



# DISABILITY AND COMMUNICATION ACCESS BOARD

Ka 'Oihana Ho'oka'a'ike no ka Po'e Kīnānā

1010 Richards Street, Rm. 118 • Honolulu, Hawai'i 96813  
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April 8, 2026

## TESTIMONY TO THE SENATE COMMITTEE ON WAYS AND MEANS

### House Bill 1973 House Draft 1 Senate Draft 1 – Relating to Health

The Disability and Communication Access Board (DCAB) supports House Bill 1973 House Draft 1 Senate Draft 1 - Relating to Health. This bill establishes within the Department of Health a one-year KupunAloha pilot program to provide in-home health care and support services to eligible participants who do not otherwise qualify for government assistance for these services. It appropriates funds for the program. This pilot program sunsets 6/30/27. It is effective 7/1/3000.

This bill will provide an affordable option for Hawaii seniors to obtain in-home health care and support services, allowing them to age in place. This reduces the likelihood of costly nursing home placement, which often falls on Medicaid and state resources that is more costly per person.

Thank you for the opportunity to testify.

Respectfully submitted,

KRISTINE PAGANO  
Acting Executive Director

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



**CAROLINE CADIRAO**  
DIRECTOR  
Executive Office on Aging

**KENNETH FINK, MD, MGA, MPH**  
DIRECTOR OF HEALTH  
KA LUNA HO'OKELE

**STATE OF HAWAII**  
**DEPARTMENT OF HEALTH**  
**KA 'OIHANA OLAKINO**  
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**Testimony COMMENTING on HB1973 HD1, SD1  
RELATING TO HEALTH**

COMMITTEE ON WAYS AND MEANS  
Senator Donovan M. Dela Cruz, Chair  
Senator Sharon Y. Moriwaki, Vice Chair

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

Hearing: Wednesday, April 8, 2026, 10:02 A.M.

Conference Room: 211

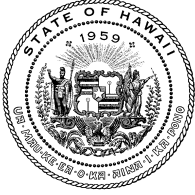
- 1 **Position:** The Executive Office on Aging (EOA), an attached agency to the Department of
- 2 Health (DOH), appreciates the intent of HB1973 HD1, SD1 and offers comments. EOA requests
- 3 that this program and appropriation not conflict with, reduce, or replace priorities identified in
- 4 the executive budget.
- 5 **Fiscal Implications:** An appropriation is needed to support the KupunAloha Program.
- 6 **Purpose:** This measure establishes a one-year KupunAloha Pilot Program within the Department
- 7 of Health (DOH) to provide essential in-home care and support services for roughly 25,000 older
- 8 adults who do not qualify for government assistance programs yet cannot afford private-pay
- 9 home care. EOA will work closely with DOH and the State Health Planning and Development

1 Agency (SHPDA) to ensure the new program doesn't overlap with current existing programs,  
2 such as State Kupuna Care.

3 Consistent with its mandate under the Older Americans Act of 1965 and HRS §349-6, EOA  
4 notes that the new program needs to be integrated within the current system of long-term  
5 services and supports. EOA is committed to working with DOH and SHPDA to clarify  
6 alignment. These services are essential for helping older adults age in place and supporting  
7 caregivers.

8 **Recommendation:** EOA appreciates the intent of this measure and defers to the Department of  
9 Health and SHPDA regarding planning and implementation.

10 Thank you for the opportunity to testify.



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

**JOSH GREEN, MD**  
GOVERNOR OF HAWAII  
KE KIA'AINA O KA MOKU'AINA 'O HAWAII

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

**JOHN C. (JACK) LEWIN, MD**  
ADMINISTRATOR

1177 Alakea Street, #402, Honolulu, HI 96813

Phone: 587-0788 Fax: 587-0783 [www.shpda.org](http://www.shpda.org)

April 7, 2026

**TO:** SENATE COMMITTEE ON WAYS AND MEANS  
Senator Donovan M. Dela Cruz, Chair  
Senator Sharon Y. Moriwaki, Vice Chair

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

**RE:** **HB 1973-HD1-SD1 -- RELATING TO HEALTH**

**HEARING:** Wednesday, April 8, 2026 @ 10:02 am; Conference Room 211

**POSITION:** SUPPORT with COMMENTS

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Testimony:

