiadrc.org.

The Plan establishes the following five goals:

Goal 1: Hawai'i's older adults have opportunities to live well.

Goal 2: Hawai'i's older adults are prepared for future health threats and disasters.

Goal 3: Hawai'i's older adults in underserved groups have equitable access to services and programs.

Goal 4: Hawai'i's older adults and persons with disabilities will age in place safely.

Goal 5: Hawai'i's caregivers have a broad array of services and supports to effectively care for their loved ones.

Part II. EOA’s State and Federal Funding for SFY 2024

Table 1

In SFY 2024, the total operating budget for the EOA was \$20,627,716. Table 1 shows a breakdown of the source of funding between State (60%) and Federal (40%) monies.

SOURCE	SFY 2023	PERCENT
State	\$12,477,808	60%
Federal	\$8,149,908	40%
Total	\$20,627, 716	100%

Part III. Long-Term Services and Support

EOA coordinates the continuum of care through programs, services, and supports to older adults residing in all care settings pursuant to federal and state laws. The Older Americans Act, Title III remains the cornerstone federal legislation that prescribes Hawai’i’s comprehensive array of services and supports for older adults and caregivers.

A. Aging and Disability Resource Center

Pursuant to HRS 349-31, EOA has the authority to establish a statewide Aging and Disability Resource Center (ADRC) operated by the Area Agencies on Aging (AAA). The ADRC plays a crucial role in helping older adults and people with disabilities access LTSS. The goal is to enable individuals to maintain independence in their home and communities while preserving their dignity and quality of life.

Table 2. Outcomes of Consumer Contacts with the ADRC for SFY 2024

Services	SFY 2023	SFY 2024
Number of Contacts Received by the ADRC*	41,591	42,666
Number of Assessments Conducted by the ADRC	3,849	3,021

*Contacts include phone calls, emails, and walk-ins.

ADRC contacts increased from 41,591 in SFY23 to 42,666 in 2024. This increase can be attributed to more older adults seeking and resuming LTSS as caregivers return to their worksites after the pandemic and individuals seeking information and assistance that resulted in referrals to other agencies or programs.

The ADRC holistic assessment screens for eligibility of publicly funded services and supports. The

number of assessments decreased from 3,849 in 2023 to 3,021 in 2024. The decrease was likely due to 1) contacts made to the ADRC that resulted in information and referral assistance only; 2) capacity of case managers at ADRC to conduct assessments in a timely manner; and 3) delay in ADRC conducting an assessment due to service provider capacity.

The AAAs are working to fill vacant positions and expand service provider capacity. The EOA expects an increase in the number of in-home assessments that will be conducted in FY 2025, which will result in the increase of service authorization and utilization of Kupuna Care and Older Americans Act (OAA) Title III programs.

B. State Kūpuna Care Program



The Kūpuna Care (KC) Program provides older adults with access to affordable and quality home and community-based services. KC goals are two-fold: 1) support elders to live at home for as long as possible, avoiding premature and costly placement in a long-term care facility, and 2) provide working caregivers with services and support for their loved ones so they can maintain employment. KC consists of eight core services including adult day care, transportation, case management, attendant care, chore, homemaker, personal care, and home-delivered meals.

KC utilizes the ADRC holistic assessment to determine initial eligibility for core services. Applicants must be 60+ years of age or older, a U.S. citizen (or qualified alien), have a cognitive impairment such as Alzheimer’s Disease or a disability, not be a resident in an institution, and not be enrolled under a comparable home and community-based care program. In addition, older adults must have deficits in performing two or more Activities of Daily Living (ADL) such as eating, dressing, bathing, toileting, and transferring in/out of bed or chair; or Instrumental Activities of Daily Living (IADL) such as preparing meals, shopping, managing medication, managing money, using the telephone, doing housework, and using available transportation without assistance.

In SFY 2024, 5,520 participants were served by KC. There was an increase in older adults receiving in-home services for personal care, homemaker, chore, assisted transportation, and transportation as compared to SFY 2023. The increase in these services can be attributed to the ending of the COVID pandemic with more older adults willing to receive in-home services and participate in their community and family members returning to their worksites.

