



STATE HEALTH PLANNING AND DEVELOPMENT AGENCY

DEPARTMENT OF HEALTH - KA 'OIHANA OLAKINO

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

KENNETH S. FINK, MD, MGA, MPH
DIRECTOR OF HEALTH
KA LUNA HO'OKELA

JOHN C. (JACK) LEWIN, M.D.
ADMINISTRATOR

January 26, 2026

TO: Senate Health and Human Services Committee
Senator Joy San Buenaventura, Chair;
Senator Jarett Keohokalole, Vice Chair; and
Honorable Members

FROM: Jack Lewin MD, Administrator SHPDA

RE: SB 1139 Relating to Medicaid – Expands Medicaid Eligibility to All Children from Birth to Age 5 Years Regardless of Household Income

TESTIMONY:

SHPDA emphatically supports this bill as key to our primary responsibility to assuring universal access to high-quality, equitable, affordable health care for ALL.

The impacts of the HR1 (OBBA) could increase uninsured persons in Hawai'i, including keiki, due to cuts on Medicaid and impacts on Obamacare Exchange tax incentive cuts. SHPDA's Health Data Advisory Council in 2025 estimated that, while Hawai'i enjoys having 96.4% of our population with health insurance, there are 5-9% uninsured persons including keiki on neighbor islands, and this situation could become worse because of HR1.

SHPDA strongly supports the intent of this bill and defers to DHS Med-QUEST Division on the details of implementation and financing of this humanitarian and important healthcare objective.

JOSH GREEN, M.D.
GOVERNOR
KE KIA'ĀINA



RYAN I. YAMANE
DIRECTOR
KA LUNA HO'OKALE

JOSEPH CAMPOS II
DEPUTY DIRECTOR
KA HOPE LUNA HO'OKALE

STATE OF HAWAII
KA MOKU'ĀINA O HAWAII
DEPARTMENT OF HUMAN SERVICES
KA 'OIHANA MĀLAMA LAWELAWE KANAKA
Office of the Director
P. O. Box 339
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TRISTA SPEER
DEPUTY DIRECTOR
KA HOPE LUNA HO'OKALE

January 26, 2026

TO: The Honorable Senator Joy San Buenaventura, Chair
Senate Committee on Health and Human Services

FROM: Ryan I. Yamane, Director

SUBJECT: **SB 1139 – RELATING TO MEDICAID.**

Hearing: January 28, 2025, 1:30 p.m.
Conference Room 225 & Videoconference, State Capitol

DEPARTMENT'S POSITION: The Department of Human Services (DHS) appreciates the bill's intent and offers comments. DHS respectfully requests that this program and appropriation not conflict with, reduce, or replace priorities identified in the executive budget. Additionally, for reference, DHS prefers that any increase in appropriation be included in the executive budget bill as a recurring appropriation to ensure ongoing coverage.

PURPOSE: This bill directs the Department of Human Services to adopt rules to expand Medicaid eligibility to all children in the State from birth to age 5 years without regard to household income. Appropriates moneys.

DHS believes there is a clear benefit to the state in ensuring that all residents have access to health care. Existing data sources estimate that approximately 77,000 children are between birth and age 5 in Hawaii. Currently, QUEST Integration, Hawaii's Medicaid program, already covers 49,700 (65%) of Hawaii's keiki in this age range. The approximate 27,000 children from birth to 5 who are not currently covered by QUEST Integration would require an annual appropriation of \$86,000,000. This program would be 100% State funded since the DHS Med-QUEST Division cannot

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leverage Federal matching dollars for coverage that does not align with existing federal Medicaid eligibility rules.

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



STATE OF HAWAI'I
Executive Office on Early Learning
Ke'ena Ho'okele Ho'ona'auao Pae Kamali'i o Hawai'i Moku'āina
2759 South King Street, Room C6
HONOLULU, HAWAI'I 96826

TO: Senator Joy A. San Buenaventura, Chair
Senator Jarrett Keohokalole, Vice Chair
Senate Committee on Health and Human Services

FROM: Yuuko Arikawa-Cross, Director
Executive Office on Early Learning

SUBJECT: Testimony on S.B. No. 1139 – RELATING TO MEDICAID
Committee: HHS
Date: Wednesday, January 28, 2026
Time: 1:30 p.m.
Location: Conference Room 225

Executive Office on Early Learning's Position: **COMMENTS**

The Executive Office on Early Learning (EOEL) offers the following comments in support of the intent of S.B. No. 1139, and defers to the Department of Human Services (DHS).

This measure is aligned with the Early Learning Board's current Framework of Policy Priorities, which are grounded in the Hawai'i's early childhood state plan. Specifically, the bill advances State Plan Building Block 1: Keiki and 'Ohana Health, Safety, and Well-Being, by increasing access to comprehensive health care during a critical period of child development. Ensuring consistent health insurance coverage for young children supports early screening, prevention, and timely intervention, all of which are foundational to positive lifelong outcomes.

