

SB 2779

Measure Title: RELATING TO THE AGING AND DISABILITY RESOURCE CENTERS.
Report Title: Aging and Disability Resource Centers, Executive Office on Aging
Description: Create aging and disability resource centers in each county to streamline access to long-term supports and services for older adults, persons with disabilities, and family caregivers.
Companion: HB2517
Package: Gov
Current Referral: HMS, WAM
Introducer(s): TSUTSUI (BR)

NEIL ABERCROMBIE
GOVERNOR OF HAWAII



WESLEY LUM, PhD, MPH
DIRECTOR

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Committee on Human Services

SB2779, RELATING TO THE AGING AND DISABILITY RESOURCE CENTERS.

**Testimony of Wes Lum
Director, Executive Office on Aging
Attached Agency to Department of Health**

Tuesday, February 7, 2012; Conference Room 016

1:30 p.m.

1 **EOA's Position:** The Executive Office on Aging (EOA) strongly supports this measure and
2 suggests amendments. SB2779 is part of Governor Abercrombie's Administrative Bill Package
3 and supports the New Day agenda of "empowering aging at home and in communities."

4 **Purpose and Justification:** Our vision is to have Aging and Disability Resource Centers
5 (ADRC) in every community serving as highly visible and trusted places where people with
6 disabilities of all ages can find information on the full range of long-term support options and can
7 access a single point of entry to public long-term support programs and benefits. To this end,
8 EOA, the four county Area Agencies on Aging (AAAs), and HCBS Strategies have developed a
9 five-year plan for implementing three initiatives: (1) a statewide Aging and Disability Resource
10 Center (ADRC) effort that will meet the Administration on Aging's criteria for a full-functioning
11 ADRC, (2) the Community Living Program, and (3) the person-centered Hospital Discharge
12 Planning initiative. The overall five-year implementation plan consists of:

- 13 1. A detailed description of the key operations that will be built and adapted to the
14 existing county and statewide infrastructure.

- 1 2. The identification of enhancements needed to management information systems tasks
2 and the plan for making these enhancements.
- 3 3. A description of the effort to estimate staffing and infrastructure costs necessary to
4 implement the five-year plan, including the ability to reallocate existing resources and
5 draw down Medicaid Administrative Federal Financial Participation to offset these
6 costs.
- 7 4. A detailed plan identifying the dependent tasks and proposed timeframes for
8 implementing the statewide ADRC operational model.
- 9 5. An ongoing planning process to guide the implementation of the plan.

10 When successfully implemented, these systems change efforts will help the state by:

- 11 1. Improving operations across counties through standardization of tools and the adoption
12 of common performance standards.
- 13 2. Ensuring that older adults and individuals with disabilities can make informed choices
14 about how to meet their long-term care needs.
- 15 3. Positioning the state to respond to federal initiatives and requirements affecting health
16 care and long term care services.
- 17 4. Helping residents of Hawaii keep their loved ones in the community by building
18 programs that support the spirit of 'ohana.

19 This measure will assist EOA and the AAA's implement the five-year plan whereby Maui
20 and Kauai counties will be full-functioning by April, 2012 and January, 2013, respectively.
21 Hawaii and Honolulu counties are not scheduled to be full-functioning until March, 2015 and July,
22 2015, respectively, and therefore, this measure will accelerate their implementation of a full-
23 functioning ADRC to 2014.

