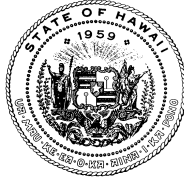


JOSH GREEN, M.D.  
GOVERNOR OF HAWAII  
KE KIA'ĀINA O KA MOKU'ĀINA 'O HAWAII'



KENNETH S. FINK, M.D., M.G.A, M.P.H  
DIRECTOR OF HEALTH  
KA LUNA HO'ŌKELE

STATE OF HAWAII  
DEPARTMENT OF HEALTH  
KA 'ŌIHANA OLAKINO  
P. O. Box 3378  
Honolulu, HI 96801-3378  
doh.testimony@doh.hawaii.gov

**Testimony in SUPPORT of HB700 HD1 SD1  
RELATING TO COGNITIVE ASSESSMENTS.**

SENATOR DONOVAN DELA CRUZ, CHAIR  
SENATE COMMITTEE ON WAYS AND MEANS

SENATOR JARRETT KEOHOKALOLE, CHAIR  
SENATE COMMITTEE ON COMMERCE AND CONSUMER PROTECTION

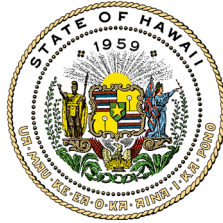
Hearing Date/Time: April 2, 2025; 10:00 AM

Room Number: 211

- 1 **Fiscal Implications:** Appropriates general funds to the Executive Office on Aging (EOA), an
- 2 attached agency to the Department of Health (DOH).
- 3 **Department Testimony:** DOH supports HB700 HD1 SD1 that establishes a pilot program within
- 4 EOA to collaborate with a health care system and participating providers to offer and conduct
- 5 cognitive assessments to Medicare Part B beneficiaries and collect patient data, and defines
- 6 “qualified patient” as a Medicare beneficiary at heightened risk for cognitive impairments,
- 7 regardless of age.
- 8 Thank you for the opportunity to testify on this measure.

**JOSH GREEN, M.D.**  
GOVERNOR OF HAWAI'I  
KE KIA'ĀINA O KA MOKU'ĀINA 'O HAWAI'I

**KENNETH FINK, MD, MGA, MPH**  
DIRECTOR OF HEALTH  
KA LUNA HO'OKELE



**STATE OF HAWAI'I**  
**DEPARTMENT OF HEALTH**  
**KA 'OIHANA OLAKINO**  
**EXECUTIVE OFFICE ON AGING**  
NO. 1 CAPITOL DISTRICT  
250 SOUTH HOTEL STREET, SUITE 406  
HONOLULU, HAWAI'I 96813-2831

**CAROLINE CADIRAO**  
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Executive Office on Aging

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**Testimony COMMENTING on HB700 HD1, SD1**  
**RELATING TO COGNITIVE ASSESSMENTS**

COMMITTEE ON WAYS AND MEANS  
SENATOR DONOVAN M. DELA CRUZ, CHAIR  
SENATOR SHARON Y. MORIWAKI, VICE CHAIR

COMMITTEE ON COMMERCE AND CONSUMER PROTECTION  
SENATOR JARRETT KEOHOKALOLE, CHAIR  
SENATOR CAROL FUKUNAGA, VICE CHAIR

Testimony of Caroline Cadirao  
Director, Executive Office on Aging  
Attached Agency to the Department of Health

Hearing: Wednesday, April 2, 2025 at 10:00 A.M. in Conference Room 211

**EOA Position:** The Executive Office on Aging (EOA), an attached agency to the Department of Health (DOH) appreciates the intent of HB700 HD1, SD1 and provides comments.

**Fiscal Implications:** Appropriates general funds for fiscal year 2025-2026 and the same sum for fiscal year 2026-2027 for costs associated with data and reporting.

**Purpose and Justification:** To improve the detection and treatment of Alzheimer's disease and related dementias in Hawai'i, this measure establishes a Cognitive Assessments for Medicare Beneficiaries Pilot Program within the Executive Office on Aging. According to the Behavioral Risk Factor Surveillance System (BRFSS), 1 in 10 individuals 65 years or older in Hawai'i are

experiencing cognitive decline but 70% of them have not discussed it with a healthcare professional. According to the World Alzheimer's Report, about 75% of all dementia cases go undiagnosed. Early detection provides individuals and their families treatment options that could slow the decline. EOA fully supports early detection of dementia using a validated tool.

EOA is actively working toward a solution by launching a public awareness campaign for Alzheimer's disease and related dementias. Generously funded by the State Legislature (2023 Act 257) the campaign has begun to educate caregivers, older adults, and individuals with disabilities about dementia and to seek early detection. After ongoing discussions with partners on this bill, we respectfully request the attached amendments which will improve the early detection of dementia in our State.

**Recommendations:** EOA provides the following amendments for your consideration:

- 1) Amend the name of “cognitive assessments for medicare beneficiaries pilot program” to “dementia data pilot project”,
- 2) Support the use of a validated tool for the cognitive assessments to identify cognitive impairment early,
- 3) Amend the following requirements to optional:
  - a. EOA “may” collaborate with a health care system
  - b. EOA “may” secure the transmission and storage of patient data, and
  - c. Healthcare Providers “may” report patient and cognitive assessment data.

EOA has been in discussion with the State Health Development Agency to collect the data from existing data collection systems.

- 4) Add definition for Medicare Part C to Section 2 (l),

- 5) Insert a sunset date of June 30, 2027 for the data pilot project to determine its viability,
- 6) EOA requests \$150,000 for fiscal year 2025-2026 and the same sum as necessary for fiscal year 2026-2027 for infrastructure development, implementation, and operational costs of the data pilot project, and
- 7) Incorporate the attached edits to HB700 HD1, SD2 for clarity and flexibility to develop the pilot project.

EOA supports this measure as amended, as long as it does not reduce or replace priorities with the administrative budget request.

Thank you for the opportunity to testify.

**EOA Edits**

**A BILL FOR AN ACT**

RELATING TO COGNITIVE ASSESSMENTS.

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

1       SECTION 1. The legislature finds that families caring for  
2 individuals with Alzheimer's disease and related dementias face  
3 many challenges when attempting to balance their professional  
4 lives with the provision of care to their loved ones.  
5 Caregivers often must choose between continuing their careers or  
6 becoming full-time caregivers. According to the Alzheimer's  
7 Association, Hawaii has approximately sixty thousand family  
8 caregivers providing ninety-one million hours of unpaid care  
9 valued at \$1,900,000,000.

10       The legislature further finds that 6.7 per cent of  
11 individuals aged forty-five or older experience subjective  
12 cognitive decline. After age sixty-five, the risk of  
13 Alzheimer's doubles every five years, with individuals on  
14 medicare considered at higher risk of having or developing  
15 dementia. According to the federal Centers for Disease Control  
16 and Prevention, by 2060, nearly fourteen million adults in the  
17 United States are projected to have Alzheimer's disease.



700  
H.D. 1  
**S.D. 1**

Nationwide, the costs to care for individuals living with Alzheimer's and related dementias is significant, with the total cost of care for Alzheimer's projected to increase to more than \$1,100,000,000,000 by 2050. However, a 2018 report from the Alzheimer's Association indicated that early diagnosis and treatment of dementia could save the nation as much as \$7,900,000,000,000 in medical and care costs over thirty years.

The treatment and prevention of Alzheimer's disease and related dementias is of pressing concern to the State. Per the department of business, economic development, and tourism, nearly one in five residents in Hawaii is sixty-five years of age or older, with this age group rapidly expanding in size. Annually, Alzheimer's and related dementias cost the State's medicaid program \$285,000,000. In the *Hawaii 2025: State Plan on Alzheimer's Disease and Related Dementias: 2020 Update*, the executive office on aging found that medicare costs for the Alzheimer's disease and related dementias population are nearly \$10,000 higher in comparison to the non-Alzheimer's disease and related dementias population. The legislature also finds that early detection of Alzheimer's disease and related dementias can reduce costs, manage comorbid conditions, delay disease



1 progression, and allow better care planning. However, data from  
2 the federal Centers for Disease Control and Prevention's  
3 Behavioral Risk Factor Surveillance System found that over two-  
4 thirds of people with memory problems in Hawaii have not talked  
5 to their health care provider. Cost may be one factor behind  
6 why individuals have not discussed their cognitive health with  
7 their health care providers. According to the *Individuals'*  
8 *Interest in Cognitive Screening, Dementia Diagnosis, and*  
9 *Treatment: New Estimates from a Population-Representative Sample*  
10 report published by the RAND Corporation on December 3, 2024,  
11 eighty per cent of study respondents said they would undergo a  
12 cognitive assessment if doing so were free. The legislature  
13 notes that medicare beneficiaries who have opted to take  
14 medicare part B coverage already receive an annual cognitive  
15 assessment as part of their supplemental coverage. This  
16 assessment can be performed by any practitioner eligible to  
17 report evaluation and management services under medicare,  
18 including physicians, physician assistants, nurse practitioners,  
19 and clinical nurse specialists. However, this assessment  
20 protocol is severely underutilized. The legislature also finds  
21 that broadening the use of cognitive assessments is an important





1 strategy to identify patients who may benefit from current and  
2 future treatments for Alzheimer's and related dementias, as  
3 assessments provide individuals with information that may  
4 facilitate actions to prepare for the future.

5 The legislature additionally finds that offering cognitive  
6 assessments for medicare beneficiaries aged sixty-five or older  
7 is a necessary component of the State's strategic plan to  
8 address Alzheimer's disease and related dementias. The  
9 legislature believes that simultaneously increasing access to  
10 cognitive assessments that are already part of many  
11 beneficiaries' supplemental medicare coverage in conjunction  
12 with the public health awareness campaign on Alzheimer's disease  
13 and related dementias conducted by the executive office on aging  
14 as part of the State's strategic plan will significantly improve  
15 the health outcomes for Hawaii's older residents.

