

JOSH GREEN, M.D.
GOVERNOR OF HAWAII
KE KIA'AINA O KA MOKU'AINA 'O HAWAII

DEPT. COMM. NO. 071
KENNETH S. FINK, MD, MGA, MPH
DIRECTOR OF HEALTH
KA LUNA HO'OKELE



STATE OF HAWAII
DEPARTMENT OF HEALTH
KA 'OIHANA OLAKINO
P. O. BOX 3378
HONOLULU, HI 96801-3378

In reply, please refer to:
File:

December 29, 2023

The Honorable Ronald D. Kouchi,
President and Members of the Senate
Thirty-second State Legislature
State Capitol, Room 409
Honolulu, HI 96813

The Honorable Scott K. Saiki, Speaker
And Members of the House of
Representatives
Thirty-second State Legislature
State Capitol, Room 431
Honolulu, HI 96813

Aloha President Kouchi, Speaker Saiki, and Members of the Legislature:

For your information, I am transmitting a copy of the following report.

Annual Report on Elder Programs of the Executive Office on Aging, 2023

Pursuant to section 93-16, Hawaii Revised Statutes, this report may be viewed online at:

<https://health.hawaii.gov/opppd/department-of-health-reports-to-2024-legislature/>

Sincerely,

Kenneth S. Fink, MD, MGA, MPH
Director of Health

Enclosures

C: Legislative Reference Bureau
Hawaii State Library System (2)
Hamilton Library

**REPORT TO THE THIRTIETH HAWAI‘I STATE
LEGISLATURE 2024 SESSION**

Executive Office on Aging Annual Report for SFY 2023

**IN ACCORDANCE WITH THE PROVISIONS CHAPTER 349-5(b)(2), HAWAII
REVISED STATUTES, REQUIRING THE EXECUTIVE OFFICE ON AGING TO
PROVIDE AN ANNUAL REPORT ON ELDER PROGRAMS FOR THE GOVERNOR
AND THE LEGISLATURE**

**Prepared by
Department of Health
Executive Office on Aging
State of Hawai‘i**

December 2023

EXECUTIVE SUMMARY

The Executive Office on Aging (EOA), an attached agency to the Department of Health respectfully submits this annual report in accordance with Section 349-5(b)(2), Hawaii Revised Statutes (HRS). The report covers the EOA's programs, services, activities, and initiatives from July 1, 2022 through June 30, 2023 (State Fiscal Year (SFY) 2023).

The Aging Network continued to adjust following the aftermath of the COVID pandemic. We witnessed kūpuna returning to activities such as congregate dining, senior centers, and participation in outreach and education events. We provided Hawai'i's kūpuna with education and assistance to increase digital literacy, connectivity, and accessibility to online resources. We continued to address food insecurity, housing, and social isolation.

The Aging Network workforce challenges are ongoing. The lack of workers at all levels has strained our system and impacted the vast array of programs and initiatives that span the aging continuum from healthy older adults, to those needing in-home long-term services and supports, to our most frail and vulnerable residents.

In SFY 2023, the EOA received \$12,991,266 in State funds and \$8,222,886 in federal funds for a total of \$21,214,152. EOA contracted with the designated Area Agencies on Aging (AAAs) to procure, manage, and coordinate the delivery of long-term supports and services in their respective counties. State funds supported the Aging and Disability Resource Center and the Kūpuna Care (KC) program.

In addition, EOA manages the following direct service programs: The Long-Term Care Ombudsman Program (LTCOP) and the LTCOP Volunteer Program, the Hawai'i State Health Insurance Assistance Program (SHIP), the Senior Medicare Patrol (SMP), the Community Living Program, and the Veterans-Directed Care Programs. EOA supports the Hawaii Healthy Aging Partnership (HHAP), No Wrong Door initiative (NWD) and the Building our Largest Dementia (BOLD) Infrastructure for Alzheimer's project.



