
SENATE CONCURRENT RESOLUTION

REQUESTING A STUDY OF VARIOUS UNRESOLVED ISSUES RELATING TO
AGING.

1 WHEREAS, the Center on Aging at the University of Hawaii at
2 Manoa was established in 1988 to:

3
4 (1) Stimulate and coordinate gerontological and aging
5 instruction, research, and community services; and
6

7 (2) Promote collaboration between the University and other
8 organizations concerned with aging; and
9

10 WHEREAS, the Executive Office on Aging is the designated
11 lead agency in the coordination of a statewide system of aging
12 and caregiver support services in the State of Hawaii, as
13 authorized by federal and state laws; and
14

15 WHEREAS, the general rule under Medicaid and Medicare is to
16 pay only if asset and income requirements are met; and
17

18 WHEREAS, for purposes of Medicaid and Medicare, assets are
19 divided into two categories: exempt and non-exempt; and
20

21 WHEREAS, exempt assets are not counted in calculating the
22 maximum asset level and include the home (of any value),
23 Individual Retirement Accounts or IRAs in the name of the "at
24 home" spouse, real property "essential for self support",
25 property used in a trade or business, household items used to
26 furnish a home, all personal effects, burial insurance, plots,
27 trusts, vaults and crypts, certain life insurance policies,
28 musical instruments, automobiles, reparation payments, and crime
29 victim payments; and
30

31 WHEREAS, non-exempt assets, such as cash, stocks, bonds,
32 mutual funds, and money market accounts are counted in
33 calculating the asset limit; and

1
2 WHEREAS, as a general rule, Medicare pays for one hundred
3 days of nursing home care after a three-day hospital stay, and
4 only so long as the ill person is making progress on
5 rehabilitation; but if Medicare runs out after one hundred days,
6 the recipient must turn to Medicaid, the processing of which can
7 take a significant time since there may be a re-qualification
8 process to ensure that a person qualifies; and
9

10 WHEREAS, "Cash and Counseling" is a non-traditional
11 Medicaid program, pioneered by New Jersey, Florida, and
12 Arkansas, with seed grants from the United States Department of
13 Health and Human Services, the United States Administration on
14 Aging, and the Robert Wood Johnson Foundation; and
15

16 WHEREAS, today, grants from Cash and Counseling programs
17 are also available in at least twelve additional states:
18 Alabama, Illinois, Iowa, Kentucky, Michigan, Minnesota, New
19 Mexico, Pennsylvania, Rhode Island, Vermont, Washington, and
20 West Virginia; and
21

22 WHEREAS, Cash and Counseling participants may use their
23 Medicaid-provided personal assistance budgets to hire their own
24 personal care aides as well as purchase items or services,
25 including home modifications that help them live independently.
26 By redirecting personal assistance funds from agencies to
27 consumers themselves, Cash and Counseling allows people to hire
28 whomever they want to provide their care and decide for
29 themselves if they would rather hire a home health aide to cook
30 for them, or pay a friend or relative to do it; and
31

32 WHEREAS, the services paid for by the State are all part of
33 the elder's authorized Medicaid care plan, and in many cases,
34 family members and friends chosen by the elder are providing
35 those services instead of an agency worker; and
36

37 WHEREAS, according to the Cash and Counseling website, the
38 program was created because, "[f]amily caregivers are the
39 backbone of our country's long-term care system, providing
40 millions of hours of care every year for no compensation and
41 frequently at great cost to their own emotional health. They're
42 burned out and exhausted from juggling work, family
43 responsibilities, and caregiving. In addition, many caregivers
44 have to reduce their work hours or even give up their jobs to

1 take care of their loved ones. By supporting caregivers, we're
2 helping them hang in longer, and, hopefully, relieving some of
3 their stress"; and
4

5 WHEREAS, even with Cash and Counseling support, family
6 caregivers are typically paid lower-than-average wages and, in
7 most cases, are paid for only a small fraction of the hours of
8 service they provide; and
9

10 WHEREAS, individuals who apply for the Cash and Counseling
11 program apply through Medicaid; are assessed in the same way
12 they would be for traditional agency-provided services; and if
13 they choose the Cash and Counseling option, work with the
14 program's staff to develop an individual budget and care plan;
15 and
16

17 WHEREAS, according to the National Aging in Place Council,
18 the American Association of Retired Persons recently released a
19 new report stating that eighty-seven per cent of people aged
20 fifty and older with disabilities want to receive long-term care
21 services in their own homes; and
22

23 WHEREAS, the term "aging in place" is used in reference to
24 allowing a person to live where the person has lived for many
25 years, or to living in a non-healthcare environment, and using
26 products, services, and conveniences that enable individuals to
27 not have to move as they grow older or as circumstances change;
28 and
29

30 WHEREAS, the term "respite care" means a service provided
31 in a least-restrictive environment for short-term care to meet
32 the needs, ranging from simple to complex, of the aging or
33 disabled; and
34

35 WHEREAS, the purpose of respite care is to avoid, if
36 possible, the necessity for long-term institutional care or to
37 provide relief to families and care providers; and
38

39 WHEREAS, caregivers who are friends or relatives usually
40 are not compensated for their invaluable services, oftentimes
41 having to give up regular employment to stay at home full-time
42 or otherwise to visit the home frequently in the day to ensure
43 the aging person is safe and comfortable; now, therefore,
44

1 BE IT RESOLVED by the Senate of the Twenty-fifth
2 Legislature of the State of Hawaii, Regular Session of 2009, the
3 House of Representatives concurring, that the Executive Office
4 on Aging and the Center on Aging at the University of Hawaii at
5 Manoa are requested to continue their research and analyses to:

- 6
- 7 (1) Develop a cash and counseling model and to apply for
8 related grants;
- 9
- 10 (2) Determine how best to compensate caregivers for
11 necessary personal services;
- 12
- 13 (3) Determine best practices for state agencies to
14 collaborate and coordinate with area agencies on aging
15 and local community service providers (including those
16 for the disabled community);
- 17
- 18 (4) Enhance funding from all sources for Medicaid and
19 Medicare services, including but not limited to,
20 removing or adjusting income limits and non-exempt
21 asset limitations;
- 22
- 23 (5) Determine how best to accommodate language barriers;
- 24
- 25 (6) Determine how best to overcome access to long-term
26 care services barriers; and
- 27
- 28 (7) Identify more funding sources for long-term care
29 services; and
- 30

31 BE IT FURTHER RESOLVED that the Executive Office on Aging
32 and the Center on Aging at the University of Hawaii at Manoa
33 submit a report on their findings and recommendations to the
34 Legislature no later than twenty days prior to the convening of
35 the Regular Session of 2010; and

36

37 BE IT FURTHER RESOLVED that certified copies of this
38 Concurrent Resolution be transmitted to the Director of the
39 Executive Office on Aging and the Center on Aging at the
40 University of Hawaii at Manoa.