1 EOA would like to recommend several amendments to strengthen the legislation:

- 2 1. Page 1, Line 3: "...the aging and disability resource centers initiative is a collaborative
3 federal and state multi-agency effort with the support of the counties led by..."
- 4 2. Page 1, Line 12: "In many communities, long-term supports and services are administered
5 by multiple agencies, both public and private, and have complex..."
- 6 3. Page 2, Line 3: "It also improves the ability of state and county governments to manage
7 resources and monitor program quality through centralized data collection and evaluation
8 which will result in the ability to target existing resources where most needed, better
9 estimate future need, and develop long-term strategies for sustainability."
- 10 4. Page 2, Line 5: "Aging and disability resource centers use two broad strategies to divert
11 persons from unnecessary and costly long-term institutional care..."
- 12 5. Page 3, Line 1: Replace the definition of "Aging and disability resource centers" with the
13 following: "Aging and disability resource centers" means an entity established by the State
14 as part of the State system of long-term care serving as a highly visible and trusted source
15 where people of all incomes and ages can get information on the full range of long term
16 support options and a single point of entry for access to public long term support programs
17 and benefits.
- 18 6. Page 3, Line 6: Replace the definition of "Area agency on aging" with the following: "Area
19 agency on aging" means the agency in each county designated by the Executive Office on
20 Aging, under the Older Americans Act section 305(a)(2)(A), to facilitate the area-wide
21 development and implementation of a comprehensive, coordinated system for providing
22 long-term care in home and community-based settings, in a manner responsive to the needs
23 and preferences of older individuals and their family caregivers.

- 1 7. Page 3, Line 8: Replace the definition of "Dementia" with the following: "Dementia"
2 means a group of symptoms affecting intellectual and social abilities severely enough to
3 interfere with daily functioning.
- 4 8. Page 3, Line 19: Replace the definition of "Developmental disability" with the following:
5 "Developmental disability" means a severe, chronic disability of an individual that
- 6 (i) Is attributable to a mental or physical impairment or combination of mental and
7 physical impairments;
- 8 (ii) Is manifested before the individual attains age 22;
- 9 (iii) Is likely to continue indefinitely;
- 10 (iv) Results in substantial functional limitations in three or more of the following areas
11 of major life activity:
- 12 a. Self-care;
- 13 b. Receptive and expressive language;
- 14 c. Learning;
- 15 d. Mobility;
- 16 e. Self-direction;
- 17 f. Capacity for independent living;
- 18 g. Economic self-sufficiency;
- 19 (v) Reflects the individual's need for a combination and sequence of special,
20 interdisciplinary, or generic services, individualized supports, or other forms of
21 assistance that are of lifelong or extended duration and are individually planned and
22 coordinated.

1 An individual from birth to age 9, inclusive, who has a substantial developmental delay or
2 specific congenital or acquired condition, may be considered to have a developmental
3 disability without meeting three or more of the criteria described in clauses (i) through (v)
4 if the individual, without services and supports, has a high probability of meeting those
5 criteria later in life.

6 9. Page 4, Line 5: Replace the definition of "Options counseling" with the following:

7 "Options counseling" means an interactive decision-support process whereby consumers,
8 family members, and significant others are supported in their deliberations to determine
9 appropriate long-term care choices in the context of a consumer's needs, preferences,
10 values, and individual circumstances.

11 10. Page 4 line 22: "There is established [an] a statewide aging and disability resource center
12 with sites in each county to streamline access..."

13 11. Page 5, Line 10: "Federal, state, and county revenue-funded programs and services
14 including, but not limited to, those funded by Medicaid, Medicare, Older Americans Act,
15 [and] the Veterans Administration, and Kupuna Care. [a centralized application process for
16 publicly funded long-term supports and services;]."

17 12. Page 5, Line 14: Reformat the option: "(2) A centralized application process for publicly
18 funded long-term supports and services." Renumber the remaining list.

19 13. Page 6, Line 5: add another item before subsection (c) to read as follows: "()
20 Community resources and services for individuals with disabilities."

21 14. Page 6, Line 17: Replace subsection (d) with the following: "(d) The executive office on
22 aging shall coordinate the implementation of the statewide aging and disability resource
23 center."

1 15. Page 6: Add a new subsection (e) to read as follows: "(e) The aging and disability resource
2 centers shall be a function of each area agency on aging within the respective geographic
3 service areas."