TABLE OF CONTENTS

	Page
Executive Summary	j
Part I. Background Information	1
A. Vision, Mission, and Statutory Basis	1
B. Hawai'i State Plan on Aging 2023–2027	1
Part II. State and Federal Funding	2
Part III. Long-term Services and Supports	2
A. Aging and Disability Resource Center	2
B. Kūpuna Care Program	3
C. Title III Older Americans Act Services and Legal Services	4
D. Service Utilization Statewide	5
Part IV. Safety Net Programs and Other Special Initiatives	6
A. Other Federal Grant Programs	6
1. Long-Term Care Ombudsman Program	6
2. Long-Term Care Ombudsman Volunteer Program	7
3. Hawai'i State Health Insurance Assistance Program	8
4. Hawai'i Medicare Improvements for Patients and Providers Act	9
5. Senior Medicare Patrol Program	9
B. Special Initiatives	11
1. Hawai'i Healthy Aging Partnership	11
2. Community Living Program	12
3. Veteran-Directed Choice Program	12
4. No Wrong Door Initiative	12
5. Hawai'i Alzheimer's Disease Supportive Services Program Grant	13
6. Building Our Largest Dementia (BOLD) Infrastructure for Alzheimer's ...	13

Part I. Background Information

A. Vision, Mission, and Statutory Basis

Vision: Hawai'i is the best place to grow old

Mission: To optimize the health, safety, and independence of Hawai'i's older adults and people with disabilities. We support kūpuna and their caregivers through planning, development, advocacy, and coordination of policies, programs, and services.

The Older Americans Act (OAA) as amended, promotes the development and implementation of a comprehensive and coordinated system of long-term services and supports (LTSS) in home and community-based settings to enable older adults and persons with disabilities to live in their homes and communities.

The U.S. Administration on Community Living (ACL) of the U.S. Department of Health and Human Services (DHHS) designates state units on aging (SUAs) to lead the implementation of the OAA.

Chapter 349, Hawaii Revised Statutes (HRS) created the Executive Office on Aging (EOA) to function as the SUA in the state and carry out the responsibilities of a SUA as described in the OAA.

B. Hawai'i State Plan on Aging 2023 - 2027

EOA developed its four-year plan on aging during this reporting period. The State Plan on Aging (Plan) contains the goals, objectives, strategies, and outcomes that will guide EOA to implement and evaluate a comprehensive and coordinated system of LTSS for kūpuna, caregivers, persons with disabilities, and individuals with Alzheimer's Disease and Related Dementia (ADRD). A copy of the Plan is located at www.hawaiidrc.org.

The Plan establishes the following five goals:

Goal 1: Hawai'i's older adults have opportunities to live well.

Goal 2: Hawai'i's older adults are prepared for future health threats and disasters.

Goal 3: Hawai'i's older adults in underserved groups have equitable access to services and programs.

Goal 4: Hawai'i's older adults and persons with disabilities will age in place safely.

Goal 5: Hawai'i's caregivers have a broad array of services and supports to effectively care for their loved ones.

Part II. EOA’s State and Federal Funding for SFY 2023

Table 1

In SFY 2023, the total operating budget for the EOA was \$21, 214,152. Table 1 shows a breakdown of the source of funding between State (61%) and Federal (39%) monies.

SOURCE	SFY 2023	PERCENT
State	\$12,991,266	61%
Federal	\$8,222,886	39%
Total	\$21,214,152	100%

Part III. Long-Term Services and Support

EOA coordinates the continuum of care through programs, services, and supports to older adults residing in all care settings pursuant to federal and state laws. The Older Americans Act, Title III remains the cornerstone federal legislation that prescribes Hawai’i’s comprehensive array of services and supports for older adults and caregivers.

A. Aging and Disability Resource Center

Pursuant to HRS 349-31, EOA has the authority to establish a statewide Aging and Disability Resource Center (ADRC). The ADRC assists individuals in finding options to address their need for LTSS and to maintain their independence to age in place preserving their dignity and quality of life.

