

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

March 11, 2020

TO: The Honorable Representative Joy A. San Buenaventura, Chair
House Committee on Human Services & Homelessness

The Honorable Representative John M. Mizuno, Chair
House Committee on Health

FROM: Pankaj Bhanot, Director

SUBJECT: **SB 2469 SD2 – RELATING TO HOMELESSNESS**

Hearing: Friday, March 13, 2020, 10:00 a.m.
Conference Room 329, State Capitol

DEPARTMENT'S POSITION: The Department of Human Services (DHS) appreciates the intent of the bill, offers comments, and requests that any appropriation not supplant funding priorities identified in the Executive Budget.

PURPOSE: Appropriates funds for the Department of Human Services to purchase, staff, and operate 2 mobile clinics to serve homeless persons; provided that 1 of the mobile clinics shall be allocated to the county with the largest land mass. Requires match funds. Effective 7/1/2050. (SD2)

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.

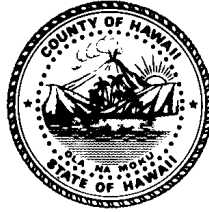
Regarding the purchase of services provided by health care professionals, DHS Homeless Programs Office (HPO) does not currently procure professional medical services and defers to the Department of Health if the intent is to compensate health care professionals and general funds. However, if health care professionals enroll as Medicaid providers of one

or more of the QUEST Integration (QI) plans, it would be possible for providers to bill the individual's QI plans for allowed health care services delivered at the mobile clinic.

DHS 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 by the 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 a mobile clinic.

Thank you for the opportunity to provide testimony on this bill.

Harry Kim
Mayor



Roy Takemoto
Managing Director

Barbara J. Kossow
Deputy Managing Director

County of Hawai'i Office of the Mayor

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March 11, 2020

Representative Joy A. San Buenaventura, Chair
Representative Nadine K. Nakamura, Vice Chair
Committee on Human Services & Homelessness

Representative John M. Mizuno, Chair
Representative Bertrand Kobayashi, Vice Chair
Committee on Health

Dear Chairs San Buenaventura and Mizuno, Vice Chairs Nakamura and Kobayashi, and Committee Members:

RE: SB 2469, SD2 Relating to Human Services

I support SB 2469, SD2 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 appreciate the Legislature's recognition that homelessness is a statewide problem. A year ago, when testifying on HB 36 and SB 526, I noted that the bills called for two mobile clinics, and that I hoped that one of the two could be earmarked for an ohana zone project on an island other than O'ahu. (It was my understanding that the Executive Committee of the Community Alliance Partners (CAP) was endorsing those bills while making a similar request.) I now cannot help but notice that SB 2469, SD2 specifies that one of the mobile clinics would have to be assigned to Hawai'i County. I thank the sponsors for this recognition of our efforts in dealing with the homeless, and I certainly believe that our geography, and our number of homeless, justify such a designation, but I also would understand if your Committee defers to DHS to pick the neighbor island that could most benefit from having such a clinic.

In any event, I ask for a favorable vote on SB 2469, SD2.

Respectfully Submitted,

Harry Kim
MAYOR



Testimony to the House Joint Committee on Human Services and Homelessness, and Health

**Friday, March 13, 2020; 10:00 a.m.
State Capitol, Conference Room 329**

RE: SENATE BILL NO. 2469, SENATE DRAFT 2, RELATING TO HUMAN SERVICES.

Chair San Buenaventura, Chair Mizuno, 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 THE INTENT** of Senate Bill No. 2469, Senate Draft 2, RELATING TO HUMAN SERVICES.

The bill, as received by your Committee, would:

- (1) Require the Department of Human Services (DHS) to operate two mobile clinics to serve homeless individuals; provided, among other things, that:
 - (A) One mobile clinic be allocated to the county with the largest land mass, and
 - (B) No funds be made available unless DHS first obtains matching funds on a dollar-for-dollar basis to the amount appropriated by the State;
- (2) Appropriate an unspecified amount of general funds for fiscal year 2020-2021, to purchase, staff, and operate two mobile clinics; and
- (3) Take effect on July 1, 2050.

By way of background, the HPCA represents Hawaii Federally-Qualified Health Centers (FQHCs). FQHCs provide desperately needed medical services at the frontlines in rural and underserved 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 healthcare.