4 Thank you for the opportunity to testify.



STATE OF HAWAII
STATE COUNCIL
ON DEVELOPMENTAL DISABILITIES
919 ALA MOANA BOULEVARD, ROOM 113
HONOLULU, HAWAII 96814
TELEPHONE: (808) 586-8100 FAX: (808) 586-7543
February 7, 2012

The Honorable Suzanne Chun Oakland, Chair
The Honorable Les Ihara, Jr., Vice Chair
Senate Committee on Human Services
Twenty-Sixth Legislature
State Capitol
State of Hawaii
Honolulu, Hawaii 96813

Dear Senators Chun Oakland and Ihara, and Members of the Committee:

SUBJECT: SB 2779 – RELATING TO AGING AND DISABILITY RESOURCE CENTERS

The State Council on Developmental Disabilities (DD) **SUPPORTS SB 2779**. The purpose of the bill is to create disability and resource centers in each county to streamline access to long-term care supports and services for older adults, persons with disabilities, and family caregivers.

The Council was a member of the State ADRC Advisory Board back in April 2006 after the Executive Office on Aging (EOA) received a federal grant to embark on establishing a one-stop single entry point for older adults and persons with disabilities. Through the past five years, the project has come a long way in establishing a one-stop center on the Island of Hawaii, and developing virtual sites in Kauai, Maui, and Honolulu through the Area Agencies on Aging. As a systems advocacy agency responsible for statewide planning, coordination, monitoring, evaluation, and advocacy on behalf of individuals with developmental disabilities and their families, we support a streamlined and user-friendly process to receive information, and access services and supports.

With respect to the definitions of developmental disability and intellectual disability, the Council suggests the following amendments for your consideration:

1. Page 3, lines 10-12: Developmental Disability

Replace the current definition with the definition according to federal law (P.L. 106-402 – DD Assistance and Bill of Rights Act of 2000):

“The term “developmental disability” means a severe, chronic disability of an individual that—

- (i) is attributable to a mental or physical impairment or combination of mental and physical impairments;
- (ii) is manifested before the individual attains age 22;

(iii) is likely to continue indefinitely;
(iv) results in substantial functional limitations in 3 or more of the following areas of major life activity:
(I) Self-care.
(II) Receptive and expressive language.
(III) Learning.
(IV) Mobility.
(V) Self-direction.
(VI) Capacity for independent living.
(VII) Economic self-sufficiency; and
(v) reflects the individual's need for a combination and sequence of special, interdisciplinary, or generic services, individualized supports, or other forms of assistance that are of lifelong or extended duration and are individually planned and coordinated.
(B) INFANTS AND YOUNG CHILDREN.—An individual from birth to age 9, inclusive, who has a substantial developmental delay or specific congenital or acquired condition, may be considered to have a developmental disability without meeting 3 or more of the criteria described in clauses (i) through (v) of subparagraph (A) if the individual, without services and supports, has a high probability of meeting those criteria later in life.”

2. Page 3, lines 20-23: Intellectual Disability

Replace the current definition with the definition according to the American Association on Intellectual and Developmental Disabilities (AAIDD):

“Intellectual disability is characterized by significant limitations both in intellectual functioning and adaptive behavior as expressed in conceptual, social, and practical skills, which are apparent prior to the age of 18.”

AAIDD recognizes that the definition of intellectual disability above does not stand alone; the definition must be applied within a context based on five assumptions:

1. Limitations in present functioning must be considered within the context of community environments typical of the individual's age peers and culture;
2. Valid assessment considers cultural and linguistic diversity as well as differences in communication, sensory, motor, and behavioral factors;
3. Within the individual, limitations often coexist with strengths;
4. An important purpose of describing limitations is to develop a profile of needed supports; and
5. With appropriate personalized supports over a sustained period, the life functioning of the person with intellectual disability generally will improve.

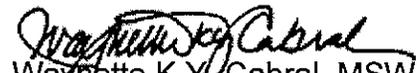
The Honorable Suzanne Chun Oakland, Chair
The Honorable Les Ihara, Jr., Vice Chair
February 7, 2012
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With the direction to streamline and integrate resources and services, it is crucial to support ADRCs in each county to accomplish a seamless approach of accessing long-term services and supports in a manner that respects individual choice and desire, and provides individual control over the individual's lives. We defer to EOA regarding the funding necessary to establish ADRCs in each county.