Table 2. Outcomes of Consumer Contacts with the ADRC for SFY 2023

Services	SFY 2022	SFY 2023
Number of Contacts Received by the ADRC*	25,717	41,591
Number of Assessments Conducted by the ADRC	4,451	3,849

*Contacts include phone calls, emails, and walk-ins.

ADRC contacts statewide increased by 61% from 25,717 in SFY22 to 41,591 in SFY23. This increase can be attributed to the ending of the COVID pandemic and the combination of older adults resuming and seeking LTSS as caregivers returned to work and individuals seeking information and assistance that resulted in referrals to other agencies or programs.

The number of assessments decreased from 2022 by 13.5%. The ADRC holistic assessment screens for eligibility of publicly funded services and supports. The decrease was likely due to contacts made to the ADRC that resulted in information and assistance only.

As the population increases annually, EOA expects a proportional increase in the number of in-home assessments that will be conducted in FY 2024 and will result in an increase in service delivery.

B. Kūpuna Care Program

The Kūpuna Care (KC) Program provides older adults with access to affordable and quality home and community-based services. KC goals are two-fold: 1) support elders to live at home for as long as possible, avoiding premature and costly placement in a long-term care facility, and 2) provide working caregivers with services and support for their loved ones so they can maintain employment. KC consists of nine core services namely adult day care, transportation, assisted transportation, case management attendant care, chore, homemaker, personal care, and home-delivered meals.

KC utilizes the ADRC holistic assessment to determine initial eligibility for core services. Applicants must be 60+ years of age, a U.S. citizen (or qualified alien), have a cognitive impairment such as Alzheimer's Disease or a disability, not be a resident in an institution, and not be enrolled under a comparable home and community-based services program.

To be eligible, older adults must have deficits in performing two or more Activities of Daily Living (ADL) such as eating, dressing, bathing, toileting, and transferring in/out of bed or chair; or Instrumental Activities of Daily Living (IADL) such as preparing meals, shopping, managing medication, managing money, using the telephone, doing housework, and using available transportation without assistance.

In SFY 2023, there were decreases in the number of older adults and services delivered to those receiving personal care, homemaker, chore, home-delivered meals, and adult day care. The decrease was likely due to providers having challenges with recruiting and retaining staff, which limits the number of older adults they can serve; post pandemic shift due to the re-opening of congregate meal sites; and the end of the ARPA funds.

Likewise, KC saw increases in case management, assisted transportation, and transportation services in SFY 2023. The increases were attributed to family members returning to work post-pandemic; increase in provider capacity; and older adults being more comfortable utilizing transportation services for shopping, attending medical appointments, and senior center activities that support their independence, health, and social interactions.

Table 3. Kūpuna Care Service Utilization SFY2022 and SFY 2023

KC Services*	Persons Served SFY2022	Units SFY 2022	Persons Served SFY2023	Units SFY 2023
Personal Care	462	37,473	429	33,405
Homemaker	517	21,915	482	20,579
Chore	52	680	34	582
Home Delivered Meals	44,345	612,031	2,236	387,888
Adult Day Care	345	209,780 hours/ 26,223 days	286	20,565
Case Management	3,657	23,498	4,808	23,245
Assisted Transportation	147	4,891	162	5,592
Transportation	2,007	79,943	2,188	90,222

*Units of measure changed from “hour” to “day”, resulting in significant difference in service units.

With EOA’s focus and commitment to long-term care workforce initiatives, we are optimistic to recruit and retain employees to provide LTSS to older adults, so they remain in their homes and avoid out of home placement.

C. Title III and Title VII of the Older Americans Act Services

In addition to Kūpuna Care, older adults and caregivers have access to other services and supports through the Older Americans Act (OAA), Title III Services. OAA programs and services represent a significant federal investment in developing a comprehensive, coordinated, and cost-effective system of home and community-based services (HCBS) that enable adults to have independent and healthy lives in their homes and communities.

- 1) **Title III-B: Supportive Services** provides transportation, information and assistance, outreach, and legal assistance.

