JOSH GREEN, M.D.
GOVERNOR OF HAWAIʻI
KE KIAʻĀINA O KA MOKUʻĀINA ʻO HAWAIʻI

KENNETH FINK, MD, MGA, MPH
DIRECTOR OF HEALTH
KA LUNA HOʻOKELE

STATE OF HAWAIʻI
DEPARTMENT OF HEALTH
KA ʻOIHANA OLAKINO
EXECUTIVE OFFICE ON AGING
NO. 1 CAPITOL DISTRICT
250 SOUTH HOTEL STREET, SUITE 406
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Testimony COMMENTING on HB1853 HD1
RELATING TO DEMENTIA

COMMITTEE ON HEALTH AND HUMAN SERVICES
SENATOR JOY A. SAN BUENAVENTURA, CHAIR
SENATOR ANGUS L.K. MCKELVEY, VICE CHAIR

Testimony of Caroline Cadirao
Director, Executive Office on Aging
Attached Agency to the Department of Health

Hearing: Friday, March 18, 2026,1:00 P.M.   Conference Room: 225

EOA Position: The Executive Office on Aging (EOA), an attached agency to the Department of Health (DOH), supports the intent of HB1853 HD1 and offers comments. Werequests that this program does not conflict with, reduce, or replace priorities identified in the executive budget.

Fiscal Implications: This measure appropriates a blank amount to establish and implement the Hanai Memory Network program within EOA.

Purpose: The measure requires EOA to create a support system of dementia care specialists, establish one or more clinics, ensure coordination, develop a referral network, provide training and technical assistance, operate a public facing website, and collect data.

EOA currently convenes the Hawaii Dementia Initiative (HDI) consisting of 150 community members and stakeholders from across the state. On a state level, HDI is fostering collaboration, leveraging data, and implementing strategies to improve the lives of individuals with dementia and their families. The initiative focuses on implementing the **Hawai‘i 2035: State Strategic Plan on Alzheimer’s Disease and Related Dementias (ADRD)**. . The coalition is organized into Action Teams through 7 targeted initiatives: 1) Dementia Caregiving, 2) Workforce Development, 3) Early Detection of Dementia, 4) Brain Health and Risk Reduction, 5) Public Awareness and Education, 6) Community Clinical Linkages, and 7) Data Action.

HDI fosters collaboration, provides education, and develops resources statewide. In SFY 2025, EOA partnered to deliver dementia education to rural, underserved, low-income communities. Programs included caregiver training, community awareness sessions, talk story listening, and HDI workgroup meetings. EOA also collaborated with the UH Center on Aging, AARP, Brain Matters, Kokua Mau, and other partners for outreach and remote/in-person trainings reached **6,306 community members** and **2,618 professionals** through dementia education and outreach. Our media campaign generated **10.5 million impressions**, and EOA launched Hawai‘i’s first dementia data dashboard, the **Healthy Brain Tracker**, featuring over 30 indicators.

In addition, we have a robust website devoted to ADRD at https://hawaiidementia.org that includes common questions, support for caregivers, information about early detection, brain health tips and education.

Lastly, we are mandated by ACT 286 HSL 2025to collect data on the number of cognitive assessments provided to Medicare beneficiaries. **Through the Hawai‘i Dementia Initiative (HDI) EOA has demonstrated its commitment to improving the lives of individuals with Alzheimer’s disease and related dementias, as well as their families**.

Concerns: EOA is currently operating at capacity with significant staffing vacancies. Implementing a new large-scale program like HANAI Memory Clinic would require substantial infrastructure and sustained funding. Given the State's economic uncertainty and EOA's resource limitations, launching this initiative now would be challenging and unsustainable.

Recommendation: While we appreciate the intent of this measure, EOA believes it would be more appropriate to revisit the proposal when the State and EOA are in a stronger position. EOA would like to see dementia care specialists throughout the state to expand the work of the current ADRD coordinator.

EOA remains fully committed to the health and well-being of our aging population. However, we must prioritize the sustainability of our existing programs and statutory mandates.

Thank you for the opportunity to testify.

STATE HEALTH PLANNING
AND DEVELOPMENT AGENCY
DEPARTMENT OF HEALTH - *KA ʻOIHANA OLAKINO*

JOSH GREEN, MD
GOVERNOR OF HAWAIʻI
KE KIAʻĀINA O KA MOKUʻĀINA ʻO HAWAIʻI

KENNETH S. FINK, MD, MGA, MPH
DIRECTOR OF HEALTH
KA LUNA HOʻOKELE

JOHN C. (JACK) LEWIN, MD
ADMINISTRATOR

1177 Alakea Street, #402, Honolulu, HI 96813 Phone: 587-0788 Fax: 587-0783 www.shpda.org

March 16, 2026

TO: SENATE COMMITTEE ON HEALTH AND HUMAN SERVICES
Senator Joy A. San Buenaventura, Chair
Senator Angus L.K. McKelvey, Vice Chair
Honorable Members

FROM: John C. (Jack) Lewin, MD, Administrator, SHPDA, and Sr. Advisor to Governor Josh Green, MD on Healthcare Innovation

RE: **HB 1853-HD1 -- RELATING TO DEMENTIA**

HEARING: Wednesday, March 18, 2026 @ 1:00 pm; Conference Room 225

POSITION: SUPPORT with COMMENTS

Testimony:

SHPDA strongly supports the intent of HB1853-HD1. Alzheimer's disease and other dementias are creating a growing public health and economic crisis in Hawaiʻi. The Alzheimer's Association estimates that 31,200 Hawaiʻi residents are living with Alzheimer's, and 1 in 9 people over age 65 has the disease, with the number expected to double in the next 25 years. Our state likely spends well over $400 million a year on the disease, with Med-QUEST alone spending over $300 million. Affected families spend an enormous additional largely unmeasured amount of personal costs. Private costs for memory care can cost families not eligible for Medicaid over $200,000 a year.

HB1853-HD1 creates a community-centered model to ensure early detection, timely diagnosis, coordinated care planning, and access to treatment across Hawaiʻi, prioritizing services for neighbor islands and rural areas. The Executive Office on Aging (EOA) would have a coordinating responsibility for the program, but it would provide new county-based clinics staffed by experienced physicians, nurses, other clinicians and social workers. Once operational, the clinics can bill insurance for services to offset state costs. The program will also provide Dementia Care Specialists in each county to promote early diagnosis, caregiver support and coordination of services. It is a very innovative model.