Thank you for the opportunity to submit testimony in **support of SB 2779**.

Sincerely,


Liz Ann Salvador
Chair


Waynette K.Y. Cabral, MSW
Executive Administrator



DISABILITY AND COMMUNICATION ACCESS BOARD

919 Ala Moana Boulevard, Room 101 • Honolulu, Hawaii 96814
Ph. (808) 586-8121 (V/TDD) • Fax (808) 586-8129

February 7, 2012

TESTIMONY TO THE SENATE COMMITTEE ON HUMAN SERVICES

Senate Bill 2779 – Relating to Aging and Disability Resource Centers

The Disability and Communication Access Board (DCAB) supports the intent of Senate Bill 2779 that creates aging and disability resource centers in each county to streamline access to long-term supports and services for older adults, persons with disabilities, and family caregivers.

DCAB initially served as a clearinghouse of information related to disability, but over the course of time our mission changed with the numerous federal laws being implemented relating to disability issues, especially the Americans with Disabilities Act (ADA). The information and referral service related to disability resources originally provided by our office was transferred to the Aging and Disability Resource Center last year. A disability specialist currently provides those services at the Executive Office on Aging, thus expanding information and referral services beyond the elderly to include people with disabilities.

Expanding services at the Aging and Disability Resource Centers is an important step closer to creating a "one-stop shop" for aging and disability related resources. DCAB suggests adding to page 6, line 5 to read as follows: "(11) Community resources and services for individuals with disabilities."

While we support the intent of this measure, we defer to the Executive Office on Aging and the Department of Health regarding the funding needed to administer the program.

We ask that this bill be passed out of Committee.

Thank you for the opportunity to provide testimony.

Respectfully submitted,

BARBARA FISCHLOWITZ-LEONG
Chairperson

FRANCINE WAI
Executive Director



ALA ARAKAWA
Mayor

JO-ANN T. RIDAO
Director
Housing & Human Concerns

JAN SHISHIDO
Deputy Director
Housing & Human Concerns

DEBORAH ARENDALE
Executive on Aging

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COUNTY OF MAUI
DEPARTMENT OF HOUSING AND HUMAN CONCERNS
MAUI COUNTY OFFICE ON AGING
AN AREA AGENCY ON AGING

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2200 MAIN STREET, SUITE 547
WAILUKU, HAWAII 96793

Senate Committee on Human Services

SB 2779 RELATING TO THE AGING AND DISABILITY RESOURCE CENTERS

**Testimony of Deborah Arendale
Executive on Aging, Maui County Office on Aging**

**Tuesday, February 7, 2012; Conference Room 016
1:30 p.m.**

MCOA's Position: Maui County Office on Aging (MCOA) is in **support** of SB 2779 for the establishment of Aging and Disability Resource Centers (ADRC) in Hawaii. This measure would assist the State Executive Office on Aging and each County in developing ADRCs that meet full functioning criteria as indicated by the Administration on Aging to serve as "one stop shops" to simplify the experience of obtaining information and accessing appropriate supports and services that enable seniors and persons with disabilities to live independently in the community.

Purpose and Justification: In 2006, the Older Americans Act was amended to include the establishment of ADRCs under the direction of each state unit on aging. To meet this requirement, the Executive Office on Aging (EOA), the four county Area Agencies on Aging (AAAs) and HCBS Strategies, Inc. engaged in the process of developing a five-year systems change implementation plan. When successfully implemented, the five year plan will result in the following: 1) improving operations across counties through standardization of tools and performance standards; 2) ensuring that older adults and persons with disabilities can make

informed choices about how to meet their long-term care needs; 3) positioning the state to respond to federal initiatives and requirements affecting health care and long-term care services; and 4) helping residents of Hawaii keep their loved ones in the community by building programs that support the spirit of 'ohana. The vision of EOA and the AAAs is to establish ADRCs in every community that serve as a highly visible and trusted places where people with disabilities of all ages can find information on the full range of long-term support options and can access a single point of entry to public long-term support programs and benefits. This measure will assist EOA and the county AAAs in establishing a successful statewide ADRC.

