LILLIAN B. KOLLER, ESQ. DIRECTOR

HENRY OLIVA DEPUTY DIRECTOR



STATE OF HAWAII DEPARTMENT OF HUMAN SERVICES

P. O. Box 339 Honolulu, Hawaii 96809-0339

February 1, 2008

MEMORANDUM

TO:

Honorable Josh Green, M.D., Chair

House Committee on Health

Honorable Maile S.L. Shimabukuro, Chair

House Committee on Human Services and Housing

FROM:

Lillian B. Koller, Director

SUBJECT:

H.B. 2881 – RELATING TO PERINATAL CARE

Hearing:

Friday, February 1, 2008, 8:00 a.m.

Conference Room 329, State Capitol

<u>PURPOSE:</u> The purpose of this bill is to continue operations and services for the perinatal clinic currently in the University of Hawaii John Burns School of Medicine by transferring the clinic to the Department of Human Services and appropriates funds

DEPARTMENT'S POSITION: The Department of Human Services (DHS) appreciates the intent of this bill but must oppose it, as written. The Department cannot support placing the perinatal clinic within DHS. The Department does not provide direct medical or substance abuse services to clients. The Department will gladly collaborate with appropriate public or private agencies to continue the pilot project if we are given the authority to contract for these services, provided the funding for this clinic does not adversely impact nor replace the priorities in the Executive Supplemental Budget.

We support sustaining perinatal clinic and case management services to women on Oahu with a history of substance abuse. Last year, the Department was agreeable to being appropriated the funds to contract with the University Clinical Educational and Research Associates program at the University of Hawaii, Department of Obstetrics, Gynecology, and Women's Health to continue the pilot perinatal clinic and the provision of case management services because the Department would have been able to enhance any State funds with matching Federal funds. The Department recommends that we continue this collaboration with the University of Hawaii or any other appropriate public or private agency for which DHS can draw down allowable matching Federal funds.

Thank you for the opportunity to testify.



February 1, 2008

PLEASE DELIVER to RM: 329 for: **HSH/HLT Committee** Friday 2/1/2008 8:00am

To:

Rep. Maile S. L. Shimabukuro, Chair

Rep. Karl Rhoads, Vice chair

Committee on Human Services and Housing

Rep. Josh Green, M.D., Chair Rep. John Mizuno, Vice Chair

Committee on Health

From: From: Cynthia J. Goto, M.D., President

Linda Rasmussen, M.D., Legislative Co-Chair Philip Hellreich, M.D., Legislative Co-Chair

Paula Arcena, Executive Director Dick Botti, Government Affairs Liaison

Re:

HB 2881 Relating to Perinatal Care

The Hawaii Medical Association supports HB 2881.

We support continued funding for the continuing of the perinatal clinic that will provide comprehensive prenatal, delivery and postpartum care and social services on Oahu to women with a history of methamphetamine and other substance abuse will be very beneficial to both the mothers and children involved.

Thank you for the opportunity to testify on this matter.



February 1, 2008

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Email: info@dpfhi.org Website: www.dpfhi.org To: House Committee on Health and

House Committee on Human Services and Housing

From: Jeanne Ohta, Executive Director

Re: HB 2881 Relating to Perinatal Care

Hearing: Friday, February 1, 2008, 8:00 a.m., Room 329

Position: Strong Support

I am in strong support of HB 2881 Relating to Perinatal Care which requests moving the program to the Department of Human Services and also requests funds to extend the program for the perinatal clinic which provides prenatal care and other services for pregnant, substance using women.

Without the clinic, services that provide appropriate health care to substance using pregnant women to ensure the birth of a healthy baby are either extremely limited or unavailable.

The clinic's programs provide both substance abuse treatment, prenatal care, and follow up services in a supportive environment rather than a punitive one. One of the barriers to women seeking perinatal care is fear of prosecution. This type of program recognizes the importance of a public health approach to the issue of pregnant drug using women.