While ensuring access to health care is a high priority for the early learning system and an important goal for the state, EOEL also notes that the Administration's supplemental budget request includes funding to respond to recent federal changes and preserve existing Medicaid coverage. Once the stability of this, and other essential safety-net programs are ensured, we encourage continued discussion around expanded support for young children.

We appreciate the Legislature's ongoing investment and shared commitment to strengthening Hawai'i's early learning system for our youngest keiki and their 'ohana. Thank you for the opportunity to share these comments regarding S.B. No. 1139.

SB-1139

Submitted on: 1/27/2026 10:21:03 AM
Testimony for HHS on 1/28/2026 1:30:00 PM

Submitted By	Organization	Testifier Position	Testify
Austin "Shiloh" Martin	Testifying for Libertarian Party of Hawaii	Oppose	Remotely Via Zoom

Comments:

Aloha Chair Aquino, Vice Chair Shimabukuro, and committee members.

I am Austin Martin, Chair of the Libertarian Party of Hawaii, testifying in opposition to SB 1139 (Relating to Medicaid).

By appropriating additional funds or broadening covered services under Medicaid, SB 1139 accelerates the growth of a program that already consumes a disproportionate share of the state budget while delivering poorer health outcomes than private alternatives in multiple national studies. Taxpayers are forced to finance this expansion under penalty of law, regardless of personal circumstances.

Sustained increases lock in intergenerational debt and reduce incentives for innovative private solutions. I recommend defeating this measure and beginning a phased transition toward voluntary, market-based healthcare arrangements.

Mahalo for your kokua to this matter.

Austin Martin

SB-1139

Submitted on: 1/26/2026 7:09:28 PM
Testimony for HHS on 1/28/2026 1:30:00 PM

Submitted By	Organization	Testifier Position	Testify
Louis Erteschik	Testifying for Hawaii Disability Rights Center	Support	Written Testimony Only

Comments:

We see many children in our office who really need Medicaid services, but whose parents may have household incomes in excess of what Medicaid allows. While there is a process known as "deeming" it is fairly complex and convoluted and often not applied. For that reason we like this idea if the funding is available.



To: The Honorable Joy San Buenaventura, Chair
The Honorable Angus McKelvey, Vice Chair
Senate Committee on Health and Human Services

From: Paula Arcena, External Affairs Vice President
Mike Nguyen, Director of Public Policy
Maria Rallojay, Public Policy Specialist

Hearing: Wednesday, January 28, 2026, 1:30pm, Conference Room 225

RE: **SB1139 Relating to Medicaid**

AlohaCare appreciates the opportunity to provide testimony in **support** of **SB1139**. This measure directs the Department of Human Services to adopt rules to expand Medicaid eligibility to all children in the State from birth to age 5 years without regard to household income and appropriates moneys accordingly.

Founded in 1994 by Hawai'i's Community Health Centers and the Queen Emma Clinics, AlohaCare is a community-rooted, non-profit health plan serving over 66,000 Medicaid and Medicaid-Medicare dual-eligible residents on all islands. Approximately 37 percent of our members are keiki. We are Hawai'i's only health plan exclusively dedicated to serving Medicaid-eligible beneficiaries. Our mission is to serve individuals and communities in the true spirit of aloha by ensuring and advocating for equitable access to quality, whole-person care for all.

Consistent with our mission and our values, AlohaCare is committed to promoting access to quality, whole-person healthcare for all of Hawai'i's residents. Hawai'i is home to an estimated 97,391 children. Expanding coverage will contribute to our state's health equity and social determinants of health (SDOH) priorities at large by increasing healthcare access.¹ Under the SDOH framework, a person's social and community context are key factors that affect health outcomes. Expanding coverage will allow all keiki ages 5 and under to access primary and preventative care contributing to better life outcomes when keiki are undergoing significant growth and development.

Mahalo for this opportunity to testify in **support** of **HB1139**.

¹ [Hawai'i Medicaid State Plan and Demonstration](#)



Hawaii Medical Association

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SENATE COMMITTEE ON HEALTH AND HUMAN SERVICES

Senator Joy A. San Buenaventura, Chair
Senator Angus L.K. McKelvey, Vice Chair

Date: January 28, 2026
From: Hawaii Medical Association (HMA)
Elizabeth Ann Ignacio MD - Chair, HMA Public Policy Committee

RE SB 1139 Relating to Medicaid - Medicaid Eligibility; Med-QUEST; Children; DHS; Appropriation
Position: Support

This measure would direct the Department of Human Services to adopt rules to expand Medicaid eligibility to all children in the State from birth to age 5 years without regard to household income, with appropriations.

Early access to healthcare will improve lifelong outcomes for Hawaii keiki. Continuous access to pediatric preventive care — including early medical and dental visits, as well as treatment for acute illnesses — reduces hospitalization rates and supports healthier school attendance and readiness.