Thank you for the opportunity to provide testimony regarding this measure.

DEPARTMENT OF COMMUNITY SERVICES
CITY AND COUNTY OF HONOLULU

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PETER B. CARLISLE
MAYOR

SAMUEL E. H. MOKU
DIRECTOR

BRIDGET HOLTHUS
DEPUTY DIRECTOR

Testimony of the Department of Community Services

MEASURE:

S.B. 2779, Relating to the Aging and Disability Resource Centers.

COMMITTEE(S):

Senate Committee on Human Services

HEARING DATE: Tuesday, February 7, 2012

TIME: 1:30 p.m.

LOCATION: State Capitol, Room 016

COMMITTEE REQUESTS 1 COPIES

TESTIFIER(S):

Samuel E.H. Moku, Director

(Written testimony only. For more information, please call
Elizabeth Bethea, Elderly Affairs Division, at 768-7708.)

Chair Chun Oakland and Members of the Committee:

The Department of Community Services strongly supports section 4 of this bill, which appropriates funds for Aging and Disability Resource Centers (ADRC).

The Elderly Affairs Division (EAD) of the Department of Community Services is Honolulu's designated Area Agency on Aging and operates in accordance with the Older Americans Act of 1965 to coordinate, advocate, and improve services to assist older persons in leading independent, meaningful, and dignified lives in their own homes and communities for as long as possible. As part of the 2006 reauthorization of the Older Americans Act, the Area Agencies on Aging were mandated to serve not only persons age 60 and above, but also persons of any age with any kind of disability, and caregivers. Accordingly, EAD already serves as the ADRC for the county of Honolulu.

As the existing Honolulu ADRC, EAD serves as a single point of entry where persons of all ages, incomes, and disabilities may access information in a person-centered manner on the full range of long-term support and service options. ADRCs are an extension of the state's public policy of supporting aging in place in one's home and community for as long as possible. ADRCs carry out this policy by providing Home and Community Based Services that enable kupuna and persons with disabilities to delay or avoid institutionalization, while having options and choices based on their personal values and needs.

In recent years, EAD has experienced a tremendous increase in calls from vulnerable kupuna; caregivers; persons with multiple disabilities; grandparents raising grandchildren;

concerned neighbors, friends and family members on the mainland; and professionals from settings such as hospital, hospice, public health, developmental and physical disability services, homeless services, mental health services, and private medical offices; asking for referrals, links to services, assistance in finding appropriate housing, help with applications for all types of public assistance, and a multitude of other services enabling an older or disabled person to live with dignity and safety in a home or community-based setting of the person's choice. Due to the size and complexity of the state long-term care system, these callers are often confused, overwhelmed, and anxious about getting the help they need for themselves, a client, or a loved one.

ADRCs minimize confusion, enhance individual choice, and foster informed decision-making. They also improve the ability of state and county governments to manage resources and to monitor program quality through centralized data collection and evaluation. As the population of persons over 60 and persons with disabilities explodes due to the aging of the Baby Boomer generation, it makes sound financial sense to invest in ADRCs.

We respectfully urge passage of the appropriation in section 4 of this bill.

TESTIMONY TO THE SENATE COMMITTEE ON HUMAN SERVICES
REGULAR SESSION OF 2012
Senator Suzanne Chun Oakland, Chair
Senator Les Ihara, Jr., Vice Chair

Tuesday, February 7, 2012

Testimony Supporting S.B. #2779: "Relating to the Aging and Disability Resource Centers"

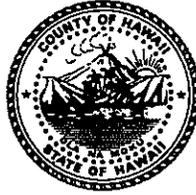
Testimony of
Ludvina K. Takahashi
Kauai County Agency on Elderly Affairs

I am in full support of the purpose of this bill in establishing the aging and disability resource centers by adding new sections to chapter 349, Hawaii Revised Statutes. The creation of the Aging and Disability Resource Centers will centralize sources for older persons, persons with disabilities of all ages, their families, and others to information about their long-term supports and services options, and access to a single entry point to public long-term supports and services.

