

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 26, 2016

The Honorable Sylvia Luke, Chair House Committee on Finance Twenty-Eighth Legislature State Capitol State of Hawaii Honolulu, Hawaii 96813

Dear Representative Luke and Members of the Committee:

SUBJECT: HB 2252 HD1 Relating to Discharge Planning

The State Council on Developmental Disabilities SUPPORTS the intent of **HB 2252 HD1**. The purpose of this bill is to complement the Federal discharge planning requirements that hospitals follow by allowing admitted inpatients to designate a caregiver, provide written and oral instructions to designated caregivers prior to discharge, and requiring hospitals to notify designated caregivers prior to a patient's discharge or transfer.

We have a proposed amendment for your consideration with regard to the section, "Designation of a caregiver," page 5, lines 12-15: "A hospital shall make reasonable attempts to notify the patient's caregiver of the patient's discharge to the patient's residence as soon as practicable." We feel that the current language may be too vague and result in unintended misinterpretation. We propose that a timeframe be established such as, "A hospital shall notify the patient's caregiver at least 36 hours prior to the anticipated patient's discharge to the patient's residence as soon as practicable." Having a timeframe would provide consistency in notification of a patient's discharge.

The Council supports initiatives that enable and support caregivers to provide competent post-hospital care to family members and other loved ones after discharge from the hospital.

Thank you for the opportunity to submit testimony supporting the intent of **HB 2252 HD1** and for your consideration of the above proposed amendment.

Sincerely,

Executive Administrator

Josephine C. Woll
Chair



House Committee on Finance Representative Sylvia Luke, Chair Representative Scott Y. Nishimoto, Vice Chair

February 26, 2016 Conference Room 308 11:00 a.m. Hawaii State Capitol

Testimony Supporting House Bill 2252, HD1 Relating to Discharge Planning (Hospital Discharge Planning; Caregiver Designation; Health Care)

Linda Rosen, M.D., M.P.H. Chief Executive Officer Hawaii Health Systems Corporation

The Hawaii Health Systems Corporation (HHSC) **supports** HB2252, HD1. Lay caregivers play an important but often highly challenging and stressful role in supporting the health of their loved ones. Hospitalized patients can benefit when their lay caregiver is identified and receives appropriate information and instructions prior to discharge. This measure will assist patients and their caregivers in the transition from the hospital back to the community setting. We hope that further work can be done to develop community supports for lay caregivers as the hospital discharge process cannot provide all the information and instruction caregivers need to address the challenges and stresses they face in the home setting.

Thank you for the opportunity to testify.

3675 KILAUEA AVENUE • HONOLULU, HAWAII 96816 • PHONE: (808) 733-4020 • FAX: (808) 733-4028



To: The Honorable Sylvia Luke, Chair, Committee on Finance

The Honorable Scott Y. Nishimoto, Vice Chair, Committee on Finance

Members, Committee on Finance (Muer

From: Paula Yoshioka, Senior Vice President, The Queen's Health Systems

Date: February 26, 2016

House Committee on Finance; Friday, February 26, 2016 at 11:00am in Room 308 Hrg:

Support for HB 2252, HD1, Relating to Discharge Planning Re:

My name is Paula Yoshioka, and I am a Senior Vice President at The Queen's Health Systems (Queen's). I would like to express my support for HB 2252, HD1, Relating to Discharge Planning. This bill requires hospitals to adopt and maintain discharge policies, consistent with recent updates to federal regulations, to ensure that patients continue to receive necessary care after leaving the hospital.

At Queen's, we are dedicated to providing the highest quality care for our patients. Oueen's is committed to ensuring that our patients and their designated caregivers are actively engaged in the discharge planning process and agree that this is important for patients to be able to manage their post-discharge care at home or in the community.

We concur with the testimony provided by the Healthcare Association of Hawaii (HAH) and agree that this bill represents a deliberative process led by the chairs and the members of the Hawaii Legislative Family Caregivers Working Group during the legislative interim to provide comprehensive recommendations that address some of the root issues facing family caregivers.

In addition, Queen's believes that there needs to be continued focus on preserving and expanding long-term support and funding programs, services, and policies that enable seniors to age in place. This would include support for wrap-around services that allow seniors to heal and stay in their homes, such as meal delivery and transportation services, respite services, and a more specialized labor force that includes nascent occupations such as community health workers.

Thank you for your time and attention to this important issue.

www.hawaiipacifichealth.org

February 26, 2016 at 11:00 am Conference Room 308

House Committee on Finance

To: Representative Sylvia Luke, Chair

Representative Scott Nishimoto, Vice Chair

From: Michael Robinson

Vice President – Government Relations & Community Affairs

Re: Testimony in Support – HB 2252, HD1

My name is Michael Robinson, Vice President, Government Relations and Community Affairs at Hawai'i Pacific Health (HPH). Hawai'i Pacific Health is a not-for-profit health care system, and the state's largest health care provider and non-governmental employer. Hawai'i Pacific Health is committed to providing the highest quality medical care and service to the people of Hawai'i and the Pacific Region through its four hospitals, more than 50 outpatient clinics and service sites, and over 1,600 affiliated physicians. Hawai'i Pacific Health's hospitals are Kapi'olani Medical Center for Women & Children, Pali Momi Medical Center, Straub Clinic & Hospital and Wilcox Memorial Hospital.