16 Accordingly, the purpose of this Act is to improve the  
17 detection and treatment of Alzheimer's disease and related  
18 dementias in Hawaii by establishing a dementia data pilot ~~program~~  
project within the  
19 executive office on aging to collect and analyze cognitive assesement  
data across the state and recommend the use of a valid cognitive assessment  
tool ~~offer cognitive assessments for~~  
20 ~~medicare beneficiaries at heightened risk for cognitive~~



1 ~~impairments~~, regardless of age, during annual wellness visits  
2 covered by medicare part B and part C.

3 SECTION 2. (a) There is established a dementia data pilot  
4 ~~program~~ project ~~cognitive~~

5 ~~assessments~~ for medicare beneficiaries ~~pilot program~~ within the  
6 executive office on aging to collect and analyze cognitive assesement  
7 data across the state for ~~provide~~ medicare part B and part C patients  
8 at

9 ~~heightened risk for cognitive impairments~~, regardless of age,  
10 ~~with a cognitive assessment~~ for the early detection of dementia.

11 (b) The executive office on aging ~~shall~~ may collaborate with  
12 a  
13 health care system to identify health care providers to  
14 participate in the pilot program.

15 (c) All health care providers participating in the pilot  
16 program shall offer and conduct a cognitive assessment when  
17 providing an annual wellness visit to a qualified patient.

18 (d) The cognitive assessment shall be conducted using  
19 standardized, validated assessment tools or diagnostic tests  
20 approved by the United States Food and Drug Administration and  
21 covered by medicare.

22 (e) A qualified patient may decline the cognitive  
23 assessment after being informed of its purpose, benefits, and  
24 any risks. The health care provider shall document the  
25 qualified patient's decision to decline the cognitive assessment

2025-2129 HB700 SD1 SMA.docx



1 and include it as a part of the qualified patient's medical  
2 record.

3 (f) The health care provider ~~shall~~ may provide a report to  
4 the  
executive office on aging no later than October 1 of each year.

5 The report may include but not be limited to:

- 6 (1) Whether the qualified patient declined the cognitive  
7 assessment;
- 8 (2) Whether the qualified patient is exempt from the  
9 cognitive assessment and the reason for the exemption;
- 10 (3) The date of the cognitive assessment;
- 11 (4) The address where the cognitive assessment was  
12 conducted and whether the cognitive assessment was  
13 conducted in person or via telehealth;
- 14 (5) The qualified patient's age, zip code, race, and  
15 gender;
- 16 (6) The type of cognitive assessment administered;
- 17 (7) The result of the cognitive assessment; and
- 18 (8) Any follow-up actions taken, including subsequent  
19 referrals and further diagnosis and treatment.



1 (g) The executive office on aging ~~shall~~ may secure the  
2 transmission and storage of the information reported pursuant to  
3 subsection (f) for the purposes of the pilot ~~program~~ project.

4 (h) The executive office on aging shall provide a report  
5 summarizing the information collected pursuant to subsection (f)  
6 to the legislature no later than twenty days prior to the  
7 convening of the regular sessions of 2027 and The report  
8 shall be made available to the public on the department of  
9 health's website.

(i) Any reports submitted to the legislature and subject  
11 to publication under this Act shall be limited to aggregated  
12 data and shall not directly contain or indirectly result in the  
13 disclosure of personally identifiable information.

14 (j) The identity, or any group of facts or any system of  
15 records that may lead to the identity, of any qualified patient  
16 who has received a cognitive assessment pursuant to this Act  
17 shall be confidential and shall not be revealed in any report,  
18 release, or publication.

19 (k) ~~The pilot program shall not include:~~

20 ~~(1) Health care providers who do not accept medicare~~  
21 ~~insurance.~~



4           (2) ~~Qualified patients who have already received a~~  
2 ~~diagnosis of dementia or mild cognitive impairment;~~  
3 ~~and~~

4 ~~(3) Qualified patients who are unable to undergo a~~  
5 ~~cognitive assessment due to a physical or mental~~  
6 ~~impairment or disability.~~

7           (1) As used in this Act:

8           "Annual wellness visit" means a preventive service visit  
9 covered by medicare part **B** between a medicare beneficiary and a  
10 primary care provider that occurs once every twelve months and  
11 includes developing or updating a personalized prevention plan  
12 and performing a health risk assessment, but does not include a  
13 physical exam.

14           "Health care provider" means a physician or surgeon  
15 licensed under chapter 453, Hawaii Revised Statutes, or an  
16 advanced practice registered nurse licensed under chapter 457,  
17 Hawaii Revised Statutes.

18           "Medicare" means the program established under Title XVIII  
19 of the Social Security Act, as amended (42 U.S.C. 1395 et seq.).

1 "Medicare part B" means the voluntary supplementary medical  
2 insurance benefits program provided under Title XVIII of the  
3 Social Security Act (42 U.S.C. 1395j-1395w-6).

4 "Qualified patient" means an individual medicare  
5 beneficiary at heightened risk for cognitive impairments,  
6 regardless of age, with coverage under medicare part B.

7 "Qualified patient" includes individuals with developmental  
8 disabilities who are predisposed to early cognitive decline.

9 (m) The dementia data ~~cognitive assessments for medicare~~  
~~beneficiaries~~

10 pilot program shall be dissolved on June 30, 2027

11 SECTION 3. There is appropriated out of the general  
12 revenues of the State of Hawaii the sum of \$150,000 or so  
13 much thereof as may be necessary for fiscal year 2025-2026 and  
14 the same sum or so much thereof as may be necessary for fiscal  
15 year 2026-2027 for any costs associated with the data management  
16 and reporting requirements for the secure data transmission  
17 required by this Act.

18 The sums appropriated shall be expended by the executive  
19 office on aging for the purposes of this Act.

20 SECTION 4. This Act shall take effect on July 1, ~~2026~~2025.



**Report Title:**

Cognitive Assessments; Medicare Beneficiaries; Annual Wellness Visits; Alzheimer's Disease and Related Dementias; Pilot Program; Reporting Requirements; Executive Office on Aging; Reports; Appropriations

**Description:**

Establishes a Cognitive Assessments for Medicare Beneficiaries Pilot Program within the Executive Office on Aging. Requires the Executive Office on Aging to collaborate with a health care system for the pilot program; health care providers participating in the pilot program to submit certain information to the Executive Office on Aging; and the Executive Office on Aging to report de-identified aggregated data to the Legislature. Appropriates funds. Effective 7/1/2026. (SD1)

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





**STATE OF HAWAII  
KA MOKU'ĀINA O HAWAII  
STATE COUNCIL ON DEVELOPMENTAL DISABILITIES  
'A'UNIKE MOKU'ĀPUNI NO KA NĀ KĀWAI KULA**

PRINCESS VICTORIA KAMĀMALU BUILDING  
1010 RICHARDS STREET, Room 122  
HONOLULU, HAWAII 96813  
TELEPHONE: (808) 586-8100 FAX: (808) 586-7543

April 2, 2025

The Honorable Senator Donovan M. Dela Cruz, Chair  
Senate Committee on Ways and Means  
The Thirty-Third Legislature  
State Capitol  
State of Hawai'i  
Honolulu, Hawai'i 96813

Dear Senator Dela Cruz, and Committee Members:

**SUBJECT: HB700 HD1 SD1 Relating to Cognitive Assessments**

The Hawaii State Council on Developmental Disabilities **SUPPORTS HB700 HD1 SD1**, establishes a Cognitive Assessments for Medicare Beneficiaries Pilot Program within the Executive Office on Aging. Requires the Executive Office on Aging to collaborate with a health care system for the pilot program; health care providers participating in the pilot program to submit certain information to the Executive Office on Aging; and the Executive Office on Aging to report de-identified aggregated data to the Legislature. Appropriates funds.

While HB700 HD1 SD1 takes a critical step toward improving early detection and treatment of Alzheimer's disease and related dementias by mandating cognitive assessments for Medicare beneficiaries, individuals with developmental disabilities face a heightened risk of early-onset cognitive decline. For instance, adults with Down syndrome are significantly more likely to develop Alzheimer's disease, often presenting symptoms in their 40s or 50s.

Early cognitive assessments can facilitate timely diagnoses, enabling individuals and families to plan for necessary support services, manage coexisting conditions, and enhance overall quality of life. For individuals with developmental disabilities, early detection is not just about medical treatment—it ensures continuity of care, access to appropriate educational and vocational support, and comprehensive life planning. Proactive screening also aligns with national initiatives on early Alzheimer's detection and supports state goals for improving healthcare equity and preventive care.

Therefore, we support and defer to the Alzheimer's Association on any needed changes or amendments.

Thank you for the opportunity to submit testimony in **support of HB700 HD1 SD1**.

Sincerely,

Daintry Bartoldus  
Executive Administrator



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[facebook.com/AARPHawaii](https://facebook.com/AARPHawaii)

**The State Legislature  
Senate Committee on Ways and Means  
Senate Committee On Commerce And Consumer Protection  
Wednesday, April 2, 2025  
Conference Room 211, 10:00 a.m.**

TO: The Honorable Donovan Dela Cruz, Chair  
The Honorable Jarrett Keohokalole, Chair  
FROM: Kealii Lopez, AARP State Director  
RE: Support for H.B. 700, HD1, SD1 Relating to Cognitive Assessments

Aloha Chair Dela Cruz, Chair Keohokalole, and Members of the Committees:

My name is Keali'i Lopez and I am the State Director for AARP Hawai'i. AARP is a nonpartisan, social impact organization that advocates for individuals age 50 and older. We have a membership of nearly 38 million nationwide and nearly 135,000 in Hawaii. We advocate at the state and federal level for the issues that matter most to older adults and their families.

