

DAVID Y. IGE
GOVERNOR



PANKAJ BHANOT
DIRECTOR

CATHY BETTS
DEPUTY DIRECTOR

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

February 8, 2019

TO: The Honorable Senator Russell E. Ruderman, Chair
Senate Committee on Human Services

FROM: Pankaj Bhanot, Director

SUBJECT: **SB 432 – RELATING TO HOMELESSNESS**

Hearing: Friday, February 8, 2019, 3:00 P.M.
Conference Room 016, State Capitol

DEPARTMENT'S POSITION: The Department of Human Services (DHS) appreciates the intent of this bill and offers comments.

PURPOSE: The purpose of this measure is to establish and appropriate moneys for a medical respite pilot program to offer medical, nursing, psychiatric, and other care for homeless individuals after being discharged from a hospital. Requires DHS to submit an application for an amendment to the QUEST Integration (QI) section 1115 demonstration waiver to expand the QI program to provide for the medical respite pilot program. Requires DHS, in consultation with the Department of Health, to establish a pilot program.

DHS Homeless Programs Office (HPO) is currently executing contracts with its identified provider, and recognizes that the proposed expiration date of June 30, 2024 for the medical respite pilot program will provide additional time for the pilot to become fully operational. HPO has included in its contract in the Special Conditions the ability to continue services with no cost extension, should there be unexpended funds and an amendment to Act 209, Session Laws of Hawaii (SLH) 2018 is passed and enacted.

Regarding Section 1 and Section 2, at this time, DHS recommends concentrating efforts on serving homeless individuals, and not to include those individuals at risk of homelessness. In Section 2, DHS also recommends excluding individuals who may experience homelessness upon release from mental health facilities or incarceration. Including the at-risk homeless and those released from mental health facilities or incarceration may have adverse effects on serving the most vulnerable homeless individuals. The focus and funding may potentially be redirected to serve other target populations.

Regarding Section 3, DHS Med-QUEST Division (MQD) notes that DHS is actively pursuing authority from the federal government to expand the housing support services offered under the QI program through the 1115 renewal negotiation process. This includes medical respite.

However, the federal government has historically pushed back on state requests to cover services like medical respite or recuperative care. The federal government may not want to provide coverage for the medical respite pilot in the exact way it is presently designed, or may not be able to under federal law. However, the federal government may be interested in providing coverage of medical respite through a different program design. Given the lack of a proven pathway to federal approval for medical respite, DHS recommends that the state be flexible in its approach and allow MQD to continue its present efforts to explore coverage of medical respite through the waiver renewal process rather than submit a separate amendment for this pilot.

Regarding Section 4, the proposed appropriation amount of \$50,000,000, while generous, is not necessarily supported by evidence at this time, and may be difficult for the provider to match as described in Act 209 (SLH 2018), Section 8. Based on the appropriated amount from Act 209, SLH 2018, the current appropriation will fund both fiscal year 2018 to 2019 and fiscal year 2019 to 2020. DHS respectfully requests, if any additional funding is appropriated that it not supplant a budget priority identified in the Executive Budget.

DHS also recommends that it be exempt from provisions of chapters 91 and 201M, Hawaii Revised Statutes, for the duration of the pilot to implement this bill.

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

SB-432

Submitted on: 2/5/2019 5:40:38 PM

Testimony for HMS on 2/8/2019 3:00:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
Louis Erteschik	Testifying for Hawaii Disability Rights Center	Support	No

Comments:



ADA

HAWAII

AMERICANS FOR DEMOCRATIC ACTION

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MAILING ADDRESS

P.O. Box 23404
Honolulu
Hawai'i 96823

Feb. 6 , 2018

TO: Honorable Chair Ruderman & HMS Committee Members

RE: SB 432 Relating to Homelessness

Support for hearing on Feb. 8

Americans for Democratic Action is an organization founded in the 1950s by leading supporters of the New Deal and led by Patsy Mink in the 1970s. We are devoted to the promotion of progressive public policies.

We support SB 432 as it would create a medical respite pilot program to offer medical, nursing, psychiatric, and other care for homeless individuals after being discharged from a hospital. Many of our chronically house-less people need health care--especially mental health care. This is a start. Therefore we also support SB 526 for mobile clinics and the pilot project in SB 1051.

Thank you for your favorable consideration.

Sincerely,

John Bickel President





EXECUTIVE CHAMBERS
HONOLULU

DAVID Y. IGE
GOVERNOR

February 8, 2019

TO: The Honorable Senator Russell E. Ruderman, Chair
Senate Committee on Human Services

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

SUBJECT: **SB 432 – RELATING TO HOMELESSNESS**

Hearing: Friday, February 8, 2019, 3:00 P.M.
Conference Room 016, State Capitol

POSITION: The Governor's Coordinator appreciates the intent of this measure, and respectfully offers comments.