The Aging and Disability Resource Center is to empower individuals to make informed choices and streamline access to long term support which includes in-home care, community based programs and institutional services such as nursing homes and other programs that are designed to help the elderly and individuals with disabilities. In our island communities, long term support services are administered by multiple agencies, and have complex, fragmented, and often duplicative intake, assessment, and eligibility functions. It is often difficult and confusing for consumers to access information and navigate the long term care system. A single, coordinated system of information and access for all persons seeking long term care support will minimize this confusion, enhance individual choice and support informed decision making.

I appreciate your consideration and thank you for this opportunity to offer testimony in favor of S.B. 2779.

William P. Kenoi
Mayor



Alan R. Parker
Executive on Aging

County of Hawai'i

OFFICE OF AGING

Aging and Disability Resource Center, 1055 Kino'ole Street, Suite 101, Hilo, Hawai'i 96720-3872
Phone (808) 961-8600 • Fax (808) 961-8603 • Email: hcoa@hawaiiantel.net
West Hawai'i Civic Center, 74-5044 Ane Keohokālole Highway, Kailua-Kona 96740
Phone (808) 323-4390 • Fax (808) 323-4398

February 6, 2012

TESTIMONY TO: **Committee on Human Services**

Senator Suzanne Chun Oakland, Chair
Senator Les Ihara, Jr., Vice Chair

SUBJECT: **SB 2779**

"RELATING TO THE AGING AND DISABILITY RESOURCE CENTERS"

February 07, 2012
1:30 p.m.
Conference Room 016

Honorable Chairs and Members of the Committee:

Thank you for this opportunity to provide testimony on HB 2517. I am Alan Parker, Director of the Hawaii County Office of Aging. HB 2517 is critical for the continuation of our demonstration project to enable full development and implementation of the programmatic aspects of Hawaii County's Aging and Disability Resource Center Project.

The County of Hawaii has invested heavily in the development of a physical site and has been depending on federal grants that are due to expire at the end of this year to develop the programmatic aspects (nuts and bolts - how things will work and integrate into our existing service network) to improve access to needed information and services.

The Hilo ADRC is co-located by nine major service providers and programs serving the elderly and people with disabilities. The \$240,000 for Hawaii County contained in HB 2517 covers personnel costs for four critical positions that are demonstrating our ACCESS model developed to improve our intake, assessment, and care coordination functions of the pilot project that is still being demonstrated and evaluated.



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The Aging and Disability Resource Center concept is indeed a noble and needed service empowering individuals to make informed choices and streamline access to long term support which includes in-home care, community based programs and institutional services such as nursing homes and other programs that are designed to help the elderly and individuals with disabilities including the younger adult population. These outcomes, however, can only be achieved through highly skilled and knowledgeable intake staff capable of conducting professional assessments to ensure appropriate and effective counsel and referral. Funding is needed to enable full implementation and evaluation of the entire intake, assessment, care coordination, follow up and evaluation processes of our demonstration project.

Thank you for providing me the opportunity to testify.

Alan R. Parker
Executive on Aging
Hawaii County Office of Aging
1055 Kinoole Street, Suite 101
Hilo, HI 96720-3872
arparker@hcoahawaii.org

To: Committee on Human Services
Senator Suzanne Chun-Oakland, Chair
Senator Les Ihara, Jr., Vice Chair

Date: Tuesday, February 7, 2012
Time: 1:30 p.m.
Place: Conference room 016

Testifier: Eudice Schick, Chair Policy Advisory Board For Elder Affairs
“PABEA”

Bill: SB 2779
In Complete Support

I am Eudice Schick, current Chair of PABEA. The following testimony is being given by myself as an individual and in no way represents the views of the Executive Office on Aging.

