Testimony in SUPPORT of  HB1273
RELATING TO HEALTH

REPRESENTATIVE JOHN H. MIZUNO, CHAIR
HOUSE COMMITTEE ON HEALTH
REPRESENTATIVE JOY A. SAN BUENAVENTURA, CHAIR
HOUSE COMMITTEE ON HUMAN SERVICES AND HOMELESSNESS

Hearing Date: February 13, 2019         Room Number: 329
9:15 a.m.

Fiscal Implications: The proposed intellectual and developmental disabilities medicaid waiver administrative claiming special fund, upon approval from the legislature, is expected to receive reimbursements for through Targeted Case Management and other Administrative claiming. Under section 1903(a)(7) of the Social Security Act, federal payment is available at a rate of fifty percent for amounts expended by a state for allowable cost for administration of programs for the Medicaid population. The anticipated administrative claiming beginning in FY2020 is estimated at $700,000 to $1.2 million.

Department Testimony: The Department of Health strongly supports HB1273. The Department of Health, Developmental Disabilities Division is the operating agency for the State of Hawaii's 1915(c) Medicaid Home and Community Based Services (HCBS) Waiver to serve Persons with Intellectual and Developmental Disabilities (I/DD). Medicaid administrative claiming is allowable for the proper and efficient administration of the HCBS I/DD waiver. HB1273 requests the legislature's approval of the establishment of a special fund for deposits from Medicaid allowable costs to administer the HCBS I/DD waiver. Currently, administrative and targeted case management claiming for the operations of the HCBS are deposited in the general fund, limiting the DOH’s ability to implement new federal requirements for implementation of the waiver, including the Final Rule on Community
Integration and its Home and Community-Based Settings regulations. Implementation of these regulations and provision of quality services that meets Medicaid waiver requirements requires an adequate infrastructure and practices at all levels of the DDD program. The monies from this special fund will be used to meet these requirements and to modernize overall operations. Specific uses of the proposed fund are:

1. Payment for fiscal management services of the Hawaii section 1915(c) Home and Community-Based Services for Persons with Intellectual and Developmental Disabilities waiver;

2. Training of staff, waiver providers, waiver participants, their families, and their legal representatives, and community stakeholders;

3. Quality management activities for operating the Hawaii section 1915(c) Home and Community-Based Services for People with Intellectual and Developmental Disabilities waiver;

4. Ongoing operations and maintenance of the information technology system;

5. Conducting rate methodology studies to define rates for the Hawaii section 1915(c) Home and Community-Based Services for People with Intellectual and Developmental Disabilities waiver; and

6. Assessment services for determining I/DD Waiver participants’ level of support needs.

**Offered Amendments:**

1. Delete SECTION 5 on pp. 12-14, which requires the convening of a task force to examine and evaluate the Medicaid Waiver application process. This Task Force was convened last year, and a report was submitted to the Legislature by the Developmental Disabilities Council.

2. Add new SECTION for an appropriation from the Special Fund.
There is appropriated out of the intellectual and developmental disabilities medicaid
waiver administrative claiming special fund the sum of $____________ or so much
thereof as may be necessary for fiscal year 2020-2021 for the purposes described in this
bill. The sum appropriated shall be expended by the department of health for the purposes
of this Act.

3. Change “rare” to “rate” in SECTION 2 on p. 5, ln. 5, to refer to “rate methodology
   studies”.

Thank you very much for the opportunity to testify.
February 11, 2019

TO: The Honorable Representative John M. Mizuno, Chair
House Committee on Health

The Honorable Representative Joy A. San Buenaventura, Chair
House Committee on Human Services and Homelessness

FROM: Pankaj Bhanot, Director

SUBJECT: HB 1273 – RELATING TO HEALTH

Hearing: Wednesday, February 13, 9:15 a.m.
Conference Room 329, State Capitol

DEPARTMENT’S POSITION: The Department of Human Services (DHS) supports the bill and offers comments. DHS supports the three amendments offered by the Department of Health (DOH) in its testimony.

PURPOSE: The purpose of the bill is to create an Intellectual and Developmental Disabilities Medicaid Waiver Administrative Claiming special fund.