Legal Assistance Services secures the rights, benefits, and entitlements for individuals. Our provider, Legal Assistance Services of Hawai’i (LASH) helped with housing, Social Security benefits, employment, advance planning directives, estate planning, and family law matters such as divorce, restraining orders, and guardianship statewide. In SFY2023, 2,176 older adults received 11,063 hours of legal assistance statewide.

The top 3 legal topic issues addressed include:

- advance planning for health care directives and powers of attorney,

- estate planning for simple wills and transfer off death deeds, and
- eviction and landlord tenant issues.

LASH participated in 58 outreach and awareness activities statewide by distributing informational brochures and fact sheets at events and fairs and conducting in-person and/or virtual presentations. Information was provided on advance care directives, estate planning, family law, vital documents, health insurance, SSI/SSDI, landlord/tenant rights, foreclosure, and reverse mortgage.

The EOA Legal Services Developer collaborated with local, state, and federal agencies on elder abuse prevention by participating in elder justice team meetings and coordinating training on elder abuse. In recognition of World Elder Abuse Day, the EOA partnered with the Hawai'i Public Health Institute, University of Hawai'i Center on Aging, and Department of Human Services Adult Protection and Community Services Branch to provide a statewide, virtual training on older adults who self-neglect and responsive approaches to care. About 220 service providers and community members attended the training.

- 2) ***Title III-C: Nutrition Services*** provides congregate and home-delivered meals and related nutrition services. Services are targeted to those in greatest social and economic need with attention to low-income individuals, minority individuals, those in rural communities, those with limited English proficiency and those at risk of institutional care.
- 3) ***Title III-D: Disease Prevention and Health Promotion Services*** promotes activities that support healthy lifestyles and promote healthy behaviors through the implementation of evidenced based interventions. Health education reduces the need for more costly medical interventions.
- 4) ***Title III-E: National Family Caregiver Support Program (NFCSP)*** offers a range of services to support family caregivers. Services to caregivers include the following: information to caregivers about available services and supports, assistance to accessing services, individual counseling, organization of support groups, and caregiver training, respite care, and supplemental services.

D. Service Utilization Statewide

This section covers the utilization of federally funded services in SFY 2023. Table 4 on page 6 shows the number of unduplicated persons served, service units delivered, and the unit measure.

Table 4. Utilization of Services in SFY 23

SERVICES*	PERSONS SERVED (Unduplicated)	UNITS OF SERVICE	MEASURE
Legal Services	2,176	11,063	Hours
Caregiver Services			
Respite Care	194	52,116	Hours
Counseling/Support Groups/Training	619	2,340	Sessions

*These services are funded with federal funds.

Part IV: Safety Net Programs and Special Initiatives

EOA offered several programs and special initiatives that enhanced the health, independence, safety, and well-being of older adults in Hawai'i, and improved their access to services. This section describes those programs and special initiatives and their performance in SFY 2023.

A. Other Federal Grant Programs

- 1) **Older Americans Act, Title VII: Long-Term Care Ombudsman Program (LTCOP)** serves as an advocate for residents of nursing homes (NF), adult residential care homes (ARCH), expanded ARCHs (E-ARCH), community care foster family homes (CCFFH), and assisted living facilities (ALF). The number of facilities statewide is approximately 1,790 with 12,942 beds. During SFY23 LTCO conducted 492 facility visits, met with 2,359 residents statewide, provided 223 consultations to facilities and providers, and offered information and assistance to 229 individuals and families.

LTCO investigate complaints from residents and work with the staff and the resident to resolve their concerns. The top complaints received were related to:

- Discharge or eviction
- Response to requests for assistance
- Resident representative or family conflict
- Staff response to complaints

Other LTCO issues encountered involved: facilities not being paid by insurance companies for resident care; residents being removed from Medicaid for no reason - then reinstated later; relatives attempting to misuse money from their elderly relative; residents wanting to take back their financial power of attorney; residents disagreeing with their discharge from a nursing home; and residents not getting enough physical or occupational therapy.