Testimony on Senate Bill No. 2469, Senate Draft 2
Friday, March 13, 2020; 10:00 a.m.
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Due to advances in technology, health care professionals are able to provide desperately needed services "in the field" and help populations that are greatly underserved. For the homeless and other marginalized groups, a simple cold or a scratch can linger and develop into more serious maladies requiring expensive treatments in the emergency room. These costs go unpaid and ultimately are borne by all of society through higher insurance premium rates, higher treatment costs and greater utilization of social services.

From that context, the use of mobile clinics is potentially a "game-changer" in health care. Professionals are able to go to where the patients are and treat injuries and sicknesses at an earlier stage to prevent them from getting worse and more costly to address.

This approach is already being taken and used in various communities throughout the State. HPCA members currently utilize mobile clinics to provide primary care services to the underserved.

While we applaud the intent of this measure, we have concerns on how the implementation of services by two State-run mobile clinics will be integrated with those that are already in use. There would be a need to ensure that areas serviced do not overlap or else other equally-needy communities are not left out from these services.

If the intent of this measure is promote the use of mobile clinics in underserved areas, this Committee may want to consider providing DHS the flexibility to contract with nonprofits that already do this to possibly expand service areas and the scope of services provided. Ultimately, that would facilitate the underlying goal of this measure.

With those concerns, the HPCA **SUPPORTS THE INTENT** of this measure and respectfully urges its approval for further discussion.

Thank you for the opportunity to testify. Should you have any questions, please do not hesitate to contact Public Affairs and Policy Director Erik K. Abe at 536-8442, or eabe@hawaiiipca.net.



Hawai'i Psychological Association

For a Healthy Hawai'i

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COMMITTEE ON HUMAN SERVICES & HOMELESSNESS

Rep. Joy A. San Buenaventura, Chair
Rep. Nadine K. Nakamura, Vice Chair

COMMITTEE ON HEALTH

Rep. John M. Mizuno, Chair
Rep. Bertrand Kobayashi, Vice Chair

Testimony in **Support** of SB 2469 SD2 **with Amendment**

Friday, March 13, 2020, 10:00 a.m., Conference Room 329

The Hawai'i Psychological Association (HPA) supports a modified version of SB 2469 SD2, which appropriates funds for establishing, staffing, and operating two mobile clinics to serve the homeless population.

HPA strongly recommends inclusion of clinical psychologists in the mobile clinic staffing. 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 Hawai'i, it may be difficult to recruit a psychiatrist for these mobile clinic positions and even if a psychiatrist is identified, it is unlikely that provider will have the time to provide more than medication management. 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 member of the mobile staff will significantly improve treatment outcome and success. We request the following amendment to Section 2(3) (page 3, lines 5-9):

“Mobile clinic staff may include a primary care provider, a nurse, a pharmacist, a psychiatrist, a clinical psychologist, a social worker, an outreach worker, students pursuing a degrees in medicine, behavioral health, or nursing, and other staff as needed; and”

We support the bill with this recommended modification.

Respectfully submitted,

Julie Takishima-Lacasa, PhD, President
Chair, HPA Legislative Action Committee
Hawai'i Psychological Association

SB-2469-SD-2

Submitted on: 3/10/2020 2:03:16 PM

Testimony for HSH on 3/13/2020 10:00:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Alysa Lavoie	Individual	Support	No

Comments:

Strongly Support

TO: Rep. Joy A. San Buenaventura, Chair
Committee on Human Services & Homelessness

Rep. Nadine K. Nakamura, Vice Chair
Committee on Human Services & Homelessness

Rep. John M. Mizuno, Chair
Committee on Health

Rep. Bertrand Kobayashi, Vice Chair
Committee on Health

FROM: Ernesto Rodriguez

DATE: March 11, 2020

SUBJECT: TESTIMONY IN SUPPORT OF S.B. 2469 S.D. 2 – RELATING TO HUMAN SERVICES

I am a constituent of District 19, Ewa by Gentry, and also a concerned citizen when it comes to the growing homeless population we are experiencing not only on Oahu but the entire state of Hawaii. I strongly support S.B. 2469 S.D. 2, Relating to Human Services, which will appropriate funds for the Department of Human Services to purchase, staff, and operate two mobile outreach clinics to serve homeless persons; provided that 1 mobile clinic be allocated to the county with the largest land mass.