The Medicaid program is administered and overseen by the Med-QUEST division (MQD) of DHS. The operations for the 1915(c) Medicaid Home and Community Based Services Waiver to serve people with Intellectual and Developmental Disabilities (I/DD waiver) are delegated to DOH, Developmental Disabilities Division (DOH-DDD). Because DOH-DDD operates the waiver on behalf of DHS, DOH-DDD may claim a 50% federal Medicaid administrative match.

Currently, Medicaid funds claimed by DOH-DDD for administrative functions and targeted case management are deposited into the general fund. This arrangement limits DOH-
DDD’s ability to implement new federal requirements that require significant changes to the I/DD waiver’s operations.

DOH-DDD needs adequate infrastructure in order to implement these requirements as well as to continue to operate a high-quality program. Specifically, the monies from the special fund would be used for:

1) Payment for fiscal management services of the Hawaii section 1915(c) Home and Community-Based Services for Persons with Intellectual and Developmental Disabilities waiver;

2) Training of staff, waiver providers, waiver participants, their families, and their legal representatives, and community stakeholders;

3) Quality management activities for operating the Hawaii section 1915(c) Home and Community-Based Services for People with Intellectual and Developmental Disabilities waiver;

4) Ongoing operations and maintenance of the information technology system;

5) Conducting rate methodology studies to define rates for the Hawaii section 1915(c) Home and Community-Based Services for People with Intellectual and Developmental Disabilities waiver; and

6) Assessment services for determining I/DD Waiver participants’ level of support needs.

DOH-DDD has historically operated the I/DD waiver program very efficiently and effectively. DHS supports the creation of a special fund so DOH-DDD can build and sustain the necessary infrastructure to meet the challenges of new federal requirements.

DHS also supports the three amendments proposed by DOH in its testimony.

Thank you for the opportunity to testify.
EOA’s Position: The Executive Office on Aging (EOA), an attached agency to the Department of Health supports HB 1273 Relating to Health.

Purpose and Justification: The purpose of this bill is to: 1) establish a special fund for the intellectual and developmental disabilities Medicaid waiver administrative claiming funds in the Developmental Disabilities Division (DDD); and, 2) require the State Council on Developmental Disabilities to establish a working group to examine and evaluate the application process of the Hawaii Medicaid section 1915(c) home and community-based services for people with intellectual and developmental disabilities waiver.

The Centers for Medicare and Medicaid Services (CMS) allows Medicaid administrative claiming for the proper and efficient administration of the waiver. Currently, the limited funds
that DDD is claiming for their waiver operations are deposited into the general fund and
unavailable for the proper and efficient administration of the waiver. A special fund would
address the CMS requirements for administering the waiver and enable the DDD to comply with
the new federal mandates governing home and community based waiver services.

Regarding Section 5 of the bill requiring the State Council in Developmental Disabilities
to establish a working group to examine and evaluate the application process of the Hawaii
Medicaid 1915(c) waiver, EOA understands this working group convened last year and has
published a report. Hence, this section is not necessary.

**Fiscal Implications:** EOA defers to DDD and the State Council for Developmental Disabilities
for the fiscal implications of this bill.

Thank you for the opportunity to testify.
The Honorable Representative John M. Mizuno, Chair
House Committee on Health
and
The Honorable Representative Joy A. San Buenaventura, Chair
House Committee on Human Services and Homelessness
Thirtieth Legislature
State Capitol
State of Hawai‘i
Honolulu, Hawai‘i 96813

Dear Representative Mizuno, Representative San Buenaventura, and Members of the Committee:

SUBJECT: HB 1273 - Relating to Health

The State Council on Developmental Disabilities supports HB 1273. The proposed measure will create the Intellectual and Developmental Disabilities Medicaid Waiver Administrative Claiming Special Fund into which federal money may be deposited from Department of Health participation in the waiver program. Establishes a task force to examine existing §1915(c) waiver application process.

The Department of Health, Developmental Disabilities Division (DOH/DDD) will be responsible for the oversight of the Special Fund; the Council respectfully requests that the DOH/DDD be referred to for any further proposed amendments with clarifying the definition of their Special Fund.

The Council held Task Force meetings as requested in last year's proposed HB538. The DOH/DDD and the Hawai‘i Disability Rights Center (HDRC) were contributing members. Although we felt we fulfilled the requirements of the Task Force, HDRC reports; parents and individuals with developmental disabilities continue to need the support of a Task Force to address broader issues.