SHPDA strongly supports HB1973-HD1-SD1 with comments. This innovative concept was born in SHPDA's Kupuna Advisory Council. The goal of the KupunAloha program is to provide an extension of primary care into the patient's home for frail and high-risk beneficiaries of traditional Medicare, who are not eligible for home health, transportation, and other services. Kupuna who are eligible for Medicaid do receive these services through Med-QUEST, but NOT the large majority of kupuna who are not Medicaid-eligible. These non-eligible kupuna are subject to frequent ED (emergency department) visits and avoidable hospitalizations, and early expensive institutional care.

The KupunAloha program will use vetted, trained, and program-supported volunteers or CHWs where available to make such services available at very low cost. The volunteers will have laptops with always available telehealth access to advanced practice nurses and social workers and to the primary care doctors and clinics to access services they would not otherwise receive. The KupunAloha beneficiaries will be referred to the program on the basis of being frail and/or high-risk by their primary care doctors, health centers, EMS or hospitals, or community organizations to access the program, and to be able to remain at home or in their community at far lower cost than they would otherwise incur.

Where available CHWs will provide the front-line patient care. The volunteers, likely early retirees such as those in Project Dana, Hui O` Hauula, and other existing programs, can also be trained up to become CHWs, and could include people who are being rejected from Medicaid for the new work requirements to be able to retain their

*HB 1973-HD-SD1: testimony of SHPDA (2026), continued*

coverage. Each patient gets at the outset of referral a thorough RN care assessment of their condition(s) and needs. The patients will also retain their relationship with their primary care providers where they have them.

Hawai'i has approximately 25,000 high-risk and frail kupuna who fall into this gap-unable to access Medicaid and financially unable to pay for private care. These individuals are among our most vulnerable, and without intervention, they face isolation, declining health, high rates of emergency department (ED) use and avoidable hospitalizations.

This measure is cost effective. The estimated costs annually for KupunAloha will likely be less than \$1000 per individual, per year. But the savings will be in the many millions. Because the Governor, SHPDA, and the DOH have included this program for the same initial cost in our Rural Health Transformation grant request for rural kupuna, this request will cover the majority of frail elders who would benefit in urban areas and are not eligible for RHTP funds.

With an appropriation of \$2 million, the program can ramp up very fast to creatively fund care for up to 2000 or more patients in year one, saving much more than that. All the resources exist –we just need to put them together. It is currently a one-year pilot, but we will be back next year with a new data-supported request to continue and to improve the model.

Every dollar spent on in-home care reduces the likelihood of costly nursing home placement, which often falls on Medicaid and state resources. By investing in KupunAloha we save the state dollars, reduce strain on our healthcare system, support families, and honor cultural values of aging in place.

KupunAloha allows seniors to remain in their homes and communities, close to family and friends, preserving dignity and mental well-being. This approach aligns with Hawai'i's commitment to 'ohana and cultural respect.

The program will report back to the Legislature by January 2027 on program effectiveness and recommendations for permanency, ensuring transparency and data-driven decisions.

This bill is fiscally responsible, compassionate, and respectful of our Kupuna-hence the name KupunAloha. It addresses a critical gap in elder care and provides a sustainable, cost-effective solution. We respectfully urge you to pass this bill.

Thank you for hearing HB 1973-HD1-SD1. Mahalo for the opportunity to testify.

■ -- Jack Lewin, MD, Administrator, SHPDA

**HB-1973-SD-1**

Submitted on: 4/6/2026 6:39:57 PM

Testimony for WAM on 4/8/2026 10:02:00 AM

| <b>Submitted By</b> | <b>Organization</b>                               | <b>Testifier Position</b> | <b>Testify</b>            |
|---------------------|---|---------------------------|---------------------------|
| Louis Erteschik     | Testifying for Hawaii<br>Disability Rights Center | Support                   | Written Testimony<br>Only |

Comments:

In support.



[www.AlohaLLHawaii.org](http://www.AlohaLLHawaii.org)

Apr 8, 2026

#### MISSION

Aloha Independent Living Hawaii (AILH) dedicated to providing independent living programs and services for persons with disabilities in Hawaii.