HPH is writing in **support** of HB 2252, HD1 which requires hospitals to adopt and maintain discharge policies, consistent with recent updates to federal regulations, to ensure that patients continue to receive necessary care after leaving the hospital.

HB 2252, HD1 reflects the discussions that occurred during the Legislative Family Caregivers Workgroup that met from August 2015 through December 2015. We support this bill as it recognizes the practical realities that our hospitals must consider when ensuring appropriate discharge planning from our facilities. Additionally this bill provides the flexibility to enable health care facilities to better respond to the unique needs of the population they serve which differ.

We are pleased to see the findings from those workgroups translated into actionable and sensible legislation that will facilitate and compliment the existing work done by our hospitals in order to better ensure that appropriate discharge planning occurs.

Thank you for the opportunity to testify.











February 26, 2016 at 11:00 AM Conference Room 308

House Committee on Finance

To: Chair Sylvia Luke

Vice Chair Scott Y. Nishimoto

From: George Greene

President and CEO

Healthcare Association of Hawaii

Re: Testimony in Support

HB 2252 HD 1, Relating to Discharge Planning

The Healthcare Association of Hawaii (HAH), established in 1939, serves as the leading voice of healthcare on behalf of 180 member organizations who represent almost every aspect of the health care continuum in Hawaii. Members include acute care hospitals, skilled nursing facilities, home health agencies, hospices, assisted living facilities and durable medical equipment suppliers. 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 over 20,000 people statewide.

The Healthcare Association of Hawaii would like to thank the committee for the opportunity to provide our **support** of HB 2252 HD 1. This legislation would require hospitals to allow patients to designate a caregiver and provide designated caregivers the opportunity to participate in discharge planning and receive instruction prior to the patient's discharge from a hospital.

Ensuring that patients and the family members that care for them receive high quality services is a priority for our hospital members, who are tasked with taking care of loved ones during the worst of times. Engaging caregivers in a patient's discharge planning process is essential to successfully transitioning a patient back home. However, discharge planning is just one part of an entire system of services that helps patients and their families following a stay at the hospital. Home- and community-based programs and services are absolutely critical to enabling seniors to stay in their homes and providing relief to caregivers.

We believe that this bill represents a deliberative process led by the chairs and the members of the Hawaii Legislative Family Caregivers Working Group (LFCWG) during the legislative interim to provide comprehensive recommendations that address some of the root issues facing family caregivers. It will support the transition of a patient from the hospital back home and help caregivers feel more integrated in the discharge planning process.

However, we are concerned that there needs to be continued focus on preserving and expanding long-term support and funding programs, services and policies that enable seniors to age in place. This would include support for wrap-around services that allow seniors to heal and stay in their homes, such as meal delivery and transportation services, respite services, and a more specialized labor force that includes nascent occupations such as community health workers.

It is also important to note that this legislation will create new state-based mandates for hospitals to follow related to discharge planning. This is a continued concern for HAH, since there are already strict, comprehensive guidelines required by the Medicare program related to discharge planning that our hospitals follow. Additionally, Hawaii hospitals are preparing to implement new requirements recently proposed by Medicare, which make it clear that the federal government wants to expand the role of caregivers in discharge planning. Those new requirements are estimated to cost hospitals \$23 million annually in nursing costs alone.

In the past, our members have been particularly concerned about mandates that would allow a patient to designate any number of caregivers, change their designated caregiver at any time, provide live or recorded instructions at the caregiver's discretion, and require providers to start documenting a huge amount of information. These provisions would have delayed discharge, increased costs, and taken time away from direct patient care.

This bill addresses and resolves the most constraining provisions of past legislation, including those referenced above. Overall, any state-based mandates should remain flexible enough to be adaptable to changing federal requirements and to avoid any conflicting directives. With these concerns in mind, HAH can support the language in this bill, with amendments, because it is complementary to the comprehensive and expanding federal requirements on discharge planning.

Thank you very much for the opportunity to testify on this measure.

Sent: Wednesday, February 24, 2016 2:27 PM

To: FINTestimony

Cc: SAAC96814@gmail.com

Subject: *Submitted testimony for HB2252 on Feb 26, 2016 11:00AM*

HB2252

Submitted on: 2/24/2016

Testimony for FIN on Feb 26, 2016 11:00AM in Conference Room 308

Submitted By	Organization	Testifier Position	Present at Hearing
Bathey Fong	Self-Advocacy Advisory Council	Support	No

Comments:

Please note that testimony submitted <u>less than 24 hours prior to the hearing</u>, 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.

From: Anthony Lenzer <tlenzer@hawaii.rr.com> Sent: Thursday, February 25, 2016 8:48 AM

To: FINTestimony Subject: HB 2252 HD1

TO: Committee on Finance

Rep. Sylvia Luke, Chair, Rep. Scott Y. Nishimoto, Vice Chair

FROM: Anthony Lenzer, PhD

RE: HB 2252 HD 1

HEARING: Friday, Feb. 26, 2016, 11:00 a.m.