Additionally, early uninterrupted coverage shifts care upstream toward prevention. There is growing evidence that shows that stable access to preventive services lowers costly emergency care, reduces untreated chronic conditions, and improves community health outcomes. This is especially important for infants and toddlers, where early developmental issues are best identified and addressed promptly.

Thank you for allowing Hawaii Medical Association to testify in support of this measure.

REFERENCES

Colleen L. MacCallum-Bridges, Lindsay K. Admon, Stephen W. Patrick, Katy B. Kozhimannil, Jamie R. Daw; Continuous Medicaid Eligibility, Child Insurance, and Health Care Use. *Pediatrics* January 2026; 157 (1): e2025072529. 10.1542/peds.2025-072529

Eliason EL, Nelson DB, Wood J, Strane D, Vasan A. Children's Continuous Medicaid Eligibility During COVID-19 and Health Care Access, Use, and Barriers to Care. *JAMA Health Forum*. 2025 Jun 7;6(6):e251376. doi: 10.1001/jamahealthforum.2025.1376. PMID: 40512509; PMCID: PMC12166482.

2026 Hawaii Medical Association Public Policy Coordination Team

Elizabeth A Ignacio, MD, Chair • Robert Carlisle, MD, Vice Chair • Christina Marzo, MD, Vice Chair
Linda Rosehill, JD, Government Relations • Marc Alexander, Executive Director

2026 Hawaii Medical Association Officers

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To: Senate Committee on Health and Human Services
Re: **SB 1139 – Relating to Medicaid**
Hawai'i State Capitol & Via Videoconference
January 28, 2026, 1:30 PM

Dear Chair San Buenaventura, Vice Chair McKelvey, and Committee Members,

On behalf of Hawai'i Children's Action Network Speaks!, I am writing in **SUPPORT of SB 1139**, which would adopt rules to expand Medicaid eligibility to all children in Hawai'i from birth through age five without regard to household income.

In late 2024, the U.S. Department of Health and Human Services approved a federal waiver for Hawai'i to adopt multi-year continuous eligibility for children in Medicaid.¹ With this waiver, Hawai'i joined 12 states in expanding Medicaid continuous coverage protections.²

Under this waiver, children enrolled in Medicaid remain covered until their sixth birthday, which means families won't lose coverage due to paperwork delays or temporary income fluctuations — avoiding the detrimental effects of churning in and out of health coverage.

The earliest years of life are a pivotal window for growth and brain development. Children with uninterrupted health coverage are more likely to receive preventive care, have better nutrition and growth outcomes, and enter school ready to learn. This kind of continuity of care improves health outcomes and reduces long-term costs associated with untreated illness.

Ensuring that every child in our state has access to affordable, comprehensive health coverage in early childhood is one of the most effective investments we can make in the long-term health, educational success, and economic stability of Hawai'i's future.

Mahalo for the opportunity to provide this testimony. Please pass this bill.

Thank you,

Nicole Woo
Director of Research and Economic Policy

¹ <https://ccf.georgetown.edu/2024/11/15/cms-approves-five-more-states-to-adopt-medicaid-multi-year-continuous-coverage-for-young-children-as-threats-to-coverage-loom/>

² <https://www.kff.org/quick-take/state-waivers-for-continuous-medicaid-eligibility-to-end-under-cms-guidance/>

SB-1139

Submitted on: 1/27/2026 8:52:40 AM
Testimony for HHS on 1/28/2026 1:30:00 PM

Submitted By	Organization	Testifier Position	Testify
Kaili Swan	Individual	Support	Written Testimony Only

Comments:

I am in strong support of this measure because people with disability need medicaid to help pay their financial cost for hospital or doctor visit please pass this bill thank you

SB-1139

Submitted on: 1/24/2026 4:35:37 AM
Testimony for HHS on 1/28/2026 1:30:00 PM

Submitted By	Organization	Testifier Position	Testify
Nash Witten	Individual	Support	Written Testimony Only

Comments:

Aloha Committee Chair and Committee Members,

As a born and raised primary care Family Medicine physician practicing in my hometown of Hale‘iwa, O‘ahu, I STRONGLY SUPPORT this bill.

Thank you for the opportunity to testify on this bill,

Nash Witten, MD

LATE

SB-1139

Submitted on: 1/27/2026 4:46:18 PM
Testimony for HHS on 1/28/2026 1:30:00 PM

Submitted By	Organization	Testifier Position	Testify
Theresa Armbruster	Individual	Oppose	Written Testimony Only

Comments:

OPPOSED to SB1139 because it proposes to expand Medicaid eligibility to All children from birth to 5 years with NO regard to income--All children in this age group are NOT in financial need of Medicaid!

The proposed amount of \$317 million for fiscal year 2025-26, & another \$317 million or so for 2026-27 is a large amount of taxpayer \$\$ for an unnecessary expansion of Medicaid eligibility for children from birth to 5 years!

Please Oppose SB1139--and Keep income level as a requirement for Medicaid eligibility!

Mahalo for the opportunity to give testimony!