SHPDA defers to EOA on the budgetary and implementation costs, but we believe an effective procurement contract will be the best way to implement this, given the existing EOA workload. Noting also an estimated $3+ million likely annual state appropriation needed to launch the program, SHPDA believes it will reduce state costs significantly over time by delaying onset and slowing progression of the disease, and by supporting families to better cope with care at home and in the community.

Thank you for hearing HB1853-HD1.

Mahalo for the opportunity to testify.

- -- Jack Lewin, MD, Administrator, SHPDA

DISABILITY AND COMMUNICATION ACCESS BOARD
Ka ʻOihana Hoʻokaʻaʻike no ka Poʻe Kīnānā

1010 Richards Street, Rm. 118 • Honolulu, Hawai'i 96813
Ph. (808) 586-8121 (V) • Fax (808) 586-8129 • (808) 204-2466 (VP)

March 18, 2026

TESTIMONY TO THE SENATE COMMITTEE ON HEALTH AND HUMAN SERVICES

House Bill 1853 House Draft 1 – Relating to Dementia

The Disability and Communication Access Board (DCAB) supports House Bill 1853 House Draft 1 - Relating to Dementia. This bill establishes the Hanai Memory Network Program within the Executive Office on Aging to create a network of dementia care specialists and support systems to assist individuals with dementia and their caregivers. Appropriates funds. Effective 7/1/3000.

We respectfully defer to the Executive Office on Aging on this measure to establish statewide equitable access to dementia care services.

Thank you for the opportunity to testify.

Respectfully submitted,

Kristine Pagano

KRISTINE PAGANO
Acting Executive Director

AARP®
Hawai‘i

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facebook.com/AARPHawaii

The Hawaii State Legislature
Senate Committee on Health and Human Services
Wednesday, March 18, 2026
Conference Room 225, 1:00 p.m.

TO: The Honorable Joy San Buenaventura Chair
FROM: Keali’i S. López, State Director
RE: Support for H.B. 1853, HD1 Relating to Dementia

Aloha Chair San Buenaventura and Members of the Committees:

My name is Keali’i Lopez and I am the State Director for AARP Hawai‘i. AARP is a nonpartisan, social impact organization that advocates for individuals age 50 and older. We have a membership of nearly 38 million nationwide and nearly 135,000 in Hawaii. We advocate at the state and federal level for the issues that matter most to older adults and their families.

AARP Hawai‘i supports House Bill 1853, HD1, which establishes the Hānai Program to provide coordinated support, guidance, and respite services for individuals living with Alzheimer’s disease and related dementias, as well as the family caregivers who care for them. This bill represents a critical step toward ensuring Hawai‘i families receive the culturally grounded, community-based assistance they urgently need.

Hawai‘i is facing a rapidly growing dementia crisis. Today, 31,200 Hawai‘i residents are living with Alzheimer’s disease, and 1 in 9 people over age 65 has the condition. With our kūpuna population expected to double in the next 25 years, the number of residents with Alzheimer’s is projected to surpass 62,000 by 2050. Families are already struggling, and without meaningful infrastructure and caregiver support, the challenges ahead will quickly become overwhelming.

The financial impact on the state is equally alarming. In 2020, Medicaid spent $240 million on care for residents with Alzheimer’s. The 2025 report shows that figure has risen to $309 million, an increase of $69 million in just five years. If no action is taken, Alzheimer’s-specific Medicaid costs are projected to reach nearly $1 billion annually by 2050. This trajectory is unsustainable and underscores the need for upstream investments in caregiver support and coordinated services—precisely what the Hānai Program provides.

At the same time, Hawai‘i’s long-term care infrastructure is already operating at or above capacity, with limited availability of memory-care beds statewide. Families face staggering private-pay costs averaging over $15,000 per month—more than $180,000 per year—placing care far out of reach for most households. Neighbor islands and rural communities experience even greater disparities, with limited access to diagnosis, treatment, and ongoing support, leading to delayed care and higher long-term costs.

AARP frequently hears from caregivers who feel lost navigating the system, emotionally exhausted, and financially stretched. Many are forced to reduce work hours or leave the workforce entirely. The Hānai Program responds directly to these needs by creating a coordinated network of information, caregiver coaching, respite resources, and culturally relevant supports that empower families to keep their loved ones at home safely for as long as possible.

AARP Hawai‘i respectfully urges the Committee to pass H.B. 1853, HD1. Thank you for the opportunity to testify in support.

ALZHEIMER'S ASSOCIATION®

Testimony to the House Committee on Health and Human Services
Wednesday, March 18, 1:00 PM, Room 225 and Videoconference

RE: House Bill No. 1853 HD1 – RELATING TO DEMENTIA

Chair San Buenaventura, Vice Chair McKelvey, and Members of the Committee:

Thank you for the opportunity to testify on the urgent need to expand access to memory care across Hawaiʻi, with a specific focus on neighbor islands and rural communities where access is limited. My name is Coby Chock, Director of Public Policy and Advocacy for the Alzheimer's Association, and I write in strong support of HB1853 HD1, which establishes the HANAI (Hawaiʻi's Assistance for the Navigation of Alzheimer's Intervention) Memory Network, offering amendments.

The Need ~ Alzheimer's disease and other dementias are creating a growing public health and economic crisis in Hawaiʻi. Today, 31,200 Hawaiʻi residents are living with Alzheimer's, and 1 in 9 people over age 65 has the disease. The population of adults 65 and older is expected to double in the next 25 years, which will push the number of individuals living with Alzheimer's in Hawaiʻi to more than 62,000 by 2050. The financial impact is already significant. Medicaid spent $240 million annually on Alzheimer's care in 2020, and the 2025 report shows that number has risen to $309 million per year, a $69 million increase in just five years. Without action, Alzheimer's-specific Medicaid costs in Hawaiʻi are projected to approach $1 billion per year by 2050. Families are facing extreme financial burdens, with memory care at long-term care facilities costing more than $15,000 per month, or about $180,000 per year. Hawaiʻi's long-term care infrastructure is at or above capacity, with limited availability of memory care beds. The need is most acute for neighbor islands and rural communities that face limited access to diagnosis and treatment, resulting in delayed care and higher costs for families and the state.

Framework ~ HB1853 creates a practical, community-centered model to ensure early detection, timely diagnosis, coordinated care planning, and access to treatment across Hawaiʻi, with priority for neighbor islands and rural areas. The Executive Office on Aging (EOA) will serve as the lead agency and will oversee implementation, coordination, and accountability.

