

STATE OF HAWAII
DEPARTMENT OF HEALTH
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Testimony in SUPPORT of S.B. 2529
RELATING TO BEHAVIORAL HEALTH SERVICES

SENATOR JARRETT KEOHOKALOLE, CHAIR
SENATE COMMITTEE ON HEALTH

Hearing Date: 2/7/2022

Hearing Time: 1:00 p.m.

1 **Department Position:** The Department of Health (“Department”) supports this measure and
2 offers comments.

3 **Department Testimony:** The Adult Mental Health Division (AMHD) offers the following
4 testimony on behalf of the Department.

5 The Department is committed to protecting and improving the health and environment
6 for all people in Hawaii including assuring that basic mental health care is available,
7 appropriate, high quality, and accessible. The AMHD is responsible for leading, fostering and
8 coordinating a comprehensive mental health system that promotes mental wellbeing through
9 the delivery of dignified, holistic, and culturally relevant mental health care and services.

10 The Department believes that the increased funding and enhancements described in
11 this measure will allow the AMHD and CAMHD to expand existing crisis care services to address
12 the mental health needs of individuals statewide.

13 As drafted, this measure enhances and increases funding for the Department’s statewide
14 crisis care continuum which includes the Department of Health (DOH) Hawaii CARES crisis line,
15 Licensed Crisis Residential Services (LCRS), short-term behavioral health Stabilization Bed Units
16 (SBU), Crisis Mobile Outreach (CMO), and Crisis Support Management (CSM). This measure also
17 increases funding for crisis counseling, tele-crisis support technology, and medical staffing for

1 CMO teams. Additionally, this measure establishes preventive youth crisis teams. Statewide
2 crisis services are overseen by the AMHD and the Child and Adolescent Mental Health Division
3 (CAMHD).

4 The Department has maintained the operations of the DOH Hawaii CARES crisis line
5 since it was first created in 2002. All calls to the DOH Hawaii CARES crisis line, (808) 832-3100
6 and 1 (800) 753-6879 are answered by trained local behavioral health staff, 24 hours a day, 7
7 days a week. Callers within the region that includes Hawaii who dial the National Suicide
8 Prevention Lifeline's (NSPL) telephone number, 1 (800) 273-TALK (8255) are routed to the DOH
9 Hawaii CARES crisis line. Nationally, in July 2022, the NSPL number will become "988." There
10 will be no change for the DOH Hawaii CARES crisis line, except for the use of the shortened
11 three digit number for receiving NSPL calls.

12 With regard to the anticipated call volume following the transition to the NSPL 988 dial
13 code, the DOH Hawaii CARES crisis line is fully operational and prepared to respond to any
14 increase in calls through the 988 dial code.

15 The Department would like to draw attention to S.B. 3237, which also proposes a pilot
16 project to expand crisis services to youth through CMO teams. S.B. 3237 provides greater detail
17 regarding the provisions of trauma-informed crisis services. The Department suggests that
18 language from S.B. 3237 be included in S.B. 2529 to clarify the specifics of preventive youth
19 crisis team services.

20 The Department would also like to draw attention to S.B. 2736 which proposes the
21 provision of medical staff within adult CMO teams. We support the inclusion of medical staff
22 for CMO teams, but note that every CMO team may not be able to include these team
23 members. For example, it may be difficult, due to medical staff shortages, to ensure every
24 CMO teams includes this specialized member.

1 As drafted in this measure, the description of adult stabilization beds does not reflect
2 the purpose and design of this service. Short-term behavioral health SBU services are provided
3 to individuals in need of mental health and/or substance use disorder stabilization for short-
4 term stabilization and linkage to care, with case managers assisting each individual to ensure
5 wrap-around services are provided as needed. The average length of admission to a short-term
6 behavioral health SBU is between three to 14 days.

7 **Offered Amendments:** None.

8 Thank you for the opportunity to testify.

9 **Fiscal Implications:** The Department humbly requests that this measure be considered as a
10 vehicle to provide this needed funding so long as it does not supplant the priorities and
11 requests outlined in the Governor’s Executive Budget request.

TESTIMONY ON BEHALF OF HAWAII PSYCHIATRIC MEDICAL ASSOCIATION

To: Chair Jarrett Keohokalole, Vice-Chair Rosalyn Baker, & Members of the Committee
From: Dr. Denis Mee-Lee, Legislative Committee Co-Chair
Hawaii Psychiatric Medical Association
Time: 1:00 p.m., February 7, 2022
Re: SB 2529, RELATING TO BEHAVIORAL HEALTH SERVICES.
Position: **COMMENTS**

On behalf of the Hawaii Psychiatric Medical Association (HPMA) we are writing to support the intent of this SB 2529 and to provide comments requesting important amendments, based on language proposed in Senate Bill 2019 which:

- Augments existing systems (e.g. CARES and 9-1-1)
- Offers relief to the law enforcement and emergency medical systems
- Provides quality and evidence-based care in a timely fashion
- Reduces the burden on residents, local resources, emergency department visits, and 911 calls
- Encompasses innovative ways to grow the workforce of mental health professionals, providing evidence-based treatment with a network of health care and mental health professionals, and increasing access for underserved communities and implement evidence-based methods to triage crisis services
- Provides a sustainable funding mechanism.