COVID also impacted residents and facilities as there were numerous outbreaks in many facilities. Family visitations were sometimes restricted or greatly reduced. PPE usage continued to be required, and staff shortages continued to increase over the past year. LTCO came across inconsistencies in COVID protocols for staff and visitors and in notifying residents about COVID cases.

During this period the highlight for the LTCOP was the declaration of August 5, 2022 as the Ombudsman Proclamation Day. After 25 years of advocating for neighbor islands to have their own Ombudsman the Legislature and the Governor approved funding for four (4) neighbor island Ombudsmen and an additional Ombudsman for O’ahu. Support from the media, legislators, and senior advocacy groups, like Kupuna Caucus, were instrumental in achieving this goal.

- 2) **Long-Term Care Ombudsman (LTCO) Volunteer Program** trains and certifies volunteers to assist the State Long-Term Care Ombudsman to identify, investigate, and resolve quality of life and quality of care issues to ensure that residents’ rights are honored and protected. In SFY 2023 there were nineteen volunteers certified as Volunteer Ombudsman. Volunteers provided 1,823 service hours valued at \$57,971 (based on 2023 national volunteer hourly rate). Despite intermittent facility closures due to active COVID cases, Volunteer Ombudsmen conducted 428 in-person visits, investigated and resolved 60 of 88 cases of complaints received, and consulted with 4,488 residents, family members or facility staff by phone, email, or in person.

During this period, in-person activities resumed and led to an increase in service hours, visits, and cases received. Table 5 shows the LTCO Volunteer Program accomplishments.

Table 5. Accomplishments for LTCO Volunteer Program

Activity	SFY 2022	SFY 2023
Volunteers	27	30
Volunteer Service Hours	819	1,823
Facility Visits	99	428
Cases Opened/Closed	34/27	88/60
Resident/Family Consultations	190	4,488
Field Training/Technical Assistance	432	469
Community Outreach Events	34	36

The Hawai’i Long-Term Care Ombudsman Program website, <https://www.hi-ltc-ombudsman.org/>, features information about the LTCOP program and volunteer

opportunities, current news, and links to the Office of Health Care Assurance, Adult Protective Services, legal services, Medicaid, Veterans Affairs, and other resources. The website has generated 121 phone calls, 7 anonymous complaints, and the recruitment of 9 new volunteers.

- 3) **Hawai'i State Health Insurance Assistance Program (SHIP)** is a volunteer-based program funded by the Administration for Community Living that educates and empowers Medicare beneficiaries to make cost-effective, informed health care decisions based on their own needs and ability to pay. Over 100 locally trained counselors helped 9,738 kūpuna, caregivers, and soon-to-be retirees with accurate, unbiased, and individual assistance.

Hawai'i SHIP counselors are certified by the Center for Medicare and Medicaid Services (CMS) and are not affiliated with any insurance provider. Services include free, confidential counseling, plan comparisons by county, and eligibility/enrollment in low-income subsidy programs. Table 6 lists the SFY2023 SHIP data requested by the legislature.

Table 6. Hawai'i SHIP Activities for SFY 2023

Activity*	SFY 2022	SFY 2023
Persons Reached through Outreach	8,369	9,739
Persons Screened for Eligibility for Medicaid/MSP or Extra Help**	1,859	1,873
Application Assistance Provided (Medicaid/MSP or Extra Help)	20	71

*Note: Performance based on statewide data.

**Each person screened was 1) uninsured, 2) losing health coverage at a future date, or 3) had a plan that did not meet their individual health needs or budget. If eligible, counseling with a SHIP Medicaid/MSP counselor was set. If ineligible, other options were provided such as a Marketplace plan.