The program has two integrated components. First, Dementia Care Specialists (DCS) will be positioned one per county, with an additional statewide program manager within EOA. These licensed social workers or nurses will provide outreach, brief cognitive assessments, navigation, caregiver support, coordination of services, and benefits counseling. DCS will conduct targeted outreach in neighbor islands and rural communities to close access gaps and connect families to services earlier.

Second, Community-Based Memory Clinics will be established on each neighbor island county and contracted with local health systems or Federally Qualified Health Centers. Clinics will be staffed by MD or DO or APRN, along with RN or MA and licensed social workers. These clinics will deliver diagnosis, staging, care plans, evidence-based interventions, and referrals, and will coordinate with neurology when warranted. Once established, clinics will bill for clinical services, which reduces long-term state appropriations while maintaining access.

Care will move through two complementary referral pathways. In the community pathway, Dementia Care Specialists (DCS) complete initial evaluations, including brief cognitive assessments and family interviews, to triage cases and refer individuals to relevant services and, when appropriate, to a Memory Clinic if there are signs of cognitive decline without a previous or recent diagnosis or care plan. In the primary care pathway, private practice primary care providers may identify symptoms and refer patients directly to Memory Clinics for further assessment. Once a patient is seen at a Memory Clinic, the specialized clinical team will provide an accurate diagnosis, develop a care plan, and offer treatment options. Depending on the individual's needs, the clinic may refer patients in later stages to geriatricians for further diagnosis, treatment, end-of-life planning, or holistic care. Patients with mild cognitive impairment or early-stage dementia may be returned to their primary care provider with a clear care plan for ongoing monitoring. Individuals who may be candidates for disease-modifying therapy can be referred to a cognitive neurologist for evaluation. Together, these pathways ensure early diagnosis, timely care planning, and access to appropriate treatment. This improves outcomes, reduces avoidable emergency visits and long-term care placements, supports caregivers, and helps keep families economically stable.

Budget and Fiscal Impact ~ The annual budget to launch the HANAI Memory Network statewide for the first three to five years is $3,000,000. This includes $700,000 per clinic for three clinics, $700,000 for salaries (5.0 FTE total), and $200,000 for community-based services and program development. After clinics are stood up and billing for services begins, the ongoing annual appropriation decreases to $1,000,000 to sustain DCS positions and program administration within EOA.

Start-up Scale and Fiscal Responsibility ~ This approach demonstrates reduced costs through earlier diagnosis, care planning, and coordinated treatment, supports caregivers remaining in the workforce, and reduces avoidable institutionalization. Medicaid costs associated with Alzheimer's have already increased by $69 million in five years, and they are projected to approach $1 billion annually by 2050 if we do nothing. Investing $3 million now, with a glide path down to $1 million once clinics bill for services, is a prudent strategy that bends the cost curve and expands access where it is most needed.

We have conferred with EOA and jointly offer the following amendments:

- Page 5, line 14: replace "shall" with "may"
- Page 6, line 7: replace "One full-time equivalent (1.00 FTE) dementia care specialist" with "Four full-time equivalent (4.0 FTE) dementia care specialist" or blank position counts and note 4.00 FTE dementia care specialists and 1.00 FTE memory network program manager in the committee report
- Page 6, line 14: delete "materials" so it reads "Public education and outreach"

The HANAI Memory Network is an equitable, scalable, and accountable solution that aligns with Hawai'i's ADRD Strategic Plan and proven models in other states. By centering access for neighbor islands and rural communities, building capacity to deliver care closer to home, and establishing sustainable funding through billing once clinics are operating, HANAI provides a practical pathway to better outcomes and long-term savings. Prioritizing early detection, coordinated care planning, caregiver support, and timely treatment improves quality of life for kūpuna and families while slowing the growth of public costs. For these reasons, I respectfully urge the Committee to pass HB1853 HD1.

Mahalo for the opportunity to testify. If you have any questions, please contact Coby Chock at 808-451-3410 or ckchock@alz.org.

Coby Chock

Coby Chock
Director, Public Policy and Advocacy
Alzheimer's Association - Hawaii

HB-1853-HD-1
Submitted on: 3/14/2026 11:28:49 AM
Testimony for HHS on 3/18/2026 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Jane Sugimura	Testifying for Hawaii Council of Community Assn's	Support	Written Testimony Only

Comments:

Support HB1853 HD1

This is so important for Hawaii with our aging population growing and many of them living within a Common Interest Community aka Condominium , townhouse of single family community.

This bill will help our Kupuna age in place, for the condo management and the Board of Directors, a place to seek support or even a place to seek answers to questions and best practices.

Thank you for the opportunity to submit this testimony.

Jane Sugimura, President Hawaii Council of Community Associations

HPCA
HAWAI'I PRIMARY CARE ASSOCIATION

Testimony to the Senate Committee on Health and Human Services
Wednesday, March 18, 2026; 1:00 p.m.
State Capitol, Conference Room 225
Via Videoconference

RE: HOUSE BILL NO. 1853, HOUSE DRAFT 1, RELATING TO DEMENTIA.

Chair San Buenaventura, Vice Chair McKelvey, and Members of the Committee:

The Hawaii Primary Care Association (HPCA) is a 501(c)(3) organization established to advocate for, expand access to, and sustain high quality care through the statewide network of Community Health Centers throughout the State of Hawaii. The HPCA **SUPPORTS** House Bill No. 1853, House Draft 1, RELATING TO DEMENTIA.

By way of background, the HPCA represents Hawaii's Federally Qualified Health Centers (FQHCs). FQHCs provide desperately needed medical services at the frontlines to over 150,000 patients each year who live in rural and underserved communities. Long considered champions for creating a more sustainable, integrated, and wellness-oriented system of health, FQHCs provide a more efficient, more effective and more comprehensive system of healthcare.

This bill, as received by your Committee, would appropriate an unspecified amount of general funds for fiscal year 2026-2027 and establish an unspecified number of positions within the Executive Office of Aging to implement the Hanai Memory Network Program to integrate community-based specialists, clinical partnerships, and public education to improve early detection, care coordination, and long-term support for individuals with dementia and their caregivers.

The bill would take effect on July 1, 3000.

According to the Center for Disease Control:

- Alzheimer’s disease is one of the top 10 leading causes of death in the United States;
- The 6th leading of death among US adults; and
- The 5th leading cause of death among adults aged 65 years or older.

In 2023, an estimated 6.7 million Americans aged 65 year or older had Alzheimer's disease. **This number is projected to nearly triple to 14 million people by 2060.**

Further, death rates for Alzheimer's disease are increasing, unlike heart disease and cancer death rates that are on the decline. Dementia, including Alzheimer's disease, has shown to be under-reported in death certificates and therefore the proportion of older people who die from Alzheimer's may be considerably higher.

