



HOUSE COMMITTEE ON HUMAN SERVICES & HOMELESSNESS

The Honorable Lisa Marten, Chair
The Honorable Ikaika Olds, Vice Chair

H.C.R. NO. 20, REQUESTING THE AUDITOR TO ASSESS THE SOCIAL AND FINANCIAL EFFECTS OF MANDATING HEALTH INSURANCE COVERAGE FOR BRIEF COGNITIVE ASSESSMENTS FOR INDIVIDUALS FIFTY YEARS OF AGE AND OLDER

Hearing: Wednesday, April 1, 2026, 10:00 a.m.

The Office of the Auditor offers comments on H.C.R. No. 20, requesting the Office of the Auditor to conduct a social and financial assessment of proposed mandatory health insurance coverage for brief cognitive assessments for individuals fifty years of age and older.

Section 23-51, Hawai'i Revised Statutes (HRS), which requires the Auditor to assess the social and financial impacts of legislative measures proposing to mandate health insurance coverage, directs that the concurrent resolution designate a specific bill proposing the health mandate. This bill must include, among other things, "the specific health service, disease, or provider that would be covered."

H.C.R. No. 20 identifies H.B. No. 1702 (2026 Regular Session), which requires insurers to cover brief cognitive assessment screenings for policyholders or any dependent of the policyholder covered under the policy. However, it is unclear what specific services are covered as "brief cognitive assessment screening." In addition, the bill states that "coverage required under this section shall include but not be limited to: (1) Initial cognitive assessments during routine visits for individuals fifty years of age and older; and (2) Initial cognitive assessments during non-routine visits for individuals fifty years of age and older." As mentioned previously, Section 23-51, HRS, requires that the bill designate a "specific health service, disease, or provider that would be covered" to facilitate our assessment of the proposed coverage. Because H.B. No. 1702 does not define "brief cognitive assessment screenings," ambiguously states that the required coverage includes but is *not* limited to certain cognitive assessments, and does not specify the limits of the proposed coverage, it is unclear what services we need to include in our assessment of the social and financial impacts of the proposed coverage.

We suggest that the Legislature consider deferring H.C.R. No. 20.



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

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

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March 31, 2026

TO: HOUSE COMMITTEE ON HUMAN SERVICES & HOMELESSNESS
Representative Lisa Marten, Chair
Representative Ikaika Olds, Vice Chair
Honorable Members

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

**RE: HCR 20 -- RELATING TO INSURANCE COVERAGE OF COGNITIVE
ASSESSMENT**

HEARING: Wednesday, April 1, 2026 @ 10:00 am; Conference Room 329

POSITION: SUPPORT with COMMENTS

Testimony:

SHPDA strongly supports the intent of HCR 20, with comments. We have testified in support of requiring insurance coverage for cognitive assessments as means of offsetting preventable cognitive decline by diagnosing it early. There are increasing means of slowing cognitive decline with new therapeutics for some patients. Every kupuna doesn't need this, even at age 80 or older. But for those who exhibit signs of cognitive decline, with a physician's recommendation, or by request by a patient or their family, suggesting the need for such an assessment, it should be a covered benefit without need for this legislation or for the HCR.

Properly providing cognitive assessments to those who might benefit will save money, not increase costs. Mandating that every person over 60 have an assessment is not needed. The auditor might better examine whether this benefit is routinely provided on the mainland for those who might benefit, and for whatever reason is being denied or requires prior authorization as a barrier to it being provided here.

Thank you for hearing HCR 20.

Mahalo for the opportunity to testify.

■ -- Jack Lewin, MD, Administrator, SHPDA

Testimony to the House Committee on Human Services & Homelessness

Wednesday, April 1, 10:00 AM

Hawaii State Capitol, Room 329 and Videoconference

RE: House Concurrent Resolution 20

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LJ R. Duenas,
Executive Director
Alzheimer's Association

Chair Marten, Vice Chair Olds, and Members of the Committee:

My name is Coby Chock, Director of Public Policy and Advocacy for the Alzheimer's Association. I write in **strong support** of HCR20 which seeks to determine the social and financial effects of mandated insurance coverage for brief cognitive assessment for individuals over 50 years old.

While certain populations face higher risk, cognitive impairment and dementia affect people across all racial, ethnic, and socioeconomic groups. An age-based approach promotes equity, avoids stigmatization, and acknowledges that cognitive health deserves routine attention as part of preventive care.

Research highlights the consequences of delayed diagnosis. A study by Maiya Smith et al. found that Native Hawaiians and Pacific Islanders (NHPI) are diagnosed with dementia at younger ages and are more likely to be diagnosed at later stages of the disease. Other research indicates that Native Hawaiians are at increased risk for early-onset Alzheimer's disease compared to other ethnicities. These findings underscore the importance of earlier screening, while also illustrating challenges that affect many families statewide, regardless of background.

The Alzheimer's Association works with families across Hawai'i and regularly engages with individuals who are under Medicare age but are already in the dementia stage at diagnosis rather than mild cognitive impairment. Families often report years of subtle symptoms that went unassessed during routine care. Earlier access to brief cognitive assessments could have prompted timely follow-up, diagnosis, treatment, and care planning—changing outcomes for both individuals and their families.

Brief cognitive assessments are a low-cost, evidence-based tool for early detection. While not diagnostic on their own, they provide access to further evaluation and care planning at a stage when Alzheimer's disease may be more responsive to treatment and lifestyle interventions. Early detection allows individuals to take steps to slow cognitive decline, maintain brain health, plan for the future, and coordinate care. When this window is missed, individuals experience steeper cognitive decline, crisis-driven and uncoordinated care, and greater impacts on families, employers, and the health system.