The pandemic has exacerbated the need for services that address mental illness and substance use disorder both in the State and nationwide. 187,000 individuals in the State of Hawaii live with mental health conditions, but more than half typically don't receive treatment. In just the last year, NAMI reports that our state lost 176 lives to suicide and 49,000 adult residents reported thoughts of suicide. Despite crises being common, individuals and families in crisis often don't know who to call for help, what kind of support they should expect, and what will happen if they need more help than can be provided over the phone. 9-8-8 will serve as a means to get direct and immediate mental health assistance from trained professionals.

While we support the intent of SB 2529, it lacks an important mechanism for future funding necessary to augment existing systems and provide quality and evidence-based care in a timely fashion. We strongly support provisions in SB 2019 which create sustainable funding for crisis and intervention services by establishing a fee to fund the 9-8-8 services. We support the creation of a task force to oversee and implement the 9-8-8 services and request that a physician specializing in and Board Certified in Psychiatry be specifically added to the task force.

Suicide prevention has been a pillar of the Hawaii Psychiatric Association's advocacy since its inception. We thank the Committee for considering this legislation and urge you to strengthen it further. We are available to provide additional information or answer questions the committee may have.

DAVID Y. IGE
GOVERNOR



CRAIG K. HIRAI
DIRECTOR

GLORIA CHANG
DEPUTY DIRECTOR

EMPLOYEES' RETIREMENT SYSTEM
HAWAII EMPLOYER-UNION HEALTH BENEFITS TRUST FUND
OFFICE OF THE PUBLIC DEFENDER

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BUDGET, PROGRAM PLANNING AND
MANAGEMENT DIVISION
FINANCIAL ADMINISTRATION DIVISION
OFFICE OF FEDERAL AWARDS MANAGEMENT (OFAM)

WRITTEN ONLY
TESTIMONY BY CRAIG K. HIRAI
DIRECTOR, DEPARTMENT OF BUDGET AND FINANCE
TO THE SENATE COMMITTEE ON HEALTH
ON
SENATE BILL NO. 2529

February 7, 2022
1:00 p.m.
Via Videoconference

RELATING TO BEHAVIORAL HEALTH SERVICES

The Department of Budget and Finance (B&F) offers comments on Senate Bill (S.B.) No. 2529.

S.B. No. 2529 appropriates:

- \$2,900,000 in general funds in FY 23 to the Department of Health (DOH) to fund the expansion and enhancement of the suicide crisis hotline and crisis management services provided by contracted service providers through the Hawai'i Coordinated Access Resource Entry System (CARES) crisis helpline.
- \$13,925,469 in general funds in FY 23 to DOH for the expansion and enhancement of the crisis mobile outreach services provided by the contracted service providers through the Hawai'i CARES crisis helpline.
- \$5,256,000 in general funds in FY 23 for the expansion of licensed crisis residential shelter services provided by contracted service providers through the Hawai'i CARES crisis helpline.

- \$5,000,000 in general funds in FY 23 to fund the expansion of bed stabilization services provided by contracted service providers through the Hawai'i CARES crisis helpline.

B&F notes that, with respect to the general fund appropriations in this bill, the federal Coronavirus Response and Relief Supplemental Appropriations Act requires that states receiving Elementary and Secondary School Emergency Relief (ESSER) II funds and Governor's Emergency Education Relief II funds must maintain state support for:

- Elementary and secondary education in FY 22 at least at the proportional level of the state's support for elementary and secondary education relative to the state's overall spending, averaged over FYs 17, 18 and 19; and
- Higher education in FY 22 at least at the proportional level of the state's support for higher education relative to the state's overall spending, averaged over FYs 17, 18 and 19.

Further, the federal American Rescue Plan (ARP) Act requires that states receiving ARP ESSER funds must maintain state support for:

- Elementary and secondary education in FY 22 and FY 23 at least at the proportional level of the state's support for elementary and secondary education relative to the state's overall spending, averaged over FYs 17, 18 and 19; and
- Higher education in FY 22 and FY 23 at least at the proportional level of the state's support for higher education relative to the state's overall spending, averaged over FYs 17, 18 and 19.

The U.S. Department of Education has issued rules governing how these maintenance of effort (MOE) requirements are to be administered. B&F will be working

with the money committees of the Legislature to ensure that the State of Hawai'i complies with these ESSER MOE requirements.

Thank you for your consideration of our comments.

SB-2529

Submitted on: 2/4/2022 7:30:00 PM

Testimony for HTH on 2/7/2022 1:00:00 PM

Submitted By	Organization	Testifier Position	Remote Testimony Requested
Louis Erteschik	Testifying for Hawaii Disability Rights Center	Support	No

Comments:

We are in support.

SB-2529

Submitted on: 2/5/2022 6:41:53 PM

Testimony for HTH on 2/7/2022 1:00:00 PM

Submitted By	Organization	Testifier Position	Remote Testimony Requested
Dara Carlin, M.A.	Individual	Support	No

Comments:

Stand in Support.