In Hawaii, Alzheimer's disease is a growing public health crisis:

- 29,000 people aged 65 and older are living with Alzheimer's in Hawaii;
- 6.7% of people aged 45 and older have subjective cognitive decline;
- 60,000 family caregivers bear the burden of the disease in Hawaii;
- 91 million hours of unpaid care are provided by Alzheimer's caregivers;
- $1.9 billion is the value of the unpaid care; and
- $240 million is the cost of Alzheimer's to the State Medicaid Program.

For these reasons, the HPCA believes that this bill will ensure that earlier diagnosis, equitable access to care across all counties, and better coordination among service providers will reduce emergency room visits and hospitalizations. By shifting from crisis-driven care to proactive planning, Hawaii can improve outcomes for kupuna and caregivers while reducing Medicaid costs and alleviating pressure on the State's long-term care system.

Accordingly, we are honored to partner with the Alzheimer's Association on this important measure and urge your favorable consideration.

Thank you for the opportunity to testify. Should you have any questions, please do not hesitate to contact Public Affairs and Policy Director Erik K. Abe at 536-8442, or eabe@hawaiipca.net.

HAWAII ALLIANCE FOR RETIRED AMERICANS
An Affiliate of Alliance for Retired Americans
(AFL-CIO)

STATEMENT IN SUPPORT OF H.B. 1853, HD1

Relating to Dementia

Hearing: Wednesday, March 18, 2026; 1:00 p.m.
Hawaii State Capitol, Conference Room 225
and Via Videoconference

Senate Committee on Health and Human Services
Senator Joy A. San Buenaventura, Chair
Senator Angus L.K. McKelvey, Vice Chair

Chair San Buenaventura, Vice Chair McKelvey, and Members of the Senate Committee on Health and Human Services:

The Hawaii Alliance for Retired Americans (HARA) **supports** H.B. 1853, HD1, which establishes within the Executive Office on Aging the Hawaii Assistance for the Navigation of Alzheimer's Intervention (HANAI) program to support individuals in the State who have Alzheimer's Disease. The bill appropriates funds for four FTE dementia care specialist positions, one in each county, and memory clinics on the neighbor islands.

HARA is an organization of senior organizations that represent some 16,000 retirees in Hawaii. HARA's affiliates include retired members of HGEA, HSTA, ILWU, UPW, Kokua Council, and the Hawaii Caregivers Coalition.

Alzheimer's Disease and related dementias are a major cost driver in the U.S. and Hawaii. Although age does not cause dementia, it is a significant risk factor. As Hawaii's population continues to live longer, the number of individuals requiring care related to dementia is expected to exponentially increase and severely tax the Medicaid program, which funded with taxpayer dollars and pays for most of the institutional care provided to those living with Alzheimer's and dementia. Even if no government resources are utilized, costs for long-term care will inevitably be borne by family caregivers, who very likely will suffer financial challenges in their own senior years.

While there is no cure for Alzheimer's or dementia, treatments are now available to slow down the progression for those diagnosed early. Research is also advancing to develop new and better treatment protocols by organizations like the Alzheimer's Association. Early diagnosis is possible if health care professionals include cognitive assessments when treating their patients.

H.B. 1853, HD1 will establish the HANAI (Hawaii Assistance for the Navigation of Alzheimer's Intervention) program and fund one memory network program manager and one dementia care specialist plus associated costs. Clearly, **two full-time employees** to manage and provide services for the entire state are **insufficient to make a difference** in addressing the **dementia crisis in Hawaii**. However, **it is a start** to help gather needed data to support expansion of the program when the State's fiscal position improves. More importantly, it **represents the Legislature's recognition of a significant health issue affecting too many Hawaii residents**.

The Hawaii Alliance for Retired Americans (HARA) **supports H.B. 1853, HD1 and urges passage** of this measure to establish the HANAI program.

Thank you for considering our testimony.

HB-1853-HD-1
Submitted on: 3/16/2026 1:16:21 PM
Testimony for HHS on 3/18/2026 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Tony S Vericella	Testifying for Alzheimer's Caregiving & The Caregivers	Support	Written Testimony Only

Comments:

Testimony on HB18538 HD1

RELATING TO ALZHEIMER'S DISEASE

Wednesday, March 18, 1:00 PM

Conference Room 225 & Videoconference

State Capitol - 415 South Beretania Street

Chair San Buenaventura, Vice Chair McKelvey, and members of the committee,

My name is Tony Vericella, and I live primarily in Waimea on the Big Island. I've been the Caregiver to my wife Dana for seven plus years. Along the way, I discovered a new purpose: to support other Caregivers walking a similar path. That's why our non profit, Alzheimer's Caregiving & The Caregivers, which we launched two years ago this past September, exists today.

- On September 21, World Alzheimer's Day, Dana and I had been married 45 years.
- She's mostly in the late stages of this unrelenting disease:
- Severe disorientation to time and place

- No short-term memory
- Long-term memory fragments
- Loss of speech
- Difficulty standing or walking
- Loss of bladder/bowel control
- No longer recognizes family members
- Inability to survive without total daily care

We've made several key changes and additions to our physical environment to be better equipped to handle Dana's activities of daily life.

Our family has accepted that the Dana we knew would live on mostly in our memories. We wait for moments, even seconds, of recognition, of love, of reassurance that she is not suffering. And we plan – how do we take this pain, learn from it, and prepare others.

I am in strong support of HB1853 HD1 which would provide memory care across the state with an emphasis on providing access for individuals living on neighbor islands and rural areas.

Hawaiʻi is facing a growing dementia crisis. Today, more than 31,000 Hawaiʻi residents are living with Alzheimer’s disease, and this number is expected to double by 2050 as our population ages. Many families, especially on neighbor islands and in rural communities, struggle to access timely diagnosis, care planning, or memory care services. This leads to delayed or missing treatment windows, avoidable emergencies, and significant emotional and financial strain.

The HANAI Memory Network offers a statewide solution by creating Dementia Care Specialists in every county and Memory Clinics on each neighbor island. This will help people get diagnosed earlier, connect families to resources, and bring memory care closer to home. Early detection and coordinated support can make a meaningful difference in quality of life for those living with dementia and for the caregivers who support them every day.

I respectfully urge you to support this legislation to ensure that all of Hawaiʻi’s kūpuna, no matter where they live, have access to timely memory care, early diagnosis, and the support they need.

Thank you for the opportunity to testify.

