

EXECUTIVE CHAMBERS HONOLULU

DAVID Y. IGE GOVERNOR

February 24, 2017

TO: The Honorable Senator Jill N. Tokuda, Chair

Senate Committee on Ways and Means

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

SUBJECT: SB 347- RELATING TO MOBILE CLINICS

Hearing: Friday, February 24, 2017, 1:35 p.m.

Conference Room 211, State Capitol

<u>POSITION</u>: The Governor's Coordinator on Homelessness appreciates the intent of this measure and offers comments. Existing outreach service providers already provide similar services, and the Coordinator asks the Legislature to support the Governor's Executive Budget request that support these services, particularly \$1.5 million in additional funding for homeless outreach; \$1 million for homeless individuals with serious and persistent mental health challenges; and \$800,000 for outreach and counseling services for chronically homeless persons with severe substance use disorders.

<u>PURPOSE</u>: The purpose of the bill is to appropriate funds to the Department of Human Services (DHS) for establishing, staffing, and operating two mobile clinics to serve the homeless population.

DHS Homeless Programs Office (HPO) currently contracts homeless outreach services with providers statewide, some of which offer mobile health services that are partially funded through private and other government sources. In general, homeless outreach providers help connect unsheltered homeless individuals with basic needs, including medical care. For example, the Institute for Human Services homeless outreach team includes a nurse and a psychiatrist to address medical needs.

However, outreach is about more than just medical care, and is essential to meet unsheltered homeless households in the community and to build rapport that connects them to housing and services, such as Housing First, Rapid Rehousing, or shelter.

Outreach workers provide a comprehensive array of services, including completing applications for housing and services, housing search, and obtaining identification and other necessary documents. Without the assistance of homeless outreach, many homeless individuals are unable to access care and unable to navigate Hawaii's system of homeless services.

In addition to homeless outreach provided by HPO contracted providers, the Department of Health (DOH) is requesting funding in the Executive Budget for targeted mental health and substance use treatment services for the unsheltered homeless population. These services are part of the State's comprehensive framework to address homelessness, which includes a focus on three primary leverage points – affordable housing, health and human services, and public safety. All three of these leverage points must be addressed to continue forward momentum in addressing the complex issue of homelessness. The Executive Budget specifically increases resources for outreach, mental health and substance use treatment, as well as addressing housing costs through programs such as Housing First, Rapid Rehousing, and the State Rent Supplement.

Thank you for the opportunity to testify on this bill.



PANKAJ BHANOT DIRECTOR

BRIDGET HOLTHUS
DEPUTY DIRECTOR

STATE OF HAWAII DEPARTMENT OF HUMAN SERVICES

P. O. Box 339 Honolulu, Hawaii 96809-0339

February 24, 2017

TO: The Honorable Senator Jill N. Tokuda, Chair

Senate Committee on Ways and Means

FROM: Pankaj Bhanot, Director

SUBJECT: SB347 - RELATING TO MOBILE CLINICS

Hearing: Friday, February 24, 2017, 1:35 p.m.

Conference Room 211, State Capitol

DEPARTMENT'S POSITION: The Department of Human Services (DHS) appreciates the intent of this measure and provides comments. DHS respectfully requests that the Legislature support the Governor's budget request of \$1.5 million in additional funding for homeless outreach.

<u>PURPOSE</u>: The purpose of the bill is to appropriate \$1.4 million in general funds to establish, staff, and operate two mobile clinics to serve the homeless population.

DHS Homeless Programs Office (HPO) currently contracts homeless outreach services with providers statewide, which may include health services. The primary purpose of outreach providers is to connect unsheltered homeless individuals to assistance with basic needs and to access medical care.

