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GOVERNOR OF HAWAII
KE KIA'ĀINA O KA MOKU'ĀINA 'O HAWAI'I



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**Testimony COMMENTING on HB1853
RELATING TO DEMENTIA**

COMMITTEE ON HEALTH
Rep. Gregg Takayama, Chair
Rep. Sue L. Keohokapu-Lee Loy, Vice Chair

COMMITTEE ON HUMAN SERVICES & HOMELESSNESS
Rep. Lisa Marten, Chair
Rep. Ikaika Olds, Vice Chair

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

Hearing: Friday, February 6, 2026, 9:00 A.M.

Conference Room: 329

- 1 **EOA Position:** The Executive Office on Aging (EOA), an attached agency to the Department of
- 2 Health (DOH), appreciates the intent of HB1853 and offers comments. EOA requests that this
- 3 program and appropriation not conflict with, reduce, or replace priorities identified in the
- 4 executive budget.
- 5 **Fiscal Implications:** This measure appropriates funds to establish and implement the HANAI
- 6 Memory Network program within the Executive Office on Aging.
- 7 **Purpose:** This measure establishes the HANAI Memory Network Program, requiring EOA to
- 8 create a statewide network of dementia care specialists, establish one or more clinics, coordinate
- 9 services, develop referral systems, provide training and technical assistance, operate a public-

1 facing website, and collect data. The HANAI Memory Network represents a large-scale initiative
2 requiring significant infrastructure, such as partnership building with clinicians and health care
3 providers, workforce development, and sustained funding.

4 EOA already leads the Hawai'i Dementia Initiative (HDI), which fulfills many objectives
5 outlined in this bill. HDI implements the **Hawai'i 2035: State Strategic Plan on Alzheimer's**
6 **Disease and Related Dementias (ADRD)** and convenes a coalition of 150 stakeholders
7 statewide. The coalition works through seven targeted action areas: dementia caregiving,
8 workforce development, early detection, brain health and risk reduction, public awareness,
9 community-clinical linkages, and data action.

10 In SFY 2025, EOA partnered to deliver dementia education to rural, underserved, and
11 low-income communities. Programs included caregiver training, community awareness sessions,
12 and HDI workgroup meetings. Through collaborations with UH Center on Aging, AARP, Brain
13 Matters, Kokua Mau, and others, we reached **6,306 community members** and **2,618**
14 **professionals** through dementia education and outreach. Our media campaign generated **56**
15 **million impressions**, and we launched Hawai'i's first dementia data dashboard—the **Healthy**
16 **Brain Tracker**—with over 30 indicators. We also maintain a robust ADRD website at
17 hawaiidementia.org and are mandated under Act 286 (2025) to collect data on cognitive
18 assessments for Medicare beneficiaries.

19 **Concerns:** Despite these accomplishments, EOA is operating at capacity with significant
20 staffing vacancies. Implementing a new statewide program like HANAI would require
21 substantial resources and infrastructure that we currently do not have. Given the State's

1 economic uncertainty and EOA's limited capacity, launching this initiative now would be
2 challenging and unsustainable.

3 **Recommendation:** EOA supports the intent of this measure but recommends revisiting the
4 proposal when the State and EOA are in a stronger position to implement it effectively. We
5 would welcome efforts to expand dementia care specialists statewide to complement the work of
6 our existing ADRD coordinator. EOA remains fully committed to improving the health and well-
7 being of Hawai'i's aging population, but we must prioritize sustainability and statutory
8 mandates.

9 If this measure is adopted, EOA respectfully requests extending the appropriation timeline to
10 FY2026–2028. This extension will allow sufficient time for staff recruitment and the completion
11 creating positions, establishing a reorganization, completing procurement and executing
12 contracts.

13 Thank you for the opportunity to testify.

HB-1853

Submitted on: 2/3/2026 9:17:29 PM

Testimony for HLT on 2/6/2026 9:00:00 AM

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

Comments:

In support.