PURPOSE: The purpose of the bill is to establish and appropriate moneys for a medical respite pilot program to offer medical, nursing, psychiatric, and other care for homeless individuals after being discharged from a hospital. The bill also requires the Department of Human Services (DHS) to submit an application for an amendment to the QUEST Integration section 1115 demonstration project to expand its QUEST Integration project to provide for the medical respite pilot program.

Act 209, Session Laws of Hawaii (SLH) 2018, established and appropriated funds for a medical respite pilot program that will sunset on June 30, 2019. DHS is finalizing its contract for the program and there are other measures (HB1451 and SB470) that propose to extend the pilot program to June 30, 2020 to allow DHS to sufficiently evaluate the effectiveness of the program and make recommendations to continue, modify, or terminate the program.


As the Act 209 (SLH 2018) medical respite pilot program will be soon underway, the Coordinator respectfully asks that this measure support the current efforts and asks for the legislature's support of the two measures that will extend the sunset date for the pilot program.

The Coordinator notes that the Center for Medicare and Medicaid Services (CMS) recently approved DHS' 1115 Medicaid waiver amendment to provide tenancy supports for chronically homeless individuals and individuals at risk of homelessness. DHS Med-QUEST Division is in the process of implementing the waiver amendment and is exploring whether services for recuperative care or medical respite care for the homeless population may be covered.

Thank you for the opportunity to testify on this bill.



THE QUEEN'S HEALTH SYSTEMS

To: The Honorable Russell E. Ruderman, Chair
The Honorable Karl Rhoads, Vice Chair
Members, Committee on Human Services


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

Date: February 7, 2019

Hrg: Senate Committee on Human Services Hearing; Friday, February 8, 2019 at 3:00 PM in
Room 016

Re: Comments on S.B. 432, Relating to Homelessness

The Queen's Health Systems (Queen's) is a not-for-profit corporation that provides expanded health care capabilities to the people of Hawai'i and the Pacific Basin. Since the founding of the first Queen's hospital in 1859 by Queen Emma and King Kamehameha IV, it has been our mission to provide quality health care services in perpetuity for Native Hawaiians and all of the people of Hawai'i. Over the years, the organization has grown to four hospitals, 66 health care centers and labs, and more than 1,600 physicians statewide. As the preeminent health care system in Hawai'i, Queen's strives to provide superior patient care that is constantly advancing through education and research.

Queen's appreciates the opportunity to provide comments on S.B. 483, which establishes and appropriates funds for a medical respite pilot program and requires the Department of Human Services to submit an amendment to the QUEST Integration section 1115 demonstration project to expand for the pilot program. While Queen's appreciates the intent, we would like to inform the committee that a similar pilot program already exists under the Homeless Programs Office. Last year the 2018 Legislature passed Act 209, which established the Medical Respite pilot program and the ED assessment pilot program. Preliminary data has demonstrated their success in reducing strain on our health care system, which is why we have made a request for an extension to June 30, 2020 to demonstrate the full value of these pilots. Queen's is appreciative to this committee for passing our no-cost extensions measure, S.B.470, for the Medical Respite and the ED assessment pilot programs last week.

Hawai'i 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.^{1,2} As an island state, our geographical and isolated position presents unique challenges in serving a homeless population that is densely concentrated. As the primary health system serving this population, by focusing resources for maximum access to this population, we

¹ The Department of Housing and Urban Development, "The 2017 Annual Homeless Assessment Report (AHAR) to Congress", December 2017

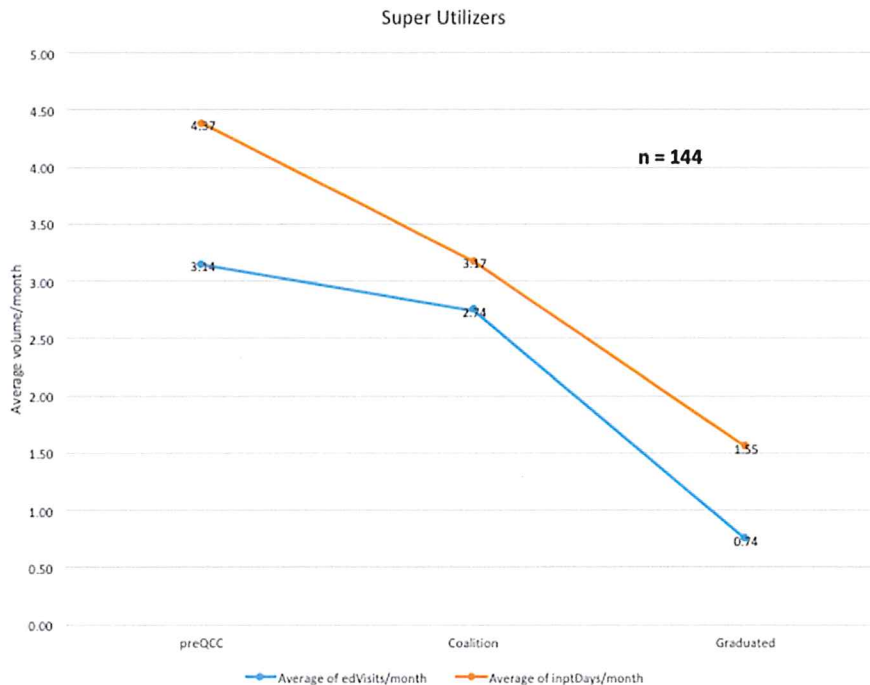
² State of Hawaii, Homeless Point-in-Time Count, January 22, 2017

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.

are able to see over 400 unique homeless patients per month and provide them with the care they need.

