



HAWAII STATE HEALTH PLANNING AND DEVELOPMENT AGENCY
 1177 Alakea Street, Suite 402 • Honolulu, HI 96813 • Phone: (808) 587-0788 • www.shpda.org
 Kupuna Advisory Council - Plan Development Committee

Meeting Minutes

December 8, 2023 | 12:00 PM Hawaii Time
 Virtually via Zoom and Physical Meeting Location at
 The Keoni Ana Building, 1177 Alakea Street, Suite 402

MEMBERS: Melissa Ah Ho-Mauga, Derrick Ariyoshi, Poki'i Balaz, Michelle Cordero-Lee, Ritabelle Fernandez, Nathan Hokama, Lindsey Ilagan, Jeanette Kojane, Jinyong Lee, Lawrence Nitz, Melvin Sakurai, Marilyn Seeley, Brandy Shima, Warren Wong

MEMBERS ABSENT: Kia'i Lee, Mia Taylor

GUESTS:

SHPDA: John Lewin, Wendy Nihoa

ATTENDANCE RECORD OF MEMBERS

Date	11/2/23	12/8/23	TBD	TBD	TBD	TBD	TBD	TBD	TBD	TBD
Melissa Ah Ho-Mauga	X	X								
Derrick Ariyoshi	O	X								
Poki'i Balaz	X	X								
Michelle Cordero	X	X								
Ritabelle Fernandez	X	X								
Nathan Hokama	X	X								
Lindsey Ilagan	X	X								
Jinyong "Jenny" Lee	X	X								
Kia'i Lee	O	O								
Lawrence Nitz	X	X								
Melvin Sakurai	X	X								
Marilyn Seeley	X	X								
Brandy Shima	X	X								
Mia Taylor	O	O								
Warren Wong	X	X								

Legend: X=Present | O=Absent | /=No Meeting | *-Chair | **-Vice Chair

TOPIC	DISCUSSION	ACTION
Call to Order	A quorum was established. The meeting was called to order at 12:01 p.m. by M. Ah Ho-Mauga, Chairperson, Kupuna Advisory Council (KAC) presiding.	
Roll Call	Member roll call.	
Welcome	M. Ah Ho-Mauga welcomed members.	
Minutes	<p>Motion to accept the minutes from the November 2, 2023 meeting.</p> <p>Vote: Unanimous. Motion carried.</p> <p>Call for public testimony – none.</p>	
SHPDA Updates	<p>J. Lewin, Administrator, SHPDA reported the importance and significance of the AHEAD (All-Payer Health Equity Approaches and Development Model) Grant to SHPDA’s goals and improving Hawaii’s healthcare system. SHPDA and Hawaii Department of Human Services, MedQUEST program have initiated grant writing activities; grant is due in 100 days. Will be looking to gain insight and recommendations from various SHPDA councils, including the Kupuna Advisory Council.</p> <p>A brief discussion followed.</p> <p>Call for public testimony – none.</p>	
Kupuna Advisory Council Priorities	<p>Council members M. Sakurai and J. Kojane presented their lists of issues/challenges. Copies of their lists are attached to these minutes as Attachment A and B respectively.</p> <p>Presentations were followed by a questions/answer period and discussion.</p> <p>Members were reminded to complete and submit their lists to W. Nihoa, Comprehensive Health Planning Coordinator, SHPDA prior to the next meeting and encouraged to be prepared to present their lists.</p>	
Kupuna Advisory Council Members	<p>M. Ah ho-Mauga led a discussion on member experience and background and encouraged members to make nominations to create a diverse group.</p> <p>Public testimony – none.</p>	
Meeting Logistics	<p>Discussion regarding meeting frequency. Unable to determine a recurring meeting date/time.</p> <p>Consensus to convene two (2) meetings in January 2024 in light of the AHEAD grant application due on March 18, 2024.</p>	

Announcements	Members were reminded to submit their issues/challenges lists and encouraged to submit any data sources to W. Nihoa.	KAC Members.
Next Meeting	January 12, 2024, 12 noon January 25, 2024 12 noon	
Adjournment	The meeting was adjourned at 12:32 p.m.	