For this reason, on behalf of individuals with developmental disabilities and their family members, we respectfully request to expand the scope of the Task Force outlined on page 12, following the last sentence on line 20; “To include within the developmental disabilities division intake booklet and training materials additional eligible conditions of developmental disabilities such as; cerebral palsy or epilepsy, autism spectrum disorder, fetal alcohol spectrum disorder, or a disorder due to a neurological condition, central nervous system disorder, or chromosomal disorder that results in either substantial impairment of general intellectual functioning or adaptive behavior skill deficits.”
Thank you for the opportunity to submit testimony in support of HB 1273.

Sincerely,

Daintry Bartoldus
Executive Administrator
Testimony in SUPPORT of HB1273
RELATING TO HEALTH

COMMITTEE ON HEALTH
Rep. John M. Mizuno, Chair
Rep. Bertrand Kobayashi, Vice Chair

COMMITTEE ON HUMAN SERVICES & HOMELESSNESS
Rep. Joy A. San Buenaventura, Chair
Rep. Nadine K. Nakamura, Vice Chair

Wednesday, February 13, 2019 9:15 AM
Conference Room 329
State Capitol
415 South Beretania Street

Hawai‘i Psychological Association (HPA) supports HB1273 and its intention to capture more federal funding for use by the Developmental Disabilities Division. HPA especially endorses the idea of a task force to study the waiver process that is part of this bill. HPA supports all efforts by the state to find ways of utilizing federal Medicaid reimbursement to better meet the needs of the people of Hawai‘i, particularly the large group of people with developmental disabilities who do not qualify for services under the current Medicaid waiver.

Thank you for the opportunity to provide input into this important bill.

Sincerely,

Julie Takishima-Lacasa, PhD
Chair, HPA Legislative Action Committee
Comments:

We strongly support the provision in the bill that establishes a Task Force within the DD Council to examine the practices of the Developmental Disabilities Division. Last year, our office received an increase in the number of complaints about the DD Division. The nature of the complaints ranged from concerns about the restrictive eligibility policies as well as an intake system that is very unfriendly to the consumers. Parents had experienced lengthy delays in the processing of applications and it appeared that the Division’s Compliance Office had manipulated every possible legal technique to thwart requests for openness and information.

In response to these concerns, Rep. Mizuno convened several meetings at the request of several parents. The DD Division was in attendance as was HDRC. There was some consensus that it would be very helpful if the legislature could convene a Work Group to evaluate some of these problems and propose solutions. The DD Council voluntarily undertook to convene this Work Group.

We applaud the effort of the DD Council in the past year. However, we believe that the work needs to continue and to also have the authority of an act of the Hawaii Legislature. Beyond that, however, it seems that the problems with the DD Division have gotten worse- not better. In addition to the aforementioned problems, there has been a serious reduction in services to the clients. Clients are being re-evaluated utilizing a new tool and the Division has been using that as an excuse to reduce services. People are not being provided with a clear explanation of the reasons for the cuts or with sufficient information on their rights. There is a tremendous amount of confusion among the recipients of DD services.

So, a Task Force is needed now more than ever. Additionally, we noted that during this session, there have been proposals to create an autism waiver as well as to include fetal alcohol spectrum disorder within the definition of developmental disability. The DD division has opposed both of those measures. While we too had some questions about some specifics of those bills, we believe that both of them were well intentioned and that the issues they raise merit further discussion. We would propose that this bill be amended to have the DD Council Task Force examine issues related to the concepts that were contained in those bills, particularly the inclusion of FASD as a developmental disability, and a plan to provide services to this population.
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<td>Melodie Aduja</td>
<td>O<code>ahu County Committee on Legislative Priorities of the Democratic Party of Hawai</code>i</td>
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Comments:
HB1273 Medicaid Administration Waiver
COMMITTEE ON HEALTH:
• Rep. Mizuno, Chair; Rep. Kobayashi, Vice Chair
COMMITTEE ON HUMAN SERVICES AND HOMELESSNESS:
• Rep. San Buenaventura, Chair; Rep. Nakamura, Vice Chair
• Wednesday, Feb. 13, 2019: 9:15 am
• Conference Room 329

Hawaii Substance Abuse Coalition Supports HB1273:

GOOD MORNING CHAIRS, VICE CHAIRS AND DISTINGUISHED COMMITTEE MEMBERS. My name is Alan Johnson. I am the current chair of the Hawaii Substance Abuse Coalition (HSAC), a statewide organization of almost 40 non-profit alcohol and drug treatment and prevention agencies.