Key accomplishments for SHIP included:

- *Passing SB900 in State Legislature.* Since 1992, when Hawai'i SHIP began, Hawai'i's aging population has increased by 300% as Baby Boomers turn 65. The increase in requests for help with Medicare, Medicaid, Marketplace, and other healthcare questions has strained current resources for years. SB900 became law as Act 252 and appropriates funds for three full-time positions to expand Hawai'i SHIP to meet the growing needs of kūpuna.
- *Expanding Outreach to Rural and Underserved Communities.* SHIP expanded its outreach efforts to rural and underserved communities by 1) training staff at health centers on Maui and Lana'i to provide in-depth information and assistance on Medicare benefits and enrollment to low-income or limited English-speaking patients, 2) distributing brochures in multiple languages and fielding inquiries about

Medicare at in-person fairs on the neighbor islands, 3) mailing out postcards that promote the Medicare Savings Program/Extra Help to households identified as low-income with a resident over the age of 50 on Hawai'i, Kaua'i, and Maui county, and 4) broadcasting radio ads on Hawai'i, Kaua'i, and Maui county to promote SHIP's services and volunteerism.

- 4) ***Hawai'i Medicare Improvements for Patients and Providers Act (MIPPA)*** contains multi-faceted provisions that enhance Medicare by allocating federal funding to State Health Insurance Assistance Programs (SHIP) to help low-income, limited English speaking, and rurally isolated Medicare beneficiaries. The program focuses on coalition-building to expand and coordinate outreach to Medicare beneficiaries likely to be eligible for Medicare Savings Programs (MSP) or Extra Help (EH). Initiatives target older adults, who are Native Hawaiian, under 65 with a disability, such as End-Stage Renal Disease (ESRD), lesbian, gay, bisexual, transgender, and queer (LGBTQ+), and other underserved and under-represented populations.

Key accomplishments for MIPAA included:

- *Expanding outreach to Native Hawaiian Elders.* MIPAA partnered with Alu Like, and the University of Hawai'i School of Social Work to provide information on Medicare/Medicaid and low-income subsidy programs to Alu Like's Kumu Kahi Elderly Services program. Presentations and counseling were done in-person at two O'ahu sites and online with Maui and Moloka'i participants. In January 2023, an educational poster commemorating the partnership was distributed to 17 Alu Like sites statewide and will soon be translated for use by Native Hawaiian speakers.
- *Expanding Outreach to Non-Traditional Learners.* In spring 2023, a new non-credit course, "Understanding the Complexities of Medicare", was conducted through the University of Hawai'i at Manoa Outreach College. After the course the 18 students enrolled were surveyed, and the results showed that 88% of the students were very satisfied with the course. To enhance the curriculum, case reviews will be included in future course offerings.

- 5) ***Senior Medicare Patrol (SMP) Hawai'i*** is a federally funded program that educates Medicare beneficiaries, their families, and caregivers to:

- **Protect** their personal identity and information including their Medicare number.
- **Detect** billing discrepancies and concerns on their Medicare billing statements.
- **Report** suspected fraud needing investigation to the U.S. Office of Inspector General

SMP Hawaii recruits and trains volunteers statewide to conduct presentations, provide 1:1 counseling, and refer suspected cases of healthcare and non-healthcare fraud to the proper authorities.

Medicare loses \$70 billion each year on false Medicare claims for services not provided or needed. Fraudsters prey upon vulnerable individuals, including socially isolated kūpuna who are more likely to become victims. Scammers target older adults:

- Hospital and prescription drug costs expected to exceed \$1 trillion by 2022.
- Largest telemedicine and durable medical equipment scheme cost Medicare \$1.2 billion
- Claims for fraudulent COVID-19 tests exceed \$4 million.
- Romance and caregiver scammers build trust to steal kūpuna’s savings and assets.