The Aging and Disability Resource Centers “ADRC” area an integral component of health and long-term care reform essential to a managed person centered system. They are the road to efficiency in managing the health and well-being of our seniors and disabled, 18 years and older. This one stop shop lessens the frustration of the population so desperately in need of services.

With the support of our legislature in passing Bill 2779 and the request of \$1.4m from the administrative budget, the Executive Office on Aging, along with the Area Offices On Aging, will be able to further their work on establishing ADRC throughout the islands.

Thank you for your consideration of my testimony and your support of SB 2779..

Sincerely,

Eudice Schick, Chair Policy Advisory Board for Elder Affairs

TO : COMMITTEE ON HUMAN SERVICES
Senator Suzanne Chun Oakland, Chair
Senator Les Ihara, Vice Chair

FROM: Eldon L. Wegner, Ph.D.
POLICY ADVISORY BOARD FOR ELDER AFFAIRS (PABEA)

HEARING: 1: 30 pm Tuesday, February 7, 2012
Conference Room 016, Hawaii State Capitol

SUBJECT: SB 2779 Relating to the Aging and Disability Resource Centers

POSITION: The Policy Advisory Board for Elder Affairs, **supports** SB 2779 which creates Aging and Disability Resource Centers (ADRC's) in each country to streamline access to long-term supports and services for older adults, persons with disabilities, and family caregivers. Makes appropriation.

RATIONALE:

The Policy Board for Elder Affairs has a statutory obligation to advocate on behalf of the senior citizens of Hawaii. While we advise the Executive Office on Aging, we do not speak on behalf of the Executive Office of Aging.

The Executive Office on Aging has been working with the County offices on aging in implementing a five-year plan to develop fully functioning ADRC's which will serve as single entry centers for accessing services for the disabled and frail elderly. These centers will reduce redundancy, increase coordination in services, and greatly improve the public's ability to access needed services.

The Federal government has provided grants and our state government and some of counties in Hawaii have also provided financial and other support for developing these Centers. The current appropriation will greatly assist in continued implementation of the five-year plan to develop these Centers.

The Long-Term Commission, which reported its recommendations to the Legislature on January 18, 2012, strongly recommends that the state devote additional resources towards the development of the ADRC's. These Centers will ease the access to services for persons in need and also bring greater coordination and efficiency to long-term care services.

Thank you for allowing me to testify on this bill.



To: Committee on Human Services
Senator Suzanne Chun Oakland, Chair

Date: February 7, 2012, Conference Room 016, 1:30 p.m.

Re: **SB2779 – RELATING TO THE AGING AND DISABILITY RESOURCE CENTERS**

Chair Chun Oakland, and Committee Members:

My name is Barbara Kim Stanton, State Director of AARP Hawaii. AARP is a membership organization of people 50 and older with nearly 150,000 members in Hawaii. We are committed to championing access to affordable, quality health care for all generations, providing the tools needed to save for retirement, and serving as a reliable information source on issues critical to Americans age 50+.

AARP **strongly supports** SB2779 which creates Aging and Disability Resource Centers (ADRC) in each county to streamline access to long-term supports and services for older adults, persons with disabilities and caregivers; and appropriates funds for its establishment.

However, the ADRCs need to be properly resourced and funded to make ADRCs an effective single point of entry for individuals seeking information on their long-term care (LTC) options. The ADRC is a navigational tool that connects individuals to appropriate long-term care options. Critical to the success of an ADRC is ensuring the availability of services (e.g., Kupuna Care) when individuals are directed to them.

Hawaii's ADRC program is in various stages of development in each county, needs to be expanded statewide, and needs improvement. AARP's recently published State Long-Term Services and Support Scorecard ranks Hawaii 41st in ability to access LTC through an ADRC or other single entry point.