Vacancies in the AAAs along with limited provider capacity has resulted in a decrease in the number of assessments conducted and case management services provided. By addressing the workforce shortage and implementing effective strategies EOA remains hopeful that older adults and individuals with disabilities will receive the services they need.

The EOA is coordinating efforts to build and strengthen the direct care workforce through a federal grant, “Expanding the Public Health Workforce within the Aging Network for States”, that was awarded by the Department of Health and Human Services, Administration on Community Living. The EOA contracted with the University of Hawaii, Center on Aging, to develop: 1) A recruitment and retention workplan with policy recommendations, action steps, and assessment of partners, resources needed, and sustainability; 2) An education plan that identifies strategies and partners to teach about aging and gerontology; and 3) A guideline of standards and core competencies for direct care workers to ensure direct care work initiatives align with healthcare clinician initiatives.

Table 3. Kūpuna Care Service Utilization SFY 2023 and SFY 2024

KC Services*	Persons Served SFY 2023	Service Units SFY 2023	Persons Served SFY 2024	Service Units SFY 2024
Personal Care	442	36,776	476	36,061
Homemaker	496	22,578	529	25,606
Chore	37	582	42	473
Home Delivered Meals	2,302	417,679	2,124	330,534
Adult Day Care	329	*242,618	315	*241,944
Case Management	3,456	15,008	2,974	13,771
Assisted Transportation	165	6,070	192	6,022
Transportation	2,137	97,524	2,366	90,480

*In Dec. 2023 ACL changed reporting of service units from days to hours

C. Title III and Title VII of the Older Americans Act Services

In addition to Kūpuna Care, older adults and caregivers have access to other services and supports through the Older Americans Act (OAA), Title III Services. OAA programs and services represent a significant federal investment in developing a comprehensive, coordinated, and cost-effective system of home and community-based services (HCBS) that enable older adults to have independent and healthy lives in their homes and communities.

- 1) **Title III-B: Supportive Services** provides transportation, information and assistance, outreach, and legal assistance.

Legal Assistance Services secure the rights, benefits, and entitlements for individuals. Our provider, Legal Assistance Services of Hawai'i (LASH) helped older adults statewide with housing, Social Security, advance planning directives, estate planning, and family law

matters such as divorce and guardianship. The most common legal concerns addressed include advance planning for health care directives and powers of attorney, estate planning for wills and transfer of death deeds, and housing for landlord-tenant matters, foreclosures, and reverse mortgages.

In SFY 2024, 890 older adults received 7,025 hours of legal assistance statewide. While LASH provided significant legal assistance this year there was a decrease in services from the previous year. The decrease can be attributed to staff shortages and reduced funding.

LASH also actively engaged in community outreach and training to increase awareness about legal issues and available resources. LASH conducted 124 outreach and training activities statewide. Training topics included advance planning, consumer issues, Social Security, family law, vital documents, and housing.

The EOA Legal Services Developer continues to coordinate elder abuse awareness and prevention efforts. EOA partnered with the University of Hawaii's Elder Law Program to develop an elder law booklet that provided information on elder abuse and laws to protect older adults from physical abuse, neglect, and financial exploitation. Additionally, in May 2024, EOA collaborated with the National Center on Elder Abuse (NCEA) to provide elder abuse training for law enforcement, known as the Elder Abuse Guide for Law Enforcement (EAGLE) on Maui and Kaua'i. The EAGLE trainings help officers quickly identify, intervene, and resolve elder abuse situations. The trainings were attended by the Maui and Kauai police department and Prosecutor's Office, the Kaua'i Fire Department, and the AAAs.

- 2) ***Title III-C: Nutrition Services*** provides congregate and home-delivered meals and related nutrition services. Services are targeted to those in greatest social and economic need with attention to low-income individuals, minority individuals, those in rural communities, those with limited English proficiency and those at risk of institutional care.
- 3) ***Title III-D: Disease Prevention and Health Promotion Services*** promotes activities that support healthy lifestyles and promote healthy behaviors through the implementation of evidenced based interventions. Health education reduces the need for more costly medical interventions.
- 4) ***Title III-E: National Family Caregiver Support Program (NFCSP)*** offers a range of services to support family caregivers. Services to caregivers include the following: information to caregivers about available services and supports, assistance to accessing services, individual counseling, organization of support groups, and caregiver training, respite care, and supplemental services.

