H.C.R. NO. ⁹⁴ H.D. 1

HOUSE CONCURRENT RESOLUTION

REQUESTING THE DEPARTMENT OF HUMAN SERVICES TO STUDY THE FEASIBILITY OF INCREASING THE MEDICAID REIMBURSEMENT PAYMENT RATE FOR HAWAII'S COMMUNITY CARE FOSTER FAMILY HOMES AND EXPANDED ADULT RESIDENTIAL CARE HOMES FOR MEDICAID CLIENTS.

WHEREAS, Hawaii has a limited number of beds in nursing 1 homes for patients requiring a nursing home level of care; and 2 3 WHEREAS, community care foster family homes (CCFFHs) and 4 5 expanded adult residential care homes (E-ARCHs) provide additional options for a nursing home level of care throughout 6 the State; and 7 8 WHEREAS, caregivers in CCFFHs and E-ARCHs effectively 9 provide the proper care needed for nursing home level patients, 10 including assistance with activities of daily living (ADLs); 11 specialized care, such as care with feeding tubes and catheters; 12 basic wound care; maintenance exercise programs; cognitive 13 stimulation; dietary management; and other custodial care, as 14 needed: and 15 16 WHEREAS, the availability of beds in CCFFHs and E-ARCHs can 17 reduce the length of hospital stays; provide emotional, 18 financial, and physical relief to families caring for a frail 19 senior or family member in their own home; and reduce the risk 20 of homelessness, morbidity, and mortality in patients who 21 require a nursing home level of care; and 22 23 24 WHEREAS, the ARCH program was introduced in Hawaii in the 1950s to provide assisted living-type care and was expanded in 25 1994 to provide a nursing home level of care as the E-ARCH 26 program under the Department of Health, serving approximately 27



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H.C.R. NO. ⁹⁴ H.D. 1

fourteen hundred patients, with the potential for an even 1 greater number; and 2 3 4 WHEREAS, the pilot CCFFH program was started in 1979 by The Queen's Medical Center; began receiving Medicaid funding under a 5 federal Medicaid waiver in 1984, initially under the direction 6 of the Department of Human Services and now under the Department 7 of Health; and serves approximately three thousand patients, 8 with the potential for an even greater number; and 9 10 WHEREAS, the 1984 federal Medicaid waiver for CCFFHs was 11 approved based on its success as a high-quality alternative to 12 nursing home care for Medicaid patients, and because it costs 13 two-thirds or less than placement in a nursing home; and 14 15 WHEREAS, the level of CCFFH reimbursement has not kept up 16 with that two-thirds target, resulting in a reimbursement rate 17 to CCFFH providers in 2020 that is approximately one-sixth of 18 that for nursing home placements; and 19 20 WHEREAS, careqivers who accept Medicaid patients into their 21 CCFFH receive \$47.06 per day, plus the patient's Social Security 22 assistance, for a maximum of \$2,500 per month for room, board, 23 and all patient care, while a nursing home receives \$280 per 24 day, plus the patient's Social Security assistance for the same 25 patient, for a maximum of \$10,100 per month (with HMSA, Kaiser 26 Permanente, and UHA insurance at slightly higher rates); and 27 28 WHEREAS, Hawaii has an ethnically diverse population that 29 lives in sparsely-populated rural and densely-populated urban 30 areas, and it is projected that the number of residents above 31 age sixty will increase by seventeen percent between 2020 and 32 33 2030 and those over eighty-five years will increase by thirty-two percent; and 34 35 36 WHEREAS, studies by AARP show that Hawaii needs to improve efforts to provide lower-cost long-term care services to the 37 community under Hawaii's MedQUEST Medicaid program rather than 38 the more expensive care in nursing homes; and 39 40 WHEREAS, many caregivers who operate CCFFHs and E-ARCHs are 41 also employed in nursing homes, hospitals, assisted-living 42 facilities, and other health care facilities around the State in 43

order to supplement their income and maintain their own health



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H.C.R. NO. ⁹⁴ ^{H.D. 1}

1 benefits, which potentially creates a greater risk for the spread of infectious disease; and 2 3 WHEREAS, many CCFFH caregivers will decline to accept a 4 Medicaid patient and instead save empty beds for private pay 5 patients in order to maximize their income, thus reducing the 6 total number of beds available to Medicaid patients; and 7 8 WHEREAS, very few caregivers in E-ARCHs will accept 9 Medicaid patients because of the low reimbursement rate and 10 instead save their beds for private pay patients; and 11 12 WHEREAS, one of the outcomes of such a low reimbursement 13 14 rate is the limited availability of beds in the community for Medicaid patients who require placement in nursing homes at the 15 higher rate, thus increasing the total cost of care; and 16 17 WHEREAS, many Medicaid patients remain hospitalized in 18 acute care beds throughout Hawaii at a financial loss to the 19 acute care facilities due to a lack of available community beds 20 to which they can be discharged; and 21 22 WHEREAS, the Medicaid rate for CCFFH reimbursement has not 23 been increased in the last eight years; now, therefore, 24 25 BE IT RESOLVED by the House of Representatives of the 26 27 Thirty-second Legislature of the State of Hawaii, Regular Session of 2024, the Senate concurring, that the Department of 28 Human Services is requested to study the feasibility of 29 increasing the Medicaid reimbursement payment rate for Hawaii's 30 CCFFHs and E-ARCHs for Medicaid clients; and 31 32 33 BE IT FURTHER RESOLVED that the Department of Human Services is requested to review the existing payment model for 34 35 Medicaid reimbursement and determine if overall savings can be achieved by increasing the rate for CCFFH and E-ARCH care 36 providers; and 37 38 BE IT FURTHER RESOLVED that the Department of Human 39 Services is requested to provide an evaluation and report of the 40 impacts of the implemented rate increases on uptake, 41 utilization, and cost savings to the Medicaid program; and 42 43



H.C.R. NO. ⁹⁴ H.D. 1

BE IT FURTHER RESOLVED that the Department of Human Services is requested to submit a report of its findings and recommendations, including any proposed legislation, to the Legislature no later than twenty days prior to the convening of the Regular Session of 2025; and

BE IT FURTHER RESOLVED that the Department of Human
Services is requested to conduct a similar feasibility study
once every ten years, starting with 2035, and submit a report to
the Legislature after the completion of each study; and

BE IT FURTHER RESOLVED that the Department of Human Services is requested to implement rate studies every four years starting from the date of the last rate study and report said results to the Legislature twenty days prior to the convening of the following legislative session; and

18 BE IT FURTHER RESOLVED that certified copies of this 19 Concurrent Resolution be transmitted to the Director of Human 20 Services, President of the Adult Foster Homecare Association of 21 Hawaii, and President of the Alliance of Residential Care Home 22 Administrators.

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