Medicare already recognizes the value of early detection by including a cognitive assessment in the Annual Wellness Visit, yet most individuals under age sixty-five cannot access this benefit. This proposed coverage is similar to screening coverage in mental health care. Insurance coverage for routine mental health screening—despite modest reimbursement—successfully increased utilization and normalized screening at regular checkups. Cognitive health warrants the same preventive approach.

HCR20 provides an important opportunity to evaluate whether covering brief cognitive assessments earlier could reduce long-term costs, improve health outcomes, and support Hawai'i's workforce and families. For these reasons, I urge your support of this resolution.

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

HCR-20

Submitted on: 3/30/2026 7:15:18 PM

Testimony for HSH on 4/1/2026 10:00:00 AM

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

Comments:

In support.



www.AlohaILHawaii.org

Apr 1, 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.

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Roxanne U. Bolden

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The Honorable Lisa Marten, Chair
House Committee on Human Services & Homelessness
The Thirty-Third Legislature
State Capitol
State of Hawaii
Honolulu, Hawaii 96813

SUBJECT: HCR20 – Requesting the Auditor to Assess the Social and Financial Effects of Mandating Health Insurance Coverage for Brief Cognitive Assessments for Individuals Fifty Years of Age and Older.

Chair and Members of the Committee:

Aloha Independent Living Hawaii (AILH) **strongly supports HCR20**, which requests the Auditor to assess the social and financial effects of mandating health insurance coverage for brief cognitive assessments for individuals fifty years of age and older, as proposed in House Bill 1702 (2026).

AILH is a Center for Independent Living serving people with all types of disabilities statewide. Many of the people we serve are aging with disabilities or develop new cognitive impairments as they age, and timely access to cognitive screening is critical for preserving independence and planning supports.

Early Detection Supports Independent Living

The resolution recognizes that brief cognitive assessments are crucial for early detection and management of cognitive impairments such as dementia and Alzheimer's disease, and that early diagnosis can improve quality of life and reduce long-term health care costs. It also notes that some populations, including people with Down syndrome and Native Hawaiians, face elevated risks: estimates suggest that fifty percent or more of individuals with Down syndrome will develop dementia due to Alzheimer's disease as they age, and Native Hawaiians experience higher



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rates of Alzheimer's and related dementias and are often diagnosed at younger ages yet in later stages of disease.

For Independent Living, early identification of cognitive changes allows:

- Person-centered planning and supported decision-making rather than crisis-driven guardianship or premature institutionalization.
- Connection to community-based services, family supports, and environmental modifications that help people remain safely at home.

The resolution correctly highlights that common risk factors such as diabetes, hypertension, smoking, inactivity, and poor diet contribute to cognitive decline and that early detection enables preventive interventions.

Why an Auditor's Assessment Matters

HCR20 properly follows sections 23-51 and 23-52, Hawaii Revised Statutes, which require a social and financial impact assessment before mandating health insurance coverage for specific services. By designating House Bill 1702 and asking the Auditor to analyze the proposed mandate—including the target group (individuals 50+), the nature of the service (brief cognitive assessments), and utilization limits and standards of care—the Legislature is taking a careful, data-driven approach.

From a disability rights and Independent Living perspective, this assessment is important to:

- Document unmet need for cognitive screening, especially among Native Hawaiians and people with intellectual and developmental disabilities aging into higher dementia risk.
- Evaluate how mandated coverage could reduce downstream costs such as hospitalizations, long-term care, and emergency interventions.
- Identify potential impacts on equity of access, including for low-income and rural residents.



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Recommendation

Aloha Independent Living Hawaii strongly supports HCR20 and respectfully urges this Committee to pass the resolution. We further request that the Auditor's report explicitly consider:

- Impacts for people with pre-existing disabilities who are aging (including Down syndrome and other intellectual or developmental disabilities); and
- How mandated coverage can be implemented in ways that promote culturally responsive, trauma-informed, and non-stigmatizing screening for Native Hawaiian and other communities.

Thank you for the opportunity to testify.

Mahalo,

Roxanne Bolden

Executive Director

HCR-20

Submitted on: 3/30/2026 11:20:47 AM

Testimony for HSH on 4/1/2026 10:00:00 AM

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

Comments:

In strong support.

Testimony on HCR20
Wednesday, April 1, 10:00 AM
Conference Room 329 & Videoconference
State Capitol - 415 South Beretania Street

Chair Marten, Vice Chair Olds, and members of the committee,

My name is Calvin Hara, and I reside in Kaimuki. My career was in senior care and long term care in California and Hawai'i. Throughout those years, I have been with residents with Alzheimer's disease. The disease still exists and there is no cure. I have also been a family caregiver for loved ones with dementia.

I am in strong support of HCR20, which requests the Auditor to assess the social and financial effects of mandating health insurance coverage for brief cognitive assessments for individuals fifty years of age and older.

Hawai'i is facing a growing dementia crisis. More than 31,000 residents are currently living with Alzheimer's disease, and this number is expected to double by 2050. Many individuals are diagnosed at the dementia stage rather than mild cognitive impairment because early cognitive changes are missed. This delay often means lost treatment opportunities, avoidable emergencies, and significant emotional and financial strain on families.

Covering brief cognitive assessments for those over 50 would help fill the gap for people who are not yet eligible for Medicare but may already be experiencing cognitive decline. Early screening can lead to earlier diagnosis, care planning, and access to treatment that may slow disease progression and improve quality of life.

I respectfully urge you to support HCR20 so Hawai'i residents have a better chance at early detection, coordinated care, and support.

Thank you for the opportunity to testify.

Mahalo,

Calvin Hara