DAVID Y. IGE GOVERNOR



CATHY BETTS DIRECTOR

JOSEPH CAMPOS II DEPUTY DIRECTOR

## STATE OF HAWAII DEPARTMENT OF HUMAN SERVICES

P. O. Box 339 Honolulu, Hawaii 96809-0339

January 31, 2022

TO: The Honorable Joy A. San Buenaventura, Chair Committee on Human Services

FROM: Cathy Betts, Director

SUBJECT: SB 2919 – RELATING TO DISABILITY HEALTH DISPARITY

HEARING: Tuesday, February 1, 2022, 3:00 pm Via Videoconference, State Capitol

**DEPARTMENT'S POSITION**: The Department of Human Services (DHS) supports the intent of this measure to report on health disparities for people with disabilities at the population health level. However, DHS does not have access to population health level information for people with disabilities and defers to the Department of Health.

**PURPOSE**: The purpose of this measure is to compile a report focused on health disparities experienced by individuals with disabilities by DHS to be submitted before the start of the next regular session of the legislature of 2023.

The report on health disparities experienced by individuals with disabilities is to include at a population health level, the duration, and severity of health conditions required to qualify for disability status, information about chronic diseases, access to health insurance, access to healthcare services such as wellness visits, social determinants of health such as household income, employment status, access to information technology. The report is to provide information that would assist the State in determining safe, equitable, and culturally appropriate public health actions that would improve health care and address health disparities experienced by people with disabilities, and to propose legislation including best practices that would help reduce the identified health disparities.

DHS does have some information for people with disabilities from both the Division of Vocational Rehabilitation and the Medicaid program, QUEST Integration. However, DHS only serves a subset of Hawaii's population with disabilities. Additionally, the health information is only related to individuals' healthcare services while on QUEST. The data is not at the population level, nor does it include the requested broad range of social determinants of health data. The Department of Health may have more access to the requested report data given their access to population health data sources such as the Behavioral Risk Factor Surveillance System.

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

DAVID Y. IGE GOVERNOR OF HAWAII



ELIZABETH A. CHAR, M.D. DIRECTOR OF HEALTH

STATE OF HAWAI'I STATE COUNCIL ON DEVELOPMENTAL DISABILITIES PRINCESS VICTORIA KAMĀMALU BUILDING 1010 RICHARDS STREET, Room 122 HONOLULU, HAWAI'I 96813 TELEPHONE: (808) 586-8100 FAX: (808) 586-7543 February 1, 2022

The Honorable Senator Joy A. San Buenaventura, Chair Senate Committee on Human services The Thirty-First Legislature State Capitol State of Hawai'i Honolulu, Hawai'i 96813

Dear Senator San Buenaventura and Committee Members:

SUBJECT: SB2919 Relating to Disability Health Disparity

The Hawaii State Council on Developmental Disabilities **STRONGLY SUPPORTS SB2919**, which requires the Department of Human Services to submit a report focused on the health disparities experienced by individuals with disabilities in Hawaii before Regular Session of 2023.

As we know from national statistics Individuals with Intellectual and or developmental disabilities (I/DD) are more at risk for sexual violence, health issues, unemployment, and other societal disparities. An issue that is under researched is the data disparity that individuals with I/DD face especially within the State of Hawaii. There is an overall lack of data collected on and reported for this section of our community. This measure seeks to alleviate this issue in regard to health disparity data surrounding individuals with disabilities.

The Council supports this measure but, would like to offer comment on how to define groups of individuals with disabilities. Disabilities as a whole is a large category of the population with meaningfully different experiences. For the purposes of this measure the Council hopes whatever data provided accounts for the different experiences brought by different types of disabilities.

Thank you for the opportunity to submit testimony in strongly support of SB2919.

SB2919 Relating to Disability Health Disparity February 1, 2022 Page 2 of 2

Sincerely,

Rainty Bartillus

Daintry Bartoldus Executive Administrator



20 Years of Empowering People to Live, Work, Learn and Enjoy Life on Hawai'i Island

To: Committee on Human Services Hearing Date/Time: 2/1/2022 at 3:00pm Re: **SB 2919** ,Relating to disability health disparity

Dear Chair Sen. San Buenaventura, Vice Chair Sen. Ihara, Jr., and committee members,

Thank you for the opportunity to *testify in support* on SB 2919 relating to disability health disparity.

