JOSH GREEN, M.D. GOVERNOR KE KIA'ĀINA



# STATE OF HAWAII KA MOKU'ĀINA O HAWAI'I DEPARTMENT OF HUMAN SERVICES

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To: The Honorable Senator Joy San Buenaventura, Chair

Senate Committee on Health and Human Services

The Honorable Senator Jarrett Keohokalole, Chair

Senate Committee on Commerce and Consumer Protection

FROM: Cathy Betts, Director

SUBJECT: SB 2180 - RELATING TO CHORE SERVICES.

Hearing: February 7, 2024, 1:00 p.m.

Conference Room 225, State Capitol & Video Conference

<u>DEPARTMENT'S POSITION</u>: The Department of Human Services (DHS) offers comments with concerns and respectfully requests clarification as to the goal of the measure.

PURPOSE: The purpose of this bill is to require the Department of Human Services (DHS) program requirements for chore services to include an assessment of whether the applicant has a family member who is available and capable of providing necessary chore services for the applicant. Requires income eligibility standards for chore services to include an assessment of whether the individual has the ability to pay a portion of the cost of the chore services they receive. Requires DHS to improve access for disabled persons seeking chore services by taking certain actions and submitting a report to the Legislature.

This measure proposes to amend section 346-64.5, Hawaii Revised Statutes (HRS), Relating to Chore Services and requires additional assessments to determine whether the applicant has a family member capable of providing the chore services and whether the

individual can pay a portion of the cost share of the chore services. DHS is concerned that additional assessments of potential family members would place unnecessary strain on the workforce and may likely cause unnecessary delay to the start of chore services.

Currently, there is a dire workforce shortage for direct care workers. If a physician had to sign off on all direct care workers who provided any type of Chore (or Personal Care) service, it would unnecessarily drain both the physicians as well as add an extra layer of administration to obtain such services.

As currently written, 346-64.5, HRS, requires the individual to be eligible for Medicaid. Notably, section 346-64.5, HRS, while the high-level definition of eligibility and services is not inaccurate, the section is somewhat obsolete as it does not reflect the administration of Chore Services, which are part of Comprehensive Home and Community Based Services (HCBS): defined in section 346D-1, HRS, as

"Comprehensive Home and Community-Based Services" means the provision of a broad range of services, not otherwise available under the approved Medicaid state plan, which the waiver program individual needs in order to avoid institutionalization for an indefinite period of time."

To qualify for Medicaid HCBS, a comprehensive assessment is done to 1) ensure the individual meets the (federally required) Institutional/Nursing Facility Level of Care; and 2) assess the specific needs of the individual for particular types of HCBS services. Consideration includes natural and social supports that may include family members.

While such natural family supports are considered, it would be infeasible and impractical to require a physician's sign-off on all the family members wishing to help. Family members can also be paid caregivers. Such caregivers receive specialized training to ensure they can perform the necessary tasks.

All long-term care services, including HCBS, require a set "cost-share" amount. No additional financial eligibility or assessment of ability to pay is allowed beyond Medicaid's eligibility requirements. Consequently, the proposed amendment to (c) (page 2, lines 7-16) again creates an additional process that may delay services or have no impact on the eligibility determination process. Also, HCBS is a unique set of services that other forms of health

insurance do not cover. Thus, there usually are no other sources of "coverage" other than Medicaid.

Finally, regarding section 2, DHS is collaborating with various Legislators to improve the long-term care system, which includes addressing services, financial sustainability of the services, and workforce development and training (SB2343/HB2224HD1 Relating to Long Term Care). As chore services are one part of the overall comprehensive group of services, some of the suggestions in this measure to improve care can be considered.

Thank you for the opportunity to testify on this measure.

### **SB-2180**

Submitted on: 2/5/2024 2:34:11 PM

Testimony for HHS on 2/7/2024 1:00:00 PM

<b>Submitted By</b>	Organization	<b>Testifier Position</b>	Testify
Ian Seely	Individual	Support	Remotely Via Zoom

#### Comments:

Our community stands for equality, yet countless elderly and disabled individuals are denied crucial assistance due to systemic flaws, especially in states like Hawaii with a 9% higher population of disabled individuals than the national average. This translates to thousands of our neighbors and loved ones struggling with daily tasks due to their disabilities. I strongly encourage you to vote in favor of SB2180, a bill that expands access to the essential Chore Services program, removes discriminatory barriers, and strengthens support for both recipients and providers.

Due to chronic pain, my disabled wife relies heavily upon Chore Services, however, a medical insurance agent arbitrarily deemed me "capable" of full-time care, despite the devastating impact on our family's well-being and my ability to work in order to make ends meet. This experience exposes some of the limitations and injustices of the current system.

## **Current System's Flaws:**

- Outdated Disability Ranking: Restricts program access to a select few, leaving numerous individuals struggling without support.
- Excessive Paperwork: Burdens medical providers and delays aid with redundant paperwork, and excessive recertification.
- Limited Scope: The limited scope leaves countless kupuna, our beloved aunties and uncles, falling behind on essential tasks due to medical conditions.

#### SB2180's Solutions:

- 1) Expand Access: Alternative funding sources and a sliding scale are utilized in order to aid a wider range of elderly and/or disabled Medicaid recipient, maximizing program impact.
- 2) Streamline Processes: Simplifies and reduces application and recertification paperwork for primary care providers, ensuring faster service delivery, without sacrificing accuracy.

3) Local Job Creation: Utilize existing DHS employment and training programs to get people started as independent chore service providers providing thousands of jobs to those in need while boosting the local economy as every dollar will directly benefit two local families.

By supporting SB2180, we can expand access to essential Chore Services for thousands of individuals in need, ensuring they receive the support they deserve to live with dignity and independence. This bill represents a cost-effective investment in our community, creating local jobs and strengthening the safety net for everyone. Together, let's build a community where everyone has the opportunity to thrive, regardless of the challenges they face.