State Health Planning and Development Agency
 Priorities Selection Process
 Individual Issues/Challenges List

Name/Title: Melvin Sakurai Organization: Research Information Services Date Completed: 12/6/2023

	ISSUE/CHALLENGE	WHY SHOULD THIS BE CONSIDERED A PRIORITY ISSUE	COMMENTS
1	<p>Establish a progressively affordable, solvent, reliable, equitable, universal funding mechanism for long-term institutional and home & community-based care</p>	<p>Financing has implications for and touches EVERY aspect of long-term institutional and home & community-based care services, including:</p> <ul style="list-style-type: none"> • Expansion of existing services and the development of new innovation service delivery modalities • Development of critically needed caregiver workforce • Quality assurance regulation (single source point for all payments) • Equitable and progressively affordable payments • Universal access <p>Absent sound financing every other Kupuna care initiative is limited to band aid solutions with limited reach, compromised effectiveness, and siloed fragmentation.</p>	<p>The current long-term care (LTC) funding system is unsustainable for both individuals and the government. It leaves many individuals with inadequate care and the government struggling to meet the growing needs of its aging population as a function of:</p> <ul style="list-style-type: none"> • Aging population: The number proportional share of older adults needing long-term care is increasing. • Rising healthcare costs. • Limited resources: Available financial resources to support long-term care are often restricted for both individuals and government. <p>Institutional care, such as nursing homes and assisted living facilities, are expensive in Hawaii, often exceeding \$10,000 per month. This can quickly deplete personal savings and force individuals to rely on Medicaid or other assistance programs.</p> <ul style="list-style-type: none"> • Nursing homes: Average monthly cost in Hawaii: \$12,644 (Genworth 2023 Cost of Care Survey) • Assisted living: Average monthly cost in Hawaii: \$7,475 (Genworth 2023 Cost of Care Survey) <p>Community-based care, including home care and adult day care, is somewhat more affordable.</p>

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			<p>However, costs can still vary depending on the level of care needed and the services provided.</p> <ul style="list-style-type: none"> • Home care: Average hourly rate in Hawaii: \$30-\$50 (AARP Hawaii) • Adult day care: Average daily cost in Hawaii: \$75-\$150 (Genworth 2023 Cost of Care Survey) <p>None of these expenses are generally affordable for most Hawaii residents.</p> <p>Medicaid: While Medicaid covers LTC for low-income individuals, it faces constant budget constraints. Eligibility requirements and benefit limitations leave many without adequate support.</p> <p>Based on historical data, Medicaid typically represents around 15-17% of the Hawaii state budget—one of the top public expenditures, on par with:</p> <ul style="list-style-type: none"> • Human Services: Encompassing various programs like welfare, disability support, and child protective services—typically accounting for around 25% of the total budget. • Education: Funding public schools, community colleges, and the University of Hawaii system—usually consuming around 20% of the budget. <p>Establishing a mandatory universal tax-based funding mechanism:</p> <ul style="list-style-type: none"> • Pros:

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			<ul style="list-style-type: none"> ○ Generates a significant and stable revenue stream. ○ Is fair and progressive, with contributions based on income or assets. ○ Creates a sense of shared responsibility for LTC within the community. ● Cons: <ul style="list-style-type: none"> ○ Political ignorance and resistance ○ Design is crucial to ensure long-range solvency, affordability and equity ○ Requires careful management and allocation of funds to avoid waste or inefficient use—use trust fund mechanism with explicit statutory governance requirements <p>Fiscal stability; a mandatory funding mechanism has the substantial advantage of having a universal risk pool that provides a robust and predictable basis for forecasting solvency requirements to foster long-term sustainability. This stability can be leveraged to:</p> <ul style="list-style-type: none"> ● Alleviate the caregiver crisis: Providing a reliable funding stream that can be invested in caregiver training, wages, and benefits, making the profession more attractive and retaining talent. ● Expand and diversify services: The reliable availability of funding resources supports creating a broader spectrum of care options beyond institutions, including home-based care, adult day services, and culturally appropriate models.