Many people with intellectual and developmental disabilities are at higher risk for social disparities such as poverty, community inclusion, access to health care, and other social determinates of health. This bill would provide much needed data and a better understanding of needs for people with disabilities living in Hawai'i. With this data we as a community can benchmark progress and take additional action to address the areas of most significant disparities.

Thank you, Jim Kilgore, Executive Director Full Life

## <u>SB-2919</u> Submitted on: 1/31/2022 12:38:09 PM Testimony for HMS on 2/1/2022 3:00:00 PM

| Submitted By   | Organization             | <b>Testifier Position</b> | Remote Testimony<br>Requested |
|----------------|--------------------------|---------------------------|-------------------------------|
| Denise Lindsey | Testifying for Full Life | Support                   | No                            |

Comments:

I am submitting for a DD participant with Full Life in Kona who is unable to submit his testimony by himself.

I am concerned citizen and i want to help people with disabilities:

Needed are more group homes and facilities to aid them with living appropriately. We in Kona are scarcely provided for when comparing Hilo to Kona, Hilo seems to be given adequate resources for the disabled population, however Kona is barely supplied for.

I am a disabled person, could you please assist in giving us this support.

Aloha

**Roy Corpuz** 

## <u>SB-2919</u> Submitted on: 1/31/2022 2:33:01 PM Testimony for HMS on 2/1/2022 3:00:00 PM

| Submitted By     | Organization                                       | <b>Testifier Position</b> | Remote Testimony<br>Requested |
|------------------|--|---------------------------|-------------------------------|
| Sierra Whiteside | Testifying for Full Life & Special Olympics Hawaii |                           | No                            |

Comments:

ALOHA, I feel strongly on these items.

- 1. Affordable and accessible housing.
- 2. More programs that can help special needs with life skills and socialization.
- 3. More accessible transportation
- 4. More job opportunities for Special needs that can work.
- 5. Funding for schooling
- 6. Better Healthcare coverage
- 7. If funding for the Native Hawaiian population for Disabilites exists, I'd like to see this happen with housing, work, medical needs and transportation.

Warmest Aloha,

Sierra Whiteside



| Submitted By | Organization | Testifier Position | Remote Testimony<br>Requested |
|--------------|--------------|--------------------|-------------------------------|
| Liza Yogi    | Individual   | Support            | No                            |

Comments:

My son has cerebral palsy and he is developmentally disabled with Bi-polar and Schizo affective disorder.

He was diagnosed with the dual diagnosis since 2005. Many years later, he developed behaviors that caused a lot of disruption in our lives. Not only did he become unmanageable, he also lost his will to live. He consequently did not want to eat nor sleep. He lost approximately 50 lbs. in a matter of 3 months.

From 2011, we have asked fo him to be admitted and evaluated by the qualified staff of the hospital hospital but instead, we were forced to take him out in 3 days. I always appealed to Medicare for his safety and ours in order to be kept and treated by the hospital. He was drugged, basically and then discharged because he is no longer acute as they say. It's only chemical restraint that they used. They didn't aim to stabilize him.

This happened over and over until recently, they refused to admit him because they claimed that they have no capability to provide services to developmentally disabled individuals.

This is discrimination! They kept him in the emergency room for 5 days and did not admit him to help him get better even when he lost 50 lbs. They even threatened to send him home in a cab or turn us in to adult protective services. Adult protective services did not respond to them. It was their tactic to put us under duress to get him out of the hospital.

This is only one of the cases that the developmentally disabled and the families face. I was told that it is the law. They have to follow the home community based settings which are in this case inadequate to address this kinds of situations.

For the sake of the helpless individuals like my son, please look into this disparity. and change the law.

Liza Yogi

| From:    | Mark Vierra                           |
|----------|---------------------------------------|
| To:      | HMS Committee                         |
| Subject: | Testimony for SB 2919                 |
| Date:    | Tuesday, February 1, 2022 10:30:13 AM |

**CAUTION:** This email originated from outside of the organization. Do not click links or open attachments unless you recognize the sender and know the content is safe.

## Hello Jackie:

I am in strong support for SB 2919 and would like a zoom link to give oral testimony.

Thank you so much--Mark

Mark Vierra

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www.onthemark.net 831-252-7700\_dir 75-5660 Kopiko St #C7-105 Kailua-Kona, HI\_96740