
A BILL FOR AN ACT

RELATING TO SUBSTANCE ABUSE TREATMENT.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF HAWAII:

1 SECTION 1. The legislature finds that the federal Patient
2 Protection and Affordable Care Act of 2010 encourages states to
3 develop innovative approaches to the delivery of integrated
4 health services. The legislature further finds that Hawaii has
5 a bold history as an innovator in ensuring that its residents
6 have access to health care. The Hawaii Prepaid Health Care Act
7 and the State's medicaid program have provided access to
8 comprehensive managed care for low-income families. The State
9 can create more effective alternative solutions for affordable
10 health care by better integrating public health systems to
11 balance public health care needs with associated costs to the
12 State.

13 The overall fiscal costs and burden of substance use
14 disorders with co-occurring mental health disorders on Hawaii's
15 public health care system are unsustainable. Studies indicate
16 that a small percentage of patients in the United States consume
17 a disproportionate share of health care resources. Known as



1 "super users", this one per cent of the population consumes
2 twenty-one per cent of the nearly \$1,300,000,000,000 spent each
3 year on health care nationwide, according to a 2013 report from
4 the Agency for Healthcare Research and Quality. In Hawaii, it
5 has been reported that about five per cent of the medicaid
6 population accounts for about forty-nine per cent of the State's
7 annual health care costs. Considering the 2015 MedQUEST budget,
8 this means about sixteen thousand people on MedQUEST cost over
9 \$1,000,000,000.

10 Super users' most common conditions involve multiple
11 illnesses, one of which is often substance abuse. Similarly,
12 patients who frequent emergency departments tend to suffer
13 chronic illnesses or have multiple psychosocial risk factors,
14 such as substance abuse, mental illness, or homelessness. The
15 commonality among most super users is that they lack a social
16 network to help them coordinate their aftercare. For example,
17 many super users do not have a regular physician, so whenever
18 medical care is necessary, they turn to the community hospital,
19 which is often the most expensive and least efficient type of
20 care for their needs.



1 The legislature finds that while the costly cycle of
2 substance abuse is currently a financial burden on the State's
3 health care system, it is also a treatable disease worthy of
4 more attention and resources. Recent discoveries in the science
5 of addiction have led to significant advances in drug abuse
6 treatment that help people successfully manage their addiction
7 and resume productive lives. While the social welfare factors
8 that contribute to addiction present a complex problem, research
9 indicates that treatment for substance use disorders can be
10 effective and reduce costs to the health care and criminal
11 justice systems. Research shows that about seventy per cent of
12 addiction and mental health costs can be averted by effectively
13 providing relevant treatment before the onset of more serious
14 chronic conditions. Treating all of super users' complex issues
15 in an integrated way is a sound social investment because it
16 effectively reduces duplication and overutilization. Recent
17 studies have proven that every \$1 spent on treatment saves \$4 in
18 health costs.

19 Therefore, the purpose of this Act is to:



1 (1) Establish a working group within the department of
2 health to address publicly-funded coverage of
3 substance abuse treatment services; and

4 (2) Appropriate moneys for the department of health to
5 convene the working group.

6 SECTION 2. (a) The department of health shall convene a
7 working group to address the availability and accessibility of
8 publicly-funded substance abuse treatment services for highly
9 represented populations that use publicly-funded services.

10 (b) The working group shall:

11 (1) Review and recommend policy changes to publicly-funded
12 services for substance use disorders including, but
13 not limited to, the federal model of recovery-oriented
14 system of care as outlined by the Substance Abuse and
15 Mental Health Services Administration;

16 (2) Explore approaches for integrating healthcare with
17 addiction treatment including, but not limited to,
18 education and training for primary care providers
19 dealing with patients with a substance use or co-
20 occurring disorder;



- 1 (3) Ensure publicly-funded substance abuse treatment
2 services are available and accessible to
3 subpopulations, such as offenders, pregnant and
4 parenting women, and co-occurring populations with
5 legal involvement; and
- 6 (4) Determine the level of resources needed to improve
7 outcomes for substance abuse treatment services.
- 8 (c) The working group shall consist of the following
9 members:
- 10 (1) The director of health or the director's designee, who
11 shall serve as the chairperson of the working group;
- 12 (2) One member of the house of representatives, to be
13 appointed by the speaker of the house of
14 representatives;
- 15 (3) One member of the senate, to be appointed by the
16 president of the senate;
- 17 (4) The director of human services or the director's
18 designee;
- 19 (5) The director of public safety or the director's
20 designee;



- 1 (6) The chair of the Hawaii paroling authority or the
2 chair's designee;
- 3 (7) One member representing the Hawaii Substance Abuse
4 Coalition, to be invited by the chairperson of the
5 working group;
- 6 (8) One member representing the Hawaii Psychiatric Medical
7 Association, to be invited by the chairperson of the
8 working group;
- 9 (9) One member representing a Hawaii inpatient or
10 emergency room hospital, to be invited by the
11 chairperson of the working group;
- 12 (10) One member representing Hawaii Primary Care
13 Association, to be invited by the chairperson of the
14 working group; and
- 15 (11) Any other member as assigned by the working group not
16 to exceed a total of fifteen members.
- 17 (d) The members of the working group shall serve without
18 pay but shall be reimbursed for their actual and necessary
19 expenses, including travel expenses, incurred in carrying out
20 their duties.



1 (e) The department of health shall submit to the
2 legislature a report concerning the publicly-funded coverage of
3 substance abuse treatment services no later than twenty days
4 prior to the convening of the regular session of 2016.

5 SECTION 3. There is appropriated out of the general
6 revenues of the State of Hawaii the sum of \$ or so much
7 thereof as may be necessary for fiscal year 2015-2016 for the
8 department of health to convene a working group pursuant to
9 section 2 of this Act.

10 The sum appropriated shall be expended by the department of
11 health for the purposes of this Act.

12 SECTION 4. This Act shall take effect on July 1, 2112, and
13 shall be repealed on June 30, 2016.



Report Title:

Substance Abuse Treatment; DOH; Working Group; Appropriation

Description:

Establishes within the Department of Health a working group to address publicly-funded substance abuse treatment services. Appropriates funds. (SB1036 HD1)

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