**AARP supports H.B. 700, HD1, SD1 which requires all health care providers who accept Medicare to include a cognitive assessment as part of the Medicare Part B Annual Wellness Visit for Medicare beneficiaries. It is crucial to emphasize that health care providers must use a validated cognitive assessment tool in their evaluations.**

Alzheimer's disease and other dementias predominantly impact older adults, with 90% of cases occurring in individuals aged 65 and older. In Hawaii, nearly one in five residents is 65 or older, putting our state at significant risk as our population continues to age. Each year, Alzheimer's and related dementias cost Hawaii's Medicaid program \$285 million.

Early detection and care planning can greatly reduce the cost of caring for someone with Alzheimer's disease or related dementia. Early diagnosis enables timely intervention, better care planning, and access to treatments that can slow the disease's progression. **Standardizing cognitive assessment tests** is essential to addressing the growing challenge of Alzheimer's disease. Early detection and intervention can significantly enhance patients' quality of life and lessen the financial burden on families and the state.

Thank you for the opportunity to support this legislation that will the benefit of Hawaii's kūpuna and their caregivers.



**Testimony to the Senate Joint Committee on Ways and Means and  
Commerce and Consumer Protection  
Wednesday, April 2, 2025; 10:00 a.m.  
State Capitol, Conference Room 211  
Via Videoconference**

**RE: HOUSE BILL NO. 0700, HOUSE DRAFT 1, SENATE DRAFT 1, RELATING TO COGNITIVE ASSESSMENTS.**

Chair Dela Cruz, Chair Keohokalole, and Members of the Committee:

The Hawaii Primary Care Association (HPCA) is a 501(c)(3) organization established to advocate for, expand access to, and sustain high quality care through the statewide network of Community Health Centers throughout the State of Hawaii. The HPCA **SUPPORTS** House Bill No. 0700, House Draft 1, Senate Draft 1, RELATING TO COGNITIVE ASSESSMENTS.

By way of background, the HPCA represents Hawaii's Federally Qualified Health Centers (FQHCs). FQHCs provide desperately needed medical services at the frontlines to over 150,000 patients each year who live in rural and underserved communities. Long considered champions for creating a more sustainable, integrated, and wellness-oriented system of health, FQHCs provide a more efficient, more effective and more comprehensive system of healthcare.

This measure, as received by your Committee, would improve the detection and treatment of Alzheimer's disease and related dementias in Hawaii by establishing a Cognitive Assessments for Medicare Beneficiaries Pilot Program within the Executive Office on Aging (Office). This measure would take effect on July 1, 2026.

According to the Center for Disease Control:

- Alzheimer's disease is one of the top 10 leading causes of death in the United States;
- The 6<sup>th</sup> leading of death among US adults; and
- The 5<sup>th</sup> leading cause of death among adults aged 65 years or older.

In 2023, an estimated 6.7 million Americans aged 65 year or older had Alzheimer's disease. **This number is projected to nearly triple to 14 million people by 2060.**

Further, death rates for Alzheimer's disease are increasing, unlike heart disease and cancer death rates that are on the decline. Dementia, including Alzheimer's disease, has shown to be under-reported in death certificates and therefore the proportion of older people who die from Alzheimer's may be considerably higher.

In Hawaii, Alzheimer's disease is a growing public health crisis:

- 29,000 people aged 65 and older are living with Alzheimer's in Hawaii;
- 6.7% of people aged 45 and older have subjective cognitive decline;
- 60,000 family caregivers bear the burden of the disease in Hawaii;
- 91 million hours of unpaid care are provided by Alzheimer's caregivers;
- \$1.9 billion is the value of the unpaid care; and
- \$240 million is the cost of Alzheimer's to the State Medicaid Program.

For these reasons, HPCA has worked closely with the Hawaii Chapter of the Alzheimer's Association to improve the health, welfare, and safety of persons and families afflicted with this disease. Accordingly, we are honored to be a partner with the Alzheimer's Association and urge your favorable consideration.

Thank you for the opportunity to testify. Should you have any questions, please do not hesitate to contact Public Affairs and Policy Director Erik K. Abe at 536-8442, or [eabe@hawaiiipca.net](mailto:eabe@hawaiiipca.net).

**HB-700-SD-1**

Submitted on: 3/27/2025 4:40:14 PM

Testimony for WAM on 4/2/2025 10:00:00 AM

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

Comments:

We believe this is very important. We supported the original bill and also believe the pilot project will help.



# Hawai'i Psychological Association

*For a Healthy Hawai'i*

P.O. Box 833  
Honolulu, HI 96808

[www.hawaiipsychology.org](http://www.hawaiipsychology.org)

Phone: (808) 521-8995

## COMMITTEE ON WAYS AND MEANS

Senator Donovan M. Dela Cruz, Chair  
Senator Sharon Y. Moriwaki, Vice Chair

## COMMITTEE ON CONSUMER PROTECTION

Senator Jarrett Keohokalole, Chair  
Senator Carol Fukunaga, Vice Chair

April 2, 2025 10:00 A.M. - VIA VIDEO CONFERENCE – ROOM 211  
SUPPORT FOR HB700 HD1, SD1 RELATING TO COGNITIVE ASSESSMENTS

The Hawaii Psychological Association (HPA) is in strong support of HB700 HD1 SD1, which seeks to establish a pilot program providing cognitive assessments for Medicare beneficiaries aged sixty-five or older during their annual wellness visits.

Early detection of Alzheimer's disease and related dementias is crucial for effective intervention and care planning. Early diagnosis can significantly reduce healthcare costs and improve patient outcomes. However, many individuals with memory concerns do not discuss these issues with their healthcare providers, often due to cost concerns or lack of awareness. By integrating cognitive assessments into routine annual wellness visits, this bill addresses these barriers, facilitating timely identification and management of cognitive impairments.

Implementing this pilot program aligns with the State's effort to combat the growing impact of dementia on our aging population. By promoting early detection, this program enhances quality of life for our kupuna and their families.

Thank you for the opportunity to provide input on this important bill.

Sincerely,

Alex Lichton, Ph.D.  
Chair, HPA Legislative Action Committee



**April 2, 2025 at 10:00 am**  
**Conference Room 211**

**Senate Committee on Ways and Means**

To: Chair Donovan M. Dela Cruz  
Vice Chair Sharon Y. Moriwaki

**Senate Committee on Commerce and Consumer Protection**

To: Chair Jarrett Keohokalole  
Vice Chair Carol Fukunaga

From: Paige Heckathorn Choy  
AVP, Government Affairs  
Healthcare Association of Hawaii

**Re: Submitting Comments**  
**HB 700 HD 1 SD 1, Relating to Cognitive Assessments**

The Healthcare Association of Hawaii (HAH), established in 1939, serves as the leading voice of healthcare on behalf of 170 member organizations who represent almost every aspect of the healthcare continuum in Hawaii. Members include acute care hospitals, skilled nursing facilities, home health agencies, hospices, and assisted living facilities. In addition to providing access to appropriate, affordable, high-quality care to all of Hawaii's residents, our members contribute significantly to Hawaii's economy by employing more than 30,000 people statewide.

Thank you for the opportunity to provide **comments** regarding this measure, which would establish a pilot project within the Executive Office on Aging to establish a partnership with a health system to perform cognitive assessments and report data to the agency. We agree that a pilot program is a better course to support cognitive assessments, rather than a mandate imposed on providers that would be burdensome in terms of administrative and clinical time.

We would also suggest that funding in the program could be provided directly to the participating providers, who would have to hire additional staff in order to carry out the functions that the legislation seeks to establish. Further, we would suggest that funding an education campaign would prove helpful and encourage more providers to engage in cognitive assessment screenings.

Thank you for the opportunity to share these comments. We stand ready to collaborate on solutions that improve cognitive health outcomes without imposing undue burdens on healthcare providers.







March 28, 2025

To: COMMITTEE ON WAYS AND MEANS  
Senator Donovan M. Dela Cruz, Chair  
Senator Sharon Y. Moriwaki, Vice Chair

COMMITTEE ON COMMERCE AND CONSUMER PROTECTION  
Senator Jarrett Keohokalole, Chair  
Senator Carol Fukunaga, Vice Chair

Re: SUPPORT OF HB700 HD1 SD1 RELATING TO COGNITIVE ASSESSMENTS

Hrg: April 2, 2025 at 10AM

The Hawai'i Public Health Association (HPHA) is a group of over 450 community members, public health professionals, and organizations statewide dedicated to improving public health. Our mission is to promote public health in Hawai'i through leadership, collaboration, education and advocacy.

The Hawaii Public Health Association supports HB8700 HD1 SD1. This measure is important because Alzheimer's disease and other dementias primarily affect older adults, with 90% of cases occurring in individuals aged 65 and older. In Hawaii, nearly one in five residents is 65 or older, placing our state at particular risk as our population continues to age. Annually, Alzheimer's and related dementias cost Hawaii's Medicaid program \$285 million.

Early detection and care planning can significantly mitigate these costs. By 2060, nearly 14 million adults in the United States are projected to have Alzheimer's disease. Early diagnosis allows for timely intervention, better care planning, and access to treatments that can slow the disease's progression.

The standardization of validated cognitive assessment tools is a crucial step in addressing the growing challenge of Alzheimer's disease. Early detection and intervention can significantly improve the quality of life for patients and reduce the financial burden on families and the state. I urge the committee to support this legislation for the benefit of our kupuna and their caregivers.

Thank you for the opportunity to provide testimony on this important issue.

Respectfully submitted,

Holly Kessler  
Executive Director

## 2025 Hawaii Leadership Board

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*Executive Director*  
*Hawaii Building and*  
*Construction Trade Council*

Gordon Takaki, *Past*  
*President Hawaii Island*  
*Chamber of Commerce*

Cary Tanaka,  
*Past President*  
*Island Insurance*  
*Companies*

Caroline Witherspoon,  
*President Becker*  
*Communications*

LJ R. Duenas,  
*Executive Director*  
*Alzheimer's Association*

## Testimony to the Senate Committees on Ways and Means & Commerce and Consumer Protection

Wednesday, April 2, 10:00 AM

Room 211 and Videoconference

**RE: SB700 HD1 SD1– RELATING TO COGNITIVE ASSESSMENTS**

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Chair Dela Cruz, Chair Keohokalole, and Members of the Committees:

Thank you for the opportunity to testify on the critical issue of standardizing cognitive assessment testing. My name is Coby Chock, Director of Public Policy and Advocacy for the Alzheimer's Association. I write in **strong support of HB700 HD1 SD1 with suggested amendments putting the requirement of validated tools being used for cognitive assessments at Annual Wellness Visits into statute.**

Alzheimer's disease and other dementias primarily affect older adults, with 90% of cases occurring in individuals aged 65 and older. This makes our kupuna the most vulnerable. In Hawaii, 1 in 5 residents are over 65, and the Department of Business, Economic Development & Tourism (DBEDT) expects the elderly population to continue increasing at a much faster rate than the overall population until 2030, when all baby boomers will be 65 or older. This places our state at particular risk as our population continues to age, straining our care-providing infrastructure. Alzheimer's disease requires costly long-term care, costs Hawaii's Medicaid program \$285 million annually, and often requires family members to leave the workforce. All of these figures will continue to rise without intervention. Early detection and care planning can significantly mitigate these costs. Alarming, over two-thirds of people with memory problems in Hawaii have not discussed their symptoms with a healthcare provider. Despite cognitive assessments currently being a part of annual wellness visits, mere observation is too frequently used in assessing patients' cognition.

Recent medical advancements have allowed us to address one of the primary causes of Alzheimer's disease—amyloid plaque buildup in the brain. The latest FDA-approved disease modifying treatment removes amyloid plaque and has been shown to slow disease progression by 30-40%, offering patients a better quality of life for a longer period, benefitting them and their families, however, these treatments are effective only in the early stages of the disease, making early detection through cognitive assessment tests critical. Without early detection, patients cannot benefit from these groundbreaking therapies. While the treatment can slow the disease, it cannot reverse it.

**In alignment with the Hawaii State Strategic Plan on Alzheimer's Disease and Related Dementias (ADRD), the key features of the proposed legislation will:**

**1. Standardize Cognitive Assessment Testing:** Requires the inclusion of a cognitive assessment test as part of annual wellness visits for patients 65 and older.

**2. Create Minimum Assessment Standards:** While we are not specifying which cognitive assessment tool is used, we expect the Mini-Cog will be the standard tool for these assessments, as The Queen's Health System has integrated this into their practice. It is non-invasive, takes just 3–5 minutes, and can be administered by primary care providers, nurse practitioners, physician assistants, social workers, or medical assistants. According to the Cochrane Dementia and Cognitive Improvement Group, it has a sensitivity rate of 76-100%, effectively identifying mild cognitive impairment and dementia while being simple and inexpensive to implement.

**3. Improve ADRD Related Data Collection and Analysis:** Providers will report data to the Executive Office on Aging for analysis, which will identify gaps in care and inform future policy.

Early detection of cognitive decline that leads to disease modifying treatment that, even slightly, slows the progression of the disease can yield significant benefits in both quality of life and overall costs. Medical advances that would slow the progression by just five years would result in a 41 percent lower prevalence of the disease and reduce overall societal costs by 40 percent by 2050. Families face an average of almost \$400,000 in lifetime costs for Alzheimer's care and over \$70,000 total per year. Early diagnosis allows for interventions that can significantly reduce this burden.

We humbly offer the following amendments for your consideration along with suggested language (see attached):

- Change the name of “cognitive assessments for medicare beneficiaries pilot program” to “dementia data pilot program.”
- Make health care provider reporting optional.
- Provide flexibility for EOA to develop the dementia data pilot program.
- Sunset the dementia data pilot program two years from it's start date.
- Place language requiring validated cognitive assessment tools for cognitive assessments be used at Annual Wellness Visits along with definitions and exemptions in a new part of the bill under HRS Chapter 349.
- Move definitions for the data pilot program to the part II of the bill.
- Include patients covered under medicare part C under the definition of “Qualified patient” and add definition for medicare part C.
- Make the effective date July 1, 2025.

The regular use of a validated cognitive assessment tool is a crucial step in addressing the growing challenge of Alzheimer's disease. Early detection and intervention can significantly improve the quality of life for patients and reduce the financial burden on families and the state. I urge the committee to support this legislation for the benefit of our kupuna and their caregivers.

Mahalo for the opportunity to testify. If you have any questions, please contact Coby Chock at 808-451-3410 or [ckchock@alz.org](mailto:ckchock@alz.org).



Coby Chock  
Director, Public Policy and Advocacy  
Alzheimer's Association - Hawaii

RELATING TO COGNITIVE ASSESSMENTS.

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

SECTION 1. The legislature finds that families caring for individuals with Alzheimer's disease and related dementias face many challenges when attempting to balance their professional lives with the provision of care to their loved ones. Caregivers often must choose between continuing their careers or becoming full-time caregivers. According to the Alzheimer's Association, Hawaii has approximately sixty thousand family caregivers providing ninety-one million hours of unpaid care valued at \$1,900,000,000.

The legislature further finds that 6.7 per cent of individuals aged forty-five or older experience subjective cognitive decline. After age sixty-five, the risk of Alzheimer's doubles every five years, with individuals on medicare considered at higher risk of having or developing dementia. According to the federal Centers for Disease Control and Prevention, by 2060, nearly fourteen million adults in the United States are projected to have Alzheimer's disease. Nationwide, the costs to care for individuals living with Alzheimer's and related dementias is significant, with the total cost of care for Alzheimer's projected to increase to more than \$1,100,000,000,000 by 2050. However, a 2018 report from the Alzheimer's Association indicated that early diagnosis and treatment of dementia could save the nation as much as \$7,900,000,000,000 in medical and care costs over thirty years.

The treatment and prevention of Alzheimer's disease and related dementias is of pressing concern to the State. Per the department of business, economic development, and tourism, nearly one in five residents in Hawaii is sixty-five years of age or older, with this age group rapidly expanding in size. Annually, Alzheimer's and related dementias cost the State's medicaid program \$285,000,000. In the *Hawaii 2025: State Plan on Alzheimer's Disease and Related Dementias: 2020 Update*, the executive office on aging found that medicare costs for the Alzheimer's disease and related dementias population are nearly \$10,000 higher in comparison to the non-Alzheimer's disease and related dementias population. The legislature also finds that early detection of Alzheimer's disease and related dementias can reduce costs, manage comorbid conditions, delay disease progression, and allow better care planning. However, data from the federal Centers for Disease Control and Prevention's Behavioral Risk Factor Surveillance System found that over two-thirds of people with memory problems in Hawaii have not talked to their health care provider. Cost may be one factor behind why individuals have not discussed their

cognitive health with their health care providers. According to the *Individuals' Interest in Cognitive Screening, Dementia Diagnosis, and Treatment: New Estimates from a Population-Representative Sample* report published by the RAND Corporation on December 3, 2024, eighty per cent of study respondents said they would undergo a cognitive assessment if doing so were free. The legislature notes that medicare beneficiaries who have opted to take medicare part B coverage already receive an annual cognitive assessment as part of their supplemental coverage. This assessment can be performed by any practitioner eligible to report evaluation and management services under medicare, including physicians, physician assistants, nurse practitioners, and clinical nurse specialists. However, this assessment protocol is severely underutilized. The legislature also finds that broadening the use of cognitive assessments is an important strategy to identify patients who may benefit from current and future treatments for Alzheimer's and related dementias, as assessments provide individuals with information that may facilitate actions to prepare for the future.

The legislature additionally finds that offering cognitive assessments for medicare beneficiaries aged sixty-five or older is a necessary component of the State's strategic plan to address Alzheimer's disease and related dementias. The legislature believes that simultaneously increasing access to cognitive assessments that are already part of many beneficiaries' supplemental medicare coverage in conjunction with the public health awareness campaign on Alzheimer's disease and related dementias conducted by the executive office on aging as part of the State's strategic plan will significantly improve the health outcomes for Hawaii's older residents.

Accordingly, the purpose of this Act is to improve the detection and treatment of Alzheimer's disease and related dementias in Hawaii by establishing a **dementia data** pilot program within the executive office on aging to **collect and analyze cognitive assessment data across the state and standardizing the use of a validated cognitive assessment tool** ~~offer cognitive assessments for medicare beneficiaries at heightened risk for cognitive impairments, regardless of age,~~ during annual wellness visits covered by medicare part B **and part C.**

## **PART I**

SECTION 2. (a) There is established a **dementia data** ~~cognitive assessments for medicare beneficiaries~~ pilot program within the executive office on aging to **collect and analyze cognitive assessment data for the purposes outlined in the State Strategic Plan on ADRD** ~~provide medicare part B patients at heightened risk for cognitive impairments, regardless of age, with a cognitive assessment for the early detection of dementia.~~

(b) The executive office on aging shall ~~shall~~ **may** collaborate with a health care system to identify health care providers to participate in the pilot program.