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**The Hawaii State Legislature
House Committee on Health
House Committee on Human Services and Homelessness
Friday, February 6, 2026
Conference Room 329, 9:00 a.m.**

TO: The Honorable Gregg Takayama, Chair
The Honorable Lisa Marten, Chair
FROM: Keali'i S. López, State Director
RE: Support for H.B. 1853 Relating to Dementia

Aloha Chair Takayama, Chair Marten 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, 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.

H.B 1853 – Relating to Dementia

AARP in Support

Page 2

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. Thank you for the opportunity to testify in support.

2026 Hawaii
Leadership Board

Testimony to the House Committees on Health and Human Services and Homelessness Friday, February 6, 9:00 AM, Room 329 and Videoconference

RE: House Bill No. 1853 – RELATING TO DEMENTIA

Travis Kikuchi, *Chair*
Senior Vice President
Central Pacific Bank

Lori McCarney, *National*
Board Member Community
Advocate

Tricia Medeiros, *Past Chair*
Chief Operating Officer
The Plaza Assisted Living

Gina Fujikami, *MD*
The Queen's Medical
Center

Kai Ohashi,
Financial Advisor Edward
Jones

Michael Robinson,
Vice President Hawaii Pacific
Health

Kimberly Soares, *Vice*
President Atlas Insurance

Gino Soquena,
Executive Director
Hawaii Building and
Construction Trade Council

Gordon Takaki, *Past*
President Hawaii Island
Chamber of Commerce

Cary Tanaka,
Past President
Island Insurance
Companies

Caroline Witherspoon,
President Becker
Communications

LJ R. Duenas,
Executive Director
Alzheimer's Association

Chair Takayama, Chair Marten, and Members of the Committees:

Thank you for the opportunity to testify on the urgent need to expand access to memory care across Hawai'i, 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, which establishes the HANA'I (Hawai'i's Assistance for the Navigation of Alzheimer's Intervention) Memory Network, offering amendments for your consideration.

The Need ~ Alzheimer's disease and other dementias are creating a growing public health and economic crisis in Hawai'i. Today, 31,200 Hawai'i 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 Hawai'i 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 Hawai'i 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. Hawai'i'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 Hawai'i, 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 DCS salaries, 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 attached suggested amendments that better outline the HANAI Memory Network in Section 2 for clarity. These amendments more clearly define the Network's structure, purpose, and key components, including community-based memory clinics, dementia care specialists, and coordination through the Executive Office on Aging, helping ensure a shared understanding of how the program is intended to operate.

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.

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

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

STATEMENT IN SUPPORT OF H.B. 1853
Relating to Alzheimer's Disease

Hearing: Friday, February 6, 2026; 9:00 a.m.
Hawaii State Capitol, Conference Room 329
Via Videoconference

House Committee on Health
Rep. Gregg Takayama, Chair
Rep. Sue L. Keohokapu-Lee Loy, Vice Chair

House Committee on Human Services and Homelessness
Rep. Lisa Marten, Chair
Rep. Ikaika Olds, Vice Chair

Chair Takayama, Vice Chair Keohokapu-Lee Loy, and Members of the House Committee on Health:

Chair Marten, Vice Chair Olds, and Members of the House Committee on Human Services and Homelessness:

The Hawaii Alliance for Retired Americans (HARA) **supports** H.B. 1853, 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 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 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 will establish the HANAI (Hawaii Assistance for the Navigation of Alzheimer's Intervention) program to fund one dementia care specialist in every county for early detection of dementia and Alzheimer's Disease and establish memory clinics. This program will be a welcome resource for health professionals on the neighbor islands where the shortage of health care professionals is alarming and the few professionals on each neighbor island are not trained or experienced in diagnosing and treating dementia patients. One specialist in each county is clearly not enough but a good start.

The Hawaii Alliance for Retired Americans (HARA) **supports H.B. 1853 and urges passage of this measure to establish the HANAI program and fund one dementia care specialist in each county.**

Thank you for considering our testimony.