Conference Room 308

Chair Luke and Members of the Committee:

I'm testifying today on behalf of the Hawaii Family Caregiver Coalition, an organization dedicated to the goal of improving life for those who give and receive care in Hawaii. Our Coalition is also part of the Hawaii CARE Act Coalition. We strongly support the principles of the CARE Act, as developed by AARP, and have advocated for caregiver inclusion in the discharge planning of hospitalized patients. We greatly appreciate the changes reflected in this draft of the bill, and believe that the changes reflect the basic principles of the CARE Act as proposed by AARP. However, we note that AARP has suggested certain amendments to the draft, which AARP believes will strengthen the focus on caregivers, rather than on the hospitals themselves. We have no objection to these proposed amendments, but do believe that the current draft represents the direction in which advocates for the CARE Act wish to go.

Thank you for the opportunity to testify with regard to this important legislation.



February 26, 2016

House Finance Committee
Representative Sylvia Luke, Chair

Re: <u>HB2252 HD1, RELATING TO DISCHARGE PLANNING</u>

Chair Luke and Members of the Committee:

My name is Gerry Silva, and I am State President for AARP Hawaii. We appreciate this opportunity to testify on HB2252 HD1 on behalf of our nearly 150,000 members in Hawaii and in support of family caregivers across the state. Family caregivers are the backbone of the long-term services and supports system in Hawaii, but their contributions are frequently unrecognized and largely unsupported. Approximately 154,000 unpaid family caregivers in the state are caring for a relative or loved one, helping them to live independently in their own homes. These caregivers provide services valued at approximately \$2.1 billion annually.

Since 2014, 18 states and Puerto Rico have enacted laws allowing patients to designate caregivers and giving caregivers the opportunity to receive after-care instructions to keep their loved ones safe at home after discharge. Another 23 states have introduced CARE Act legislation in 2016.

AARP Hawaii is pleased that the HD1 clarified the legislative intent to provide provisions of the CARE Act to all patients by revising the definition of "patient" to mean "an individual admitted to a hospital for inpatient treatment." We believe this was a strong statement of support for our family caregivers.

As such, AARP Hawaii supports HB2252 HD1 with two clarifying technical amendments:

- The preamble of this bill should be revised to reflect a balanced view of the concerns of both the hospitals and caregivers. Currently, the preamble speaks from the hospital's perspective only. To demonstrate legislative concern and support for patients and their family caregivers, as well, we offer the additional language for your consideration as attached. See Attachment 1.
- 2. To clarify that the opportunity for a caregiver to be designated, notified, and instructed is not only complementary, but integral, to a hospital's discharge policy or policies, we offer

this technical amendment to just re-order the provisions of section 2 (p. 5) so that subsection c becomes subsection a. See Attachment 2 for your consideration.

We are pleased with the progress that has been made to date on an issue that has been of great concern to an overwhelming majority of our community, and the members of the Care Act Coalition, including AARP. We hope you will concur with these friendly proposed revisions.

Thank you for the opportunity to testify.

House Finance Committee Representative Sylvia Luke, Chair Hearing on Feb. 26, 2016

Re: HB2252 HD1- RELATING TO DISCHARGE PLANNING

Chair Luke and members of the Committee:

My name is Vicki Franco a resident of Manoa, and I am a family caregiver. I am also a member of the Hawaii CARE Act Coalition. I am in support of this bill but with amendments. Those amendments to include:

Preamble to include the needs of family caregivers not just hospitals.

Section 2 needs to include all hospital inpatients the opportunity to designate a family caregiver.

Eighteen states across the national have passed this bill and 23 others have introduced it this year. Hawaii needs to pass this bill this legislative session.

My support is contingent on the amendments being made. Thank you for this opportunity to testify.

Respectfully submitted by,

Vicki Franco – Manoa Resident

February 25, 2016

House Finance Committee Representative Sylvia Luke, Chair

RE: HB2252 HD1, Relating to Discharge Planning

Chair Luke and Members of the Committee:

My name is Laurel Coleman, and I am submitting this testimony on behalf of PABEA.

PABEA (Policy Advisory Board for Elder Affairs) has long supported the CARE Act and has continued to advocate for the important role that caregivers play when a patient leaves the hospital. We submitted testimony for the CARE Act when it was submitted with the Kupuna Caucus package of legislation and we continue to support this effort with HB 2252 HD1.

All hospitalized patients should have the opportunity to name a caregiver who might help them at home, and if desired by the patient the caregiver should be given the opportunity to receive after-care instructions. Involvement of caregivers has been shown in multiple studies to be crucial for patient safety, avoidance of re-admissions and return ER visits.

Hawai'i should join the 18 other states that have passed the CARE Act, and the 23 other states that are introducing this important legislation. Similar bills in other states have not requested any state appropriation.