We work together with the community and consumers to improve the quality of life through individual choices and access to services.

#### EXECUTIVE DIRECTOR

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The Honorable Donovan M. Dela Cruz, Chair  
Senate Committee on Ways and Means  
The Thirty-Third Legislature  
State Capitol  
State of Hawaii  
Honolulu, Hawaii 96813

**SUBJECT:** HB1973 HD1 SD1 – Relating to Health (KupunAloha Pilot Program)

Chair and Members of the Committee:

Aloha Independent Living Hawaii (AILH) respectfully submits testimony in **strong support of HB1973 HD1 SD1**, which establishes a one-year KupunAloha pilot program within the Department of Health to provide in-home health care and support services for eligible individuals who do not qualify for existing government programs and cannot otherwise afford these services. We offer this testimony from an Independent Living philosophy and cross-disability perspective that centers the rights, autonomy, and community integration of people with disabilities and kupuna in Hawaii.

AILH is a statewide Center for Independent Living that provides advocacy, peer support, independent living skills training, information and referral, and transition services to people with all types of disabilities across Hawaii. Our work is grounded in the Independent Living principle that people with disabilities should be able to live in their own homes and communities, with the services and supports they need, rather than being forced into institutional settings due to gaps in available services.

#### **Building on Prior Testimony**

AILH previously submitted testimony to the Senate Committee on Health and Human Services on March 20, 2026, in strong support of HB1973 HD1. We continue to strongly support this measure and submit this updated



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testimony to affirm our support for HB1973 HD1 SD1 and to highlight the importance of adequate funding and a realistic effective date as the bill moves through the Committee on Ways and Means.

## Independent Living Perspective on KupunAloha

The legislature finds that an estimated twenty-five thousand elderly individuals in Hawaii require in-home health care or support services and do not qualify for existing programs, such as Medicare, and cannot afford in-home care services. From an Independent Living perspective, these kupuna are at high risk of falling into an “eligibility gap” where they are too “over-income” or otherwise ineligible for public programs, yet cannot pay out of pocket for supports that would allow them to remain safely at home.

HB1973 HD1 SD1 responds directly to this gap by creating a one-year KupunAloha pilot program within the Department of Health to provide in-home health care and support services for eligible individuals who do not qualify for existing government assistance and cannot otherwise afford these services. By requiring the department to create a plan of care for each eligible applicant and authorizing referrals and contracts with health care providers, the pilot program helps ensure that services follow the person into the community rather than requiring the person to move into a facility to get help.

Keeping kupuna in their homes preserves cultural connections, ohana relationships, and personal autonomy, all of which are core to Independent Living values in Hawaii. In-home services—such as assistance with daily activities, health-related tasks, and coordination with providers—are often the difference between remaining safely at home and facing premature or unwanted institutionalization.

## Key Features of HB1973 HD1 SD1

AILH supports the key elements of HB1973 HD1 SD1, including:

- Establishment of a one-year KupunAloha pilot program within the Department of Health to provide in-home health care and support services for eligible individuals who do not otherwise qualify for



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government assistance for these services.

- Requirement that the department create a plan of care for each eligible applicant and authority for the department to refer eligible applicants to health care providers.
- Authority for the pilot program to enter into contracts with health care providers, with contracts subject to chapter 103F, Hawaii Revised Statutes, to effectuate the purposes of the Act.
- Clear eligibility criteria that exclude individuals who are already covered by Medicaid or other government assistance for in-home services, or who do not meet the income or need criteria established by the department, thereby targeting the program to those who are currently falling through the cracks.
- A sunset date of June 20, 2027, ensuring this is a time-limited pilot with defined parameters and an opportunity for evaluation before any long-term commitment.
- A reporting requirement directing the Department of Health to submit a report on the effectiveness of the pilot program, including recommendations to improve efficiency and whether the program should be made permanent, no later than twenty days prior to the 2027 regular session.

These features make HB1973 HD1 SD1 a practical, time-limited step that fills a critical gap in access to in-home supports, helps prevent unnecessary institutionalization, and advances the State's commitment to kupuna and people with disabilities living with dignity in their own homes and communities.