This bill appropriates funds out of general revenues for fiscal year 2013-2014 for ADRCs. The Executive Office on Aging (EOA) and the Area Agencies on Aging (AAA) should be consulted as to the appropriate amount of funds.

ADRCs will address consumer frustration when trying to determine how to obtain long-term supports and services, if appropriately resourced, funded, and services are available. Otherwise, this frustration will be magnified with the increasing demand for service due to a rapidly aging population:

- Approximately one out of every five (20%) Hawaii residents are over 60 years old.
- Hawaii's population over age 65 is increasing rapidly and projected to increase by 71% between 2010 and 2030.
- Approximately 247,000 family caregivers are the backbone of Hawaii's long-term care system and currently provide nearly \$2 billion a year of unpaid caregiving services.

AARP
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- The number of family caregivers is declining. The primary family caregiver group is 50-64 years old. This group will decline by 10% by 2030, and cause further strain on seniors and remaining caregivers.

Thank you for the opportunity to provide testimony.



SENATE COMMITTEE ON HUMAN SERVICES
Senator Suzanne Chun Oakland, Chair

Conference Room 016
February 7, 2012 at 1:30 p.m.

Supporting SB 2779: Relating to the Aging and Disability Resource Centers

The Healthcare Association of Hawaii advocates for its member organizations that span the entire spectrum of health care, including all acute care hospitals, as well as long term care facilities, home care agencies, and hospices. In addition to providing quality care to all of Hawaii's residents, our members contribute significantly to Hawaii's economy by employing over 40,000 people. Thank you for this opportunity to testify in support of SB 2779, which establishes an Aging and Disability Resource Center in each county to improve access to long term care.

This bill is one of many that are designed to strengthen the infrastructure that cares for the elderly or reduces elder abuse. Hawaii's elderly population is growing faster than even the national average. Since statehood, the proportion of elderly to Hawaii's total population has increased three-fold, from roughly 5% in 1960 to 15% in 2009. By comparison, the nation's population stands at 13%. Between 1990 and 2009, the number of elderly aged 75 and older increased 115% in Hawaii compared to 44% nationally. By 2030, the elderly population will represent 20% of the population in Hawaii.

There is a clear relationship between age and the prevalence of chronic conditions and level of disability, so the elderly are the heaviest users of health care resources. Hawaii's existing resources are not sufficient to satisfy the current high demand for care for the elderly, which is increasing further as the population ages, and these resources should be expanded.

A related issue is elder abuse. As elders become more physically frail, they are less able to stand up to bullying and/or to fight back if attacked. They may not see or hear as well or think as clearly as they used to, leaving openings for unscrupulous people to take advantage of them. Elder abuse can take the form of physical abuse, emotional abuse, sexual abuse, neglect, abandonment, and financial exploitation. An infrastructure has been created to prevent elder abuse and to address it when it happens, and this infrastructure should be strengthened.

HAH supports a broad range of legislative measures designed to expand care for the elderly and address elder abuse. Thank you for the opportunity to testify in support of SB 2779.

From: mailinglist@capitol.hawaii.gov
Sent: Tuesday, February 07, 2012 7:37 AM
To: HMS Testimony
Cc: info@schha.com
Subject: Testimony for SB2779 on 2/7/2012 1:30:00 PM

Testimony for HMS 2/7/2012 1:30:00 PM SB2779

Conference room: 016

Testifier position: Support

Testifier will be present: No

Submitted by: Annie Au Hoon, President

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Submitted on: 2/7/2012

Comments:

From: mailinglist@capitol.hawaii.gov
Sent: Saturday, February 04, 2012 11:07 AM
To: HMS Testimony
Cc: robertscottwall@yahoo.com
Subject: Testimony for SB2779 on 2/7/2012 1:30:00 PM

Testimony for HMS 2/7/2012 1:30:00 PM SB2779

Conference room: 016
Testifier position: Support
Testifier will be present: Yes
Submitted by: Scott Wall
Organization: Individual
E-mail: robertscottwall@yahoo.com
Submitted on: 2/4/2012

Comments: