
A BILL FOR AN ACT

RELATING TO HEALTH.

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

1 SECTION 1. The legislature finds that many persons who
2 have been diagnosed with fetal alcohol spectrum disorder face
3 profound challenges in navigating the State's present system of
4 care. Many individuals with diagnoses on the spectrum cope with
5 lifelong physical, cognitive, or behavioral disabilities but age
6 out of eligibility for care services once they become adults.
7 Persons having fetal alcohol spectrum disorders, or their
8 parents or caregivers, may also find it difficult to access
9 proactive therapies that teach coping skills, improve
10 functioning, and foster community connections. The absence of
11 these care services can be devastating for those who face
12 cognitive or behavioral deficits due to their conditions:
13 approximately fifty per cent of persons diagnosed with fetal
14 alcohol spectrum disorder ultimately become involved with the
15 criminal justice system.

16 Accordingly, the purpose of this Act is to establish a task
17 force to identify therapies and home- and community-based care



1 services that may benefit persons having fetal alcohol spectrum
2 disorders, including therapies and treatments that may benefit
3 them as adults. The task force shall also make recommendations
4 on how the State can best make these services available and
5 accessible to persons having fetal alcohol spectrum disorders
6 and their parents or caregivers.

7 SECTION 2. (a) There is established within the behavioral
8 health services administration of the department of health a
9 task force to review best care practices for persons having
10 fetal alcohol spectrum disorders, including therapies and
11 treatments commonly needed as adults. The task force shall
12 consist of:

- 13 (1) A representative of the behavioral health services
14 administration of the department of health;
- 15 (2) A representative of the developmental disabilities
16 division of the department of health;
- 17 (3) A representative of the adult mental health division
18 of the department of health;
- 19 (4) A representative of the child and adolescent mental
20 health division of the department of health;
- 21 (5) A representative of the department of human services;



- 1 (6) A representative of the med-QUEST division of the
2 department of human services;
- 3 (7) A representative of the state council on developmental
4 disabilities;
- 5 (8) At least one representative from a med-QUEST health
6 plan, who shall be invited to participate by the chair
7 of the task force;
- 8 (9) A member to be selected by the chair of the house of
9 representatives committee on human services and
10 homelessness;
- 11 (10) A member to be selected by the chair of the senate
12 committee on human services;
- 13 (11) A member to be selected by the chair of the house of
14 representatives committee on health;
- 15 (12) A member to be selected by the chair of the senate
16 committee on commerce, consumer protection, and
17 health;
- 18 (13) At least one member of a developmental or intellectual
19 disability advocacy group, who shall be invited to
20 participate by the chair of the task force;



- 1 (14) Two parent-advocates to be selected and invited to
- 2 participate by the speaker of the house of
- 3 representatives;
- 4 (15) Two parent-advocates to be selected and invited to
- 5 participate by the president of the senate;
- 6 (16) A representative from the Hawaii substance abuse
- 7 coalition as recommended by the department of health,
- 8 who shall be invited to participate by the chair of
- 9 the task force; and
- 10 (17) Any additional representatives from state agencies,
- 11 stakeholders, advocates, parent-advocates, or other
- 12 individuals as deemed necessary by the majority of the
- 13 task force members; provided that any additional
- 14 members shall be invited to participate by the chair
- 15 of the task force.

16 The task force shall elect one of its members to serve as
17 chairperson of the task force.

18 (b) The task force shall conduct a study and submit a
19 report of its findings and recommendations to the legislature no
20 later than twenty days prior to the convening of the regular
21 session of 2021. The study shall include:



- 1 (1) Identification of all populations and sub-populations
- 2 having fetal alcohol spectrum disorders in the State
- 3 that currently, or may in the future, experience
- 4 burdens in navigating and accessing care services;
- 5 (2) Identification of therapies and home- and community-
- 6 based care services that may benefit persons having
- 7 fetal alcohol spectrum disorders, including therapies
- 8 and treatments that may benefit those persons as
- 9 adults. These may include but are not limited to:
- 10 (A) Assistive technology;
- 11 (B) Career planning, including vocational assessment
- 12 and job placement services;
- 13 (C) Community transition services;
- 14 (D) Day habilitation;
- 15 (E) Family support;
- 16 (F) Home modifications;
- 17 (G) Nutritional consultation;
- 18 (H) Residential habilitation;
- 19 (I) Respite care;



- 1 (J) Specialized skill development, including
- 2 behavioral specialist, community support, and
- 3 systematic skill building services;
- 4 (K) Supported employment, including extended
- 5 employment supports, and intensive job coaching;
- 6 (L) Temporary supplemental services;
- 7 (M) Therapeutic care;
- 8 (N) Transitional work services;
- 9 (O) Vehicle modifications; and
- 10 (P) Supportive housing;
- 11 (3) Strategies to reduce the incidence and impact of fetal
- 12 alcohol spectrum disorder in Hawaii through a
- 13 community-wide, coordinated effort; provided that
- 14 these strategies encompass the areas of screening and
- 15 diagnosis, prevention, health promotion, and
- 16 interventions that take into account needs across a
- 17 person's lifespan;
- 18 (4) Recommendations for any changes to state policies and
- 19 administrative rules that may increase access to
- 20 therapies and home- and community-based services for



1 persons having fetal alcohol spectrum disorder and
2 their parents or caregivers; and

3 (5) Recommendations for any necessary legislation.

4 (c) Two or more members of the task force, but less than
5 the number of members that would constitute a quorum for the
6 task force, may discuss between themselves matters relating to
7 official business of the task force to enable members to
8 faithfully perform their duties to both the task force and the
9 organizations they represent, provided that no commitment to
10 vote is made or sought. These discussions shall be considered
11 permitted interactions under section 92-2.5, Hawaii Revised
12 Statutes.

13 (d) The members of the task force shall serve without
14 compensation but shall be reimbursed for necessary expenses,
15 including travel expenses, incurred for service on the task
16 force. No member of the task force shall be made subject to
17 section 84-17, Hawaii Revised Statutes, solely because of that
18 member's participation on the task force.

19 (e) The task force shall convene no later than thirty days
20 after the effective date of this Act.



1 (f) The task force shall serve until it has accomplished
2 the objectives of this Act or twenty days prior to the convening
3 of the regular session of 2021, whichever occurs first.

4 SECTION 3. This Act shall take effect on July 1, 2050.



Report Title:

DOH; Fetal Alcohol Spectrum Disorder; Task Force

Description:

Establishes a task force within the Department of Health to identify therapies and home- and community-based care services that may benefit persons having fetal alcohol spectrum disorders, including therapies and treatments that may benefit them as adults. Requires the task force to recommend any necessary policy changes, rule changes, or legislation to increase access to these therapies and services. Requires a report to the Legislature. Effective 7/1/2050. (SD2)

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