At this point and time there are no sustained mobile clinics operating on Oahu or Hawaii county to help provide medical care to the homeless population. This, along with the Waikiki Health Center losing its contract with the state, to provide medical care for homeless, has assisted in placing a burden on our hospitals when it comes to providing medical care. Take for example Queen's Medical Center, its Emergency Room is starting to become over occupied on a daily basis with repeat homeless patients who do not have access to primary health care. This is contributing to patients with serious life threatening emergencies to not be seen in a timely manner. The hospital is also taking a financial hit by not being paid in full for medical services provided. Medicare is covering less than half in total of all expenses incurred for these visits. According to the latest statistics provided by Lt. Gov. Josh Green, the average cost per person to the health system is \$4,650 per day and the highest utilizers spend an average of \$82,000 per year. Costs such as these are forcing the hospital to push the cost of services off to the general population. Situations like these are why securing funding for two mobile health clinics could benefit the state. These mobile clinics will be able to go out into the community and help provide basic health care which in return may alleviate some of the strain off the hospitals. As for Hawaii county, individuals find it extremely difficult to access much needed services with limited resources available and medical facilities being few and far in between

Hawaii's homeless population contains high numbers of individuals suffering from drug abuse and mental health issues. I believe that the operation of mobile outreach clinics will be of enormous help in providing homeless individuals with not only much needed counseling and psychological services, but help individuals navigate the system for housing and treatment placement.

This bill is able to provide different methods in helping Hawaii's homeless. By funding this bill, the state may be able to take a significant step in not only providing more services for the homeless, but may help to reduce the numbers of homeless individuals from overwhelming the state's health care system . I urge the committee to pass S.B. 2469 S.D. 2. Thank you for the opportunity to testify.

TO: Honorable Joy A. San Buenaventura, (Chair)
Members of the Senate Committee on Human Services & Homelessness

Honorable John M. Mizuno, (Chair)
Members of the Senate Committee on Health

FROM: Norrick Higa

SUBJECT: SB2469, SD2- Relating to Human Services

HEARING: **DATE:** Friday, March 13, 2020
 TIME: 10:00 AM
 PLACE: Conference Room #329 - State Capital

Aloha,

My name is Norrick Higa and I am pursuing my Bachelor's and Master's Degree in Social Work at the University of Hawaii at Manoa. I am testifying in **strong support** of SB2469, SD2 in regards to Human Services and the funding to pay for staffing and operate 2 mobile clinics to serve our homeless population.

According to the Democratic Party of Hawaii, this outreach service could help to provide non-emergency medical services, testing for STD, HIV, and hepatitis, behavioral and mental health services, substance abuse services, family/child planning services, referral services, dental care, shower and laundry services, clean clothes, pharmacy services, and even health insurance enrollment.

Furthermore, according to Hawaii County Council, this type of services and access to free healthcare services could potentially reduce costs to hospital emergency room visits.

I, personally, know what it feels like to be homeless and without any services. While homeless, addicted to drugs, and living on the streets, I experienced anxiety and depression and did not have the will to do anything. Furthermore, as time went on, I became complacent and stuck in the life I had made for myself.

I had no money and what money I did have went straight to fuel my addiction. I hardly had any food and was deteriorating, I had no hygiene, no clean clothes, I hardly ever showered because there was no place to shower. Moreover, I was dejected, ashamed, and scared. Deep in my heart, I knew what I should do and go seek help but truly didn't even know where to begin. I certainly was so ashamed of the way I looked and, probably, the way I smelled, that I was never going to get on a bus to seek out the services that I needed for fear of being ridiculed and ostracized.

I was fortunate enough to have an acquaintance help me out of this plight by taking me in for a few weeks and bringing me back to a state of decency and respectability. Just enough to gain back some dignity.

In closing, I strongly support SB2469 SD2, for funding to pay for staffing and 2 mobile clinics to service our homeless population and get them the proper, much needed care, for them to get back their dignity and worth, so that they too are able to get back on their feet and become productive members of society.

Thank you very much and I appreciate the opportunity to share my testimony.

Sincerely,

Mr. Norrick Higa

TO: Honorable Joy A. San Buenaventura, (Chair)
Members of the Senate Committee on Human Services & Homelessness

Honorable John M. Mizuno, (Chair)
Members of the Senate Committee of Health

FROM: Steve Cedillo

SUBJECT: SB2469, SD2- Relating to Human Services

HEARING: **DATE:** Friday, March 13, 2020
 TIME: 10:00 AM
 PLACE: Conference Room #329 – State Capital

Aloha,

My name is Steve Cedillo and I am currently pursuing my Bachelor's Degree in Social Work at the University of Hawai'i at Manoa. I am testifying in strongly support of SB 2469, SD2 in regards to Human Services and the funding to pay for staffing and operate 2 mobile clinics in servicing our homeless population.

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. Furthermore, diverting frequent users of the emergency medical services may result in some savings after evaluation of the cost of a mobile clinic.

Thank you for the opportunity to provide testimony of this Bill SB2469, SD2.

SB-2469-SD-2

Submitted on: 3/12/2020 9:47:19 AM

Testimony for HSH on 3/13/2020 10:00:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Amy Brinker	Individual	Support	No

Comments:

LATE



Environmental Caucus of The Democratic Party of Hawai'i

Friday, March 13, 2020

Senate Bill 2469, SD 2

Testifying in Support

Aloha Chairs San Buenaventura and Mizuno, Vice Chairs Nakamura and Kobayashi, and Members of the Committee on Human Services and Homelessness, and Committee on Health:

The Environmental Caucus of the Democratic Party of Hawaii stands in support of SB 2469, SD2. The purpose of this bill is to appropriate funds for the Department of Human Services to purchase, staff, and operate 2 mobile clinics to serve homeless persons; provided that 1 of the mobile clinics shall be allocated to the county with the largest land mass.

As noted in a Civil Beat article entitled, [Death on the Streets: Lack of Health Care a Major Factor in Homeless Deaths](#), by Nick Grube, dated November 13, 2014, (please see, link below), there are thousands of homeless people struggling to survive on O`ahu, where dozens of families have pitched tents along the streets, and many individuals struggle to survive for long stretches without medical care. Clinics may be the only health care a homeless person receives for months, sometimes even years. This is a major reason why the homeless population on average die decades before people who are housed. Their average age of death is 50. The lack of medical care can be attributable to a number of factors, including but not limited to: (1) being of a transient population, (2) mobility issues getting to clinics, (3) mental illness, (4) severe psychosis, (5) chaos in just finding nutritious food and a place to sleep, (6) uninsured, (7) impoverished, (8) substance and alcohol abuse, and (9) the inability to manage their own lives as necessary to seek medical care.

Queen's Medical Center officials noted 4,000 – 5,000 emergency room visits from the homeless population in 2014. The Honolulu Emergency Services Department, under the direction of Jim Ireland, Director, in an effort to cut taxpayer costs for EMS services to the homeless, started sending paramedics directly to make "home visits" before known homeless "frequent fliers" call for EMS services and treat them on the field rather than at the hospital. It is estimated that these frequent homeless callers cost our taxpayer-funded health care system at least \$3 million a year for ambulance response and trips to the ER. However, based on the transient nature of the homeless population, it may be very difficult to locate these frequent fliers for follow-up visits.

SB 2469, SD2, would fill this immediate need for two mobile clinics which will decrease the already high-demand for medical care by paramedics and emergency room doctors, and treat

injuries or illnesses at their early stages when the prognoses are easier to manage rather than later which are often the case.

Two mobile clinics could provide not only non-emergency medical services but also provide tests for HIV, STD and hepatitis; services for family planning, child and family services, behavioral health, substance abuse, and mental health services; dental care; referral services; shower and laundry services; clean clothing; health insurance enrollment; pharmacy services; “street medicine” for those living on the streets, in parks, along river banks, on beaches, in abandoned buildings; and other assistance services, all of which would satisfy, in part, very important and critical needs of our homeless populations in the counties of Honolulu and Hawai`i.

For these reasons, we urge you to vote favorably on this bill to appropriate funds for the Department of Human Services to purchase, staff, and operate 2 mobile clinics to serve homeless persons; provided that 1 of the mobile clinics shall be allocated to the county with the largest land mass.

Mahalo for the opportunity to testify,

/s/ Melodie Aduja

Melodie Aduja
Co-Chair, Green New Deal Committee
Environmental Caucus
Democratic Party of Hawaii
Legislativepriorities@gmail.com

<https://www.civilbeat.org/2014/11/death-on-the-streets-lack-of-health-care-a-major-factor-in-homeless-deaths/>

SB-2469-SD-2

Submitted on: 3/12/2020 9:25:31 PM

Testimony for HSH on 3/13/2020 10:00:00 AM

LATE

Submitted By	Organization	Testifier Position	Present at Hearing
Naomi Melamed	Individual	Support	No

Comments: