

1 and, compared to the other regions, have less opportunity for
2 additional revenue generation.

3 While the need for long-term care beds on Oahu has
4 decreased in recent years, a study completed by the department
5 of business, economic development, and tourism has projected
6 that the population aged sixty-five and older will grow by one
7 hundred forty-eight per cent over the next twenty-five years.
8 On Oahu, this translates to an estimated shortfall of one
9 thousand one hundred long-term care beds in the next five to ten
10 years alone. Thus, despite the costs of long-term care, it is
11 vital that state facilities continue to operate to ensure that
12 beds remain available for our aging population.

13 Similar to the Oahu region, the department of health
14 operates the Hawaii state hospital, a facility that does not
15 generate revenue, but is nonetheless necessary to provide care
16 and treatment for mentally ill patients in Hawaii. In recent
17 years, the Hawaii state hospital has experienced a challenge in
18 providing sufficient bed space for admitted patients. As of
19 September 2019, two hundred twenty-six patients - well over the
20 maximum capacity of two hundred two - occupied beds at the
21 Hawaii state hospital. To meet its needs, the Hawaii state



1 hospital was also required to contract with Kahi Mohala, a
2 privately-run facility, to care for an additional forty-six
3 patients.

4 Beyond the Hawaii state hospital, the department of health
5 has also been charged with addressing the significant gap in the
6 behavioral health care system between acute psychiatric care
7 facilities and low acuity residential treatment. Data collected
8 in the State estimates that more than half of all individuals
9 experiencing a mental health crisis, or fifty-four per cent,
10 have needs that align better with services delivered within a
11 subacute level of care facility rather than an emergency room.

12 Subacute residential stabilization services have been a
13 missing component of a comprehensive behavioral health continuum
14 of care, which would bridge the gap between acute
15 hospitalization and lower level residential and community
16 resources. Many individuals who are taken to the emergency room
17 on an MH-1, or for emergency examination and hospitalization,
18 are often not acute enough in their illness to warrant
19 psychiatric hospitalization. On the other hand, their
20 symptomology is too acute for them to be admitted to a group
21 home, shelter, or other existing low acuity residential program,



1 or, if they are admitted, they are often unsuccessful in those
2 environments. More often than not, they fail because they have
3 not had time to stabilize in an environment where they can be
4 closely monitored. This lack of post-acute care contributes to
5 the poor outcomes of both acute behavioral health inpatient and
6 community-based services because many individuals are not
7 appropriate for either level, but fall somewhere in the middle.

8 In its efforts to address the need for subacute residential
9 stabilization services, the department of health recognized the
10 lack of state facilities within the department that could be
11 utilized for this purpose. Through discussions with the Oahu
12 Hawaii health systems corporation region, however, it was
13 determined that some of the facilities in the Oahu region,
14 particularly at Leahi hospital, are currently underutilized and
15 have the potential to be re-purposed for other important health
16 care and social service needs.

17 The legislature further finds that, while statutorily tied
18 to the Hawaii health systems corporation, the Oahu region
19 operates mostly autonomously and its functions - including
20 target population - are unique from those of the other regional
21 health care systems. As such, there is little necessity to keep



1 the facilities of the Oahu region as a part of the Hawaii health
2 systems corporation. With proper planning and implementation,
3 the Oahu region facilities could be strategically assimilated
4 into the department of health and its facilities could be used,
5 in addition to long-term care, to help alleviate the need for
6 subacute residential mental health stabilization and other
7 subacute care services.

8 The purpose of this Act is set a date for the transition of
9 the Oahu region's health care facilities from the Hawaii health
10 systems corporation to the department of health and to establish
11 a working group by and between the Oahu Hawaii health systems
12 corporation region and department of health that shall be
13 responsible for developing a comprehensive plan to address all
14 necessary components of such transition.

15 PART II

16 SECTION 2. Section 323F-2, Hawaii Revised Statutes, is
17 amended by amending subsection (b) to read as follows:

18 "(b) The corporate organization shall be divided into
19 [~~five~~] four regional systems, as follows:

20 [~~(1) The Oahu regional health care system;~~

21 ~~(2)] (1) The Kauai regional health care system;~~



1 ~~[(3)]~~ (2) The Maui regional health care system;
 2 ~~[(4)]~~ (3) The east Hawaii regional health care system,
 3 comprising the Puna district, north Hilo district,
 4 south Hilo district, Hamakua district, and Kau
 5 district; and

6 ~~[(5)]~~ (4) The west Hawaii regional health care system,
 7 comprising the north Kohala district, south Kohala
 8 district, north Kona district, and south Kona
 9 district;

10 and shall be identified as regional systems I, II, III, and IV,
 11 ~~[and V,]~~ respectively."