PABEA conditionally supports HB2252 HD1 - but ONLY with amendments proposed by the CARE Act Coalition regarding the preamble and Section 2 — "Designation of Caregiver". These amendments are especially important because it should always be up to the patient to decide whether they want to involve a caregiver in their discharge planning/instructions. It should <u>not</u> be decided by the hospital staff on a "case by case basis".

Asking a patient if they have a caregiver at home, and offering to involve the caregiver in an explanation of what is needed after discharge is an expected and crucial part of providing good medical care.

Laurel Coleman MD Geriatric physician PABEA member

This testimony is submitted on behalf of PABEA.

TO: Honorable Representative Sylvia Luke, Chair

Honorable Representative Scott Nishimoto, Vice Chair

Members of the Committee on Finance

DATE: Friday, February 26, 2016 PLACE: State Capitol Room 308

TIME: 11:00 am

SUBJECT: Testimony in support of HB 2252, HD 1 Relating to Discharge Planning

Project Dana strongly supports HB 2252, HD 1 Relating to Discharge Planning.

Project Dana is an interfaith volunteer caregivers program that provides support services through a corps of trained volunteers, guided by the principle of "Dana", which combing selfless giving and compassion in contributing towards the well-being of the frail elderly, disabled persons and family caregivers. The Project has been humbly serving the statewide community for 27 years.

The volunteers who serve the older population are sensitive to Hawaii's diverse cultures and traditions. As Administrator of Project Dana, I can attest to the concerns and issues facing the frail elderly and disabled persons. The volunteers from time to time have witnessed the frail elderly who are frequently in and out of the hospitals whose desire is to remain in their homes and live independent lives to the fullest as long as possible.

Project Dana feel that some training be strongly considered to family caregivers when hospitals are in the process of discharging patients, such as medication management, injections, wound care and special diets. Too often the patient being discharged is not capable of receiving instructions. Training family caregivers before their loved ones are discharged can help alleviate stress and suffering and in some cases save lives.

Please support HB 2252, HD 1 so that instructions or training be provided to family caregivers in order that their loved ones remain in their homes as long as possible.

Thank you very much.

Rose Nakamura

Administrator, Project Dana

House Finance Committee Representative Sylvia Luke, Chair

Re: HB-2252 HD1 – RELATING TO DISCHARGE PLANNING

Chair Luke and members of the Committee:

I support HB-2252 HD1 with amendments 1 and 2.

Amendment 1-the bill's preamble should be more balanced to reflect the needs of family caregivers as well as the hospitals.

Amendment 2-The designation of caregiver should go beyond the federal rules and guidelines and include all hospital inpatients having the opportunity to designate a family caregiver.

My name is Ken Takeya, I have been a caregiver for my wife the last 13 years. She suffers from a form of dementia so she is unable to speak for herself. During our journey she has visited the emergency room and was admitted to the hospital a few times for various reasons. On two of her visits she was released from the hospital and I was given very few instructions on her care. I was not smart enough to ask the right questions so on both occasions she was re-admitted because I did not know what to look for or do during her recovery at home. Not only was it costly but a waste of time for both the hospital staff as well as us. A hospital visit by a person without dementia can be scary. A person with dementia it can to traumatic because they do not understand what is going on. I now know what questions to ask and what to look out for but it could have been prevented if someone took a little more time prior to her discharge to explain what to do and what to look out for.

As part of the Hawaii CARE Act Coalition, I support the Care Act with the hope that someone else will not have to go through what we experienced. Somehow the compassion for the caregiver and their loved one has been replaced by financial concerns of the hospitals and insurance companies.

Sincerely,

Ken Takeya

Sent: Thursday, February 25, 2016 6:35 AM

To: FINTestimony

Cc: sarahyuan@gmail.com

Subject: Submitted testimony for HB2252 on Feb 26, 2016 11:00AM

HB2252

Submitted on: 2/25/2016

Testimony for FIN on Feb 26, 2016 11:00AM in Conference Room 308

Submitted By	Organization	Testifier Position	Present at Hearing	
Sarah Yuan	Individual	Support	No	

Comments: Aloha Chair Luke and Members of the Finance Committee: I support HB2252 HD1 with two clarifying technical amendments that are being proposed by the AARP for this bill at this hearing. Thank you!

Please note that testimony submitted <u>less than 24 hours prior to the hearing</u>, 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.

House Finance Committee Representative Sylvia Luke, Chair

Re: HB2252 HD1, RELATING TO DISCHARGE PLANNING

Date: Friday, February 26, 2016

Time: 11 a.m.

Honorable Chair Luke and Members of the Committee:

My name is Simone C. Polak, and I'm a resident of Maui. My comments are based on my personal experiences as a caregiver to my life partner Leticia who at age 43 was diagnosed with an aggressive form of Multiple Myeloma, an excruciatingly painful, incurable blood cancer. From 2008, until her death in 2012, Leticia was hospitalized numerous times on Maui and on Oahu in acute care facilities. Some hospitals provided excellent discharge and immediate after care instructions to Leticia and I as her caregiver - others not so much!