D. Service Utilization Statewide

This section covers the utilization of federally funded services in SFY 2024. Table 4 shows the number of unduplicated persons served, service units delivered, and the unit measure.

Table 4. Utilization of Services in SFY 2024

SERVICES*	PERSONS SERVED (Unduplicated)	UNITS OF SERVICE	MEASURE
Legal Services	890	7,025	Hours
Caregiver Services			
Respite Care	221	64,903	Hours
Counseling/Support Groups/Training	592	5,573	Hours

Part IV: Safety Net Programs and Special Initiatives

EOA offered several programs and special initiatives that enhanced the health, independence, safety, and well-being of older adults in Hawai'i, and improved their access to services. This section describes those programs and special initiatives and their performance in SFY 2024.

A. Other Federal Grant Programs

- 1) ***Older Americans Act, Title VII: Long-Term Care Ombudsman Program (LTCOP)*** serves as an advocate for residents of nursing homes (NF), adult residential care homes (ARCH), expanded ARCHs (E-ARCH), community care foster family homes (CCFFH), and assisted living facilities (ALF). The number of facilities statewide is approximately 1,790 with 12,942 beds.

In SFY24 the LTCOP had 6 staff: the State LTCO, 2 O'ahu LTCO, 1 Maui LTCO (hired in March 2024), 1 Hilo LTCO (hired in May 2024), and the LTCO Volunteer Coordinator. The LTCOP also contracted for 3 part-time Ombudsman in Kaua'i, Maui, and Hilo. LTCO staff and volunteers conducted 987 facility visits, met with 7,791 residents statewide, provided 2,656 consultations to facilities and providers, and offered information and assistance to 827 individuals and families.

The LTCO investigate complaints from residents and work with the staff and the resident to resolve their concerns. The top complaints received were related to resident rights, timely response to care requests, staff shortages, and resident discharge or eviction.

In SFY 2024 Long-Term Care Ombudsman activities included:

- Visiting all LTC residents on Maui after the wildfires to offer additional support
- Meeting with AARP and other Kupuna Advocacy groups to discuss and garner support for the new Center on Medicare Services rule on minimum staffing ratio for nursing home facilities
- Meeting with the Office of Elections to brainstorm how more LTC residents can participate in the electoral process
- Meeting with the new Veteran’s Affairs Coordinator for Community Residential Care Program to brainstorm how to assist homeless veterans with LTC placement
- Meeting with Resident Councils at 11 assisted living facilities and
- Visiting legislators to inform them about the LTCOP and submitting testimony in support of bills such as the Personal Allowance bill that would increase the personal allowance of LTC residents from \$50 to \$75.

2) **Long-Term Care Ombudsman (LTCO) Volunteer Program** trains and certifies volunteers to assist the State Long-Term Care Ombudsman to identify, investigate, and resolve quality of life and quality of care issues to honor and protect residents’ rights. In SFY 2024, 16 volunteers were certified as Volunteer Ombudsman and an additional 15 volunteers were trained to provide outreach and share information and resources at 39 community events. Volunteers provided 1,593 service hours valued at \$53,352 (based on 2024 national volunteer hourly rate). COVID-19 continued to impact facility visits with intermittent facility closures due to active COVID cases. Along with an increase of extended travel by volunteers, the number of in-person visits decreased. Ombudsmen Volunteers conducted 333 in-person visits, during which they investigated and resolved 83 of 101 complaint cases received. Overall, volunteers consulted with 6,610 residents, family members, and facility staff by phone, email, or in person.