The clinic would be cost effective as it would help prevent low-birth weight babies and premature births. It would also encourage families to stay together and avoid the foster care and child protective services systems.

Please pass this bill and extend funding for the clinic. I feel it is a good investment for the state and would in the long run save the state money. Thank you for this opportunity to testify.



Date:

January 31, 2008

Committee: House Health and Human Services and Housing

Bill:

HB 2881; RELATING TO PERINATAL CARE

Honorable Chairpersons Green and Shimabukuro and Members of both the House Health and Human Services and Housing Committee:

My name is Jackie Berry, Executive Director of Healthy Mothers Healthy Babies Coalition of Hawaii. HMHB IS IN STRONG SUPPORT OF HB 2881, WHICH PROPOSES TO CONTINUE SUPPORT OF THE PERINATAL SUBSTANCE USE TREATMENT CLINIC ON OAH'U (PATH Clinic). This perinatal clinic provides comprehensive prenatal, delivery, postpartum care, and social services to pregnant women with a history of substance use.

The clinic opened in April, 2007 and has served over 50 women, most pregnant or immediately postpartum. The goal of the comprehensive care and services provided by the clinic is to improve outcomes for both mother and infant. There is general agreement that supportive and respectful care that addresses the perinatal, substance use, mental health, and pediatric aspects of at-risk pregnancies is optimal to get substance using women in for needed services.

The Association of Maternal and Child Health Programs state "the threat of criminal prosecution prevents many women from seeking prenatal care and early intervention for their alcohol or drug dependence,dissuades women from providing accurate and essential information to health care providers. The consequence is increased risk to the health and development of their children and themselves."

We urge your support for the passage of this bill.

Mahalo for your consideration of this issue and our testimony.

May Mizuno

From: Sent: Tricia Wright [tewright@hawaii.edu] Thursday, January 31, 2008 10:26 AM

To:

HLTtestimony

Subject:

HB 2881

To Representative Josh Green, MD, Chair John Mizuno, Vice Chair Members, House Committee on Health

Rep. Maile S. L. Shimabukuro, Chair Rep. Karl Rhoads, Vice Chair Members, Committee on Human Services & Housing

From: Tricia Wright, MD FACOG Assistant Professor Obstetrics, Gynecology and Women's Health Medical Director, Perinatal Addiction Treatment of Hawaii (PATH) Clinic University of Hawaii John A. Burns School of Medicine

Re: In strong support of continuing financing the perinatal clinic

Dear Dr. Green and Ms. Shimabukuro and others:

I am writing to urge you to continue support of the PATH clinic. As you are aware the clinic was established from funding by ACT 248 in 2006 and the funding continued by ACT 147 in 2007. The PATH clinic opened in April, 2007 and since that time, we have served over 50 women, most pregnant or immediately post-partum. We have had 16 women deliver healthy infants so far, all but one was clean at the time of delivery. The one woman who was using at the time of delivery has since gone into residential treatment with her infant, and has remained clean since that time. We have multiple testimonies from the women that we've helped begin a new life.

Since opening, we have continued to add services. We now have an addictions fellow seeing the women for assessments and treatment of co-occurring psychiatric disorders. We are in the process of adding a full-time therapeutic child care provider who has been working with the women, teaching parenting skills. We have obtained two small grants from the Women's Fund of Hawaii, supporting the building of self-esteem through therapeutic craft projects and from the March of Dimes of Hawaii supporting our motivational incentive program. Unfortunately, we have been unable to find a pediatrician willing to be a primary care provider for the infants, but we are still looking.

The clinic is currently billing Medicaid and other third party payers for our services when appropriate, which has offset some of the costs, however the clinic still requires approximately \$300,000 per year to cover the costs of the social worker, nurse manager, child care provider and medical assistant. I strongly urge you to continue to fund the clinic either through the Department of Health or The Department of Human Services as last year.

Mahalo nui loa,

Tricia Wright