I am deeply grateful to that the Hawaii Legislature has recognized the need for a strong discharge planning bill which will include the patient and caregiver. I am pleased with the progress this bill has made thus far; I especially <u>support</u> the revised definition of "patient" to mean "an individual admitted to hospital for inpatient treatment" under HD1.

Reading the preamble of the bill, however, I must express my disappointment that its entire focus is on the concerns of hospitals, while blatantly ignoring the plight of every caregiver in Hawaii; there are over 154,000 unpaid caregivers in Hawaii who annually provide services valued at \$2.1 billion. Personally, at various stages in Leticia's treatment, I provided almost exclusive care to her, while holding a demanding full-time job. I performed "simple" caregiving tasks such as bathing, cooking (including special diets as needed), shopping, accompany/give rides to clinic for chemo/blood transfusions/Dr. appointments, handling insurance issues, as well as more "complex" tasks such as medication coordination/administration, gave injections as needed, and following several surgical procedures, I provided wound care and Hickman catheter flushing. It is obvious that clear and comprehensive discharge instructions to the patient and the caregiver not only contribute to the safety and continued recovery of the patient, but also prevent unnecessary re-admissions which benefits hospitals.

Many caregivers have similar experiences to mine, and it is therefore rather surprising and sad that the preamble is not more balanced by providing acknowledgment and support for the army of dedicated caregivers who give so much of themselves for their loved ones! Surely, the Legislature does appreciate the immense contributions and sacrifices that family caregivers all over Hawaii are tirelessly making - we all know caregivers or people needing caregivers! Also not acknowledged is the undeniable fact that in 2012 alone, Hawaii had the highest percentage of residents in the United States over age 85, and their numbers are projected to increase by 56% over the next 20 years, which of course will only lead to a higher number of caregivers! In fact, Judiciary Committee Chair Karl Rhoads in HSCR511-16 provides a strong acknowledgment of the critical role of caregivers and recognized that "[t]he dramatic expansion of caregivers' responsibilities and the need for post-hospital care for older adults and others require strong State and community support to help caregivers support their loved ones at home." HSCR511-16, p.2.

I strongly urge this Committee to revise this bill's preamble to include a factual, fair and balanced view of the reasons for this bill, acknowledging the hospitals <u>and caregivers</u> needs and concerns.

Secondly, the Preamble states "The purpose of this Act is to *complement* the federal discharge planning requirements that hospitals follow...." (Emphasis supplied). See, Section 2, § -2, (page 4-5 of bill)

entitled, Designation of a caregiver. In addressing caregivers' opportunity to be designated, notified, and instructed, that section should make clear that these provisions are not just *complimentary*, but in fact *mandatory* to be included in a written discharge plan.

As a former caregiver and a member of the Hawaii CARE Act Coalition, I strongly believe that HB2252 HD1 should be clear that its intent is to implement CARE Act provisions that go <u>beyond</u> existing federal guidelines and the proposed, but not yet adopted, Center for Medicare and Medicaid Services (CMS) rules – which leave the important decision of whether to involve family caregivers in the discharge process in the hands of the hospital, not the patient. To do otherwise would leave in place the status quo and would continue two (2) tier system: patients who are considered "worthy" by hospitals of adequate discharge planning which include the caregiver, and those who are not. I believe that is wrong.

I am pleased with the progress that has been made to date on an issue of great concern to many Hawaii caregivers and community members.

I am in support of HB 2252 HD1, if the suggested two non-substantive, but clarifying amendments are made.

Thank you for the opportunity to submit written testimony.

Aloha, Simone C. Polak Wailuku, Maui, HI 96793

Sent: Thursday, February 25, 2016 10:39 AM

To: FINTestimony

Cc: alohaessenceofmaui@hawaii.rr.com

Subject: Submitted testimony for HB2252 on Feb 26, 2016 11:00AM

HB2252

Submitted on: 2/25/2016

Testimony for FIN on Feb 26, 2016 11:00AM in Conference Room 308

Submitted By	Organization	Testifier Position	Present at Hearing	
David L Wilson	Individual	Support	No	

Comments: We are David and Ellen Wilson, We live on Maui. We are Caregivers for my 89 year old soon to be 90 year old paraplegic Mother with 3 subcutaneous ulcer sores, 2 catheters, and some Dimensia. We have been giving her care since 2010. We have had several incidents with the hospital in not giving us the appropriate instructions for her care upon discharge. Twice she ended up back in the hospital because of this. This is why we are in firm support of HB2252 HD1 with amendments. The bill's preamble should be balanced to reflect the needs of family caregivers (not just hospitals). The bill should give all hospital inpatients the opportunity to designate a family caregiver to be included in the discharge process (and not leave that decision to hospital discretion). The bill should exceed the federal standards related to hospital discharge. Simply meeting the federal standard isn't enough, as that would simply promote the status quo. We are asking you very sincerely to pass the Care Act as all of us Caregivers need your help. We will all be the one in need some day if we're not already. Mahalo for your help, Very Sincerely, David and Ellen Wilson and Alice Wilson Our Mother and Patient Sent from my iPhone

Please note that testimony submitted <u>less than 24 hours prior to the hearing</u>, 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.