Table 5. Accomplishments for LTCO Volunteer Program

Activity	SFY 2023	SFY 2024
Volunteers	30	31
Volunteer Service Hours	1,823	1,593
Facility Visits	428	333
Cases Opened/Closed	88/60	101/83
Resident/Family Consultations	4,488	6,610
Field Training/Technical Assistance	469	538
Community Outreach Events	36	39

The Hawai’i Long-Term Care Ombudsman Program website, <https://www.hi-ltc-ombudsman.org/>, features information about the LTCOP program and volunteer

opportunities, current news, and links to the Office of Health Care Assurance, Adult Protective Services, legal services, Medicaid, Veterans Affairs, and other resources. The website has generated 16 anonymous complaints and the recruitment of 4 new volunteers.

- 3) **Hawai'i State Health Insurance Assistance Program (SHIP)** is a volunteer-based program funded by the Administration for Community Living that educates and empowers Medicare beneficiaries to make cost-effective, informed health care decisions based on their own needs and ability to pay. In 2024, 91 trained volunteers helped 12,644 kūpuna, caregivers, and soon-to-be retirees statewide with accurate, unbiased, and timely information, resources, and referrals.

Hawai'i SHIP counselors are certified by the Center for Medicare and Medicaid Services (CMS) and are not affiliated with any insurance provider. Services include free, confidential counseling, plan comparisons by county, and eligibility/enrollment in low-income subsidy programs.

Table 6. Hawai'i SHIP Activities for SFY 2024

Activity	SFY 2023	SFY 2024
Volunteers	50	91
Volunteer Service Hours	3,927	3,683
Persons Reached Through Outreach	9,667	12,644
Outreach Activities	97	127
Application Assistance for Medicaid/MSP or Extra Help	71	166

In SFY 2024 Hawai'i SHIP focused on increasing access to services for underserved communities. These communities include those with limited income and/or English proficiency, live in rural isolated areas, have a disability, or are of Native Hawaiian descent. These efforts significantly increased the number of volunteers, persons reached, outreach activities, and application assistance provided. Nearly 100 more Medicaid/MSP or Extra Help applications, which assist low-income individuals offset their medical and prescription drug costs, were completed and submitted in 2024 as compared to 2023. Although there was a small decrease in service hours, Hawai'i SHIP volunteers still contributed 3,683 service hours valued at \$123,344 to the state.

After the pandemic and Maui wildfires, the Medicaid redetermination process was extended through December 2024. As the number of terminations grew, Hawai'i SHIP received 21% more inquiries through the helpline and website. With more volunteers and operational efficiencies, Hawai'i SHIP was able to maintain a 75% response rate to requests

for eligibility and enrollment help with Medicare Parts A/B/C/D, Medicaid, Medicare Savings Programs, Medigap, Extra Help, and Marketplace, for individuals who are uninsured.

- 4) ***Hawai'i Medicare Improvements for Patients and Providers Act (MIPPA)*** is a federally funded program that works collaboratively with SHIP to help low-income, limited English speaking, and rurally isolated Medicare beneficiaries. The program focuses on expanding outreach to Medicare beneficiaries likely to be eligible for Medicare Savings Programs (MSP) or Extra Help (EH). Initiatives target older adults, who are Native Hawaiian, under 65 with a disability, or are lesbian, gay, bisexual, transgender, and queer (LGBTQ+). Additionally, outreach was provided to individuals with limited digital literacy/connectivity and older adult workers.

In alignment with SHIP, MIPAA focused on increasing access to services. These efforts included partnering with the Department of Health Harm Reduction Branch to participate in the Pride parade and festival; distributing information to attendees at the Deaf Safari Day at the Zoo; and enhancing the website and printed materials for accessibility with larger fonts, plain language, effective graphics and translating printed materials to various languages.

- 5) ***Senior Medicare Patrol (SMP) Hawai'i*** is a federal volunteer-based program that educates older adults to prevent, detect, and report healthcare fraud, errors, and abuse. SMP recruits and trains volunteers statewide to conduct presentations, provide 1:1 counseling, and refer suspected cases of healthcare and non-healthcare fraud to the proper authorities. Health-related scams include Medicare identity theft, unnecessary medical equipment prescriptions, fake genetic testing, fake COVID testing, non-emergent medical transportation, and more. The Medicare program loses an estimated \$60 billion every year to false claims submitted by medical professionals.

SMP also helped kūpuna who fell victim to “non-health” related scams such as computer ransomware, imposter, unethical caregivers, charity, lottery, romancers, or gift card schemes. SMP refers to local and federal agencies who specialize in these cases to investigate and recover monies.

Table 8. Accomplishments for SMP

Activity	SFY 2023	SFY 2024
Active Volunteers	58	75
Persons Counseled	503	330
Persons Reached through Outreach	11,834	10,350
Volunteer Service Hours	6,568	7,767
Value of Volunteer Hours (2024 national volunteer hourly rate)		\$260,104

In October 2023, SMP launched the “Swat Those Scams” media campaign that resulted in an increase in the number of volunteers statewide from 58 volunteers in 2023 to 75 volunteers in 2024. Due to limited funding and resources SMP streamlined its outreach and awareness efforts. Consequently, there was a decrease in the number of persons counseled and persons reached through outreach. SMP reached 10,350 residents and counseled 330 individuals in 2024. To advance diversity, equity, and inclusion SMP enhanced its promotional digital and printed materials including the website, brochures, newsletter, signage, postcard mailers, and print ads for improved accessibility with larger fonts, plain language, effective graphics, and various languages translations.

B. Special Initiatives

- 1) ***Hawai’i Healthy Aging Partnership*** (HHAP) improves the overall health and wellbeing of the state’s aging population by reducing health disparities. Approximately, 84.9% of people in Hawai’i, 60 and older, live with one or more chronic conditions. HHAP offers two evidenced-based health promotion programs: Enhance®Fitness and Better Choices Better Health—*Ke Ola Pono*.

Enhance®Fitness (EF) is a 1-hour group exercise program offered three times a week over a 16-week cycle. Routine exercises are designed to improve strength, balance, endurance, and flexibility and are tailored for both active and frail older adults. Program results demonstrate improved physical fitness, reduced fall risk, and increased overall well-being. To accommodate various needs, EF offered in-person and remote classes as well as modified program versions.

Better Choices Better Health (BCBH) –Ke Ola Pono is a comprehensive 2 ½ hour workshop offered weekly for 6 weeks. BCBH facilitators educate and train older adults to manage chronic health conditions, such as diabetes, cancer, and other chronic diseases. Workshop topics include self-management strategies, healthy lifestyle choices, and effective communication with healthcare providers. BCBH is offered in various formats, including in-person, phone, and remote sessions.

Table 9. Number of Participants Served for HHAP

Activity	SFY 2024
Enhance®Fitness Program	348 Participants
BCBH Phone & Online Workshop	38 Participants

To increase participation, HHAP advanced several initiatives:

- Maui County Office on Aging and Kaua'i Agency on Elder Affairs: Continue to offer in-person and remote EF classes and are expanding the program to include Bingocize and Matter of Balance.
- Honolulu YMCA: Continues to partner with Pearl City Community Church to offer two EF classes, with plans to add three more sites.
- HAP EF Leadership Meeting: Restructuring meetings to streamline efforts by integrating and coordinating with fall prevention initiatives.
- BCBH Program Expansion: Training two additional Master Trainers to increase capacity and offer the program to more participants.

By implementing these strategies, HHAP seeks to enhance the quality of life for older adults in Hawai'i through these evidence-based programs that promote physical and mental well-being. Additionally, the Legislature provided critical funding to HAP for SFY2025. This funding will enable HHAP to sustain its operations and pursue additional funding to further expand its programs and impact on the community.

- 2) **Community Living Program (CLP)** embodies participant-direction and has the same eligibility requirements as the Kūpuna Care Program. The CLP differs from the Kūpuna Care in that the older adults are their own case managers and self-direct their own care. CLP participants hire their own care workers, who may be friends or family members, to provide care and are responsible for explaining the job duties to address their needs, adhere to a monthly budget, and complete required paperwork on a timely basis.