HB-1853

Submitted on: 2/3/2026 9:10:50 PM

Testimony for HLT on 2/6/2026 9:00:00 AM

Submitted By	Organization	Testifier Position	Testify
Margaret A. Perkinson, PhD	Individual	Support	Written Testimony Only

Comments:

I support HB1853.

HB-1853

Submitted on: 2/3/2026 10:29:08 PM

Testimony for HLT on 2/6/2026 9:00:00 AM

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 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 yrs 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

HB-1853

Submitted on: 2/4/2026 2:20:57 PM

Testimony for HLT on 2/6/2026 9:00:00 AM

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

Comments:

I strongly support this measure.

**Testimony on HB1853
RELATING TO ALZHEIMER'S DISEASE
Friday, February 6, 9:00 AM
Conference Room 329 & Videoconference
State Capitol - 415 South Beretania Street**

Chair Takayama, Chair Marten, and members of the committees,

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** which would provide memory care across the state with an emphasis on providing access for individuals living on neighbor islands and rural areas.

Hawai'i has been facing a growing dementia crisis for years. Today, more than 31,000 Hawai'i 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. If earlier diagnosis can occur, earlier treatment and lifestyle supports become available, helping families to care in the home.

The HANAI Memory Network offers a statewide solution by creating Dementia Care Specialists in every county and Memory Clinics on each neighbor island. We 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.

I respectfully urge you to **support this legislation for The HANAI Memory Network** to ensure that Hawai'i 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

Submitted on: 2/4/2026 7:11:40 PM

Testimony for HLT on 2/6/2026 9:00:00 AM

Submitted By	Organization	Testifier Position	Testify
Garan Ito	Individual	Support	Written Testimony Only

Comments:

Testimony on HB1853

RELATING TO ALZHEIMER'S DISEASE

Friday, February 6, 9:00 AM

Conference Room 329 & Videoconference

State Capitol - 415 South Beretania Street

Chair Takayama, Chair Marten, and members of the committees,

My name is Garan Ito, and I live in Aiea. I have lost my father to this terrible disease and would like to ensure others have more support and understanding about it then me and my family. I am in strong support of HB1853 which would provide memory care across the state with an emphasis on providing access for individuals living on neighbor islands and rural areas.

Hawai'i is facing a growing dementia crisis. Today, more than 31,000 Hawai'i 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 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,

Garan Ito

HB-1853

Submitted on: 2/4/2026 7:21:24 PM

Testimony for HLT on 2/6/2026 9:00:00 AM

Submitted By	Organization	Testifier Position	Testify
Jo Hittner	Individual	Support	Written Testimony Only

Comments:

Chair Takayama, Chair Marten, and members of the committees,

My name is Jo Hittner, and I live in Hilo. I come from a family with a history of dementia on both sides. I am 80 years old and am concerned about the possibility of a diagnosis of dementia as I age. I live on a neighbor island in Hawaii that has limited access for diagnosis and treatment. I know that early detection and treatment significantly slows the progression of Alzheimer's disease and I would like to have the opportunity, if necessary, to have early detection and treatment, not only for me but for all Hawaii residents who are susceptible to the disease. I am in strong support of HB1853 which would provide memory care across the state with an emphasis on providing access for individuals living on neighbor islands and rural areas.

Hawai'i is facing a growing dementia crisis. Today, more than 31,000 Hawai'i 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 the 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 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,

Jo Hittner

TESTIMONY IN STRONG SUPPORT OF HB1853 – RELATING TO DEMENTIA (HANAI Memory Network)

Hearing: Friday, February 6, 2026 – 9:00 AM | Conference Room 329 & Videoconference

State Capitol – 415 South Beretania Street

Committees: Health (HLT), Human Services & Homelessness (HSH), and Finance (FIN)

Chair Takayama, Chair Marten, Vice Chair Keohokapu-Lee Loy, Vice Chair Olds, and members of the committees:

Mahalo for the opportunity to testify. My name is Jerry Perone. I live in Kaka‘ako, and I serve as an Alzheimer’s Association Ambassador in Hawai‘i. I am also a member of the Honolulu Department of Emergency Management Reserve Corps and the Hawai‘i Medical Reserve Corps. Those roles have given me a broad, on-the-ground view of how dementia intersects with family safety, emergency response, and community resilience.