Sent: Thursday, February 25, 2016 9:03 AM

To: FINTestimony

Cc: ghissourosala@yahoo.com

Subject: Submitted testimony for HB2252 on Feb 26, 2016 11:00AM

HB2252

Submitted on: 2/25/2016

Testimony for FIN on Feb 26, 2016 11:00AM in Conference Room 308

Submitted By	Organization	Testifier Position	Present at Hearing
Ghissou Rosala	Individual	Comments Only	No

Comments: The purpose of this service is to serve patients and families for a better care at home. This is an important part of quality care for the patients and ease of mind for families.

Please note that testimony submitted <u>less than 24 hours prior to the hearing</u>, 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.

Sent: Thursday, February 25, 2016 12:05 AM

To: FINTestimony

Cc: phillipsa008@hawaii.rr.com

Subject: Submitted testimony for HB2252 on Feb 26, 2016 11:00AM

HB2252

Submitted on: 2/25/2016

Testimony for FIN on Feb 26, 2016 11:00AM in Conference Room 308

Submitted By	Organization	Testifier Position	Present at Hearing
Kathleen Phillips	Individual	Comments Only	No

Comments: Re: HB2252 HD1, RELATING TO DISCHARGE PLANNING My Name is Kathleen Phillips. I live I Pukalani, Maui, Hawaii. I am part of the Hawaii Care Act Coalition. I am in support of HB2252 HD1 with amendments. My support is contingent on the amendments being made. I am a Caregiver for my husband and my 45 year old daughter who had a massive stroke last year. The proposed legislation should give all hospital in-patients and their designated caregivers the opportunity to receive after-care instructions prior to discharge. Patients and their caregivers should have a voice in determining if they need to have instructions explained to them – prior to discharge. It is important that all caregivers be included with the discharge instructions and receive instructions in the aftercare tasks they will perform at home. I have had several occasions that we had problems upon discharge and the aftercare of my family member. I have spoken with several people who have shared similar discharge concerns. In conclusion, I believe that the bill should exceed the federal standards related to hospital discharge. Simply meeting the federal standard isn't enough, as that would simply promote the status quo. Thank you for your help. Kathleen Phillips

Please note that testimony submitted <u>less than 24 hours prior to the hearing</u>, 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.

Re: HB2252 HD 1 – RELATING TO DISCHARGE PLANNING

Chair Luke and Members of the Committee:

My name is Paul Nishimura and I am part of the Hawaii CARE Act Coalition. I support HB2252 HD1 with amendments. If the concern is truly for the health and comfort of the patient then all hospital in-patients and their designated caregivers must be given the opportunity to receive after-care instruction prior to discharge. This legislation should not move forward without the amendments

The preamble needs to be amended to bring attention to the patients and their caregivers who are providing the care. "Put the patient first" as Representative Bellati said when advancing bills to streamline physician sanctions. In Hawaii 154,000 family caregivers provide \$2.1 billion in unpaid care. As currently written it sounds like the hospitals are the only ones who are affected by this bill. The \$23,000,000 figure includes out-patient care so is very misleading.

The updated Federal discharge planning requirements still allow hospitals to determine who receives aftercare instructions. CARE Act provisions go beyond the Federal requirements and gives every in-patient a voice in the discharge planning.

I am pleased that progress has been made in moving CARE Act legislation forward. I encourage revisions to make clear the importance of caregivers in the discharge planning.

Thank you for the opportunity to testify.

Sent: Wednesday, February 24, 2016 10:24 PM

To: FINTestimony

Cc: gertiehara@gmail.com

Subject: Submitted testimony for HB2252 on Feb 26, 2016 11:00AM

HB2252

Submitted on: 2/24/2016

Testimony for FIN on Feb 26, 2016 11:00AM in Conference Room 308

Submitted By	Organization	Testifier Position	Present at Hearing
Gertrude Hara	Individual	Comments Only	No

Comments: "I Support the CARE ACT" as this Bill indicates great impact both caregivers and "all patients" in admitting, identify and instruct prior to patients discharge. Thank you for this opportunity in readdressing patients their caregivers to identify and be known prior to releasing from hospital.

Please note that testimony submitted <u>less than 24 hours prior to the hearing</u>, 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.

To: House Committee on Finance

Representative Sylvia Luke, Chair

Date: Friday, February 26, 2016

11:00 a.m., Room 308

Re: HB 2252, HD1 – RELATING TO DISCHARGE PLANNING

Chair Luke and members of the Committee:

I am Audrey Suga-Nakagawa, a private consultant with over 25 years of health care administration and geriatric services in Hawaii. I have worked in our public hospital system as well as with the State and county agencies on aging, the University of Hawaii and private nonprofit organizations serving Hawaii's older adults throughout my career. I am also a former family caregiver who took care of both parents for over 10 years until their recent passing. Therefore I am very familiar with our health care system both professionally and personally. I support House Bill 2252 HD1, with the following recommended revision:

- 1. The preamble of this bill should be revised to reflect a balanced view of the concerns of both the hospitals and caregivers. Currently, the preamble speaks from the hospital's perspective only.
- 2. To clarify that the opportunity for a caregiver to be designated, notified, and instructed is not only complementary, but integral, to a hospital's discharge policy or policies.