HSAC supports the collection of federal funds to administer a waiver that would help to defray the rising costs to states for administration of medicaid programs. This special fund will indirectly people with intellectual and development disabilities, especially to promote community integration, quality and accountability.

We appreciate the opportunity to provide testimony and are available for questions.
HB-1273  
Submitted on: 2/12/2019 2:51:50 PM  
Testimony for HLT on 2/13/2019 9:15:00 AM

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<td>Michele Ku</td>
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Comments:
Comments:

We support the creation of a distinct intellectual and developmental disabilities waiver administrative claiming fund to hold waiver program funds authorized under the federal Social Security Act §1915(c). We believe the dd administration should use these funds for gap groups, like to give individuals with Fetal Alcohol Spectrum Disorder Respite money, so they can take a break one weekend a month.

We support the establishment of a Task Force to examine the existing SSA §1915(c) waiver application process, which should include looking at existing and proposed categories of individuals considered to have intellectual and developmental disabilities and proposing an exemplary, not exclusionary list, consistent with relevant federal criteria that apply to individuals with intellectual and developmental disabilities.

We recommend that the Task Force be authorized to advise the Division of Developmental Disabilities on how to improve its waiver application process in such areas as, but not limited to – tests and procedures used to determine eligibility, timelines related to any notifications connected to eligibility determinations, content of service plans for eligible individuals, appeals process, and training for any individuals working in or affected by the waiver program. When someone is not eligible do a better job explainig why.
On behalf of the Hawaii Fetal Alcohol Spectrum Disorders (FASD) Action Group, I offer testimony on two provisions in HB 1273, relating to health.

- We support the creation of a distinct intellectual and developmental disabilities waiver administrative claiming fund to hold waiver program funds authorized under the federal Social Security Act §1915(c).
- We strongly support the establishment of a Task Force to examine the existing SSA §1915(c) waiver application process, which should include looking at existing and proposed categories of individuals considered to have intellectual and/or developmental disabilities and proposing eligibility criteria that recognizes spectrum disorders such as Fetal Alcohol Spectrum Disorders and does not penalize people with FASD who show no intellectual disabilities but have severe functional disabilities. The list should not be exclusionary, consistent with relevant federal criteria that apply to individuals with intellectual and developmental disabilities. Further, I recommend that the Task Force be authorized to advise the Division of Developmental Disabilities on how to improve its waiver application process in such areas as, but not limited to – tests and procedures used to determine eligibility, timelines related to any notifications connected to eligibility determinations, content of service plans for eligible individuals, appeals process, and training for any individuals working in or affected by the waiver program.

Thank you for your consideration.
Sincerely,
Ann S. Yabusaki, Ph.D., MFT
Hawaii FASD Action Group
Dear Chairperson, Representatives John Mizuno and members of the Health, Human Services and Homelessness Committee,

In behalf of the Hawaii FASD Action Group, I am writing in support of HB 1273 that seeks to create the intellectual and developmental disabilities Medicaid waiver administrative claiming special fund into which federal moneys may be deposited from DOH’s participation in waiver program established per SSA §1915(c). Establishes task force to examine existing §1915(c) waiver application process.

As a professional working with children with special needs for 22 years in my opinion this bill will expedite services across the board and will expand the availability of treatment for individuals in need of developmental services in Hawaiʻi by mental health professionals from a variety of backgrounds with amendments to include FASD.

FASD is associated with secrecy and shame, quite possibly due to its preventable nature and the stigma attached to it. Alcohol is legal accessible therefore it is not surprising that the research stated that 1 in 20 first graders do have FASD. According to a study questions, if this shame is the reason for its marginalization of the children and families with FASD in general? While Autism Spectrum Disorders has increased public awareness, availability of therapeutic services and much recognized. (Barker, Kulyk, Knorr, & Brenna, 2011).

Language and communication disorder are common neurodevelopmental symptoms associated with FASD as are the intellectual disability, memory impairment, motor impairment, and sensory which is side by side similar to Autism. The range and severity of impairments exhibited by individuals with ASD and FASD are both physical and neurodevelopmental each with a specific diagnosis. FASD has its cause specified, and Autism does not- both are Developmental Disabilities that equally need support and services.

FASD diagnosis is processing disorder, learning disability, and attention-deficit/hyperactivity disorder almost the same with Autism Spectrum Disorders (Astley, 2010; Kodituwakku & Kodituwakku, 2014). Somewhere between 1% and 4% of all children worldwide are reported to have an FASD. The neurodevelopmental impairments associated with FASD came with significant social costs across the lifespan in the form of increased medical, educational, and vocational support and lost productivity (Lupton, Burd, & Harwood, 2004; Popova, Lange, Burd, & Rehm, 2015). I have worked with Children with Autism as a Registered Behavioral Therapist under ABA Guidelines, and in my observations, FASD is a Developmental Disability equally as severe as Autism which needs to be included and treated the same as Autism.

Mahalo Nui Loa,
Darlyn Chen Scovell RBT, MA
Reference


We strongly support the provision in the bill that establishes a Task Force within the DD Council to examine the practices of the Developmental Disabilities Division. Last year, our office received an increase in the number of complaints about the DD Division. The nature of the complaints ranged from concerns about the restrictive eligibility policies as well as an intake system that is very unfriendly to the consumers. Parents had experienced lengthy delays in the processing of applications and it appeared that the Division's Compliance Office had manipulated every possible legal technique to thwart requests for openness and information.

In response to these concerns, Rep. Mizuno convened several meetings at the request of several parents. The DD Division was in attendance as was HDRC. There was some consensus that it would be very helpful if the legislature could convene a Work Group to evaluate some of these problems and propose solutions. The DD Council voluntarily undertook to convene this Work Group.

We applaud the effort of the DD Council in the past year. However, we believe that the work needs to continue and to also have the authority of an act of the Hawaii Legislature. Beyond that, however, it seems that the problems with the DD Division have gotten worse—not better. In addition to the aforementioned problems, there has been a serious reduction in services to the clients. Clients are being re-evaluated utilizing a new tool and the Division has been using that as an excuse to reduce services. People are not being provided with a clear explanation of the reasons for the cuts or with sufficient information on their rights. There is a tremendous amount of confusion among the recipients of DD services.

So, a Task Force is needed now more than ever. Additionally, we noted that during this session, there have been proposals to create an autism waiver as well as to include fetal alcohol spectrum disorder within the definition of developmental disability. The DD division has opposed both of those measures. While we too had some questions about some specifics of those bills, we believe that both of them were well intentioned and that the issues they raise merit further discussion. We would propose that this bill be amended to have the DD Council Task Force examine issues related to the concepts that were contained in those bills, particularly the inclusion of FASD as a developmental disability, and a plan to provide services to this population.

Louis Erteschik, Esq.
Executive Director
Hawaii Disability Rights Center
1132 Bishop Street
Suite 2102
Honolulu, HI  96813
Phone:  808-949-2922 Ext. 211
As a member of the Hawaii Fetal Alcohol Spectrum Disorders Action Group I strongly support HB 1273. The proposed measure will create the Intellectual and Developmental Disabilities Medicaid Waiver Administrative Claiming Special Fund into which federal money may be deposited from Department of Health participation in the waiver program. Establishes a task force to examine existing §1915(c) waiver application process.

The Department of Health, Developmental Disabilities Division (DOH/DDD) will be responsible for the oversight of the Special Fund; the Council respectfully requests that the DOH/DDD be referred to for any further proposed amendments with clarifying the definition of their Special Fund.

The Council held Task Force meetings as requested in last year’s proposed HB538. The DOH/DDD and the Hawai‘i Disability Rights Center (HDRC) were contributing members. We need the support of a Task Force to address broader issues.

For this reason, on behalf of individuals such as those with FASD, a permanent brain based developmental disability and their family members, I respectfully request to expand the scope of the Task Force outlined on page 12, following the last sentence on line 20; “To include within the developmental disabilities division intake booklet and training materials additional eligible conditions of developmental disabilities such as; cerebral palsy or epilepsy, autism spectrum disorder, fetal alcohol spectrum disorder, or a disorder due to a neurological condition, central nervous system disorder, or chromosomal disorder that results in either substantial impairment of general intellectual functioning or adaptive behavior skill deficits.”

Thank you for the opportunity to submit testimony in support of HB 1273.

Sincerely,

Kenichi K. Yabusaki, Ph.D.
Retired Biochemist
Member Hawaii FASD Action Group