Queen's is proud to partner with to the Institute for Human Services on Tutu Bert's House and Ka Uka Respite House. Both of these facilities provide Medical Respite services to facilitate a stable and transitional supervised environment for homeless patients who have been discharged from Queen's and may need additional time to heal in a more appropriate level of care setting. The need for Medical Respite care for individuals experiencing homelessness is a critical part of the continuum of care for this population. Once individuals experiencing homelessness are ready for discharge from a hospital, many times they do not have a place to go to complete their post-acute care recover. Medical Respite facilities not only provide emergency shelter, they also serve as a "place of healing". Eligible guests are able to recover from acute conditions of medical, surgical or psychiatric nature.

The ED assessment pilot program is currently operating through the Queen's Care Coalition (QCC). The QCC identifies homeless patients with the highest utilization of emergency services and works aggressively to provide care and the right resources. The QCC navigates approximately 225 homeless patients annually, providing them coordinated care and connecting them to community resources such as supportive housing services, social services, behavioral health, etc. to address underlying issues that may stem from their unique circumstances.



Since the start of the QCC in January 2018, the graph (above) illustrates a significant decrease in average volume per month by super utilizers coming to the Queen's Emergency Department. The

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.



THE QUEEN'S HEALTH SYSTEMS

chart shows utilization per month, per super utilizer three months pre-intervention and three months post-intervention. As we continue to develop and deploy the QCC Team, there is the potential for efforts to be replicated on the neighbor islands for greatest reach and reduced costs and strain on the health care system. An upwards of 64% of all hospital visits by the homeless are at Queen's, where care is delivered at partial or no reimbursement. High utilization of Emergency Medical Services (EMS) and Emergency Department (ED) resources by homeless individuals also impacts Hawaii's Medicaid program.

Thank you for the opportunity to provide testimony with comments.

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.

SB-432

Submitted on: 2/7/2019 2:58:26 PM

Testimony for HMS on 2/8/2019 3:00:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
Melodie Aduja	Testifying for O`ahu County Committee on Legislative Priorities of the Democratic Party of Hawai`i	Support	No

Comments:

SB-432

Submitted on: 2/6/2019 7:37:54 AM

Testimony for HMS on 2/8/2019 3:00:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
Zachary Wolf	Individual	Support	No

Comments:

Date: February 6, 2019

To: Senator Russell E. Ruderman, Chair

Senator Karl Rhoads, Vice Chair

Members of the Senate Committee on Human Services

From: Zachary Wolf

Re: Support for SB432, Relating to Homelessness

Hrg: Friday, February 8, 2019 at 3:00pm at Conference Room 016

My name is Zachary Wolf and I am a current MSW student at the Myron B. Thompson School of Social Work at the University of Hawai'i at Mānoa. This written testimony is to show my support for Senate Bill 432.

I am in support of this bill as I believe that by continuing this pilot project, the entire community will see great benefits. As I have had prior experience working as a Community Based Case Manager for dual-diagnosed clients, I know the positive impact a project like this would have on those individuals. From a client's standpoint, having a stable environment upon discharge from the hospital will provide appropriate services to support co-occurring mental health illness will greatly support the daily function on the individual. As a provider it will allow for easier access to a typically highly transient population, allowing for appropriate services and follow up as necessary.

The benefit is two-fold as well because a facility like this will lessen the need for clients to utilize Emergency Department (ED) services. This will allow for emergency departments to be utilized in the way that they are established to. Homeless individuals will not have to utilize ED services to receive basic care and in turn this can be done at the facility. Finally, by maintaining this project, homeless individuals will receive the

services they need to gain and maintain stability in their lives. With the reason mentioned above, I hope that you will take *support this Bill as well*.

Sincerely,

Zachary Wolf

SB-432

Submitted on: 2/7/2019 6:41:48 AM

Testimony for HMS on 2/8/2019 3:00:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
Andrea Quinn	Individual	Support	No

Comments:

Dear Honorable Committee Members:

Please support SB432 to provide psychiatric services to the homeless. It is estimated that up to 70% of those on the street have mental health issues, many of whom self-medicate because there are no services available to them.

Thank you for the opportunity to present my testimony.

Andrea Quinn

SB-432

Submitted on: 2/7/2019 2:05:33 PM

Testimony for HMS on 2/8/2019 3:00:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
Dara Carlin, M.A.	Individual	Support	No

Comments: