



March 19, 2009  
9:30am  
Conference room 329

To: Rep. John Mizuno, Chair  
Rep. Tom Brower, Vice Chair  
House Human Services Committee

Rep. Ryan Yamane, Chair  
Rep. Scott Nishimoto, Vice Chair  
House Health Committee

From: Paula Arcena  
Legislative and Community Liaison

Re: **SB1344 Relating to Health Care**  
(Requires DHS to include in its request for proposals for QUEST providers various provisions to safeguard against disruption of services that may be caused by positive enrollment)

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My name is Paula Arcena, I am the Legislative and Community Liaison for AlohaCare.

AlohaCare is a non-profit health insurance company, founded by community health centers, to serve the most medically fragile populations in Hawaii. These groups include low-income families, the aged, the disabled and many other groups. Serving the healthcare needs of the people of Hawaii with aloha is our mission. AlohaCare has more than 60,000 health plan members, 1,200 of which are Medicare members.

Thank you for the opportunity to testify in support of the intent of SB1344.

We support the intent of the bill, but do not believe the modifications proposed are adequate to safeguard against the disruption of services to Hawaii's Medicaid

population. In our opinion, the only way to achieve this goal is to eliminate the potential for positive enrollment all together. Positive enrollment has caused unnecessary confusion among beneficiaries and providers, delays in necessary medical care, disruption to case management and loss of contact between QUEST recipients and their primary care providers and unnecessary expense for all involved.

We feel it is important that the committees understand that AlohaCare does not financially gain from the reduction or elimination of positive enrollment. In 2006, AlohaCare benefited from the auto assignment of approximately 20,000 enrollees who did not select a health plan as a result of positive enrollment because we were the lowest bidder.

As the result of our low bid, AlohaCare will save the State of Hawaii approximately \$23 million over the current four year contracted period. Our concern about positive enrollment is that it jeopardizes the care of some of our State's most vulnerable and medically fragile population.

We do believe that offering QUEST enrollees choice is important. If an enrollee does not initially choose a health plan, one should be auto assigned. If an enrollee does not initiate a change, they should stay with the plan they initial selected. Enrollee choice is currently assured in the QUEST program because beneficiaries are all given an annual opportunity to change health plan. This is identical to the once-a-year open enrollment opportunity provided to members of employer purchased health plans.

We appreciate the opportunity to share our concerns with you and we appreciate the Committee's continued attention to this important matter.

Thank you for this opportunity to testify.



## Hawai'i Primary Care Association

345 Queen Street | Suite 601 | Honolulu, HI 96813-4718 | Tel: 808.536.8442 | Fax: 808.524.0347  
www.hawaiipca.net

To: **House Committee on Human Services**  
The Hon. John M. Mizuno, Chair  
The Hon. Tom Brower, Vice Chair

**House Committee on Health**  
The Hon. Ryan I. Yamane, Chair  
The Hon. Scott Nishimoto, Vice Chair

**Testimony in Support of Senate Bill 1344**  
**Relating to Health Care**  
**Submitted by Beth Giesting, CEO**  
**March 19, 2009, 9:30 a.m. agenda, Room 329**

The Hawaii Primary Care Association supports this bill. We strongly champion the rights of QUEST enrollees to choose their health plan and provider; however, when literacy and language challenges meet letters from DHS misunderstandings are likely to result. In addition, QUEST enrollees are fairly mobile and mailed notices often do not reach them. We believe that so-called positive enrollment should be minimized as it causes confusion for clients, additional work for both state and private workers to sort out unintended reassignments, and likely disruption of patient/plan/provider relationships.

We support the process outlined in this measure will help ensure that patient care is not sacrificed unnecessarily for relatively modest economic benefits. Thank you for the opportunity to testify in support of this measure.

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**From:** Sheila Beckham [mailto:sbeckham@waikikihc.org]  
**Sent:** Tuesday, March 17, 2009 11:19 AM  
**To:** Rep. Ryan Yamane; Rep. Scott Nishimoto  
**Subject:** SB 1344

TO: House Committee on Health:  
Representative Ryan Yamane, Chair  
Representative Scott Nishimoto, Vice Chair

Thank you for the opportunity to testify in support of the intent of SB1344.

We support the intent of the bill, but believe that positive enrollment will negatively impact our State's most vulnerable and fragile population.

We appreciate the opportunity to share our concerns with you and we appreciate the Committee's continued attention to this important matter.

Thank you for this opportunity to testify.

Sheila Beckham  
Executive Director, Waikiki Health Center

To: **Committee on Human Services**  
The Hon John Mizuno, Chair  
The Hon. Tom Brower., Vice Chair

**Committee on Health**  
The Hon. Ryan I. Yamane, Chair  
The Hon. Scott Y. Nishimoto, Vice Chair

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48 Lono Ave  
Kahului, HI 96732  
(808) 871-7772  
Fax (808) 872-4029

**SATELLITE CLINICS**

Ka Hale A Ke Ola  
Resource Center  
670-A Waiale Dr.  
Wailuku, HI 96793

Lahaina Comprehensive  
Health Center  
15 Ipu Amakua Lane  
Lahaina, HI 96761

**Testimony in Support of Senate Bill 1344**  
**Relating to Positive Enrollment**  
**Submitted by Dana Alonzo-Howeth, Executive Director**  
**March 19, 2009, 9:30 a.m. agenda, Room 329**

The Community Clinic of Maui supports the intent of this bill but strongly believes this will not be enough to safeguard against the disruption of services to Hawaii's Medicaid population. In 2006, our staff witnessed first hand the many problems associated with positive enrollment, particularly from a continuity of care perspective. Needless to say positive enrollment creates a tremendous amount of unnecessary work for our health center staff who are already overwhelmed with caring for our most fragile residents. We urge you to consider doing away with positive enrollment altogether so continuity of care remains in tact and our staff can focus on improving the quality of care and outcomes for our patients.

Thank you for this opportunity to testify.