The bill should give all hospital patients the opportunity to designate a family caregiver to be included in the discharge process (and not leave that decision to hospital discretion). The bill should also exceed the federal standards related to hospital discharge. Simply meeting the federal standard isn't enough, as that would simply promote the status quo.

Thank you for allowing me to submit my testimony.

Sincerely,

Audrey Suga-Nakagawa 1626 Ala Mahina Place Honolulu, Hawaii 96819

Sent: Wednesday, February 24, 2016 8:14 PM

To: FINTestimony

Cc: suezv@hawaiiantel.net

Subject: Submitted testimony for HB2252 on Feb 26, 2016 11:00AM

HB2252

Submitted on: 2/24/2016

Testimony for FIN on Feb 26, 2016 11:00AM in Conference Room 308

Submitted By	Organization	Testifier Position	Present at Hearing
Susan Ventura	Individual	Support	No

Comments: I support HB2252 HD1 with the AARP amendments.

Please note that testimony submitted <u>less than 24 hours prior to the hearing</u>, 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.

Sent: Wednesday, February 24, 2016 7:35 PM

To: FINTestimony

Cc: marvshel@gmail.com

Subject: Submitted testimony for HB2252 on Feb 26, 2016 11:00AM

HB2252

Submitted on: 2/24/2016

Testimony for FIN on Feb 26, 2016 11:00AM in Conference Room 308

Submitted By	Organization	Testifier Position	Present at Hearing
MICHELE PAULARENA	Individual	Comments Only	No

Comments: Aloha, My name is Michele Paularena and I am a member of the Hawaii Care Act Coalition. I support HB2252 HD1 with amendments. The bill's preamble should be balanced to reflect the needs of family caregivers (not just hospitals). The bill should give all hospital inpatients the opportunity to designate a family caregiver to be included in the discharge process (and not leave that decision to hospital discretion). The bill should exceed the federal standards related to hospital discharge. Simply meeting the federal standard isn't enough, as that would simply promote the status quo. Thank you for allowing me to testify, Michele Paularena Kahului, HI

Please note that testimony submitted <u>less than 24 hours prior to the hearing</u>, 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.

TO: HOUSE COMMITTEE ON FINANCE

Representative Sylvia Luke, Chair

Representative Scott Y. Nishimoto, Vice Chair

FROM: Eldon L. Wegner, Ph.D.

HEARING: 11 am Friday, February 26, 2016

Conference Room 308, Hawaii State Capitol

SUBJECT: HB 2252 HD1 Relating to Hospital Discharge Planning

POSITION: I strongly support HB 2252 HD1 which would require hospitals to

request patients to identify their family caregiver, to inform caregivers prior to transferring the patient, and to include the caregiver provide when instructions to on the care of the patient after being discharged to home.

RATIONALE:

This proposed bill addresses would improve the ability family caregivers to provide quality care for their frail and disabled loved ones after being discharged from the hospital to home.

- Family caregivers provide 70% of the care for frail elderly persons and thus bear the
 major burden and expense of care. However, they also need to have the knowledge
 and skills to perform the tasks expected of them.
- The shift from hospital and institutional care to maintaining patients in their homes has
 greatly increased the demands on family caregivers. At the same time, hospitals
 have reduced their discharge planning and role in assuring adequate post-hospital
 care. Consequently, the rate of re-admissions due largely to inadequate care at
 home has greatly increased.
- These re-admissions also result in costly fines for hospitals. Hospitals have a responsibility to address this problem to minimize risk to patients as well as to control their costs.
- Caregivers need to be identified, included in the discharge planning, and included in providing information of the tasks which will be expected of them.
- The current bill addresses the fears of hospitals for incurring liability and is a sensible approach to making it feasible to arrange for the needed training of caregivers.

I urge you to pass this much needed bill. Thank you for allowing me to offer testimony.

Thank you for giving me the opportunity to submit testimony.

To: House Committee on Finance

Representative Sylvia Luke, Chair

Date: Friday, February 26, 2016

Time: 11:00 a.m.

Location: Conference Room 308

Re: HB2252, HD1 Relating to Discharge Planning

Chair Luke and Members of the Committee:

My name is Esther Ueda, and I am writing to provide comments on SB 2252 HD Relating to Discharge Planning.

I have assisted in various aspects of caregiving and also have many friends and family members who are currently caregivers or have been caregivers in the past. Based on my experience, I feel it is really important for family caregivers to get some training to care for their loved ones. It is very costly to obtain professional care, and many families try to do the best they can without professional help or with limited professional help.

This bill would help to make sure that steps are followed in the hospital discharge process, to assist family caregivers in getting proper training to help care for loved ones after they are discharged from the hospital.

I support the bill with an amendment to the preamble to reflect a more balanced view of the concerns of caregivers and hospitals, inasmuch as supporting caregivers is a key element of the proposed bill.

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In summary, I support HB2252 HD1 with the proposed amendment.