~~—(c) All health care providers participating in the pilot program shall offer and conduct a cognitive assessment when providing an annual wellness visit to a qualified patient.~~

~~—(d) The cognitive assessment shall be conducted using standardized, validated assessment tools or diagnostic tests approved by the United States Food and Drug Administration and covered by medicare.~~

~~—(e) A qualified patient may decline the cognitive assessment after being informed of its purpose, benefits, and any risks. The health care provider shall document the qualified patient's decision to decline the cognitive assessment and include it as a part of the qualified patient's medical record.~~

(f) The health care provider shall ~~shall~~ **may** provide a report to the executive office on aging no later than October 1 of each year. The report may include but not be limited to:

- (1) Whether the qualified patient declined the cognitive assessment;
- (2) Whether the qualified patient is exempt from the cognitive assessment and the reason for the exemption;
- (3) The date of the cognitive assessment;
- (4) The address where the cognitive assessment was conducted and whether the cognitive assessment was conducted in person or via telehealth;
- (5) The qualified patient's age, zip code, race, and gender;
- (6) The type of cognitive assessment administered;
- (7) The result of the cognitive assessment; and
- (8) Any follow-up actions taken, including subsequent referrals and further diagnosis and treatment.

(g) The executive office on aging shall ~~shall~~ **may** secure the transmission and storage of the information reported pursuant to subsection (f) for the purposes of the pilot program.

(h) The executive office on aging shall provide a report summarizing the information collected pursuant to subsection (f) to the legislature no later than twenty days prior to the convening of the regular sessions of 2027 and . The report shall be made available to the public on the department of health's website.

(i) Any reports submitted to the legislature and subject to publication under this Act shall be limited to aggregated data and shall not directly contain or indirectly result in the disclosure of personally identifiable information.

(j) The identity, or any group of facts or any system of records that may lead to the identity, of any qualified patient who has received a cognitive assessment pursuant to this Act shall be confidential and shall not be revealed in any report, release, or publication.

~~—(k) The pilot program shall not include:~~

~~—(1) Health care providers who do not accept medicare insurance;~~

~~—(2) Qualified patients who have already received a diagnosis of dementia or mild cognitive impairment; and~~

~~—(3) Qualified patients who are unable to undergo a cognitive assessment due to a physical or mental impairment or disability.~~

~~—(l) As used in this Act:~~

~~—"Annual wellness visit" means a preventive service visit covered by medicare part B between a medicare beneficiary and a primary care provider that occurs once every twelve months and includes developing or updating a personalized prevention plan and performing a health risk assessment, but does not include a physical exam.~~

~~—"Health care provider" means a physician or surgeon licensed under chapter 453, Hawaii Revised Statutes, or an advanced practice registered nurse licensed under chapter 457, Hawaii Revised Statutes.~~

~~—"Medicare" means the program established under Title XVIII of the Social Security Act, as amended (42 U.S.C. 1395 et seq.).~~

~~—"Medicare part B" means the voluntary supplementary medical insurance benefits program provided under Title XVIII of the Social Security Act (42 U.S.C. 1395j-1395w-6).~~

~~—"Qualified patient" means an individual medicare beneficiary at heightened risk for cognitive impairments, regardless of age, with coverage under medicare part B. "Qualified patient" includes individuals with developmental disabilities who are predisposed to early cognitive decline.~~

(m) The **dementia data** ~~cognitive assessments for medicare beneficiaries~~ pilot program shall be dissolved **two years from it's start date** on ~~—~~, .

SECTION 3. There is appropriated out of the general revenues of the State of Hawaii the sum of \$        or so much thereof as may be necessary for fiscal year 2025-2026 and the



same sum or so much thereof as may be necessary for fiscal year 2026-2027 for any costs associated with the data management and reporting requirements for the secure data transmission required by this Act.

The sums appropriated shall be expended by the executive office on aging for the purposes of this Act.

## PART II

SECTION 2. Chapter 349, Hawaii Revised Statutes, is amended by adding a new part to be appropriately designated and to read as follows:

"Cognitive assessments for medicare beneficiaries".

§349-A Definitions. As used in this part:

"Annual wellness visit" means a preventative service visit covered by medicare part B between a medicare beneficiary and a primary care provider that occurs once every twelve months and includes developing or updating a personalized prevention plan and performing a health risk assessment, but does not include a physical exam.

"Health care provider" means a physician or surgeon licensed under chapter 453, Hawaii Revised Statutes, or an advanced practice registered nurse licensed under chapter 457, Hawaii Revised Statutes.

"Medicare" means the program established under Title XVIII of the Social Security Act, as amended (42 U.S.C. 1395 et seq.).

"Medicare part B" means the voluntary supplementary medical insurance benefits program provided under Title XVIII of the Social Security Act (42 U.S.C. 1395j-1395w-6).

"Medicare Part C" means the Medicare Advantage program provided under Title XVIII of the Social Security Act (42 U.S.C. 1395w-21 to 1395w-28).

"Qualified patient" means an individual medicare beneficiary, including but not limited to individuals with developmental disabilities who are predisposed to early cognitive decline, with coverage under medicare part B or part C.

§349-B Cognitive assessments for qualified patients.

(a) The cognitive assessment provided to qualified patients at an annual wellness visit shall be conducted using standardized, validated assessment tools or diagnostic tests approved by the Food and Drug Administration and covered by medicare.

(b) A qualified patient may decline the use of a standardized validated cognitive assessment tool or diagnostic test after being informed of its purpose, benefits, and any risks.

§349-C Exemptions. This part shall not apply to:

(1) Health care providers who do not accept medicare insurance;

(2) Qualified patients who have already received a diagnosis of dementia or mild cognitive impairment; and

(3) Qualified patients who are unable to undergo a cognitive assessment due to a "physical or mental impairment or disability."

SECTION 4. This Act shall take effect on July 1, ~~2026~~ 2025.

**HB-700-SD-1**

Submitted on: 3/31/2025 2:12:02 PM

Testimony for WAM on 4/2/2025 10:00:00 AM

Submitted By	Organization	Testifier Position	Testify
Belia Paul	Testifying for A Honu Space LLC	Support	Written Testimony Only

Comments:

Chair Dela Cruz, Chair Keohokalole, and Members of the Committee,

Aloha, my name is Belia Paul, and I am a proud resident of Wailuku, Maui. I'm writing in strong support of HB700 with the amendments proposed by the Alzheimer's Association.

As the owner of a kūpuna concierge business and a member of the Alzheimer's Association Walk Committee, I am in homes, I sit with families, and I listen to stories that often go unheard by the healthcare system. I am also the facilitator of a monthly caregiver support group, where I witness the emotional and logistical toll this disease takes on families—especially when diagnosis comes too late.

In my work, I often see the earliest signs of cognitive decline—subtle shifts that loving adult children miss because they're too close, or too hopeful, or too overwhelmed. I notice when the house isn't quite how it used to be. I catch the missed appointments, the repeated stories, the confusion tucked behind polite smiles. Sometimes, I see the fear in a kūpuna's eyes when they can't quite find the words—but are still aware enough to know something is slipping.

Early detection matters. It changes everything. It gives people the power to plan, to access support, to process what's happening, and to live with dignity for as long as possible. I believe so deeply in this bill because a validated, FDA-approved cognitive assessment tool gives us something we desperately need: consistency, fairness, and a real chance to intervene before it's too late.

This is not about expanding benefits—it's about making sure we are fully using the tools we already have. It's about ensuring equitable access to early diagnosis, especially for our rural and underserved communities across Hawaii, where resources and specialists are limited. It's also about empowering primary care providers to do more than guess—to diagnose with clarity and confidence.

I urge you to support HB700. Please help us support our kūpuna with the compassion, foresight, and respect they deserve.

Mahalo for your time and leadership.

With heartfelt aloha,

Belia Paul

**HB-700-SD-1**

Submitted on: 3/27/2025 4:09:16 PM

Testimony for WAM on 4/2/2025 10:00:00 AM

Submitted By	Organization	Testifier Position	Testify
Rick Tabor	Individual	Support	Written Testimony Only

## Comments:

Chair Dela Cruz, Chair Keohokalole and members of the committee, My name is Rick Tabor, and I am a resident of Honolulu.

I strongly support the passage of HB700 HD1 with the amendments offered by the Alzheimer's Association. This cognitive assessment bill, asks for an annual dementia assessment at the annual physical of those age 65 and older. The recommended screening takes a few minutes. The results will screen Dementia issues and a possible referral for testing that will identify a dementia related diagnosis, leading to early detection, opening the door to some exciting new treatment options that can slow the advancement and help manage the symptoms.

With over 32,000 dementia diagnosed in Hawaii, knowing that's less than half who struggle to live with dementia, this test, can make a huge quality of life difference.

My Mother lived over 25 years with Alzheimers. She passed a year ago, February 7. What was sad was how the diagnosis was made. Her doctor told our family, 'She's Old, So She's Got Alzheimers. Doesn't Matter What Type it is, There's No Cure.' I told my family, that's not good medical care. In Rural America, that's what people seem to expect.

My mother's end of life struggle was a difficult one. Filled with fears and tears. Hard to experience for her and everyone involved. Thankfully, she's in a better place now. Before her cognitive, mental and physical decline, she lived a remarkable life. I'm coming around to letting that be the memory I recall. Had she been tested, properly diagnosed and fortunate enough to receive treatment, I think we could have saved a lot of anguish and medical cost. Our family's story is a common one.