I am here in strong support of HB1853 because Alzheimer’s is not a policy topic in my family. It is a lived experience. It is the slowest kind of grief—the kind where the person is still breathing, still sitting in the room, and yet the person you love is slipping farther away every week.

I watched this disease take my mother-in-law through Alzheimer’s dementia. At first it looked “small”—a repeated question, a missed appointment, confusion about a familiar route. But then came the moment that changed everything: the day she looked at her own family and didn’t know who we were. **That is what dementia steals first—recognition, safety, and trust—and then it steals time, money, and health from the whole household.**

HB1853 matters because it builds the map families do not have today.

The bill’s findings say what families are already living: Alzheimer’s is estimated to affect one in nine Hawai‘i residents over age 65; the older adult population is expected to grow dramatically; and without intervention the surge will have “devastating financial consequences.”

The bill also does something rare in legislation: it tells the truth about dollars. Medicaid spending for Alzheimer’s care in Hawai‘i rose from \$240 million in 2020 to \$309 million in 2025, and the bill warns those costs could approach \$1 billion annually by 2050.

And it tells the truth about households: families are paying more than \$15,000 per month—about \$180,000 per year—for memory care, often after they’ve already spent themselves thin.

Those are not just numbers. They represent the same story repeated thousands of times: a caregiver doing math at midnight, trying to decide what gets paid and what doesn’t; a spouse trying to keep a partner safe; a family hoping the next confusing moment doesn’t become the next 911 call.

In fact, I did that midnight math for my own family. I built a set of the six simple end-of-life scenarios and the costs per year for me and my wife just to understand what dementia and frailty could cost in Hawai‘i versus Virginia, where our son lives. **In the "Cognitive Decline" scenario, the nominal annual cost in Hawai‘i is \$172,000 (worst-case \$199,000), compared with \$100,000 (worst-case \$121,000) in Virginia. This is Exhibit A. It is not a statewide average—it is a picture of the financial cliff a single household can face.**

HB1853’s solution is exactly the kind Hawai‘i needs: a coordinated, statewide system that makes early diagnosis and sustained support possible across all counties in Hawai‘i, not just where specialists happen to be concentrated. The bill establishes the HANAI Memory Network within the Executive Office on Aging and calls for dementia care specialists, memory clinics, a statewide referral network and directory, training for providers, a public-facing website, data tracking, and annual reporting so the Legislature can measure results.

Here is the second “why” that should matter to every fiscal decision-maker: if this were a business, these numbers would be a flashing red dashboard. When a liability rises from \$309 million toward \$1 billion a year, **you don’t call it “the cost of doing business.” You treat it as a preventable failure mode—and you redesign the system before it puts you out of business.**

HANAI is that redesign.

It shifts Hawai‘i from crisis-driven care to planned care—earlier diagnosis, better navigation, fewer avoidable emergencies, and support that helps families keep loved ones safer at home longer. With early diagnosis, a care plan, memory clinic support, and true navigation, more families can age in place longer—reducing the probability and duration of the worst-case scenarios in Exhibit A.

I respectfully urge you to pass HB1853 and fund it at a scale that matches the crisis. Protect the intent: real clinical partnerships, equal access on neighbor islands and rural communities, and measurable outcomes you can track year after year.

Because when dementia hits a family, the first question is never, “What program exists?”

The first question is, “What do I do right now?”

HB1853 makes Hawai‘i finally able to answer that question with something families can hold onto: a guide, a plan, and a network that does not abandon them to the maze.

Mahalo for your leadership and for hearing HB1853.