## Requests to the Committee on Ways and Means: Appropriation and Effective Date



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HB1973 HD1 SD1 includes an appropriation section that would fund the implementation and operation of the KupunAloha pilot program for fiscal year 2026-2027, but the dollar amount is left blank. For the pilot to succeed—and to generate meaningful data for the required report—the Department of Health will need sufficient resources to:

- Conduct outreach and intake for eligible kupuna who are currently not served by existing programs;
- Develop and implement individualized plans of care;
- Contract with community-based providers across islands for in-home health care and support services; and
- Collect and analyze data on outcomes and lessons learned to inform future policy decisions.

AILH respectfully urges the Committee on Ways and Means to appropriate a level of funding that is adequate to support statewide implementation of the KupunAloha pilot program and to ensure that services reach kupuna in rural and neighbor island communities as well as urban Oahu. Underfunding the pilot would limit its reach and undermine the State's ability to fairly evaluate whether it should be made permanent.

We also note that HB1973 HD1 SD1 currently has an effective date of July 1, 3000. As with other bills using effective dates for drafting purposes, this would delay the benefits of the pilot beyond the lifetimes of the kupuna the Legislature seeks to support. AILH respectfully requests that the Committee amend the effective date to July 1, 2026 (or another near-term date aligned with the appropriation), so that the pilot can operate on the timeline envisioned by the June 30, 2027 sunset and the 2027 report requirement.

From an Independent Living standpoint, it is urgent to move forward now to address the eligibility and affordability gaps leaving thousands of kupuna without in-home supports. Aligning the effective date with the sunset and reporting deadlines will allow Hawaii to test and refine an approach that



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keeps people safely at home, honoring their choices and connections to ohana and community.

## Conclusion

HB1973 HD1 SD1 is an important, time-limited pilot that targets kupuna who are currently left without options for necessary in-home health care and support services and are at risk of unnecessary institutionalization. The KupunAloha pilot program advances Independent Living values by helping people receive services where they live, preserving autonomy and community ties, and creating a structured opportunity to learn from and improve in-home supports across the State.

Aloha Independent Living Hawaii strongly supports HB1973 HD1 SD1. We respectfully urge the Committee on Ways and Means to:

1. Pass HB1973 HD1 SD1;
2. Provide sufficient appropriations in Section 4 to fully implement and evaluate the KupunAloha pilot program; and
3. Amend the effective date so that the pilot can begin in the near term and operate through June 30, 2027, as intended.

Thank you for the opportunity to provide testimony on this important measure.

Mahalo,

Roxanne Bolden  
Executive Director



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902 University Avenue, Honolulu, Hawaii 96826 • (808) 945-3736 • [info@projectdana.org](mailto:info@projectdana.org) • [www.projectdana.org](http://www.projectdana.org)

Senator Donovan M. Dela Cruz, Chair  
Senator Sharon Y. Moriwaki, Vice Chair  
Members of the Senate Committee on Ways and Means

**RE:** HB 1973, HD1, SD1 – RELATING TO HEALTH (KupunAloha Program)

**HEARING DATE:** April 8, 2026

**POSITION: STRONG SUPPORT**

Dear Chair Dela Cruz, Vice Chair Moriwaki, and Members of the Committee:

As the Executive Director of Project Dāna, I respectfully submit testimony in **STRONG SUPPORT** of HB 1973, HD1, SD1, which establishes and funds the KupunAloha pilot program within the Department of Health.

This measure addresses a well-documented gap affecting approximately 25,000 kūpuna in Hawai'i who do not qualify for Medicaid but cannot afford private in-home care. Without intervention, many experience preventable health decline, caregiver burnout, and costly hospitalizations or institutional care.

### **A Strategic, Cost-Effective Investment**

KupunAloha is designed as a high-leverage pilot that combines licensed care providers, family caregivers, and trained volunteers into a unified plan of care.

This model provides early, preventive support—stabilizing kūpuna before needs escalate into crises. By doing so, it can help delay or avoid higher-cost care, including emergency department use, hospitalization, and long-term institutional placement.

Every month that a kūpuna safely remains at home represents meaningful cost avoidance to the State.

### **Leveraging Existing Infrastructure**

Importantly, KupunAloha builds on—and does not duplicate—existing systems.