Sadly, According to the Alzheimer's Association, the cost of caring for people with Alzheimer's disease in the United States is estimated to be around \$360 billion in 2024, with projections showing this number could reach nearly \$1 trillion by 2050.

What's promising is the progress we've made, with awareness, understanding, prevention, and treatments that slow the progression, with hope of a cure, on the horizon, someday soon.

For today, this 50 year mental health professional with a certification in cognitive disabilities, asks for your support passing HB700 HD1 with the amendments offered by the Alzheimer's Association.

A proper Diagnosis is the key to a better life for a lot of people. Anything you can do is appreciated. Thank you for your compassionate thoughtfulness on this fairly basic ask. Take Care.

**HB-700-SD-1**

Submitted on: 3/27/2025 2:58:16 PM

Testimony for WAM on 4/2/2025 10:00:00 AM

Submitted By	Organization	Testifier Position	Testify
Bixby Ho	Individual	Support	Written Testimony Only

Comments:

VIA E-MAIL

Testimony in support of HB 700, HD 1: Related to Cognitive Assessments

April 2, 2025 Aloha Chair Keohokalole, Vice Chair Fukunaga, Members of the Senate Committee on Commerce and Consumer Protection, Chair Dela Cruz, Vice Chair Moriwaki, Members of the Senate Committee on Ways and Means,

My name is Bixby Ho, I am the Community Engagement and Walk Experience Chair for Alzheimer's Association of Hawaii and offer my testimony in STRONG SUPPORT of HB 700: Related to Cognitive Assessments.

Let's face it, we are facing the next to biggest health crises in our lifetime and this time we are fighting it by ourselves. The crisis I am referring to is, the population of aging is going to be the largest it has ever been in a long time and the time is now that we have to step up to start worrying about diseases such as Alzheimer's, Parkinson's, ALS, and so many others.

When we go to the Doctor's for our annual physicals, yes, we get ahead of the curve with flu shots, Measles, TB, but what we do not get ahead of the curve with is the need for cognitive assessments.

Yes, we like to believe our brain has an infinite muscle supply, but with muscle comes aging. This bill that was introduced in the House and passed with overwhelming support can and will help bring to the forefront the Cognitive Assessment that we should, I emphasize should have.

I hope that the Senate will also concur with their counterparts and pass this bill with overwhelming support as well. I speak out because as mentioned, we are aging, I do not want to one day be deprived of not being able to age well.

Thank you for the opportunity to provide testimony today.

Very Respectfully,

/s/ Bixby Ho



**HB-700-SD-1**

Submitted on: 3/27/2025 5:05:53 PM

Testimony for WAM on 4/2/2025 10:00:00 AM

Submitted By	Organization	Testifier Position	Testify
Seth Roberts	Individual	Support	Written Testimony Only

Comments:

Chair Dela Cruz, Chair Keohokalole and members of the committee,

My name is Seth G. Roberts, and I am a resident of Kihei, HI. My Mother who lives in Alaska, is starting to show signs of Alzheimer's and it is VERY disconcerting not being able to diagnose properly or care for her long distance myself. And it's Quite Frightening for those who suffer, when they no longer recognize their own offspring.

I am in strong support of HB700 HD1 SD1 with the amendments proposed by the Alzheimer's Association which would require a validated cognitive assessment tool be used for the cognitive assessment component of Annual Wellness Visits.

Alzheimer's disease and other dementias primarily affect older adults, with 90% of cases occurring in individuals aged 65 and older. In Hawaii, nearly one in five residents is 65 or older, placing our state at particular risk as our population continues to age. Annually, Alzheimer's and related dementias cost Hawaii's Medicaid program \$285 million.

Early detection and care planning can significantly mitigate these costs. By 2060, nearly 14 million adults in the United States are projected to have Alzheimer's disease. Early diagnosis allows for timely intervention, better care planning, and access to treatments that can slow the disease's progression.

The standard use of a validated cognitive assessment tool is a crucial step in addressing the growing challenge of Alzheimer's disease. Early detection and intervention can significantly improve the quality of life for patients and reduce the financial burden on families and the state. I urge the committee to support this legislation for the benefit of our kupuna and their caregivers.

Thank you for the opportunity to testify.

Sincerely,

Pono Seth Roberts

**HB-700-SD-1**

Submitted on: 3/27/2025 5:59:00 PM

Testimony for WAM on 4/2/2025 10:00:00 AM

Submitted By	Organization	Testifier Position	Testify
Alan Daniel	Individual	Support	Written Testimony Only

Comments:

Chair Dela Cruz, Chair Keohoklolo and members of the committee,

My name is Alan Daniel, and I am resident of Kalaheo on Kauai.

I am a strong supporter of HB700 HD1 SD1 with the amendments proposed by the Alzheimer's Association which would require a validated cognitive assessment tool to be used for the cognitive assessment component of Annual Wellness Visits.

Alzheimer's disease, and other dementias, primarily affect older adults, with 90% of cases occurring in individuals aged 65 and older. In Hawaii, nearly one in five residents is 65 or older, placing our state at particular risk as our population continues to age. Annually, Alzheimer's and related dementias, cost Hawaii Medicaid program \$285 million.

Early detection and care planning can significantly mitigate these costs. By 2060, it is projected that nearly 14 million adults in the United States will have Alzheimer's disease. Restating **EARLY DIAGNOSIS ALLOWS FOR TIMELY INTERVENTION, BETTER CARE PLANNING, AND ACCESS TO TREATMENTS THAT CAN SLOW THE DISEASE'S PROGRESSION.**

The standard use of a validated cognitive assessment tool is a crucial step in addressing the growing challenge of Alzheimer's disease. Early detection and intervention can significantly improve the quality of life for Hawaii dementia patients and reduce the financial burden for Hawaii families and the state. I urge the committee to support this legislation for the benefit of our kapuna and their caregivers.

Thank you for the opportunity to testify.

Sincerely,

Alan Daniel

Chair Dela Cruz, Chair Keohokalole  
and members of the committee,

My name is Kathleen Wyatt and I am a resident of Waipahu. I have three adult day care centers where I care for over 100 individuals living with Alzheimer's Disease. I am in strong support of HB700 HD1 SD1 with the amendments proposed by the Alzheimer's Association which would require a validated cognitive assessment tool be used for the cognitive assessment component of Annual Wellness Visits. I have seen the devastation on families when they are not prepared to give the proper care to their loved ones with dementia. Early assessment would give the caregivers the opportunity to

prepare and plan on caregiving needs for when they are needed.

Alzheimer's disease and other dementias primarily affect older adults, with 90% of cases occurring in individuals aged 65 and older. In Hawaii, nearly one in five residents is 65 or older, placing our state at particular risk as our population continues to age. Annually, Alzheimer's and related dementias cost Hawaii's Medicaid program \$285 million.

Early detection and care planning can significantly mitigate these costs. By 2060, nearly 14 million adults in the United States are projected to have Alzheimer's disease. Early diagnosis

allows for timely intervention, better care planning, and access to treatments that can slow the disease's progression.

The standard use of a validated cognitive assessment tool is a crucial step in addressing the growing challenge of Alzheimer's disease.

Early detection and intervention can significantly improve the quality of life for patients and reduce the financial burden on families and the state. I urge the committee to support this legislation for the benefit of our kupuna and their caregivers.

Thank you for the opportunity to testify.

Sincerely,  
Kathleen Wyatt

**Testimony on HB700 HD1 SD1  
RELATING TO COGNITIVE ASSESSMENTS  
Wednesday, April 2, 10:00 AM  
Conference Room 211 & Videoconference  
State Capitol - 415 South Beretania Street**

Chair Dela Cruz, Chair Keohokalole and members of the committee,

My name is Mansa Devaki, a student at UC Berkeley studying Neuroscience and Public Health, and I am a resident of Kula. During my time volunteering with Alzheimer's patients, I've seen firsthand how devastating the disease is—not just for those diagnosed but for their families as well. I worked with patients on cognitive exercises designed to help slow their decline, but the reality is that once symptoms become noticeable, many families are already deep in the struggle of caregiving. A family friend of mine on Maui was fortunate to be diagnosed with dementia fairly early, allowing them to pursue treatments and lifestyle changes that may extend their independence. But for many, especially those diagnosed late, the options are far more limited.

I've met families who had to place their loved ones in care facilities, which can cost thousands of dollars a month—expenses that quickly deplete savings. Early diagnosis doesn't just give patients a fighting chance; it saves families from immense financial strain and reduces the burden on the healthcare system.

I am in strong support of HB700 HD1 SD1 with the amendments proposed by the Alzheimer's Association which would require a validated cognitive assessment tool be used for the cognitive assessment component of Annual Wellness Visits.

Alzheimer's disease and other dementias primarily affect older adults, with 90% of cases occurring in individuals aged 65 and older. In Hawaii, nearly one in five residents is 65 or older, placing our state at particular risk as our population continues to age. Annually, Alzheimer's and related dementias cost Hawaii's Medicaid program \$285 million.

Early detection and care planning can significantly mitigate these costs. By 2060, nearly 14 million adults in the United States are projected to have Alzheimer's disease. Early diagnosis allows for timely intervention, better care planning, and access to treatments that can slow the disease's progression.

The standardization of cognitive assessment tests is a crucial step in addressing the growing challenge of Alzheimer's disease. Early detection and intervention can significantly improve the quality of life for patients and reduce the financial burden on families and the state. I urge the committee to support this legislation for the benefit of our kupuna and their caregivers.

Thank you for the opportunity to testify.