12 SECTION 3. Section 323F-3, Hawaii Revised Statutes, is
 13 amended by amending subsection (b) to read as follows:

14 "(b) The members of the corporation board shall be
 15 appointed as follows:

- 16 (1) The director of health as an ex officio, voting
- 17 member;
- 18 (2) The ~~[five]~~ three regional chief executive officers as
- 19 ex officio, nonvoting members;
- 20 (3) Three members who reside in the county of Maui, two of
- 21 whom shall be appointed by the Maui regional system



- 1 board and one of whom shall be appointed by the
2 governor, all of whom shall serve as voting members;
- 3 (4) Two members who reside in the eastern section of the
4 county of Hawaii, one of whom shall be appointed by
5 the East Hawaii regional system board and one of whom
6 shall be appointed by the governor, both of whom shall
7 serve as voting members;
- 8 (5) Two members who reside in the western section of the
9 county of Hawaii, one of whom shall be appointed by
10 the West Hawaii regional system board and one of whom
11 shall be appointed by the governor, both of whom shall
12 serve as voting members;
- 13 (6) Two members who reside on the island of Kauai, one of
14 whom shall be appointed by the Kauai regional system
15 board and one of whom shall be appointed by the
16 governor, both of whom shall serve as voting members;
- 17 [~~(7) Two members who reside on the island of Oahu, one of~~
18 ~~whom shall be appointed by the Oahu regional system~~
19 ~~board and one of whom shall be appointed by the~~
20 ~~governor, both of whom shall serve as voting members,]~~
21 and



1 ~~[(8)]~~ (7) One member who shall be appointed by the governor
2 and serve as an at-large voting member.

3 The appointed board members who reside in the county of
4 Maui, eastern section of the county of Hawaii, western section
5 of the county of Hawaii, and on the island of Kauai [~~, and on the~~
6 ~~island of Oahu~~] shall each serve for a term of four years;
7 provided that the terms of the initial appointments of the
8 members who are appointed by their respective regional system
9 boards shall be as follows: one of the initial members from the
10 county of Maui shall be appointed to serve a term of two years
11 and the other member shall be appointed to serve a term of four
12 years; the initial member from East Hawaii shall be appointed to
13 serve a term of two years; the initial member from West Hawaii
14 shall be appointed to serve a term of four years; and the
15 initial member from the island of Kauai shall be appointed to
16 serve a term of two years; [~~and the initial member from the~~
17 ~~island of Oahu shall be appointed to serve a term of four years,~~
18 ~~and~~] provided further that the terms of the initial appointments
19 of the members who are appointed by the governor shall be four
20 years. The at-large member appointed by the governor shall
21 serve a term of two years.



1 Any vacancy shall be filled in the same manner provided for
2 the original appointments. The corporation board shall elect
3 its own chair from among its members. Appointments to the
4 corporation board shall be as representative as possible of the
5 system's stakeholders as outlined in this subsection. The board
6 member appointments shall strive to create a board that includes
7 expertise in the fields of medicine, finance, health care
8 administration, government affairs, human resources, and law."

9 PART III

10 SECTION 4. (a) There is established a working group
11 comprised of board members of the Oahu regional health care
12 system, director of health, representatives of the department of
13 health, representatives of other state departments and agencies,
14 and others, to develop, evaluate, and implement the steps
15 necessary to transition the Oahu regional health care system
16 into the department of health.

17 (b) The working group shall consist of the following
18 members:

19 (1) The director of health, or the director's designee,
20 who shall serve as co-chair, and who, along with the
21 chair of the Oahu regional health care system, or the



- 1 chair's designee, shall have final authority over
2 transfer activities to be implemented by the working
3 group;
- 4 (2) The chair of the Oahu regional health care system
5 board, or the chair's designee, who shall serve as co-
6 chair;
- 7 (3) The chief executive officer of the Oahu regional
8 health care system, or the chief executive officer's
9 designee;
- 10 (4) One representative from the behavioral health
11 administration of the department of health;
- 12 (5) One or more department of health staff as deemed
13 necessary by the director of health, or the director's
14 designee;
- 15 (6) One representative from the department of human
16 resources development;
- 17 (7) One representative from the department of accounting
18 and general services;
- 19 (8) The chair of the Hawaii health systems corporation
20 board, or the chair's designee;



- 1 (9) One representative from the Hawaii health systems
2 corporation human resources department;
- 3 (10) One representative from the Hawaii health systems
4 corporation finance department;
- 5 (11) One or more Oahu regional health care system staff as
6 deemed necessary by the chief executive officer of the
7 Oahu regional health care system, or the chief
8 executive officer's designee;
- 9 (12) One representative from the Hawaii government
10 employees association;
- 11 (13) One representative of an affected community to be
12 selected by the director of health; and
- 13 (14) Others as recommended by the co-chairs.
- 14 (c) The working group shall be responsible for completing
15 the following items as part of the transition plan:
- 16 (1) Development of a statutory framework to govern the
17 transition of the Oahu regional health care system
18 into the department of health that shall, where
19 possible, preserve the rights and exemptions that the
20 Oahu regional health care system enjoyed as a region
21 within the Hawaii health systems corporation;



- 1 (2) Identification of all real property, appropriations,
2 records, equipment, machines, files, supplies,
3 contracts, books, papers, documents, maps, and other
4 property made, used, acquired, or held by the Oahu
5 regional health care system that will be transferred
6 to the department of health;
- 7 (3) Identification of all debts and other liabilities that
8 will remain with the Hawaii health systems corporation
9 and those that will be transferred to the department
10 of health;
- 11 (4) Identification and resolution of all contractual
12 arrangements and obligations, including but not
13 limited to those related to personal service
14 contracts, vendor contracts, and capital improvement
15 projects;
- 16 (5) Development of a comprehensive plan to transition all
17 employees into the classification system of the
18 executive branch and the department of health with due
19 consideration of collective bargaining rights and
20 civil service rules;



1 (6) Development and implementation of any and all policies
2 and procedures necessary to ensure that the facilities
3 within the Oahu regional health care system remain
4 compliant with all federal, state and local laws and
5 regulations; and

6 (7) Development of a proposed budget for the Oahu regional
7 health care system during the transition period and a
8 plan to transfer all fiscal and accounting functions
9 to the department of health.