At the end of SFY 2024, a total of 19 qualified individuals were enrolled in the CLP statewide, as compared to 23 participants enrolled in SFY 2023. The EOA planned to increase enrollment in SFY 2024 by accepting referrals from the City and County of Honolulu. However, due to limited provider capacity this was not possible. Recently, an existing provider expanded their staffing and is now able to accept CLP referrals. Additionally, the EOA is in the process of contracting with a new provider.

- 3) **Veteran-Directed Choice (VDC) Program** is a participant-directed program administered by the Veteran's Administration (VA) for eligible veterans of all ages. Veterans must have functional limitations that would make them eligible for nursing home placement. VDC empowers participants to take control of their own care by selecting their preferred providers and services.

In SFY2024, the EOA received 46 referrals from the VA for enrollment into the program. However, 23 of these referrals were deemed ineligible by the VA for various reasons

including relocation, long-term care facility placement, and the unfortunate death of an applicant. At the end of SFY 2024, 105 veterans were enrolled in the VDC program, a decrease from the previous year's enrollment of 113. The decrease in enrollment can be attributed to death, relocation of veteran, and voluntary disenrollment.

EOA anticipates receiving 40-50 new referrals from the VA in SFY 2025 and aims to enroll 25-30 veterans in the VDC program.

- 4) **No Wrong Door (NWD) Initiative** was developed to streamline the ADRC referral process for individuals who need LTSS. The “No Wrong Door” system ensures that no matter what “door” (agency) the individual enters, they will receive an assessment and a warm hand off to the appropriate agency/agencies to address their needs.

We continue to engage the “doors” as needed. Due to staff vacancies, EOA has been less focused on the No Wrong Door efforts but will expand these efforts once vacancies are filled.



- 5) **Hawai'i Dementia Initiative (HDI)** strives to address Alzheimer's Disease and Related Dementias (ADRD) on a state level by fostering collaboration, leveraging data, and implementing strategies that improve the lives of individuals with dementia and their families. Efforts of the initiative are focused on implementing the Hawai'i 2035: State Strategic Plan on ADRD through community engagement, collaboration, and education. Convened by the EOA, the HDI coalition consists of 150 community members and stakeholders from across the state with diverse backgrounds and perspectives and bring both personal and professional experience. The coalition is organized into Action Teams through 7 targeted initiatives: 1) Dementia Caregiving, 2) Workforce Development, 3) Early Detection of Dementia, 4) Brain Health and Risk Reduction, 5) Public Awareness and Education, 6) Community Clinical Linkages, and 7) Data Action. In 2024 the Action Teams held 25 meetings to discuss strategies, share best practices, and coordinate efforts. An implementation plan was developed to track and guide the progress of the State Strategic Plan on ADRD. This living document will be continuously updated to reflect the coalition's efforts and evolving strategies and priorities.

The Building Our Largest Dementia Infrastructure (BOLD) for Alzheimer's Disease grant from the Centers for Disease Control and Prevention (CDC) is funding the coordination efforts

and implementation activities of the HDI. In 2024, at least 3,171 individuals participated in educational programs and community engagement opportunities and 473 professionals received training on dementia. EOA partnered with several organizations to provide ADRD educational programs aimed at engaging rural, underserved, low-income communities across the islands of Hawai'i, Maui, Lana'i, Moloka'i, Kaua'i, and O'ahu. These partners included Alzheimer's Association Hawai'i Chapter, Hawai'i Public Health Institute, Kula No Na Po'e Hawai'i, and the University of Hawai'i Center on Aging. Partners brought together healthcare providers, community-based organizations, and other stakeholders and conducted talk story listening sessions to hear the communities' concerns about dementia and discuss strategies to strengthen community resources. Information shared in these sessions will inform future implementation activities.

In addition to the implementation activities of the HDI coalition, the EOA received \$1 million from the Hawai'i State Legislature last year for a public awareness campaign on ADRD. EOA contracted with Anthology Media Group to conduct market research and develop a public awareness campaign, projected to launch in 2025. EOA also contracted with Brave New Media to develop and manage a new dementia website that will become the landing page for the ADRD public awareness campaign and provide dementia resources.