Sincerely,

Mansa Devaki



**HB-700-SD-1**

Submitted on: 3/28/2025 4:36:47 PM

Testimony for WAM on 4/2/2025 10:00:00 AM

Submitted By	Organization	Testifier Position	Testify
Jo Hittner	Individual	Support	Written Testimony Only

## Comments:

Chair Dela Cruz, Chair Keohokalole and Members of the Committee,

My name is Jo Hittner, I am a resident of Hilo, and a retired Ph.D. University Full Professor in the Counselor Education Department at Winona State University in Winona, Minnesota. My parents and my maternal grandfather all had dementia. I watched as they lost cognitive abilities and needed more and more care over time. Since their passing, there have been many treatments made available that were not known at the time they were living. These treatments have been effective in preventing the deterioration that they experienced. However, the new treatments are much more effective when dementia is diagnosed in the early stages. I am 79 and have been living in Hilo for 9 years. Prior to my move to Hawaii, I was given a cognitive assessment at each wellness visit after age 65. However, for the last 9 years, I have not received that assessment. My parents and grandfather were younger than me when their symptoms began. They were not fully aware of their decline and let the symptoms progress further than necessary before seeking treatment. I am advocating for cognitive assessments to be given on a regular basis in order for someone who is more objective than my husband or me to determine if there is unusual decline over the years. This would not be for diagnostic purposes, but rather to see if changes are beginning to occur. Thus, having some objective measurement for recommending further assessment.

Early detection and care planning can significantly mitigate costs that currently are nearly \$300 million dollars for Hawaii's Medicare and Medicaid programs. It is projected that by 2060, nearly 14 million adults in the U.S. are projected to have Alzheimer's disease. Besides the monetary cost, there is the psychological cost to the families and the loss of potential physical and intellectual contributions of these people to their communities and society.

The standardization of cognitive assessments is a critical step in addressing the growing challenge of Alzheimer's disease. Early detection and intervention can significantly improve the quality of life for patients and reduce the financial burden on families and the state. I am in strong support of HB700 HD1 SD1 with the amendments proposed by the Alzheimer's Association which would require a validated cognitive assessment tool be used for the cognitive assessment component of Annual Wellness Visits.

Alzheimer's disease and other dementias primarily affect older adults, with 90% of cases occurring in individuals aged 65 and older. In Hawaii, nearly one in five residents is 65 or older,

placing our state at particular risk as our population continues to age. Annually, Alzheimer's and related dementias cost Hawaii's Medicaid program \$285 million.

Early detection and care planning can significantly mitigate these costs. By 2060, nearly 14 million adults in the United States are projected to have Alzheimer's disease. Early diagnosis allows for timely intervention, better care planning, and access to treatments that can slow the disease's progression.

The standard use of a validated cognitive assessment tool is a crucial step in addressing the growing challenge of Alzheimer's disease. Early detection and intervention can significantly improve the quality of life for patients and reduce the financial burden on families and the state. I urge the committee to support this legislation for the benefit of our kupuna and their caregivers.

Thank you for the opportunity to testify.

Sincerely,

Jo Hittner

**Testimony on HB700 HD1 SD1  
RELATING TO COGNITIVE ASSESSMENTS  
Wednesday, April 2, 2025, 10:00am  
Conference Room 211 & Videoconference  
State Capitol - 415 South Beretania Street**

Chair Yamashita, Vice Chair Takenouchi and members of the committee:

My name is Calvin Hara and I reside in Kaimuki. I am in strong support of HB700 HD1 SD1. Throughout my thirty year career in senior care and as a family caregiver, I have seen many kupuna with Alzheimer's disease and other dementia. It is a very difficult time, from diagnosis to the progression of the disease and ultimately death.

Alzheimer's disease and other dementias primarily affect older adults, with 90% of cases occurring in individuals aged 65 and older. In Hawaii, nearly one in five residents is 65 or older, placing our state at particular risk as our population continues to age. It is costly to take care of a person with Alzheimer's and related dementia. Annually, the cost for Hawaii's Medicaid program is \$285 million.

That cost can be mitigated with early detection and care planning. By 2060, nearly 14 million adults in the United States are projected to have Alzheimer's disease. Early diagnosis allows for timely intervention, better care planning, and access to treatments that can slow the disease's progression.

The standardization of cognitive assessment tests is a crucial step in addressing the growing challenge of Alzheimer's disease. Early detection and intervention can significantly improve the quality of life for patients and reduce the financial burden on families and the state. I urge the committee to support this legislation for the benefit of our kupuna and their caregivers.

Thank you.

Calvin Hara

**HB-700-SD-1**

Submitted on: 3/29/2025 7:55:11 AM

Testimony for WAM on 4/2/2025 10:00:00 AM

Submitted By	Organization	Testifier Position	Testify
Riley Yoshio Regan	Individual	Support	Written Testimony Only

Comments:

**Testimony on HB700 HD1 SD1****RELATING TO COGNITIVE ASSESSMENTS****Wednesday, April 2, 10:00 AM****Conference Room 211 & Videoconference****State Capitol - 415 South Beretania Street**

Chair Dela Cruz, Chair Keohokalole and members of the committee,

My name is Riley Yoshio Regan, and I am a resident of Honolulu, Hawaii. My Alzheimer's-stricken grandpa, Fred Araki, passed away on February 19, 2025. Had he received cognitive assessments, I firmly believe he would have been diagnosed much earlier, and necessary measures would have been taken to slow the progression of the disease.

Consequently, I am in strong support of HB700 HD1 SD1 with the amendments proposed by the Alzheimer's Association which would require a validated cognitive assessment tool be used for the cognitive assessment component of Annual Wellness Visits.

Alzheimer's disease and other dementias primarily affect older adults, with 90% of cases occurring in individuals aged 65 and older. In Hawaii, nearly one in five residents is 65 or older, placing our state at particular risk as our population continues to age. Annually, Alzheimer's and related dementias cost Hawaii's Medicaid program \$285 million.

Early detection and care planning can significantly mitigate these costs. By 2060, nearly 14 million adults in the United States are projected to have Alzheimer's disease. Early diagnosis allows for timely intervention, better care planning, and access to treatments that can slow the disease's progression.

The standard use of a validated cognitive assessment tool is a crucial step in addressing the growing challenge of Alzheimer's disease. Early detection and intervention can significantly improve the quality of life for patients and reduce the financial burden on families and the state. I urge the committee to support this legislation for the benefit of our kupuna and their caregivers.

Thank you for the opportunity to testify.

Mahalo,

Riley Yoshio Regan

**HB-700-SD-1**

Submitted on: 3/29/2025 10:21:57 PM

Testimony for WAM on 4/2/2025 10:00:00 AM

Submitted By	Organization	Testifier Position	Testify
Alexis Mililani Liftee	Individual	Support	Written Testimony Only

Comments:

Chair Dela Cruz, Chair Keohokalole and members of the committee:

My name is Alexis Mililani Liftee, and I am a resident of Nu'uano.

My siblings and I experienced a form of dementia, possibly Alzheimer's first hand because of our mom.

Although she was not diagnosed (not our choice), we tried our best to educate ourselves re: the symptoms and how to face the challenges.

My brother and I lived with our mom. I eventually became her full-time caregiver after I resigned from my job in April 2017. The signs arised a few years prior to me being home with her and it progressed until she passed from other serious illnesses. Just days before she passed, she could not recognize me. That was extremely heartbreaking. Overall, it crushed my soul to watch our mom slowly deteriorate from a strong and vibrant woman to a woman who developed a disease, which robbed her to function properly at the cognitive level.

I am in strong support of HB700 HD1 SD1 with the amendments proposed by the Alzheimer's Association. This would encourage or even mandate to implement cognitive assessment testing by primary care physicians re: early detection and early diagnosis of various forms of dementia through the Medicare Annual Wellness Visit.

The following are only a few statistics from the Alzheimer's Association Hawaii website, which is quite alarming.

\* 6.7% of people aged 45 and above have subjective cognitive decline.

\* 31,000 people aged 65 and above living in Hawaii have Alzheimer's.

\* 60,000 family caregivers living in Hawaii, carries the burden of the disease.

I humbly urge the committee to fully support this legislation for the benefit of our Kupuna, the middle-aged, and their families.

Thank you kindly for the opportunity to testify.

Sincerely,

Alexis Mililani Liftee

**HB-700-SD-1**

Submitted on: 3/30/2025 12:02:06 PM

Testimony for WAM on 4/2/2025 10:00:00 AM

Submitted By	Organization	Testifier Position	Testify
Lori McCarney	Individual	Support	Written Testimony Only

Comments:

Chair Dela Cruz, Chair Keohokalole, and Members of the Committee,

My name is Lori McCarney, and I am a resident of Honolulu. I'm writing to share my strong support for HB700, with the amendments proposed by the Alzheimer's Association, requiring the use of a validated, FDA-approved cognitive assessment tool during the cognitive assessment component of Medicare Annual Wellness Visits.

My family has a long history of Alzheimer's, most recently with my father dying of it after an 8-year battle. This history obviously worries me--will I be next? When I noticed changes in my thinking and memory, I asked my doctor about getting an assessment, and I only got one after being very persistent. Now that I've had an assessment a few years ago, and been told all looks okay (so far) I don't know if the disease may have progressed without me knowing. There is no consistent benchmark to track and trend. If my annual check included use of a consistent cognitive assessment, the trending would be invaluable in determining if I am on a path down the road to a long and agonizing death, or if things are holding steady.

The sooner I can know if the disease is progressing, the sooner I can make plans and prepare my family. I might also qualify for some new therapies to slow the progression, which would be so wonderful. And maybe, if I can delay progression, better therapies will be found that actually cure Alzheimer's. A cure is on the horizon.