Jerry Perone

Kaka‘ako, Honolulu

Alzheimer’s Association Ambassador (Hawai‘i)

EXHIBIT A — Personal end-of-life scenario costs (me only; spouse would be additional)

Scenario	Hawai‘i (best / nominal / worst)	Virginia (best / nominal / worst)
A. Stable/independent	\$3k / \$24k / \$44k	\$3k / \$19k / \$36k
B. Falls frequent	\$14k / \$47k / \$100k	\$11k / \$37k / \$78k
C. Major fall (fracture/head injury)	\$29k / \$86k / \$112k	\$24k / \$70k / \$73k
D. Chronic mobility decline	\$37k / \$59k / \$138k	\$33k / \$50k / \$81k
E. Cognitive decline / needs supervision	\$59k / \$172k / \$199k	\$50k / \$100k / \$121k
F. Sudden disabling event (stroke/MI)	\$35k / \$110k / \$218k	\$30k / \$76k / \$139k

Testimony on HB1853
RELATING TO ALZHEIMER'S DISEASE
Friday, February 6, 9:00 AM
Conference Room 329 & Videoconference
State Capitol - 415 South Beretania Street

Chair Takayama, Chair Marten, and members of the committees,

My name is Calvin Hara, and I live in Kaimuki. I am in support of HB1853. 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.

Please support HB1853 so Hawaii's kupuna can find better comfort in days ahead. Thank you for the opportunity to submit testimony.

Mahalo,

Calvin Hara

**Testimony on HB1853
RELATING TO ALZHEIMER'S DISEASE
Friday, February 6, 9:00 AM
Conference Room 329 & Videoconference
State Capitol - 415 South Beretania Street**

Chair Takayama, Chair Marten, and members of the committees,

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 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 their home island. And not to be forgotten is the need for support throughout the course of this disease—for the patient and his or her caregivers. The HANAI Memory Network is a solution to this problem.

Hawai'i is facing a growing dementia crisis. Today, more than 31,000 Hawai'i 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 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,
Peter Black

**Testimony in SUPPORT of HB 1853
RELATING TO DEMENTIA**

COMMITTEE ON HEALTH

Rep. Takayama, Chair

Rep. Keohokapu-Lee Loy, Vice Chair

**COMMITTEE ON HUMAN SERVICES
& HOMELESSNESS**

Rep. Martin, Chair

Rep. Olds, Vice Chair

Aloha Chair Takayama, Vice Chair Keohokapu-Lee Loy, Chair Martin, Vice Chair Olds, and Honorable Members of the Committee,

My name is Tani Salazar and I'm a Social Worker, born and raised in Hawai'i, testifying as an individual in support of the intent of HB 1853. Three of my grandparents lived with dementia, and my 'ohana 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 Hawai'i. 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

**Testimony on HB1853
RELATING TO ALZHEIMER'S DISEASE
Friday, February 6, 9:00 AM
Conference Room 329 & Videoconference
State Capitol - 415 South Beretania Street**

Chair Takayama, Chair Marten, and members of the committees,

My name is Barbara Black and I live in Ninole on the Big Island. I strongly support HB1853 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.

Hawai'i is facing a growing dementia crisis. Today, more than 31,000 Hawai'i 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

Submitted on: 2/5/2026 8:33:44 AM

Testimony for HLT on 2/6/2026 9:00:00 AM

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

Comments:

Testimony on HB1853

RELATING TO ALZHEIMER'S DISEASE

Friday, February 6, 9:00 AM

Conference Room 329 & Videoconference

State Capitol - 415 South Beretania Street

Chair Takayama, Chair Marten, and members of the committees,

My name is Dr.Gina Fujikami, and I live in Honolulu, HI. Alzheimer's has affected my family, and as a Geriatrician, I mainly see kupuna with cognitive issues and their caregivers. I am in strong support of HB1853 which would provide memory care across the state with an emphasis on providing access for individuals living on neighbor islands and rural areas.

Hawai'i is facing a growing dementia crisis. Today, more than 31,000 Hawai'i 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 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,

Gina Fujikami, MD