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Thank you for the opportunity to submit these comments..

Sincerely,

Esther Ueda

Pearl City, Hawaii

The Twenty-Eighth Legislature Regular Session of 2016



HOUSE OF REPRESENTATIVES

Committee on Finance Rep. Sylvia Luke, Chair Rep. Scott Y. Nishimoto, Vice Chair State Capitol, Conference Room 308 Friday, February 26, 2016; 11:00 a.m.

STATEMENT OF THE ILWU LOCAL 142 ON H.B. 2252, HD1 RELATING TO DISCHARGE PLANNING

The ILWU Local 142 **supports** H.B. 2252, HD1, which requires hospitals to adopt and maintain discharge policies, consistent with recent updates to federal regulations, to ensure that patients continue to receive necessary care after leaving the hospital.

The ILWU is a member of a coalition that supports the CARE Act, which has been considered by the Legislature the past two legislative sessions. The CARE Act proposes to require hospitals to give a patient admitted to a hospital for inpatient treatment the opportunity to designate a caregiver, to notify the designated caregiver about planning for the patient's discharge, and to provide the caregiver with instructions for any after-care needs at home. Two working groups have met to work on language that will be agreeable to all.

We believe the language in H.B. 2252, HD1 adequately addresses concerns, particularly after an amendment by the House Committee on Health to simplify the definition of "patient" and remove any concern that hospitals may deny patients the right to a designated caregiver's support.

In our view, there are common-sense reasons for designating a caregiver when the patient is frail elderly, seriously ill or disabled, and incapable of caring for himself or herself. And there are also legal concerns that hospitals rightly have about liability if they are required to provide aftercare instructions. But H.B. 2252, HD1 and other bills dubbed "the CARE Act" address these concerns by including language to shield hospitals from liability.

The ILWU believes it is time to come to an agreement and move forward. We urge passage of H.B. 2252, HD1. Thank you for the opportunity to provide testimony on this measure.



HAWAII GOVERNMENT EMPLOYEES ASSOCIATION

AFSCME Local 152, AFL-CIO

RANDY PERREIRA, Executive Director • Tel: 808.543.0011 • Fax: 808.528.0922



The Twenty-Eighth Legislature, State of Hawaii House of Representatives

Committee on Finance

Testimony by Hawaii Government Employees Association February 26, 2016

> H.B. 2252, H.D. 1 - RELATING TO DISCHARGE PLANNING

The Hawaii Government Employees Association, AFSCME Local 152, AFL-CIO is providing comments on H.B. 2252, H.D. 1 Relating to Discharge Planning. HGEA fully supports Hawaii's 154,000 family caregivers across the state and was encouraged by the bills introduced this session.

HGEA is part of the coalition with AARP to support the CARE Act that is part of the Kupuna Caucus package introduced this session, (S.B. 2208 and H.B. 1879), and feels that the language in those bills addresses the issues for the caregivers. However, we are prepared to support H.B. 2252, H.D. 1 with the following clarifying technical amendments:

The preamble of this bill should be revised to reflect more accurately the concerns of the caregivers and the patient rather than focused on the hospitals perspective. H.B.2252, H.D.1 needs to be clear that its intent is to implement the CARE Act provisions that go beyond existing federal guidelines and the proposed Center for Medicare and Medicaid Services (CMS) rules.

Secondly, the proposed legislation should give all hospital in-patients and their designated caregivers the opportunity to receive after-care instructions prior to discharge. Patients and their caregivers should have a voice in determining if they need to have instructions explained to them prior to discharge.

HGEA is committed to Hawaii's family caregivers, and feels that H.B. 2252, H.D.1 should be broadened to include the patient in the discharge process and not just the hospitals.

Thank you for the opportunity to provide comments on this measure.

Sincerely,

Kandy Perreira
Executive Director



From: CPH Testimony

Sent: Friday, February 26, 2016 9:21 AM

To: FINTestimony

Subject: FW: amendment proposal for HB 2252 HD1

Forwarding late testimony.

Mahalo, Christina

From: Joanne Nishihara [mailto:jnnishihara@gmail.com]

Sent: Friday, February 26, 2016 9:11 AM

To: CPH Testimony

Subject: amendment proposal for HB 2252 HD1

Rep Karl Rhoads and Committee,

My name is Joanne Nishihara and I am in support of the amended proposal for bill HB2252 Hd1.

I am an AARP Advocacy volunteer, an AARP Taxaide volunteer and I also volunteer with Hospice.

The passing of HB2252 HD1 is a most crucial point for the elderly and caregivers of which I am at the beginning stages with my mother. Not only are there no guidelines in place, the hospital and medical systems have such different procedures and frankly don't seem to know what the different health care insurers rules are. Maneuvering this is mind boggling

I realize now that elderly patients have such different needs and family situations as well as financial ability. Skilled nursing facilities, long term care and in home care, please tell me where you can find this information until you are in need?

People who aren't prepared and have no idea how hard it is to care for someone, especially an elderly person need this bill passed.

Thank you,

Sincerely,

Joanne Nishihara