By supporting this bill, you are standing up for kupuna like me, so many caregivers, and future generations. Implementing a standardized cognitive assessment tool ensures equitable, timely care and reflects our state's commitment to compassionate healthcare.

I humbly ask you to pass this legislation to improve the well-being of our community. Thank you for the opportunity to submit testimony and for your leadership in addressing this critical issue.

Sincerely

Lori L McCarney

Honolulu, HI 96813



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808-347-0833

**Testimony on HB700 HD1 SD1  
RELATING TO COGNITIVE ASSESSMENTS  
Wednesday, April 2, 10:00 AM  
Conference Room 211 & Videoconference  
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Chair Dela Cruz, Chair Keohokalole and members of the committee,

My name is Barbara Black and I am a resident of Ninole. I am a caregiver for my husband, Peter, whose Alzheimer's was diagnosed ten years ago. That relatively early diagnosis was a gift to us as we contemplated our future. We were able to plan how we would manage this disease as it inevitably progressed. I have had the opportunity during this time to learn (online and in person) more about the disease and caregiving. This has been incredibly helpful to me as we have moved forward through the progression of this disease. Strong support from our family and friends is another gift.

Caregiving for a spouse with Alzheimer's is complex and difficult; the ability to adjust and learn as early as possible has helped me immensely. Early detection also provides the possibility of early access to treatments to slow progression of the disease. Treatments are becoming more and more accessible and effective.

I strongly support of HB700 HD1 SD1 with the amendments proposed by the Alzheimer's Association which would require a validated cognitive assessment tool be used for the cognitive assessment component of Annual Wellness Visits.

Alzheimer's disease and other dementias primarily affect older adults, with 90% of cases occurring in individuals aged 65 and older. In Hawaii, nearly one in five residents is 65 or older,

placing our state at particular risk as our population continues to age. Annually, Alzheimer's and related dementias cost Hawaii's Medicaid program \$285 million.

Early detection and care planning can significantly mitigate these costs. By 2060, nearly 14 million adults in the United States are projected to have Alzheimer's disease. Early diagnosis allows for timely intervention, better care planning, and access to treatments that can slow the disease's progression.

The standard use of a validated cognitive assessment tool is a crucial step in addressing the growing challenge of Alzheimer's disease. Early detection and intervention can significantly improve the quality of life for patients and reduce the financial burden on families and the state. I urge the committee to support this legislation for the benefit of our kupuna and their caregivers. I also hope that resources will be made available as needed to facilitate the implementation of this legislation.

Thank you for the opportunity to testify.

Sincerely,  
Barbara Black

**Testimony on HB700 HD1 SD1  
RELATING TO COGNITIVE ASSESSMENTS  
Wednesday April 2, 10:00 AM  
Conference Room 211 & Videoconference  
State Capitol - 415 South Beretania Street**

**Chair Dela Cruz, Chair Keohokalole, and members of the committee.**

My name is Peter W. Black and I live in Ninole on the Hamakua Coast of the Big Island. I am an 82-year-old retired professor of Anthropology and I have Alzheimer's.

Most of my career was at George Mason University, in Virginia. In 2005 I accepted an offer of early retirement from the University because it had become more and more difficult to teach at the level I was used to. As a student I was unfortunate enough to have taken courses from people who were clearly past their peak, and I did not want to subject my students to the same thing. My wife Barbara and I moved to Hawaii in 2011. In 2015, Barbara suggested that since I seemed to be worried that I might be declining mentally I should probably just see a neurologist. I was 73 years old at that time.

I will never forget the shock I felt when the neurologist told me that I had mild cognitive impairment. But I couldn't argue, because the simple tests that he asked me to complete were ones that would have given me no trouble at all in the past. I will be grateful for the rest of my life that I made that appointment.

At that time MCI had had very little impact on my daily life. I was able to drive, pay my bills, had no trouble writing or

communicating, and only seldom did I lose my wallet, keys, or other things. In short, life for me was what it always had been. Barbara and I took that diagnosis as a **wake-up call**. We immediately began planning for a future in which I might be significantly demented. When I received my Alzheimer's diagnosis, we had already made sure that we were as well prepared as we could be. This meant arranging things so that we could stay together in the home we had built in Ninole for as long as we lived. It also meant I would have plenty of time to be with our family and friends before it was too late. And of course, it has led us to our very rewarding involvement with the Alzheimer's Association. Most importantly, early detection of my cognitive decline made possible by those simple tests given to me by my neurologist ten years ago allowed me to start infusions with Leqembi, a drug which has been proven to delay the onset of Alzheimer's worst symptoms.

Cognitive assessment at an early age has the promise of making life better for our kupuna and their families. I strongly support this legislation.

Thank you for the opportunity to testify.

Sincerely,  
Peter W. Black

**HB-700-SD-1**

Submitted on: 3/31/2025 12:38:37 PM

Testimony for WAM on 4/2/2025 10:00:00 AM

Submitted By	Organization	Testifier Position	Testify
Emilia Thomas	Individual	Support	Written Testimony Only

Comments:

My husband had dementia for five years before passing away. Early diagnosis was important to assiss long term care resources. The need for support from medical providers was critical.. Finding financial, family and caregiving assistance was ongoing..

**HB-700-SD-1**

Submitted on: 3/31/2025 3:19:56 PM

Testimony for WAM on 4/2/2025 10:00:00 AM

Submitted By	Organization	Testifier Position	Testify
Douglas Paul	Individual	Support	Written Testimony Only

Comments:

Chair Dela Cruz, Chair Keohokalole, and Members of the Committee,

My name is **Douglas Paul**, and I am a resident of Wailuku, Maui. I am writing to express my strong support for HB700, with the amendments proposed by the Alzheimer’s Association, requiring the use of a validated, FDA-approved cognitive assessment tool during the cognitive assessment component of Medicare Annual Wellness Visits.

**My mother, Donna Paul, passed away two years ago. Her decline was especially difficult for our family because there was so much denial—especially from my father and other relatives—about what was really happening. They assumed she was simply becoming forgetful with age.**

**When we finally brought her concerns to her primary care doctor, we received little guidance. She was eventually referred to a neurologist on Maui, but the specialized testing she needed was only available on Oahu. Traveling off-island was extremely challenging, especially for someone already experiencing the early stages of dementia.**

**If we had been able to catch her condition earlier, she could have received medication and support that might have helped her manage daily tasks and maintain her quality of life longer.**

Early detection through the use of a validated cognitive assessment tool is a vital step forward. Diagnosing Alzheimer’s early allows individuals and their families to access treatment options, plan for the future, and receive the necessary support services. It also reduces long-term care costs and alleviates the burden on Hawai‘i’s healthcare system and the state.

By supporting this bill, you are standing up for our kupunaand others, their caregivers, and future generations. Implementing a standardized cognitive assessment tool ensures equitable, timely care and reflects our state’s commitment to compassionate healthcare.

I respectfully urge you to pass this legislation to improve the well-being of our community. Thank you for the opportunity to submit testimony and for your leadership in addressing this critical issue.

Sincerely,

**Douglas Paul**

**808-280-9201**

**DAP1988@hotmail.com**  
**Wailuku, Maui, 96793**



**HB-700-SD-1**

Submitted on: 4/1/2025 11:39:29 AM

Testimony for WAM on 4/2/2025 10:00:00 AM

Submitted By	Organization	Testifier Position	Testify
Gina Fujikami	Individual	Support	Written Testimony Only

Comments:

Chair Dela Cruz, Chair Keohokalole, and Members of the Committee,

My name is Dr.Gina Fujikami, and I am a resident of Honolulu. I am writing to express my strong support for HB700, with the amendments proposed by the Alzheimer’s Association, requiring the use of a validated, FDA-approved cognitive assessment tool during the cognitive assessment component of Medicare Annual Wellness Visits.

As a Geriatrician, I see many kupuna who are dealing with dementia. Dementia also affected my maternal grandfather. I see the daily emotional, physical, and financial burden of this disease on not only the person suffering from dementia but also their family and caregivers.

Early detection through the use of a validated cognitive assessment tool is a vital step forward. Diagnosing Alzheimer’s early allows individuals and their families to access treatment options, plan for the future, and receive the necessary support services. It also reduces long-term care costs and alleviates the burden on Hawaii’s healthcare system and the state.

By supporting this bill, you are standing up for our kupuna and others, their caregivers, and future generations. Implementing a standardized cognitive assessment tool ensures equitable, timely care and reflects our state’s commitment to compassionate healthcare.

I respectfully urge you to pass this legislation to improve the well-being of our community. Thank you for the opportunity to submit testimony and for your leadership in addressing this critical issue.

Sincerely,  
Gina Fujikami, MD

96821

gfujikami@queens.org

**HB-700-SD-1**

Submitted on: 4/1/2025 3:19:22 PM

Testimony for WAM on 4/2/2025 10:00:00 AM

Submitted By	Organization	Testifier Position	Testify
Frank Schultz	Individual	Support	Written Testimony Only

Comments:

I support this initiative.

**HB-700-SD-1**

Submitted on: 4/1/2025 3:57:52 PM

Testimony for WAM on 4/2/2025 10:00:00 AM

Submitted By	Organization	Testifier Position	Testify
Corinne Sillapachai	Individual	Support	Written Testimony Only

## Comments:

My name is Corinne Sillapachai and I am a resident of Honolulu, Hawaii on Oahu.  
my husband had been diagnosed in 2022 with a form of Alzheimer's and I am his only caregiver.  
It can be difficult at times but still very rewarding to have him around and I hope for a long time.

i support this HB700 wholeheartedly and I hope more legislation will come about in support of  
all Alzheimer's and Dementia.

Thank you sincerely on behalf of my husband and I,

Corinne Sillapachai