



EXECUTIVE CHAMBERS
HONOLULU

DAVID Y. IGE
GOVERNOR

February 8, 2018

TO: The Honorable Representative John M. Mizuno, Chair
House Committee on Health and Human Services

FROM: Scott Morishige, MSW, Governor's Coordinator on Homelessness

SUBJECT: HB 2269 – RELATING TO MOBILE CLINICS

Hearing: Thursday, February 8, 2018, 9:00 a.m.
Conference Room 329, State Capitol

POSITION: The Governor's Coordinator on Homelessness supports this bill provided that the measure's passage does not replace or adversely impact priorities identified in the Governor's supplemental budget request. The Coordinator asks the Legislature to support the Governor's budget request, which includes appropriations to the Department of Human Services (DHS) and Department of Health (DOH) for \$3 million for Housing First, \$3 million for Rapid Rehousing, \$1.75 million for homeless outreach, and \$800,000 for outreach and counseling services for chronically homeless persons with severe substance use disorders. The Coordinator defers to DHS in regard to the contracting and implementation of homeless services, and to DOH in regard to funding and oversight of professional medical services as described in this measure.

PURPOSE: The purpose of the bill is to appropriate funds to the Department of Human Services (DHS) for establishing, staffing, and operating two mobile clinics to serve the homeless population.

Homelessness remains one of the most pressing challenges facing Hawaii, and the State has adopted a comprehensive framework to address homelessness that focuses on three primary leverage points – affordable housing, health and human services, and public safety. In particular, the State has worked together with the Legislature and other stakeholders to

increase resources for permanent housing programs, such as Housing First and Rapid Rehousing.

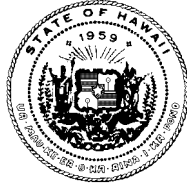
Between 2015 and 2017, the number of permanent housing beds for homeless individuals statewide increased by 1,986 – an increase of 146%, more than doubling the supply of permanent beds. Permanent housing programs, such as Housing First, are especially critical for homeless individuals with chronic medical needs and assist in alleviating financial impact on hospital emergency departments and other parts of the healthcare system.

The housing retention rate for the state's Housing First program is approximately 97% – meaning that 97% remain housed and off the streets – which far exceeds the national average of 80%. Funding for Housing First includes both monthly rent and ongoing wraparound case management. Preliminary analysis of a subset of State Housing First clients by the University of Hawaii Center on the Family found that per client report, estimated healthcare costs for Housing First clients dropped an average of 43% in the six months following housing placement – from an average of \$10,570 per client per month to \$5,980 per client per month.

The proposed mobile clinics will complement and enhance existing services for the homeless population, such as homeless outreach and Housing First. However, the Coordinator has concerns regarding potential adverse impact on other items in the budget relating to these existing programs that are critical pieces of the State's comprehensive approach to homelessness.

Collectively, the homeless programs administered by DHS and other State agencies represent an array of resources designed to provide one-time crisis assistance, as well as medium term (3-24 months) and longer-term support. This mix of short-, medium-, and long-term assistance is designed not only to transition at-risk and homeless individuals and families into stable housing, but also designed to prevent homelessness by assisting formerly homeless individuals with maintaining housing over time. Accordingly, the Coordinator respectfully requests the Legislature's support of the Governor's supplemental budget request.

Thank you for the opportunity to testify on this bill.



STATE OF HAWAII
DEPARTMENT OF HUMAN SERVICES
P. O. Box 339
Honolulu, Hawaii 96809-0339

February 7, 2018

TO: The Honorable Representative John M. Mizuno, Chair
House Committee on Health & Human Services

FROM: Pankaj Bhanot, Director

SUBJECT: **HB 2269 – RELATING TO MOBILE CLINICS**

Hearing: Thursday, February 8, 2018, 9:00 a.m.
Conference Room 329, State Capitol

DEPARTMENT'S POSITION: The Department of Human Services (DHS) appreciates the intent of this bill and recognizes the health care needs of homeless individuals, especially in rural areas. DHS offers comments to support this bill provided that this measure's passage does not replace or adversely impact priorities identified in the Governor's supplemental budget.

PURPOSE: The purpose of this bill is to appropriate funds to purchase, staff, and operate two mobile clinics to serve the homeless population.

DHS acknowledges that homeless individuals may experience high disease burdens and mortality rates. Consequently, homeless individuals are more likely to be frequent users of emergency medical services.