Mahalo,

Tony Vericella

Alzheimer's Caregiving & The Caregivers

Founder & CEO

March 16, 2026

Aloha Chair, Vice Chair, and Members of the Committee,

My name is Cindy Fowler, and I serve as the Kauaʻi/Maui County Program Manager for the Alzheimer's Association. In my role, I work directly with individuals living with Alzheimer's disease and related dementias, as well as their caregivers, across Kauaʻi, Maui, Lānaʻi, and Molokaʻi.

I am writing in strong support of the proposed HANAI Memory Network bill.

Every week, I hear from families who are struggling—often in silence—to navigate a system that does not meet their needs. On Kauaʻi, as well as on Maui, Lānaʻi, and Molokaʻi, access to timely assessment, diagnosis, and treatment for cognitive impairment is extremely limited. Families are frequently placed on long waitlists, must travel off-island for specialty care, or are left without clear guidance on next steps following concerning symptoms.

The result is not just delayed care—it is distress, confusion, and, too often, a sense of hopelessness.

Caregivers regularly express feeling overwhelmed and unsupported, unsure of where to turn or how to plan for the future. A common theme I hear is that neighbor island residents receive "less than" when it comes to access to healthcare services, particularly specialized services like memory care. On Kauaʻi, for example, there are only 11 licensed memory care beds available for an estimated 1,500 to 2,000 individuals living with dementia. This stark gap underscores the reality families are facing every day.

Through my work, I strive to bridge these gaps by providing education, support groups, early-stage engagement programs, and community outreach initiatives that promote brain health and early detection. We are working to build awareness and equip families with tools—but education alone cannot replace access to a coordinated system of care.

The HANAI Memory Network represents a critical step forward in addressing these disparities. By strengthening access to memory care services, improving care coordination, and expanding support across all islands, this legislation has the potential to fundamentally change the experience of dementia care in Hawaiʻi—especially for those in rural and neighbor island communities.

This is not just a healthcare issue; it is a matter of equity, dignity, and support for our kūpuna and their families.

I respectfully urge you to pass this bill and help ensure that all residents of Hawaiʻi—regardless of where they live—have access to the care and support they deserve.

Mahalo for the opportunity to provide testimony and for your commitment to improving the lives of those impacted by Alzheimer's and related dementias.

Sincerely,
Cindy Fowler
Kauaʻi/Maui County Program Manager
Alzheimer's Association
808-518-6655
cfowler@alz.org

HB-1853-HD-1
Submitted on: 3/16/2026 2:29:49 PM
Testimony for HHS on 3/18/2026 1:00:00 PM

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

Comments:

We are in support.

HB-1853-HD-1
Submitted on: 3/14/2026 2:16:55 PM
Testimony for HHS on 3/18/2026 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Christine Spath	Individual	Support	Remotely Via Zoom

Comments:

To: Senate Committee on Health and Human Services (HHS)
Honorable Sen. Joy A. San Buenaventura, Chair
Honorable Sen. Angus L.K. McKelvey, Vice Chair

From: Christine Spath

Re: TESTIMONY IN SUPPORT FOR HB1853 HD1 – RELATING TO DEMENTIA

Date: March 18, 2026
Time: 1:00 PM
Place: Conference Room 225 & Videoconference

Aloha e Chair San Buenaventura, Vice Chair McKelvey, and Members of the Committee,

My name is Christine Spath. I live on Kaua‘i and I am testifying as an individual in support of HB1853 HD1, which establishes the Hānai Memory Network to strengthen dementia care coordination and support for families across Hawai‘i.

Having worked in home health on Kaua‘i for over six years, I have seen firsthand how dementia affects not only the individual but the entire family system. Many caregivers are trying to navigate complex medical, behavioral, and emotional changes without clear guidance or coordinated support. On neighbor islands in particular, families often face additional barriers such as limited access to specialists, fragmented services, and long wait times for memory care resources.

As a social work student at the Thompson School of Social Work at the University of Hawai‘i at Mānoa, I am also part of the Geriatric Workforce Enhancement Program. In my field experience, I conduct cognitive screenings such as the Mini-Cog and communicate concerns about possible cognitive decline to the attending physician. However, there is often no clear pathway for follow-up evaluation, care planning, or exploring treatment options. A coordinated system like the proposed Hānai Memory Network would allow physicians and care providers to connect patients with specialized memory clinics and other support services when appropriate.

From a financial perspective alone, this investment makes sense. Earlier diagnosis and better care coordination can reduce avoidable emergency visits and delay long-term institutional care. Even modest improvements in early intervention and coordinated support have the potential to offset costs quickly.

From a social work perspective, dementia affects not only the individual but also caregivers, families, and the broader community. Programs that improve early diagnosis and care coordination help families navigate services, reduce caregiver stress, and allow people living with dementia to remain in their homes and communities for as long as possible. Supporting systems that strengthen families and community care reflects core social work values of dignity, compassion, and connection.

I understand the concerns raised by the Executive Office on Aging about workforce shortages. As part of the Geriatric Workforce Enhancement Program, I receive specialized supervision in geriatrics from outside the island because this type of supervision is not available locally on Kauaʻi. That experience has shown me firsthand that the workforce shortage is real. At the same time, it highlights why building stronger systems for training, referral, and coordinated care is so important—and this is exactly what the Hānai Memory Network is designed to support.

For these reasons, I respectfully urge you to support this legislation. Mahalo for the opportunity to testify.

Sincerely,

Christine Spath

Testimony on HB1853 HD1
RELATING TO ALZHEIMER'S DISEASE
Wednesday, March 18, 1:00 PM
Conference Room 225 & Videoconference
State Capitol - 415 South Beretania Street

Chair San Buenaventura, Vice Chair McKelvey, and members of the committee,

My name is Calvin Hara, and I live in Kaimuki. I am in support of HB1853 HD1. During my thirty-year career in long term care, I have seen many people with Alzheimer’s disease along with their family caregivers. It is a difficult disease to have and to be a caregiver, especially as the disease progresses.

I have been a caregiver myself for loved ones and experienced first-hand on providing necessary care. As we know, there is no cure for Alzheimer’s disease.

HB1853 would provide memory care across the state with an emphasis on providing access for individuals living on neighbor islands and rural areas. Hawaii’s people need a network to improve their access to care as well the ability to have a plan of care for their life with Alzheimer’s.

The need is well explained along with the plan to create and implement to help Hawaii’s aging population. The Department of Health designated lead agency on aging is best fitted to fulfill the merits of this measure and should focus on the means to implement rather than on alleged reasons that it could not be implemented.