Table 8. Accomplishments for SMP

Activity	SFY 2022	SFY 2023
Active Volunteers	45	58
Persons Counseled	734	503
Persons Reached through Outreach	4,966	11,834
Recovery and Savings to Medicare beneficiaries	\$677	\$1,100
Volunteer Service Hours	4,755	6,568
Value of Volunteer Hours (2023 national volunteer hourly rate)		\$208,665

Key accomplishments for SMP included:

- *Passing SB1592 in State Legislature.* Fraudsters prey upon vulnerable kūpuna with schemes that are becoming more frequent, sophisticated, and harmful. SB1592 became law as Act 250 and appropriates funds for three full-time positions, which will enable SMP Hawai’i to expand partnerships, outreach, and services to strengthen the “safety net,” for older adults.
- *Creating Computer Basics for Kūpuna: Issue 1.* The training booklet was produced to educate older adults with limited English-proficiency to build computer skills to increase access to online resources. The booklets were translated in simple/traditional Chinese, Japanese, Korean and Vietnamese with Ilocano and Tagalog versions forthcoming.

B. Special Initiatives

- 1) ***Hawai'i Healthy Aging Partnership*** (HHAP) improves the overall health and wellbeing of the state's aging population by reducing health disparities. Approximately, 84.9% of people in Hawai'i, 60 and older, live with one or more chronic conditions. HHAP offers two evidenced-based health promotion programs: Enhance®Fitness and Better Choices Better Health—*Ke Ola Pono*.

Enhance®Fitness (EF) is a 1-hour group exercise program offered three times a week over a 16-week cycle. Routine exercises address strength, balance, endurance, and flexibility and are geared for both active and frail older adults. Program results showed that participants improved their strength, balance, and mobility, exercised more, and experienced fewer falls. During the pandemic, remote EF classes and modified program versions were offered.

Better Choices Better Health (BCBH)- Ke Ola Pono is a 2 ½ hour workshop offered weekly over a 6-week period. The workshops are facilitated by two trained leaders and provide education and training on how older adults can better manage and live with chronic health conditions and improve their interactions with health care providers.

Table 9. Number of Participants Served for HHAP

Activity	SFY 2023
Enhance®Fitness Program	220 Participants
BCBH Phone & Online Workshop	56 Participants

Key accomplishments of the Enhance®Fitness included:

- Opening 5 sites, hosting 8 classes, and continuing 3 remote classes for Enhance®Fitness in Maui
- Offering virtual exercise classes to keep kūpuna active and opening 3 Enhance®Fitness sites in Kauai.
- Partnering with YMCA of Honolulu and the Pearl City Community Church to offer a second in-person EF class to the community.

Key accomplishments of the Better Choices Better Health program included:

- Offering self-paced online BCBH classes. Of the 79 people who registered for the classes, a total of 55 attended the classes. (Note: these participants are not included in the table above).
- Resuming the Living with Cancer (CTS) program.

With the end of the COVID emergency disaster declaration in May 2023, we were challenged with securing Enhance® Fitness sites which were closed during the pandemic and recruiting trainers that were lost because of the pandemic. Funding for HHAP to sustain and expand its program efforts is critical. Limited amounts of federal funding and zero State funding have reduced HHAP's capacity to retain instructors and leaders to offer classes thereby limiting the number of classes for Kūpuna to remain active and healthy. HHAP continues to seek opportunities for new funding sources to sustain its programs to keep kūpuna active and healthy.

- 2) **Community Living Program (CLP)** embodies participant-direction and has the same eligibility requirements as the Kūpuna Care Program. However, the CLP differs from the Kūpuna Care in that the older adults are their own case managers and self-direct their own care. Older adults enrolled in CLP hire their own care workers, who may be friends or family members, to provide care. CLP participants are responsible for explaining the job duties to address their needs, adhere to a monthly budget, and complete required paperwork on a timely basis.

At the end of SFY 2023, a total of 23 qualified individuals were enrolled in the CLP statewide, as compared to 25 participants enrolled in SFY 2022. Currently CLP is provided in the counties of Kaua'i, Maui, and Hawai'i. EOA plans to launch in the City and County of Honolulu in SFY 2024.

- 3) **Veteran-Directed Choice (VDC) Program** is a participant-directed program administered by the Veteran's Administration (VA) for eligible veterans of all ages. Veterans must have a functional level that makes them eligible for nursing home placement. VDC allows veterans to control the care they receive, the provider of their care, and the quality of their care, rather than being dependent on a VA facility or community facility that is reimbursed by the VA for their care.