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			<ul style="list-style-type: none"> • Elevate quality: Ensuring the financial security for providers supports establishing prioritized quality improvement initiatives, training, and technology adoption. <p>The existing funding mechanism comprising a host of tiny, fragmented risk pools creates instability and limits our ability to actuarially forecast solvency requirements and responsibly plan for the future.</p> <p>Transform MedQuest LTC spending by ceding MedQuest LTC expenditures (including Federal share) to the mandatory public funding Trust Fund.</p>
2	Invest in the development of a qualified and trained healthcare workforce	<p>There aren't enough trained and qualified LTC caregivers even as the demand for care continues to grow. The imbalance between supply and demand will have severe consequences:</p> <ul style="list-style-type: none"> • Limited access to care: Individuals and families struggle to find qualified caregivers, leaving them vulnerable and unsupported. • Increased reliance on government programs: Medicaid, already strained, will face even greater pressure. • Financial hardship: Many families are forced to spend down their savings or take on debt to cover the cost of care. • Stress on the healthcare system: Hospitals may see increased admissions due to inadequate home 	<p>The graying of Hawaii:</p> <ul style="list-style-type: none"> • Hawaii's population aged 65+ is projected to double by 2030, reaching over 250,000. • This demographic shift will significantly increase the demand for LTC services, including home care, assisted living, and nursing facilities. <p>Paucity of care giving workforce: The number of qualified LTC workers is not keeping pace with the rising need. There are many familiar contributing factors:</p> <ul style="list-style-type: none"> • Low wages: Caregiving is often seen as a low-paying, undervalued profession. • Limited career advancement: Opportunities for growth and training can be scarce. • Prohibitive cost of living: Hawaii's expensive housing and general costs make it challenging for caregivers to afford living here.

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		<p>care, further burdening an already stretched system.</p>	<ul style="list-style-type: none"> • Burden of care: Caring for someone with complex needs can be physically and emotionally demanding, leading to burnout. <p>Elevating the Caregiver Profession <u>costs money</u>:</p> <ul style="list-style-type: none"> • Wage parity: Ensure caregivers are compensated fairly. • Career advancement: Create clear pathways for professional development, training, and specialization. • Benefits and recognition: Provide comprehensive benefits packages and public recognition for caregivers' dedication. <p>Addressing the financial aspect is crucial. Without a reliable and fair funding mechanism, the entire system will be shaky.</p>
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5	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.

INSTRUCTIONS:

- 1) Top of Form. Enter your name and title, the organization* you represent and date you completed the table. If you do not represent an organization, indicate "Individual" here.
- 2) Issue/Challenge Column. List your issue/challenge. Be clear and concise.
- 3) Why Should this be considered a priority issue Column. Include a brief explanation as to why this is an issue for Kupuna. When available, include quantitative data here.
- 4) Comments Column. Include any supporting notes, references, and qualitative data here.
- 5) Take time to review your list.
- 6) Combine any similar issue/challenge when possible.

State Health Planning and Development Agency

Priorities Selection Process
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Name/Title: Jeannette Kojane, Executive Director

Organization: Kōkua Mau

Date Completed: 12/7/2023

	ISSUE/CHALLENGE	WHY SHOULD THIS BE CONSIDERED A PRIORITY ISSUE	COMMENTS
1	Need more family/ caregiver support . Need more care options including Adult Day Care, increased access to home health and care in the home, respite care for families	Families and loved ones are overwhelmed. They cannot manage care of kupuna alone. This also can impact the safety of the senior and the caregivers. Burden on family with time, money., guilt and their own health . People may be forced to quit working or cut back on hours. We need expanded options and expanded personnel who can help including CHW and PHN.	E.g. Increase current family caregiver payment program through EOA, Respite programs for families need to be greatly expanded. (See #3 below) 50% of Caregivers for dementia patients end up in the hospitals for themselves!! For most people who fall into the middle income group, those who don't qualify for Medicaid but are not super wealthy, we need options to fill in the gaps.
2	Need more Palliative Care and models of care for the seriously ill especially outside of institutions	We do not currently have comprehensive services before people reach hospice. We need to have holistic, supportive services as people age that correspond to their needs. This needs to be preventative – think ahead to prevent the crisis.	This must include navigation and case management. Hopefully the new MedQuest Palliative care benefit will pass and offer a robust option for Medicaid members.
3	Affordable housing	Kupuna need affordable housing as do those who will be caring for them.	We see the increase of homeless seniors. We know that health workers are unable to find affordable housing so who will care for the kupuna?
4	Lack of health and healthcare literacy for patients, families and caregivers.	Lots of time is wasted as people try to figure out what is available, where to find care, what the options are. People need to know where to go for Information and Assistance.	People don't know what they don't know . Fits in with good navigation and case management.

State Health Planning and Development Agency

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		With Advance Care Planning, we see this can Reduce burden on the healthcare system and family. Reduce unwanted, unnecessary treatments. Reduce family stress. Especially true for patients who develop dementia. You need to plan ahead to avert a crisis.	
5	Need to increase Dementia Services	Huge burden on family and loved ones. There is an increase in numbers of people who need this because of aging population as well as societal stigma.	Models exist to help create a dementia ready community. State Dementia plan was just released with lots of concrete suggestions

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