Please support HB1853 so Hawai’i’s kupuna can find better comfort in days ahead.

Thank you for the opportunity to submit testimony.

Mahalo,

Calvin Hara

Testimony on HB1853 HD1
RELATING TO ALZHEIMER'S DISEASE
Wednesday, March 18, 1:00 PM
Conference Room 225 & Videoconference
State Capitol - 415 South Beretania Street

Chair San Buenaventura, Vice Chair McKelvey, and members of the committee,

My name is Peter Black, and I live in Ninole on the Big Island. I am a retired professor of Anthropology, 83 years old, and I have Alzheimer's disease. I strongly support HB1853 HD1 which would provide memory care across the state, with an emphasis on providing services for people living on neighbor islands and rural areas.

Most of my career was at George Mason University, in Virginia. In 2005 I accepted an offer of early retirement from the University because it had become more and more difficult to teach at a level I could accept. As a student, I was unfortunate enough to have taken courses from people who were clearly past their peak, and I did not want to subject my students to the same thing. My wife Barbara and I moved to Hawaii in 2011. In 2015, she suggested that since I seemed to be worried that I might be declining mentally, I should probably just see a neurologist. I was 73 years old at that time.

I shall never forget my shock when the neurologist told me that I had Alzheimer's. However, that relatively early diagnosis turned out to be a blessing since it led us to plan for the future, and for me, access to one of the new Alzheimer's drugs.

For many other kūpuna on the Big Island and the other neighbor islands, access to such care is very difficult because it is not available locally. We are fortunate in this respect.

An affordable and accessible pathway to early detection and diagnosis needs to be available on all the neighbor islands along with locally available support throughout the course of this disease for patients and their caregivers. The HANAI Memory Network is a solution to this problem.

Hawaiʻi is facing a growing dementia crisis. Today, more than 31,000 of us are living with Alzheimer's disease, and this number is expected to double by 2050 as our population ages. Many families, especially on neighbor islands and in rural communities, struggle to access timely diagnosis, care planning, or memory care services. This leads to delayed or missing treatment windows, avoidable emergencies, and significant emotional and financial strain.

The HANAI Memory Network offers a statewide solution by creating Dementia Care Specialists in every county and Memory Clinics on each neighbor island. This will help people get diagnosed earlier, connect families to resources, and bring memory care closer to home. From my own experience, I am confident that early detection and coordinated support can make a meaningful difference in quality of life for those living with dementia and for the caregivers who support them every day.

I respectfully urge you to support this legislation to ensure that all of Hawaiʻi's kūpuna, no matter where we live, have access to timely memory care, early diagnosis, and the support we need.

Thank you for the opportunity to testify.

Mahalo,
Peter Black

Testimony on HB18538 HD1
RELATING TO ALZHEIMER'S DISEASE
Wednesday, March 18, 1:00 PM
Conference Room 225 & Videoconference
State Capitol - 415 South Beretania Street

Chair San Buenaventura, Vice Chair McKelvey, and members of the committee,

My name is Barbara Black and I live in Ninole on the Big Island. I strongly support HB1853 HD1 which would provide a network of memory care across the state with an emphasis on providing access for individuals living on neighbor islands and rural areas.

I am the caregiver for my spouse, Peter Black, who lives with Alzheimer's. Peter was diagnosed about 10 years ago. We were extremely lucky in that early diagnosis, and it was possible only because we had the ability to go to Oahu and to San Francisco. There were no memory care facilities on this island and, as we all know, PCPs are overwhelmed on the neighbor islands. Moreover, many are reluctant to care for those with dementia of any kind.

Peter's relatively early diagnosis was a gift to us as we contemplated our future. We were able to plan how we would manage this disease as it inevitably progressed.

I have had the opportunity during this time to learn (online and in person) more about the disease and caregiving. This has been incredibly helpful to me as we have moved forward through the progression of this disease. Caregiving for a spouse with Alzheimer's is complex and difficult; the ability to adjust and learn as early as possible has helped me immensely.

Early detection also provides the possibility of early access to treatments to slow progression of the disease. Treatments are becoming more accessible and effective every day.

Access to early detection, treatment, and coordinated support should be easily available and accessible to all those dealing with this disease throughout the state.

Hawaiʻi is facing a growing dementia crisis. Today, more than 31,000 Hawaiʻi residents are living with Alzheimer's disease, and this number is expected to double by 2050 as our population ages. Many families, especially on neighbor islands and in rural communities, struggle to access timely diagnosis, care planning, or memory care services. This leads to delayed or missing treatment windows, avoidable emergencies, and significant emotional and financial strain.

The HANAI Memory Network offers a statewide solution by creating Dementia Care Specialists in every county and Memory Clinics on each neighbor island. This will help people get diagnosed earlier, connect families to resources, and bring memory care closer to home. Early detection and coordinated support can make a meaningful difference in quality of life for those living with dementia and for the caregivers who support them every day.

I respectfully urge you to support this legislation to ensure that all Hawai‘i’s kūpuna, no matter where they live, have access to timely memory care, early diagnosis, and the support they need.

Thank you for the opportunity to testify.

Mahalo,

Barbara Black

HB-1853-HD-1
Submitted on: 3/15/2026 5:29:32 AM
Testimony for HHS on 3/18/2026 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Johnnie-Mae L. Perry	Individual	Support	Written Testimony Only

Comments:

I, Johnnie-Mae L. Perry, Support

1853 HB RELATING TO DEMENTIA.

To: Chair San Buenaventura
Vice Chair McKelvey
Members of the Committee on Health and Human Services

Re: **HB 1853, HD1 – RELATING TO DEMENTIA**
Wednesday, March 18, 2026
Testimony in Strong Support

My name is Steven Tam, and I am submitting testimony in **strong support of HB 1853, HD1**, which establishes the Hanai Memory Network Program within the Executive Office on Aging. I support this bill in memory of my father and three uncles who died from Alzheimer's disease.

Hawaiʻi is in the midst of a dementia crisis. More than 31,000 residents are living with Alzheimer's disease today, supported by over 62,000 unpaid family caregivers. **This is not a future challenge on the horizon — it is a crisis unfolding right now for families and neighbors across our state. These numbers will rise sharply as our population ages.**

Despite this growing need, access to early diagnosis, coordinated care, and long-term support remains limited—especially on the neighbor islands and in rural communities. These gaps are already leading to delayed diagnosis, preventable crises, and overwhelming caregiver stress. **Like many families, we struggled to navigate a system that simply isn't keeping up with what families need today. Families are experiencing the consequences now, which is why action cannot wait for a later session.**

The HANAI Memory Network offers a statewide solution by creating Dementia Care Specialists in every county and Memory Clinics on each neighbor island. This model strengthens early detection, shortens the time to diagnosis, connects families to resources, and brings memory care closer to home. HB 1853, HD1 ensures that families receive timely guidance, culturally responsive support, and proactive care planning. Early detection and coordinated support can make a meaningful difference in quality of life for those living with dementia and for the caregivers who support them every day.

