



STATE OF HAWAII
DEPARTMENT OF HEALTH
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WRITTEN TESTIMONY ONLY

**Testimony in SUPPORT of H.B. 1396, HD 2, SD1
RELATING TO COMMUNITY CARE FOSTER FAMILY HOMES**

SENATOR JILL N. TOKUDA, CHAIR
SENATE COMMITTEE ON WAYS AND MEANS

Hearing Date: Tuesday, March 28, 2017

Room Number: 211

1 **Fiscal Implications:** None

2 **Department Testimony:** The Department appreciates the opportunity to testify in SUPPORT of
3 H.B. 1396, HD 2, SD1 with the proposed amendments. The amendments were offered during
4 the Senate Human Services (HMS) and Consumer Protection and Health (CPH) combined
5 hearing, and the Department believes the amendments were inadvertently left off of the SD1.
6 We ask the Ways and Means Committee to review the proposed amendments and consider
7 inserting them. The amendments are included in this testimony; please refer to the end of the
8 Department's testimony.

9 The State has been addressing this matter for a couple of years and, closely working with
10 key legislators and the Department of Human Services, the Department of Health believes an
11 appropriate solution has been found.

12 The Department of Health supports amending the definition of a community care foster
13 family home (CCFFH). The amended definition provides the Department, in consultation with
14 DHS, with discretion to allow two (2) private-pay individuals who are in a married or civil union
15 relationship to be cared for in the same CCFFH. Relevant factors for consideration are identified

1 in the bill and the Department may consider other factors that the Department deems relevant to
2 reach its decision.

3 The Department expects that the need for two (2) private-pay individuals to occupy the
4 same CCFFH will be rare, but it believes that truly unique and rare circumstances should allow
5 for unique considerations. The Department believes this bill provides an appropriate tool for
6 those unique and rare circumstances to be deliberated upon.

7 Thank you for the opportunity to testify in SUPPORT of this bill with the offered
8 amendments, below.

9 **Offered Amendments:** On page 4, line 11 - 18:

10 (B) The department, in consultation with the department of human services, (please note: the
11 insertion of a comma is to clarify that the discretion is for the Department of Health, not for the
12 Department of Human Services) and in its discretion, and considering the past admission history
13 and current client mix of the community care foster family home, may allow two private-pay
14 individuals to be cared for in the same community care foster family home ~~if all of the following~~
15 ~~are met~~ after considering the following relevant factors (please note: this language clarifies the
16 Department's discretion to consider the relevant factors rather than requiring that all the relevant
17 factors be met):

DAVID Y. IGE
GOVERNOR



PANKAJ BHANOT
DIRECTOR

BRIDGET HOLTHUS
DEPUTY DIRECTOR

STATE OF HAWAII
DEPARTMENT OF HUMAN SERVICES

P. O. Box 339
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March 28, 2017

TO: The Honorable Senator Jill N. Tokuda, Chair
Senate Committee on Ways and Means

FROM: Pankaj Bhanot, Director

SUBJECT: **HB 1396 HD 2 SD 1 – RELATING TO COMMUNITY CARE FOSTER FAMILY HOMES**

Hearing: March 28, 2017, 1:30 p.m.
Conference Room 211, State Capitol

DEPARTMENT'S POSITION: The Department of Human Services (DHS) supports the measure.

PURPOSE: The purpose of the bill is to authorize the Department of Health to allow two private-pay individuals to be cared for in the same community care foster family home if certain requirements are met. DHS defers to the Department of Health (DOH) and agrees with its proposed amendments.

Community Care Foster Family Homes (CCFFH) were created specifically for the Medicaid program for low-income recipients. CCFFH is an integral part of the long term care continuum of care for the Medicaid program and provides a less restrictive community-based home for Medicaid recipients who are at a nursing facility level of care. CCFFH allow recipients to remain in the community rather than go into a nursing facility, which is a major national goal and the personal preference for many individuals and families.

Currently, CCFFHs are licensed for two residents and may request for a third bed. One of the residents may be private-pay. Also, in order to obtain the third bed, it must be for a Medicaid

recipient. This bill would permit the Department of Health to allow two private pay residents and only one Medicaid recipient under certain conditions.

While currently, DHS does not anticipate a high number of individuals to seek this accommodation, a change in law may influence a change in behavior that was not anticipated at the time of the law's passage.

DHS notes that with this change, there remains some potential of reduced CCFFH beds for Medicaid recipients, which, in certain communities, could result in individuals having to remain for longer periods of time in an acute hospital bed until a community-based bed becomes available, or going into a more costly nursing facility. None the less, we believe the bill provides for sufficient protections in order to mitigate this risk.

DHS will continue to work with DOH and the Legislature to address the State's long-term care needs of the state's aging population, and maintain community based options for low-income elderly or people with disabilities.

Thank you for the opportunity to testify on this bill.

From: mailinglist@capitol.hawaii.gov
Sent: Saturday, March 25, 2017 5:09 PM
To: WAM Testimony
Cc: kteger@hawaii.rr.com
Subject: *Submitted testimony for HB1396 on Mar 28, 2017 13:30PM*

HB1396

Submitted on: 3/25/2017

Testimony for WAM on Mar 28, 2017 13:30PM in Conference Room 211

Submitted By	Organization	Testifier Position	Present at Hearing
Katharine T. Cannon-Eger	Individual	Support	No

Comments:

Please note that testimony submitted less than 24 hours prior to the hearing, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

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Aloha Chair Tokuda, Vice Chair Dela Cruz and committee members

I am a senior citizen and a resident of House District 19 and Senate District 9 . I am a member of AARP, Kokua Council, the Hawaii Alliance of Retired Americans and the Legislative Committee of PABEA.

I'm testifying in strong opposition to HB1396, HD2 regarding allowing two private-pay individuals to be cared for in the same Community Care Family Foster Home. This bill came about due to the situations of two particular couples, one of whom had been married more than 68 years.

While the stories are very touching, the important thing to remember is that private-pay patients ARE NOT REQUIRED to be in licensed facilities; Medicaid patients are. CCFFH's would prefer to take private-pay patients for obvious reasons; they pay more than Medicaid. While it appears that there are safeguards to prevent care home operators from choosing private-pay over Medicaid, DOH is already unable to complete necessary tasks regarding residential care facilities (e.g. DOH doesn't have enough staff to post nursing home inspections or perhaps even to complete them). Adding more work is simply not practical.

If this bill passes, it will be even more difficult for Medicaid patients to find placements.

Please do not increase the burden upon the most vulnerable of our Kupuna. Please oppose HB1396,HD2.

Thank you for the opportunity to testify.

Barbara J. Service

From: mailinglist@capitol.hawaii.gov
Sent: Tuesday, March 28, 2017 6:36 AM
To: WAM Testimony
Cc: marcdelorme@outlook.com
Subject: *Submitted testimony for HB1396 on Mar 28, 2017 13:30PM*

HB1396

Submitted on: 3/28/2017

Testimony for WAM on Mar 28, 2017 13:30PM in Conference Room 211

Submitted By	Organization	Testifier Position	Present at Hearing
Marc Delorme	Individual	Oppose	No

Comments:

Please note that testimony submitted less than 24 hours prior to the hearing, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

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