- The program aligns with the State's Rural Health Transformation Program (RHTP), with this measure supporting urban Honolulu as the State match to federal rural investments.
- Community-based organizations, including Project Dāna, already operate established volunteer infrastructure that can be scaled quickly and cost-effectively.
- The bill requires a unified plan of care, ensuring coordination and avoiding fragmentation across providers.

This approach maximizes return on investment by leveraging both federal funding and existing community capacity.

## **A Prudent Pilot with Clear Accountability**

This is a time-limited, one-year pilot that:

- Targets a clearly defined population
- Uses a coordinated care model
- Requires reporting to the Legislature on outcomes and recommendations

This structure allows the State to:

- Evaluate effectiveness
- Measure cost avoidance
- Refine the model before any long-term commitment

## **Ready to Implement**

Project Dāna and its partners are prepared to operationalize the volunteer component of this model, building on decades of experience serving kūpuna across Hawai'i.

The need is urgent, the model is practical, and the infrastructure is in place.

KupunAloha represents a thoughtful, fiscally responsible investment that aligns community-based care with health system priorities.

For these reasons, I respectfully urge the Committee to pass HB 1973, HD1, SD1 and fund the KupunAloha pilot program.

Mahalo for the opportunity to testify.

Respectfully,



**Maria Raiza D. Morales**  
Executive Director  
Project Dāna

**HCAOA  
Hawaii Chapter Board**

Dew-Anne Langcaon  
*Chair*  
*Vivia by Ho'okele Home  
Care*

Jenny Cambra  
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Cecilia Fong  
*Advocacy Chair*  
*Griswold Home Care for  
Oahu*

Cory Kataoka  
*Education Co-Chair*  
*Bayada Home Health Care*

Alison Lee  
*Education Co-Chair*  
*BrightStar Care of Honolulu*

**TO:** Representative Dela Cruz, Chair  
Representative Moriwaki, Vice Chair  
Members of the House Committee on Ways and Means

**RE:** HB1973 HD1 SD1 - RELATING TO HEALTH  
(KupunAloha Program)

**HEARING DATE:** April 8, 2026, 10:02 AM

**POSITION: STRONG SUPPORT WITH AMENDMENTS**

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Dear Chair Dela Cruz, Vice Chair Moriwaki, and Members of the Ways and Means Committee:

The Home Care Association of America (HCAOA) Hawaii Chapter respectfully submits testimony in **STRONG SUPPORT WITH AMENDMENT** of HB1973 HD1 SD1, which establishes and appropriates funds for the KupunAloha program within the Department of Health to provide in-home health care and support services to eligible participants who do not otherwise qualify for government assistance and cannot otherwise afford to pay out of pocket for these services.

**In Support of Partnerships with Volunteer Organizations**

HCAOA Hawaii recognizes the essential role that community-based volunteer organizations play in supporting kupuna who need help at home but do not qualify for government-funded services and cannot afford to pay for such in-home services privately. Volunteer organizations have served Hawaii's seniors with dedication and compassion for decades with neighbors helping neighbors. However, as seniors become more fragile and require more hands-on personal care assistance, unpaid volunteers may be reluctant to provide higher intensity personal care and often times may withdraw from volunteering when the situation becomes overwhelming and beyond their training and comfort. We believe a partnership between professional caregivers and volunteers can foster continuation of the volunteer relationship and affordably supplement the care in the home with trained and licensed caregivers.

HCAOA Hawaii also supports the need for a unified plan of care for seniors to tightly coordinate the services of volunteer, family and professional caregivers as a team. We applaud the KupunAloha program for proposing a solution that fosters a unified team approach to coordinating in-home service resources and avoiding the pitfalls of creating a siloed structure that could be more complex rather than helpful to seniors who need help at home. Such partnerships can enhance the volunteer programs with additional training resources, coverage for unexpected absences, clinical oversight, quality assurance and

accountability as well as access to advanced technology tools and systems.

### **Federal Context Adds Urgency**

Federal threats to Medicaid home and community-based services funding through the One Big Beautiful Bill Act make state-level investments in community-based senior care even more critical. If federal cuts reduce eligibility for Medicaid-funded home care, more kupuna will rely on volunteer and community-based services as their primary source of support. Volunteers can also assist with filling some of the vacancies in severe direct care workforce shortages.