For these reasons, I respectfully urge the Committee to pass HB 1853, HD1. This legislation will ensure that Hawaiʻi's families are no longer left to navigate dementia alone and represents a critical step toward a more coordinated, compassionate, and sustainable dementia care system for our state.

Mahalo for the opportunity to testify.

Steven Tam

HB-1853-HD-1
Submitted on: 3/16/2026 2:13:51 PM
Testimony for HHS on 3/18/2026 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Rosalie Char	Individual	Support	Written Testimony Only

Comments:

Chair San Buenaventura, Vice Chair McKelvey, and members of the committee,

My name is Rosalie Char, and I live in Kaneohe. Though I do not have a close, personal connection to Alzheimer's disease and other dementia, I do have many friends who do. Over the years I have heard from many of them with regards to the challenges and struggles they have had in caregiving for their loved ones. I am in strong support of HB1853 HD1 which would provide memory care across the state with an emphasis on providing access for individuals living on neighbor islands and rural areas.

Hawaiʻi is facing a growing dementia crisis. Today, more than 31,000 Hawaiʻi residents are living with Alzheimer’s disease, and this number is expected to double by 2050 as our population ages. Many families, especially on neighbor islands and in rural communities, struggle to access timely diagnosis, care planning, or memory care services. This leads to delayed or missing treatment windows, avoidable emergencies, and significant emotional and financial strain.

The HANAI Memory Network offers a statewide solution by creating Dementia Care Specialists in every county and Memory Clinics on each neighbor island. This will help people get diagnosed earlier, connect families to resources, and bring memory care closer to home. Early detection and coordinated support can make a meaningful difference in quality of life for those living with dementia and for the caregivers who support them every day.

I respectfully urge you to support this legislation to ensure that all of Hawaiʻi’s kūpuna, no matter where they live, have access to timely memory care, early diagnosis, and the support they need.

Thank you for the opportunity to testify.

Mahalo,

Rosalie

HB-1853-HD-1
Submitted on: 3/17/2026 6:40:24 AM
Testimony for HHS on 3/18/2026 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Glen Kagamida	Individual	Support	Written Testimony Only

Comments:

STRONG SUPPORT!!! MAHALO!

Testimony on HB18538 HD1
RELATING TO ALZHEIMER'S DISEASE
Wednesday, March 18, 1:00 PM
Conference Room 225 & Videoconference
State Capitol - 415 South Beretania Street

Chair San Buenaventura, Vice Chair McKelvey, and members of the committee,

My name is Liane Briggs, and I live in Kāneʻohe. My parents were spared the effects of Alzheimer's, however, I know many caregivers through a caregiver support group, and I am familiar with how dementia care affects local families, physically, emotionally, and financially. **I am in strong support of HB1853 HD1** which would provide memory care across the state with an emphasis on providing access for individuals living on neighbor islands and rural areas.

The HANAI Memory Network offers a statewide solution by creating Dementia Care Specialists in every county and Memory Clinics on each neighbor island. Kupuna and their families are aware of the difficulty of finding senior care, throughout the State and especially in rural areas and on neighbor islands, due to limited numbers of medical specialists, senior care facilities and workers. The HANAI Memory Network will help people get diagnosed earlier, connecting families to resources, and bringing memory care closer to home.

The very name of this bill, "The Hanai Memory Network", brings awareness to the role that the larger community shares in the care of our elders. The State can take the lead in this effort with this bill.

I respectfully urge you to **support this legislation for The HANAI Memory Network** to ensure that Hawaiʻi kūpuna, no matter where they live, have access to timely memory care, early diagnosis, and the support they need.

Thank you for the opportunity to testify.

Mahalo,
Liane Briggs

HB-1853-HD-1
Submitted on: 3/17/2026 10:17:10 AM
Testimony for HHS on 3/18/2026 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Gina Fujikami	Individual	Support	Written Testimony Only

Comments:

Testimony on HB18538 HD1

RELATING TO ALZHEIMER'S DISEASE

Wednesday, March 18, 1:00 PM

Conference Room 225 & Videoconference

State Capitol - 415 South Beretania Street

Chair San Buenaventura, Vice Chair McKelvey, and members of the committee,

My name is Dr.Gina Fujikami, and I live in Honolulu. My grandfather died from Alzheimer's disease and because of him, I became a Geriatrician to help take care of those afflicted by this disease. I am in strong support of HB1853 HD1 which would provide memory care across the state with an emphasis on providing access for individuals living on neighbor islands and rural areas.

Hawaiʻi is facing a growing dementia crisis. Today, more than 31,000 Hawaiʻi residents are living with Alzheimer’s disease, and this number is expected to double by 2050 as our population ages. Many families, especially on neighbor islands and in rural communities, struggle to access timely diagnosis, care planning, or memory care services. This leads to delayed or missing treatment windows, avoidable emergencies, and significant emotional and financial strain.

The HANAI Memory Network offers a statewide solution by creating Dementia Care Specialists in every county and Memory Clinics on each neighbor island. This will help people get diagnosed earlier, connect families to resources, and bring memory care closer to home. Early detection and coordinated support can make a meaningful difference in quality of life for those living with dementia and for the caregivers who support them every day.

I respectfully urge you to support this legislation to ensure that all of Hawaiʻi's kūpuna, no matter where they live, have access to timely memory care, early diagnosis, and the support they need.

Thank you for the opportunity to testify.

Mahalo,

Gina Fujikami, MD

HB-1853-HD-1
Submitted on: 3/17/2026 11:00:05 AM
Testimony for HHS on 3/18/2026 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Lila Mower	Individual	Support	Written Testimony Only

Comments:

I strongly support this measure and ask your committee to move it forward to the next committee. Mahalo.

TESTIMONY IN STRONG SUPPORT OF HB1853 HD1
RELATING TO ALZHEIMER'S DISEASE
Wednesday, March 18, 1:00 PM
Conference Room 225 & Videoconference
State Capitol - 415 South Beretania Street

Chair San Buenaventura, Vice Chair McKelvey, and members of the committee,

Mahalo for the opportunity to testify.

