H.C.R. NO. ²⁴ H.D. 1

HOUSE CONCURRENT RESOLUTION

REQUESTING THE DEPARTMENT OF HEALTH AND THE HAWAII OPIOID INITIATIVE TO ASSESS THE SOCIAL AND FINANCIAL EFFECTS OF LIMITED ACCESS TO PREVENTION AND TREATMENT SERVICES FOR OPIOID AND OTHER SUBSTANCE ABUSE DISORDERS.

1 2 3 4 5	WHEREAS, opioids are a class of drugs that include the illegal drug heroin, synthetic opioids such as fentanyl, and prescription pain relievers such as oxycodone, hydrocodone, codeine, and morphine; and
6 7 8 9	WHEREAS, while opioids are generally safe when taken for a short period of time as prescribed by a physician, regular use of opioid pain killers, even as prescribed by a physician, can lead to dependence; and
10 11 12 13 14	WHEREAS, because opioid pain relievers produce euphoria in addition to pain relief, they are prone to misuse and can easily lead to overdoses and deaths; and
14 15 16 17	WHEREAS, the Centers for Disease Control and Prevention formally declared an opioid epidemic in 2011; and
18 19 20 21	WHEREAS, according to the American Society of Addiction Medicine, more than 2,500,000 Americans have an opioid use disorder; and
22 23 24 25	WHEREAS, the opioid epidemic is the deadliest drug crisis in United States history, claiming more than 200,000 lives, or more than three times the number of United States military deaths in the Vietnam War; and
26 27 28	WHEREAS, in 2016 alone, drug overdoses claimed more lives than motor vehicle accidents or gun violence, and every three



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weeks the opioid epidemic causes about the same number of deaths 1 as occurred in the September 11, 2001, terrorism attacks; and 2 3 WHEREAS, Hawaii is also experiencing the effects of the 4 opioid epidemic, with two hundred seventy-five individuals dying 5 from opioid overdoses between 2012 and 2016 and about two 6 thousand more suffering from nonfatal overdoses; and 7 8 WHEREAS, all substance use disorders including opioid use 9 disorders are understood to be chronic illnesses that require a 10 broad spectrum of treatment interventions; and 11 12 WHEREAS, the American Society of Addiction Medicine 13 provides a framework for determining levels of care for 14 substance use disorders across six dimensions of functioning and 15 that this framework is an industry standard; and 16 17 WHEREAS, the Department of Health has initiated a 18 comprehensive opioid and substance abuse action plan that 19 follows a policy framework and includes stakeholders from a 20 broad array of the community, and that the framework has six 21 workgroups that review and assess the status of the substance 22 abuse prevention and treatment care system and how to improve 23 access and effectiveness; and 24 25 WHEREAS, section 321-193, Hawaii Revised Statutes, requires 26 in part that the Department of Health shall: 27 28 Coordinate all substance abuse programs including 29 (1) rehabilitation, treatment, education, research and 30 prevention activities; 31 32 Prepare, administer, and supervise the implementation (2)33 of a state plan for substance abuse which may consist 34 of a plan for alcohol abuse prevention and a plan for 35 drug abuse prevention; 36 37 (3) Identify all funds, programs, and resources available 38 in the State, public and private, and from the federal 39 government which are being used or may be used to 40 support substance abuse prevention, rehabilitation, 41 treatment, education, and research activities; and 42 43



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Encourage and coordinate the involvement of private (4)1 and public agencies in the assessment of substance 2 abuse problems, needs, and resources; and 3 4 WHEREAS, the Legislature seeks to evaluate the current 5 substance abuse system of care in relationship to: 6 7 8 (1)Specific opioid and other substance abuse prevention and treatment services or providers that could be 9 covered under current healthcare plans; 10 11 (2) The extent of the coverage currently available; 12 13 Target groups that would benefit from expanded or (3) 14 targeted coverage under healthcare plans; 15 16 17 (4) Limits on utilization, if any; and 18 19 (5) Standards of care; and 20 WHEREAS, the Legislature believes that sufficient health 21 insurance coverage specifically for persons suffering from 22 substance abuse disorders will prevent the loss of precious 23 lives, ensure that those persons receive needed treatment, and 24 help to eradicate the current epidemic of opioid overdoses in 25 Hawaii; and 26 27 WHEREAS, the Department of Health in partnership with other 28 stakeholders involved in the opioid plan is best positioned to 29 continue efforts to examine and report to the Legislature: 30 31 The extent to which opioid and other substance use 32 (1)disorder treatment or services are generally utilized 33 by a significant portion of the population; 34 35 The extent to which insurance coverage for these (2) 36 services are already generally available; 37 38 If coverage is not generally available, the extent to (3) 39 which the lack of coverage results in persons being 40 unable to obtain necessary health care treatment; and 41 42 If the coverage is not generally available, the extent (4) 43 to which the lack of coverage results in unreasonable 44



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financial hardship on those persons needing treatment, 1 and on other components of the social and medical care 2 system such as emergency departments; and 3 4 WHEREAS, anecdotal evidence suggests that patients 5 currently face a variety of gaps and barriers when seeking 6 insurance coverage for opioid and other substance dependence 7 treatment; and 8 9 WHEREAS, the Legislature is concerned that these gaps and 10 barriers may prevent patients from receiving necessary opioid 11 and other substance abuse treatment, resulting in those patients 12 relapsing and suffering fatal or near fatal overdoses; and 13 14 WHEREAS, the Hawaii Opioid Initiative found that, in 15 addition to a growing opioid crisis, the State continues to 16 struggle with the negative impacts of other substance abuse 17 problems, including methamphetamine, alcohol, cannabis and 18 tobacco, resulting in high cost to the emergency medical care 19 system; and 20 21 WHEREAS, the high medical costs from opioid related 22 overdoses and from the disabling effects of other substance use 23 disorders could be avoided if patients are able to receive 24 sufficient drug treatment in a timely manner; now, therefore, 25 26 BE IT RESOLVED by the House of Representatives of the 27 Twenty-ninth Legislature of the State of Hawaii, Regular Session 28 of 2018, the Senate concurring, that the Department of Health, 29 through utilization of the current framework of the Hawaii 30 Opioid Initiative's working groups, is requested to conduct an 31 assessment and provide a report on: 32 33 The extent to which substance use disorder treatment (1)34 or services are generally utilized by a significant 35 portion of the population; 36 37 (2) The extent to which insurance coverage for these 38 services are already generally available; 39 40 If coverage is not generally available, the extent to (3) 41 which the lack of coverage results in persons being 42 unable to obtain necessary health care treatment; and 43 44



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1 (4) If the coverage is not generally available, the extent to which the lack of coverage results in unreasonable 2 financial hardship on those persons needing treatment; 3 4 and 5 BE IT FURTHER RESOLVED that the Department of Health is 6 requested to submit findings and recommendations to the 7 Legislature, including any necessary legislation, twenty days 8 prior to the convening of the Regular Session of 2019; and 9 10 BE IT FURTHER RESOLVED that certified copies of this 11 Concurrent Resolution be transmitted to the Director of Human 12 Services, Director of Public Safety, and the Insurance 13 Commissioner, who in turn is requested to transmit copies to 14 each insurer in the State that issues health insurance policies. 15 16 17 18