A report from the National Health Care for the Homeless Council detailed 33 mobile health care projects that used a variety of models, and vehicles to provide a variety of health services to people with unstable housing. The top three criteria for program success were identified as: selection of service sites, collaboration with partners, and staff effectiveness at building trusting relationships. Some of the obstacles to initiate and maintain the program were: lack of financial capacity to purchase, maintain, and upgrade the mobile units, pay for

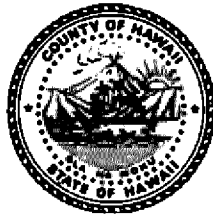
clinician hours, vehicle or equipment problems, clinical information management, and staffing. Other obstacles were insufficient space and patient follow up. See <http://www.nhchc.org/wpcontent/uploads/2012/02/mobilehealth.pdf> .

DHS Homeless Programs Office (HPO) currently contracts homeless outreach services with providers statewide. Outreach services may include housing identification, linkages to supportive services, assistance with public benefits, and referrals to healthcare. This bill will complement additional services needed in both continua of care on Oahu and neighbor islands. Furthermore, diverting frequent users of the emergency medical services may result in some savings after evaluation of the cost of a mobile clinic.

With regard to an appropriation for services provided by health care professionals, DHS HPO does not currently procure for professional medical services, and defers to the Department of Health if the intent is to compensate health care professionals with general funds. However, if health care professionals were enrolled as Medicaid providers of one or more of the QUEST Integration (QI) plans, it would be possible for them to bill individual's QI plans for allowed health care services delivered at the mobile clinic.

Thank you for the opportunity to testify on this bill.

Harry Kim
Mayor



Wil Okabe
Managing Director

Barbara J. Kossov
Deputy Managing Director

County of Hawai'i
Office of the Mayor

25 Aupuni Street, Suite 2603 • Hilo, Hawai'i 96720 • (808) 961-8211 • Fax (808) 961-6553
KONA: 74-5044 Ane Keohokālole Hwy., Bldg C • Kailua-Kona, Hawai'i 96740
(808) 323-4444 • Fax (808) 323-4440

February 6, 2018

Representative John M. Mizuno, Chair
Committee on Health & Human Services
Hawai'i State Capitol, Room 329
Honolulu, HI 96813

Dear Chair Mizuno and Committee Members:

Re: HB 2269 Relating to Mobile Clinics
Hearing Date: 02/08/18 – 9:00 am; Conference Room 329

There are so many good bills for your consideration dealing with the homeless that I have been hesitant to weigh in on any one in particular. I know that the needs are great and resources limited.

Nevertheless, I thought I would offer a comment on HB 2269, although I would ask that you not interpret a lack of testimony on other measures as a sign of indifference or lack of support.

I support HB 2269, as well as any other initiative that can have a positive impact on the homeless population, make their lives a bit easier, and move them toward conventional shelter.

As a neighbor island Mayor, I would ask for recognition that homelessness is a statewide problem. Since HB 2269 calls for two mobile clinics, I would hope that one of the two can be earmarked for an island other than O'ahu.

Respectfully submitted,

A handwritten signature in black ink that reads "Harry Kim".

Harry Kim
Mayor, County of Hawai'i



Hawai'i Psychological Association

For a Healthy Hawai'i

P.O. Box 833
Honolulu, HI 96808

www.hawaiipsychology.org

Phone: (808) 521-8995

Committee on Health & Human Services

Rep. John M. Mizuno, Chair

Rep. Bertrand Kobayashi, Vice Chair

Testimony in Support of HB 2269 with Amendment

Thursday, February 8, 2018, 9:00 a.m., Conference Room 329

The Hawai'i Psychological Association (HPA) supports a modified version of HB 2269, which appropriates funds for establishing, staffing, and operating two mobile clinics to serve the homeless population.

The Hawaii Psychological Association strongly recommends inclusion of a clinical psychologist in the mobile clinic minimum staffing requirements. The homeless population suffers from extremely high rates of mental illness and a more comprehensive approach to their care is required. There is a strong body of scientific evidence that clearly demonstrates that psychotherapy along with medication is more effective than pharmaceutical intervention alone. The combination results in a faster, more complete and enduring response to treatment. Given the critical shortage of psychiatrists in the State of Hawaii, it is unlikely that any will have the time to provide more than medication management to the homeless population. Including a clinical psychologist on the team will allow for the provision of psychotherapy and will result in more effective treatment. In addition, if at some point psychologists are authorized to prescribe, the Department of Human Services will be able to select from a larger pool of available providers, with the advantage that prescribing psychologists will be able to offer the full-range of behavioral health services (psychotherapy and medication).

Including a clinical psychologist as a required member of the mobile staff will significantly improve treatment outcome and success. We support the bill with this recommended modification.

Respectfully submitted,

Julie Takishima-Lacasa, PhD
Chair, Legislative Action Committee



**Testimony to the House Committee on Health and Human Services
Thursday, February 8, 2018; 9:00 a.m.
State Capitol, Conference Room 329**

RE: SUPPORTING HOUSE BILL NO.2269, RELATING TO MOBILE CLINICS.

Chair Mizuno, Chair Kawakami, and Members of the Committee:

The Hawaii Primary Care Association (HPCA) is a 501(c)(3) organization established to advocate for, expand access to, and sustain high quality care through the statewide network of Community Health Centers throughout the State of Hawaii. The HPCA **SUPPORTS** House Bill No. 2269, RELATING TO MOBILE CLINICS.

The bill, as received by your Committee, would:

- (1) Appropriate an unspecified amount of general funds for fiscal year 2018-2019, for the Department of Human Services (DHS) to purchase, staff, and operate two mobile clinics to serve the homeless population;
- (2) Clarify the type and number of health care professionals that would staff each mobile clinic, and specify the types of service that the mobile clinics may provide; and
- (3) Allow DHS to procure mobile clinic services in accordance with Chapter 103F, Hawaii Revised Statutes.

Federally Qualified Health Centers (FQHCs) provide desperately needed medical services at the frontlines in rural communities. Long considered champions for creating a more sustainable, integrated, and wellness-oriented system of health, FQHCs provide a more efficient, more effective and more comprehensive system of health.

HPCA fully and wholeheartedly supports efforts by the State to provide desperately needed resources for social services to our most vulnerable populations. We commend the introducer for offering this measure as the means of informing lawmakers of the practicality and efficacy of mobile clinics.

FQHCs have in the past, and currently are utilizing mobile clinics as the means of providing direct health care services where they are needed. Waikiki Community Health Center, Bay Clinic, and Koolauloa Community Health Center are just a few of our member organizations that have demonstrated their willingness to utilize mobile clinics in serving the needs of their communities. The initial costs for obtaining the equipment though are high, but the benefit to our citizenry is enormous. By getting services and treatment to patients early, the need for more expensive and complex procedures is mitigated.


Accordingly, we **SUPPORT** this bill and urge your favorable consideration of this measure.

In advance, thank you for your consideration of our testimony.



THE QUEEN'S HEALTH SYSTEMS

To: The Honorable John M. Mizuno
The Honorable Bertrand Kobayashi, Vice Chair
Members, Committee on Health and Human Services

From:  Paula Yoshioka, Vice President, Government Relations and External Affairs, The
Queen's Health Systems

Date: February 7, 2018

Hrg: House Committee on Health and Human Services Hearing; Thursday, February 8, 2018
at 9:00 AM in Room 329

Re: Support for H.B. 2269, Relating to Mobile Clinics

My name is Paula Yoshioka, and I am a Vice President at The Queen's Health Systems (Queen's). I would like to express my support for H.B. 2269, Relating to Mobile Clinics. This bill would appropriate funds to purchase, staff, and operate mobile clinics to service the homeless population.

The mission of Queen's is to provide quality health care services to improve the well-being of Native Hawaiians and all the people of Hawai'i, which includes our most vulnerable and underserved patient populations like the homeless. Hawaii has the highest per capita rate of homelessness in the nation, with roughly 5,000 homeless individuals heavily distributed on Oahu and concentrated in Honolulu and on the Waianae Coast. Queen's provides the majority of medical care to our homeless population in Hawai'i. In 2015, Queen's had 10,126 homeless encounters, up from 6,958 in 2013. This represents 64% of the state's homeless hospital encounters.

The costs to the entire continuum of care—from hospitals to long-term care facilities to home-based services—of treating the homeless population are large and growing. There are still unmet needs for our homeless patients and while Queen's has been a leader in care coordination, we know that much more needs to be done within the community to close the gaps in services and supports for our homeless population. I commend the legislature for introducing this measure and thank you for the opportunity to testify.

The mission of The Queen's Health Systems is to fulfill the intent of Queen Emma and King Kamehameha IV to provide in perpetuity quality health care services to improve the well-being of Native Hawaiians and all of the people of Hawai'i.

February 8, 2018 at 9:00 a.m.
Conference Room 329

House Committee on Health & Human Services

To: Representative John Mizuno, Chair
Bertrand Kobayashi, Vice Chair

From: Michael Robinson
Vice President – Government Relations & Community Affairs

Re: HB 2269 – Relating to Mobile Clinics: Testimony in Support

My name is Michael Robinson, and I am the Vice President, Government Relations and Community Affairs at Hawai'i Pacific Health (HPH). Hawai'i Pacific Health is a not-for-profit health care system, and the state's largest health care provider and non-governmental employer. Hawai'i Pacific Health is committed to providing the highest quality medical care and service to the people of Hawai'i and the Pacific Region through its four hospitals, more than 50 outpatient clinics and service sites, and over 1,600 affiliated physicians. Hawai'i Pacific Health's hospitals are Kapi'olani Medical Center for Women & Children, Pali Momi Medical Center, Straub Clinic & Hospital and Wilcox Memorial Hospital.

I write in support of HB 2269 which appropriates funds to establish, staff, and operate two mobile clinics to serve the homeless population.

Mobile clinics provide valuable preventive and primary care to the homeless population. Roughly two thirds of homeless individuals in Hawai'i relied on MedQuest to pay for health care services. Barriers to health care such as lack of insurance, housing, transportation, and primary care physicians result in the over-use of high-cost hospital emergency facilities as well as EMS services. The homeless population's limited access to preventive and primary health care also results in many individuals waiting to seek treatment until their health conditions have reached extreme stages. The severity of homeless people's health conditions could be prevented and costs to the state minimized if mobile clinics offered basic primary care to O'ahu's homeless population.

This measure improves access to health care for our homeless population and decreases the cost to the State and to hospitals for providing necessary and basic health care services.

Thank you for the opportunity to provide this testimony.

HB-2269

Submitted on: 2/6/2018 9:13:08 AM

Testimony for HHS on 2/8/2018 9:00:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Hannah Preston-Pita	Big Island Substance Abuse Council	Support	No

Comments:

HB-2269

Submitted on: 2/7/2018 8:47:36 AM

Testimony for HHS on 2/8/2018 9:00:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Melodie Aduja	OCC Legislative Priorities	Support	No

Comments:

HB-2269

Submitted on: 2/5/2018 8:20:25 PM

Testimony for HHS on 2/8/2018 9:00:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Joy Marshall		Support	No

Comments:

HB-2269

Submitted on: 2/7/2018 8:09:06 PM

Testimony for HHS on 2/8/2018 9:00:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Alicia Fuqua		Support	Yes

Comments:

Honorable Rep. John M. Mizuno, Chair

Honorable Rep. Bertrand Kobayashi, Vice Chair

Members of the Committee on Human Services

RE: Testimony in SUPPORT of HB 2269: RELATING TO MOBILE CLINICS

HEARING: Thursday, February 8, 2018 at 9:00 am, House Conference Room 329

My name is Alicia Fuqua. I am in the second-year of my master's program at the Myron B. Thompson School of Social Work at UH Manoa. I am testifying in favor of House Bill 2269. My field experience includes working with individuals with severe mental illness and homelessness.

In the U.S., 1 in 25 will be homeless sometime in their lives, and in Hawai'i alone there are an estimated 7,220 homeless individuals. The homeless population tends to use the emergency department in higher numbers than a non-homeless individual. As stated in the bill, the costs for these medical visits are increasingly high, and yet, they are still not receiving the proper medical attention. According to several studies, people who are homeless die sooner than non-homeless individuals. As a social worker, I strive to protect and empower vulnerable populations, and fight for health equity. Many lack the necessary services needed to address general or mental health issues.

The services offered by the mobile clinics include child and family services, dental care, and pharmacy among other services as outlined in the bill, thus promoting public health and well-being. Mobile clinics are a cost-effective model that allows providers to deliver services for this underserved population. According to the article *The Scope and Impact of Mobile Health Clinics in the United States: A Literature Review*, published in the International Journal for Equity in Health (Yu, Hill, Ricks, Bennet, & Oriol, 2017), the authors have reported “Because MHC’s can overcome many healthcare barriers, services provided by the MHC’s have been shown to improve individual health outcomes, advance population health, and reduce health care costs compared to traditional clinical settings.”

The need for these services is urgent. It is essential that we work as a community to improve the social condition in Hawaii.

Please vote **YES** on HB 2269 to allow greater access to care for those most in need.

Respectfully submitted,

Alicia Fuqua