HCAOA Hawaii strongly urges the Committee to pass HB1973 HD1 SD1 and fund the KupunAloha program. Our member agencies stand ready to partner with volunteer and other community resources to weave a safety net of services for gap group Kupuna. Thank you for the opportunity to provide testimony.

Respectfully submitted,

### **Cecilia Fong**

Advocacy Chair, Home Care Association of America - Hawaii Chapter  
Administrator, Griswold Home Care for Oahu

### **HCAOA Hawaii Chapter Board**

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*Chair*  
*Vivia by Ho'okele Home  
Care*

Jenny Cambra  
*Vice Chair*  
*Senior Helpers*

Cecilia Fong  
*Advocacy Chair*  
*Griswold Home Care for  
Oahu*

Cory Kataoka  
*Education Co-Chair*  
*Bayada Home Health Care*

Alison Lee  
*Education Co-Chair*  
*BrightStar Care of Honolulu*

### **About HCAOA Hawaii Chapter**

The Home Care Association of America (HCAOA) is a national trade association for home care providers. The HCAOA Hawaii Chapter, established in 2025, represents licensed home care and home health agencies throughout the state that work alongside family caregivers daily, providing professional support that enables kupuna to age safely in their homes.

care providers. The HCAOA Hawaii Chapter, established in 2025, represents licensed home care and home health agencies throughout the state that work alongside family caregivers daily, providing professional support that enables kupuna to age safely in their homes.

**HB-1973-SD-1**

Submitted on: 4/6/2026 12:45:56 PM

Testimony for WAM on 4/8/2026 10:02:00 AM

| <b>Submitted By</b> | <b>Organization</b> | <b>Testifier Position</b> | <b>Testify</b>            |
|---------------------|---------------------|---------------------------|---------------------------|
| Glen Kagamida       | Individual          | Support                   | Written Testimony<br>Only |

Comments:

STRONG SUPPORT!!! WORTH A ONE YEAR PILOT PROGRAM. THERE IS A BIG NEED OUT THERE. MAHALO!

**HB-1973-SD-1**

Submitted on: 4/7/2026 10:05:02 AM

Testimony for WAM on 4/8/2026 10:02:00 AM

| <b>Submitted By</b> | <b>Organization</b>   | <b>Testifier Position</b> | <b>Testify</b>            |
|---------------------|---|---------------------------|---------------------------|
| Rick Tabor          | Testifying for PABEA<br>(Policy Advisory Board<br>for Ederly Affairs) | Support                   | Written Testimony<br>Only |

Comments:

Thank you for hearing Bill HB1974.

I'm Rick Tabor, a long time hearing aid champion. I stronly support Bill HB1974.

I testify as PABEA's (Policy Advisory Board for Wlderly Affair's) Legislative Chair. Our views do not represent EOA. However, as you'll read, I've dedicated a decade to the hope of helping those with hearing issues.

For the record, I'm a retired mental health professional with extensive clinical and casemanagement us program development, implementation and management experience. In my semi-retirement yesrs, I was an operations manager for in-home care. I'm also a Veteran Field Medical Navy Hospital Corpsman who was stationed at Kaneohe Marine Corps Air Station in the mid to late 1970's. In my retirement I'm active with several kūpuna nonprofits. To honorvthose who once cared for us is one of life's greatest honors.

My past legislative session testimonies supported adequate coverage for hearing aids. I chair the Gift of Sound Rotary free hearing aid program. The HB1974 proposal hopes to explore Hawaii's hearing aid needs. Awareness, accessibility and affordability are three of the immediate concerns to address.

I've previously shared my morher's hearing loss Alzheimers issues. She succomed to her issues on February 7, 2014. I'll spare the committee our story. Trust me, her and our journey was a rough one. Awareness, Accessibility and Affordablity all played a part in her issues. As a professional, I can always sort out a reasonable, realistic plan. As a Son, nothing prepared me for the roller coaster our family experienced. I know we, as a taskforce can sort out the needs and hopefully, together, we can mitigate current hearing loss issues.

Your support is extremely helpful and much appreciated.

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

-Rick Tabor  
Honolulu, Hawaii