At the end of SFY 2023, a total of 113 veterans were enrolled in the VDC program as compared to 100 in FY 2022. The EOA expects to enroll 35-40 new veterans in the VDC program in SFY 2024.

- 4) **No Wrong Door (NWD) Initiative** was developed to streamline the ADRC referral process for individuals who need LTSS. The "No Wrong Door" system ensures that no matter what "door" (agency) the individual enters, they will receive an assessment and a warm hand off to the appropriate agency/agencies to address their needs.

In SFY2023, EOA continued to engage the Doors by conducting six bi-monthly meetings to enhance the collaboration. Additionally, two new nonprofit agencies were trained and added

on the use of the online referral tool.

EOA continued communications with the Center for Medicare and Medicaid Services (CMS) for Medicaid Administrative Claiming approval (also known as Federal Financial Participation FFP).

- 5) ***Hawai'i Alzheimer's Disease Supportive Services Program Grant*** successfully closed out the project on March 31, 2023 after receiving a no-cost extension to complete deliverables. The purpose of the grant was to 1) extend dementia capability training to Community Health Workers (CHW); 2) enhance dementia care transitions within the Queen's Medical Center and integrate CHWs and homeless providers in the transition in support of homeless individuals with dementia; and 3) expand the availability of a culturally tailored Savvy Caregiver program in Hawai'i's rural communities.

Overall accomplishments for the grant included:

- Providing dementia capability trainings to Community Health Workers (CHWs) from Kapiolani Community College and Case Managers from the Institute for Human Services. Dr. Ritabelle Fernandes, a geriatrician, trained 379 CHWs and Case Managers to conduct dementia screening using the AD8 and Mini-Cog tools for their clients. Dr. Fernandes also produced a video and train the trainer curriculum on dementia capability, so agencies and instructors can offer the training to their staff or students at any time. The videos are posted on EOA's dementia information website: <https://www.hawaiiadrc.org/dementia>
- Offering dementia training to Moloka'i and Lana'i professionals and caregivers. Dr. Ritabelle Fernandes and Dorothy Colby conducted in-person training for 18 professionals and 45 caregivers on the basics of dementia and Positive Approaches to Care.
- Training nine new facilitators on Savvy Caregiver. Six of the new facilitators offered Savvy Caregiver classes to 21 caregivers. Additionally, four of the new facilitators adapted the Savvy Caregiver curriculum for Native Hawaiians. A "booster" class was also arranged for 14 previously Savvy trained caregivers to reconnect with other caregivers and refresh their skills and knowledge.

- 6) ***Building our Largest Dementia (BOLD) Infrastructure for Alzheimer's Disease*** is an implementation grant from the CDC to update the Hawai'i 2025: State Plan for Alzheimer's Disease and Related Dementias (ADRD) and build a strong public health infrastructure to address ADRD. The grant will:

- engage stakeholders to identify ADRD needs, challenges, and opportunities;
- align the ADRD State Plan to the CDC Healthy Brain Initiative Road Map that includes primary, secondary, and tertiary prevention approaches;
- increase the data sources on dementia;

- develop a public awareness and messaging plan for Asian American and Pacific Islander (AAPI) communities; and
- develop strategies to enhance public health programs, increase knowledge and awareness of brain health and cognitive impairment, and build a dementia capable public health workforce.

Key accomplishments for the BOLD grant included:

- Updating the 2025 plan and developing a draft of the 2035 Strategic Plan on ADRD for public comment.
- Publishing the Native Hawaiian Road Map: Navigating Impacts of Nā Ma‘i Poina-Alzheimer's Disease and Related Dementias Among Native Hawaiians.
- Supporting the passing of HB278 during the 2023 legislative session. HB278, known as Act 257, appropriates funds for EOA to implement an ADRD public health awareness campaign.