Prevent Suicide Hawai'i Taskforce
*Hawaii's Statewide Public-Private Network
promoting hope, help, and healing
and passing life forward in our local communities*



February 7, 2022

LATE

Chair Jarrett Keohokalole
Vice Chair Rosalyn H. Baker
Senate Committee on Health
Hawai'i State Legislature
415 South Beretania Street
Honolulu, HI 96813

RE: SUPPORT for SB 2529, SB 2735, and SB 2736

Senate Committee on Health - hearing on February 7, 2022 at 1:00 p.m. via videoconference

- *SB 2529 – relating to behavioral health services*
 - *Appropriates funds for fiscal year 2022-2023 to accommodate the anticipated increase in the volume of calls to Hawaii CARES Crisis Helpline following the transition of the National Suicide Prevention Lifeline's dial code to "9-8-8" on July 16, 2022.*
- *SB 2735 – relating to behavioral health crisis stabilization beds*
 - *Appropriates funds to the Adult Mental Health Division of the Department of Health to support increased behavioral health crisis stabilization beds.*
- *SB 2736 – relating to crisis outreach programs*
 - *Appropriates funds to the Department of Health for a statewide crisis outreach program*

Chair Keohokalole, Vice Chair Baker, and distinguished members of the Senate Committee on Health:

The undersigned members of the Steering (Leadership) Committee of the Prevent Suicide Hawai'i Taskforce wish to send our support for SB 2529, SB 2735, and SB 2736. As you may know, the Taskforce is the State's network for public-private collaboration and coordination with respect to suicide prevention. Originally convened in 1999, it is the longest-standing collaborative of its kind. The Taskforce is also author of the Hawai'i Suicide Prevention Strategic Plan, requested by and reported to the Legislature: <https://health.hawaii.gov/injuryprevention/files/2019/02/Prevent-Suicide-Hawaii-Taskforce-Strategic-Plan-by-2025.pdf>.

Please first allow us to convey a heartfelt THANK YOU for continuing to serve as champions for mental health and suicide prevention in Hawai'i. As you know, one person dies by suicide every two days in Hawai'i. As we often say, "This is an issue that does not discriminate" – suicide unfortunately affects all groups, communities, and disciplines. In addition, the immense stigma around mental health and suicidality increases the challenge that faces us when encouraging people to seek help when needed.

These three bills represent important advancements with respect to strengthening Hawaii's mental health and suicide prevention systems, and align with goals set forth in the Taskforce's Strategic Plan.

- **SB 2529** addresses needs related to our local crisis call center, including the imminent transition to full use of the 9-8-8 calling code. While Hawai'i is actually ahead of the curve in terms of already having the national system tied into our local call center, ongoing supports are needed to ensure the center operates at its fullest potential, especially as call volume increases once the new calling code is heavily advertised.
- **SB 2735** meets an important need for individuals that may be in crisis, but do not meet the level of acuity to be seen in an emergency department or inpatient setting. What's more, outpatient/community settings are sometimes more conducive to supporting the individual (e.g., offering a calmer, less traumatic experience during a time of immense vulnerability).
- **SB 2736** addresses one of our more vulnerable populations, our houseless/unsheltered communities. We know you agree that addressing the mental health of these individuals and families benefits not only our health system, but also our entire system of care including human services and economy, education, etc.

Finally, the only minor comment the Taskforce wishes to offer is to ensure the benefits of these services are made accessible to all of our people, including our rural and neighbor island communities. We fully appreciate that many projects begin or are centered on O'ahu, given many of the major providers and agencies are located in Honolulu, but we support any plans/intention to ensure services do eventually reach a statewide audience.

Should you have questions or require additional information, or any resources related to suicide prevention, please do not hesitate to reach out to us. Dr. Jeanelle Sugimoto-Matsuda is the Taskforce's advocacy coordinator, and can be reached at junesugi88@gmail.com or (808) 291-9930.

Thank you, once again, for prioritizing suicide prevention in our local communities; promoting hope, help and healing; and most importantly, *PASSING LIFE FORWARD*.

With Deepest Aloha,



Gina Kaulukukui
Current Co-Chair, State PSHTF



Deborah Goebert, DrPH
Current Co-Chair, State PSHTF



Jeanelle Sugimoto-Matsuda, DrPH
Immediate Past Co-Chair, State PSHTF
Taskforce Advocacy Coordinator



Brent Oto, MA, CPS
Immediate Past Co-Chair, State PSHTF
Taskforce military representative



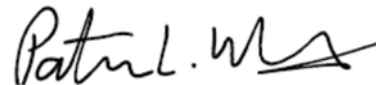
Danielle Bergan
Co-Chair, E Ola Hou Prevent Suicide Maui County Taskforce



Kristin Mills, MS, MA
Co-Chair, E Ola Hou Prevent Suicide Maui County Taskforce



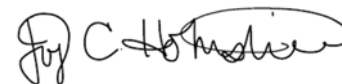
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