10 (d) Members of the working group shall serve without
11 compensation but shall be reimbursed for reasonable expenses
12 necessary for the performance of their duties, including travel
13 expenses. No member of the working group shall be subject to
14 chapter 84, Hawaii Revised Statutes, solely because of the
15 member's participation in the working group.

16 (e) Two or more members of the working group, but less
17 than the number of members which would constitute a quorum for
18 the working group, may discuss between themselves matters
19 relating to official business of the working group to enable
20 them to faithfully perform their duties to the working group and
21 the organizations they represent, as long as no commitment to



1 vote is made or sought. Such discussions shall be a permitted
2 interaction under section 92-2.5, Hawaii Revised Statutes.

3 (f) The working group shall give written public notice,
4 including a meeting agenda, for each meeting of the working
5 group.

6 (g) The working group shall submit a report of its
7 transition plan, including any proposed legislation, to the
8 legislature no later than twenty days prior to the convening of
9 the regular session of 2021.

10 (h) The transition plan shall be subject to the following
11 conditions:

12 (1) The attorney general shall approve the legality and
13 form of any transition plan created by the working
14 group, and the director of finance shall evaluate and
15 approve any expenditure of public funds determined to
16 be in accordance with the budget laws and controls in
17 force;

18 (2) Any and all liabilities of the Oahu regional health
19 care system that were transferred to the Hawaii health
20 systems corporation upon its creation by Act 262,
21 Session Laws of Hawaii 1996, or to the Oahu regional



1 health care system upon its establishment by Act 290,
2 Session Laws of Hawaii 2007, and all other contractual
3 liabilities of the Oahu regional health care system,
4 including those related to collective bargaining
5 contracts negotiated by the State, shall become the
6 responsibility of the State upon the transition of the
7 Oahu regional health care system into the department
8 of health;

9 (3) All employees who occupy civil service positions shall
10 transfer to the department of health by this Act and
11 retain their civil service status, whether permanent
12 or temporary. Employees shall be transferred without
13 loss of salary, seniority (except as prescribed by
14 applicable collective bargaining agreements),
15 retention points, prior service credit, any vacation
16 and sick leave credits previously earned, and other
17 rights, benefits, and privileges, in accordance with
18 state personnel laws and this Act;

19 (4) Any employee who, prior to this Act, is exempt from
20 civil service or collective bargaining and is
21 transferred as a consequence of this Act shall be



1 transferred without loss of salary and shall not
2 suffer any loss of prior service credit, contractual
3 rights, vacation or sick leave credits previously
4 earned, or other employee benefits or privileges and
5 shall be entitled to remain employed in the employee's
6 current position for a period of no less than one year
7 after being transferred; and

8 (5) The wages, hours, and other conditions of employment
9 shall be negotiated or consulted, as applicable, with
10 the respective exclusive representative of the
11 affected employees, in accordance with chapter 89,
12 Hawaii Revised Statutes.

13 (i) The working group shall be dissolved on June 30, 2022,
14 or upon completion of the transition of the Oahu regional health
15 care system into the department of health, whichever is later.

16 PART IV

17 SECTION 5. The rights, benefits, and privileges currently
18 enjoyed by employees of the Oahu regional health care system,
19 including those rights, benefits, and privileges under chapters
20 76, 78, 87A, and 88, Hawaii Revised Statutes, shall not be
21 impaired or diminished as a result of these employees being



1 transitioned to the department of health. The transition to the
2 department of health shall not result in any break in service
3 for the affected employees. The rights, benefits, and
4 privileges currently enjoyed by employees shall be maintained
5 under their existing collective bargaining agreement and any
6 successor agreement.

7 SECTION 6. Statutory material to be repealed is bracketed
8 and stricken. New statutory material is underscored.

9 SECTION 7. This Act shall take effect on July 1, 2050;
10 provided that part II of this Act shall take effect on January
11 1, 2050.



Report Title:

Hawaii Health Systems Corporation; Oahu Region; Department of Health; Transition; Working Group

Description:

Sets a date of 6/30/2022 for the transition of the Oahu regional health care system facilities from the Hawaii health systems corporation to the department of health. Establishes a working group to develop a comprehensive plan that addresses necessary components of such transition. Takes effect on 7/1/2050. Part II takes effect on 1/1/2050. (HD2)

The summary description of legislation appearing on this page is for informational purposes only and is not legislation or evidence of legislative intent.