My name is Girard “Jerry” Perone. I live in Kakaʻako and serve as a volunteer Ambassador with the Alzheimer’s Association in Hawaiʻi. **I strongly support HANAI** because dementia in Hawaiʻi is no longer only a private family burden. It is a growing public health, caregiver, and health-system challenge.

HANAI is a practical response. It is designed to create a **statewide dementia care network** with on**e Dementia Care Specialist** embedded in each county, **one contracted memory clinic** in each neighbor-island county, **coordination through the Executive Office on Aging**, and an **annual budget target of about $3 million**. Its intended results are earlier diagnosis, better access to treatment, stronger caregiver and provider support, and fewer emergency room visits and hospitalizations.

This matters because the scale of the problem is already large. Hawaiʻi has about **31,200 kūpuna age 65** and older living with Alzheimer’s. Families here **provide roughly 111 million hours of unpaid dementia caregiving** each year, valued at about $2.8 billion. Alzheimer’s-related Medicaid costs in Hawaiʻi are about $309 million annually, and ED visits among people with dementia are reported at 1,248 per 1,000. Those are not abstract numbers. They represent families in crisis, caregivers under strain, and a system that is too often reacting late instead of helping early.

For HHS, the c**entral question is whether HANAI will help people sooner and more effectively. It will.** Dementia rarely begins with one dramatic event. It usually starts with confusion, missed medications, wandering risk, falls, caregiver exhaustion, and delayed diagnosis. HANAI helps move Hawaiʻi from crisis-driven dementia care to planned care. It gives families a front door into the system, helps them get assessed earlier, connects them to real care pathways, and improves access on the neighbor islands where gaps are often greatest.

HANAI is also fiscally responsible. At a **$3 million annual appropriation** against a **$309 million Medicaid dementia cost baseline**, the **break-even threshold is only about 0.97 percent**. If HANAI reduces Medicaid Alzheimer’s spending by **about 1 percent, it pays for itself even** before counting household savings, caregiver stability, or quality-of-life gains. That is a modest threshold for a program specifically designed to reduce avoidable emergency use, improve coordination, and delay higher-cost deterioration. However, even if the program cost grows to $5 million the breakeven threshold grows to only 3.24% (see table below)

Break-even table using $309,000,000 Medicaid baseline

Annual HANAI cost	Break-even Medicaid reduction	One-line interpretation
$1,000,000	0.32%	Need about 0.32% less Medicaid dementia spend vs. $309M baseline
$3,000,000	0.97%	Need about 0.97% less Medicaid dementia spend vs. $309M baseline
$5,000,000	1.62%	Need about 1.62% less Medicaid dementia spend vs. $309M baseline
$10,000,000	3.24%	Need about 3.24% less Medicaid dementia spend vs. $309M baseline

Break-even equation:

Break-even Medicaid reduction (%) = (Annual **HANAI** cost ÷ Annual Medicaid Alzheimer's/dementia spending) × 100

Just as important, HANAI can be held accountable. The program structure already contemplates reporting, measurable outcomes, and county-level visibility. That means the Legislature is not being asked to fund a vague idea. It is being asked to support a defined, measurable public health response to a clearly growing problem.

Please pass HANAI. Dementia is already moving through Hawaiʻi’s families, hospitals, and communities every day. The question is whether the State will continue paying for it at the crisis stage or build a system that meets families earlier, treats them with dignity, and manages this challenge with intelligence.

Mahalo for the opportunity to testify

Respectfully,
Girard Perone

Testimony in SUPPORT of HB 1853
RELATING TO DEMENTIA

COMMITTEE ON HEALTH AND HUMAN SERVICES
Sen. San Buenaventura, Chair
Sen. McKelvey, Vice Chair

Aloha Chair San Buenaventura, Vice Chair McKelvey, and Members of the Committee,
My name is Tani Salazar and I'm a Social Worker, born and raised in Hawaiʻi, testifying as an individual in support of the intent of HB 1853. Three of my grandparents lived with dementia, and my ʻohana has firsthand experience with how challenging it can be for families to navigate the healthcare system and community-based services to obtain appropriate support. These experiences underscore the importance of accessible, coordinated dementia care. Thank you for your leadership in hearing this measure, which would establish a HĀNAI Memory Network Program to assist families in navigating dementia care and to provide dementia education to the broader community. Expanding access to early detection and education is critical to improving outcomes for individuals living with dementia and caregivers.
I recognize that this is a challenging time for our state to establish new programs, particularly given fiscal and staffing constraints and ongoing changes in the federal landscape. However, as our population ages, dementia will continue to impact more individuals and families across Hawaiʻi. For this reason, it is vital that dementia-related programs remain a priority—whether through this measure or through future efforts when capacity allows. Mahalo for this opportunity to testify.

Sincerely,

Tani K. Salazar

Tani Salazar, LSW, MSW

LATE

HB-1853-HD-1
Submitted on: 3/17/2026 3:53:42 PM
Testimony for HHS on 3/18/2026 1:00:00 PM

Submitted By	Organization	Testifier Position	Testify
Rick Tabor	Individual	Support	Written Testimony Only

Comments:

Thank you for hearing the HANAI Memory Network Bill HB1853.

I'm Rick Tabor and I'm testifying in strong support.

The Hanai Memory Network Program within the Executive Office on Aging to create a network of dementia care specialists and support systems to assist individuals with dementia and their caregivers.
This bill would establish the HANAI Memory Network to expand access to memory care statewide, with a focus on neighbor islands and rural communities, ensuring early and accurate diagnosis and access to specialists and treatment.

My passion for improving our Dementia care comes from losing my mother to the disease. She became terrified as alzheimers took her mind on a horrifying roller coaster of unfortunste events, ending in her passing two yesrs ago, today.

I was frustrated every incident our family reported, with no where to turn. Because she needed 24/7 care, My brother sold their family restaruant, resulting in a small town no longer having anywhere to eat.

The proposed HANAI Memory Network would help with many of our Alzheimers needs in rural Hawaii communities. I feel our family coukd have mitigated many of the unpleasant occurrences they experienced, if a knowledgeable professional was near-by, supporting them. I know money spent, due to falls, wanderings ending with hyperthermia, and worse,

Hopefully, the needs outway all other variables. My mother once said, 'loosing myself, all by myself, is the scariest thing I never wanted.' Our family was not prepared or
adequately supported for what they had to endure. I truly believe a HANAI Memory Network could have been helpful.

Thank you for your time and consideration on this important matter.

Mahalo Nui Loa,

-Rick Tabor