While two mobile clinics may be worthy additions to the array of homeless services, the proposed \$1.4 million appropriation would adversely impact the Governor's budget request of \$1.5 million for homeless outreach services. While statistics for state fiscal year (SFY) 2016 are pending, in SFY 2015, state-funded outreach programs served 8,030 homeless people statewide. The current goal is to increase outreach services as outreach is essential to meet unsheltered homeless households in the community and to build rapport that connects

them to housing and services, such as Housing First, Rapid Rehousing, or shelter. Outreach workers provide a comprehensive array of services, including completing applications for housing and services, housing search, and obtaining identification and other necessary documents. Without the assistance of homeless outreach, many homeless individuals are unable to access care and unable to navigate Hawaii's system of homeless services.

Without detail as to how many clients a mobile clinic could serve in a year or information about associated operational and the professional administrative costs, we are currently unable to compare and respectfully ask for the Legislature's support of the Governor's executive budget request of \$1.5 million for statewide outreach services.

Additionally, the proposal contemplates the delivery of medical services and identifies a minimum staff of a doctor, nurse, pharmacist, and a psychiatrist. DHS HPO does not procure professional medical services, the committee may want to consult with the Department of Health who would be better able to provide the relevant administrative information.

Thank you for the opportunity to testify on this bill.



To: The Honorable Jill N. Tokuda, Chair

The Honorable Donovan M. Dela Cruz, Vice Chair

Members, Committee on Ways and Means

From: Paula Yoshioka, Senior Vice President, The Queen's Health Systems

Date: February 22, 2017

Hrg: Senate Committee on Ways and Means Decision Making; Friday, February 24, 2017 at

1:35PM in Room 211

Re: Support for SB 347, Relating to Mobile Clinics

My name is Paula Yoshioka, and I am a Senior Vice President at The Queen's Health Systems (QHS). I would like to express my **support** for SB 347, Relating to Mobile Clinics. This bill would appropriate \$1.4 million in fiscal years 2018 and 2019 respectively to purchase, staff, and operate two mobile clinics to service the homeless population.

At QHS we are committed to providing care for Hawaii's most underserved. This legislation recognizes the great cost that many health care providers take on to care for this vulnerable and underserved population. The costs to the entire continuum of care—from hospitals to long-term care facilities to home-based services—of treating the homeless population are large and growing. Mobile clinics would help to provide needed non-emergency medical care to homeless individuals in the community. Preventive services assist with mitigating many illnesses and go a long way to reducing the demand for high cost medical services down the road.

QHS shoulders majority of the burden of care for our homeless population in Hawaii. The Hawaii Health Information Corporation (HHIC) reports that our hospitals provided 64 percent of the care for homeless individuals with 10,459 encounters in FY15 as opposed to 5,381 encounters by all other facilities. Over 90 percent of the care QHS provided occurred in the emergency room setting. QHS experienced a net loss of \$10.6 million in FY15 providing unfunded and underfunded care for homeless patients.

I commend the legislature for introducing this measure and urge you to support it. Thank you for your time and attention to this important issue.



February 24, 2017 at 1:35pm Conference Room 211

Senate Committee on Ways and Means

To: Senator Jill N. Tokuda, Chair

Senator Donovan M. Dela Cruz, Vice Chair

From: Michael Robinson

Vice President – Government Relations & Community Affairs

Re: SB 347 – Relating to Mobile Clinics: Testimony in Support

My name is Michael Robinson, Vice President, Government Relations and Community Affairs at Hawai'i Pacific Health (HPH). Hawai'i Pacific Health is a not-for-profit health care system, and the state's largest health care provider and non-governmental employer. Hawai'i Pacific Health is committed to providing the highest quality medical care and service to the people of Hawai'i and the Pacific Region through its four hospitals, more than 50 outpatient clinics and service sites, and over 1,600 affiliated physicians. Hawai'i Pacific Health's hospitals are Kapi'olani Medical Center for Women & Children, Pali Momi Medical Center, Straub Clinic & Hospital and Wilcox Memorial Hospital.

On behalf of Hawai'i Pacific Health, I write to testify in support of SB 347 which appropriates funds to establish, staff, and operate two mobile clinics to serve the homeless population.

Mobile clinics provide valuable preventative and primary care to the homeless population. Roughly two thirds of homeless individuals in Hawai'i relied on MedQuest to pay for health care services. Barriers to health care such as lack of insurance, housing, transportation, and primary care physicians result in the over-use of high-cost hospital emergency facilities as well as EMS. The homeless population's limited access to preventative and primary health care also results in many individuals waiting to seek treatment until their health conditions have reached extreme stages. The severity of homeless people's health conditions could be prevented and costs to the state minimized if mobile clinics offered basic preventative and primary care to O'ahu's homeless population.

For example, Waikiki Care-A-Van was meeting these needs of some of Oʻahu's homeless population. Though the State funding for that organization has been pulled, the need remains. Hawaiʻi Pacific Health understands that our State is focusing on housing first, but until we reach our goal of providing housing to all homeless individuals, it is important to choose the most cost-effective ways of providing access to health care. SB 347 improves access to health care for our homeless population and

decreases the cost to the State and to hospitals for providing necessary health care services.

Thank you for the opportunity to testify in support of SB 347.

HAWAII YOUTH SERVICES NETWORK

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Rick Collins, President

Judith F. Clark, Executive Director

Bay Clinic

Big Brothers Big Sisters of

Hawaii

Bobby Benson Center

Central Oahu Youth Services

Association

Child and Family Service

Coalition for a Drug Free Hawaii

Domestic Violence Action Center

EPIC, Inc.

Family Programs Hawaii

Family Support Hawaii

Hale Kipa, Inc.

Hale 'Opio Kauai, Inc.

Hawaii Student Television

Ho'o

Hui Malama Learning Center

Kokua Kalihi Valley

Life Foundation

Marimed Foundation

Maui Youth and Family Services

P.A.R.E.N.T.S., Inc.

Parents and Children Together

(PACT)

Planned Parenthood of the

Great Northwest and

Hawaiian Islands

Salvation Army Family

Intervention Services

Sex Abuse Treatment Center

Susannah Wesley Community

Center

The Catalyst Group

Uhane Pohaku Na Moku

O Hawai`i

Waikiki Health

February 22 2017

Senator Jill Tokuda, Chair, And members of the Committee on Ways and Means

Testimony in Support of SB 347 Relating to Mobile Clinics

Hawaii Youth Services Network, a statewide coalition of youth-serving organizations, supports SB 347 Relating to Mobile Clinics.

Hawaii's homeless population includes runaway and homeless youth who are living on the streets without support or guidance from their families. More than 40% were thrown out of their homes by their families. They are the most vulnerable segment of our homeless population because they are <u>children</u> who have not completed their education, lack employment experience, and have not yet learned the skills for adult living.

Homeless youth experience significant health challenges with which mobile clinics could assist. Compared to their peers, they are:

- Twice as likely to get sick, be hospitalized, and go hungry.
- 7 times as likely to die from AIDS; 16 times as likely to be diagnosed with HIV.
- About 50% of street youth have had a pregnancy experience.

Mobile clinics could improve access to health care for homeless youth, for injuries and infections as well as preventive health care, such as immunizations.

Thank you for this opportunity to testify.

Sincerely,

Judith F. Clark, MPH Executive Director

Justito F. Clark







Hawai'i Psychological Association

For a Healthy Hawai'i

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Committee On Ways and Means Senator Jill Tokuda, Chair Senator Donovan Dela Cruz, Vice Chair

Testimony in Support of SB347

Friday, February 24, 2017, 1:35 pm, Room 211

The Hawai'i Psychological Association (HPA) supports a modified version of SB347, which appropriates funds for establishing, staffing, and operating two mobile clinics to serve the homeless population.

The Hawaii Psychological Association strongly recommends inclusion of a clinical psychologist in the mobile clinic minimum staffing requirements. 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 Hawaii, it is unlikely that any will have the time to provide more than medication management to the homeless population. 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 required member of the mobile staff will significantly improve treatment outcome and success. We support the bill with this recommended modification.

Respectfully submitted,

Raymond A. Folen, Ph.D., ABPP Executive Director