

# EXECUTIVE CHAMBERS HONOLULU

DAVID Y. IGE GOVERNOR

February 7, 2017

TO: The Honorable Representative John M. Mizuno, Chair

House Committee on Health and Human Services

The Honorable Representative Tom Brower, Chair

House Committee on Housing

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

SUBJECT: **HB 1901 – RELATING TO HUMAN SERVICES** 

Hearing: Wednesday, February 7, 2018, 9:30 a.m.

Conference Room 329, State Capitol

**POSITION**: The Governor's Coordinator on Homelessness appreciates the intent of this bill, as it seeks to support ongoing efforts of the Department of Human Services (DHS) and Department of Health (DOH) to address homelessness, and offers the following comments.

<u>PURPOSE</u>: The purpose of the bill is to require DHS, in collaboration with DOH, to review the progress of the Hawaii Pathways Project pilot and continue to pursue efforts to utilize Medicaid to provide supportive housing services for chronically homeless individuals. In addition, the bill requires DHS to report to the legislature regarding the status of its efforts, including any proposed legislation, no later than twenty days prior to the convening of the regular session of 2019. The bill includes an appropriation for an unspecified amount, with a federal matching funds requirement, to be expended by DHS.

For the past three years, DHS and DOH have collaborated to implement the Hawaii Pathways Project, which is funded through a federal Cooperative Agreements to Benefit Homeless Individuals (CABHI) grant. The Hawaii Pathways Project provides case management and tenancy support services for high needs chronically homeless persons with co-occurring substance abuse and mental health concerns, and pairs these individuals with vouchers from

the state Housing First program and other Permanent Supportive Housing (PSH) voucher programs. A recent evaluation of the Hawaii Pathways Project by the University of Hawaii Center on the Family noted a high housing retention rate of 90%. At a six-month follow up with their case managers, Hawaii Pathways Project clients were more likely to report having social support for recovery compared to the time of program entry, and were less likely to report emergency room visits, criminal justice system involvement, and alcohol or drug use.

In addition to positive housing retention results, preliminary analysis of the State's Housing First clients participating in the Hawaii Pathways Project estimated through client report, that healthcare costs for clients dropped an average of 43% in the six months following housing placement – from an average of \$10,570 per client per month to \$5,980 per client per month. This preliminary data appears consistent with evaluation data for Housing First programs in other communities, which have been found to significantly reduce healthcare utilization and healthcare costs for chronically homeless persons over time. A Progress Report of the Hawaii Pathways Project by the University of Hawaii Center on the Family, can be found online at:

#### http://uhfamily.hawaii.edu/publications/brochures/4c755 HPP ProgressReport2016.pdf

The Coordinator continues to work closely with both DOH and the DHS Med-QUEST Division (MQD) to examine issues related to healthcare coverage for persons experiencing homelessness, and build upon the early success of the Hawaii Pathways Project. Specifically, MQD is currently looking to expand eligibility for case management and supportive services for Medicaid-eligible individuals that are identified as chronically homeless. By expanding Medicaid coverage, managed care health plans could potentially pick up some of the cost of homeless outreach activities that help people attain housing, and other activities to support a person's ability to maintain housing after placement. The Coordinator is also working with DHS and DOH homeless outreach providers to explore partnerships with other systems that serve as "touch points" for the homeless (e.g. the hospital system) to increase efficiency of outreach services by concentrating services at particular entry/exit points, such as when a person is discharged from a hospital emergency room.

Thank you for the opportunity to testify on this bill.



### STATE OF HAWAII DEPARTMENT OF HEALTH

P. O. Box 3378 Honolulu, HI 96801-3378 doh.testimony@doh.hawaii.gov

#### Testimony COMMENTING on H.B. 1901 RELATING TO HEALTH

# REPRESENTATIVE JOHN M. MIZUNO, CHAIR HOUSE COMMITTEE ON HEALTH & HUMAN SERVICES

### REPRESENTATIVE TOM BROWER, CHAIR HOUSE COMMITTEE ON HOUSING

Hearing Date: February 7, 2018 Room Number: 329

- 1 **Fiscal Implications:** Not determined
- 2 **Department Testimony:** The Department of Health (DOH) supports the intent of this measure.
- 3 The DOH continues to work with and defer to both the Department of Human Services (DHS)
- 4 and the Governor's Coordinator on Homelessness (Coordinator) to build upon the success of the
- 5 Hawaii Pathways Project and to address increased healthcare coverage and support services for
- 6 the chronically homeless.

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- The DOH defers to the DHS on the request to the Centers for Medicare and Medicaid
- 8 Services for an 1115 waiver to amend the Hawaii Medicaid Plan to include supportive housing
- 9 services as well as the need for an appropriation.
- The DOH is also currently awaiting the latest Progress Report on the Hawaii Pathways
- 11 Project, prepared by the University of Hawaii, Center on the Family. We hope to release the
- next Progress Report before the end of February, 2018. The current Report is available at:
- http://uhfamily.hawaii.edu/publications/brochures/4c755 HPP ProgressReport2016.pdf
- The DOH continues to follow the lead of the Coordinator to ensure that efforts are
- synchronized in support of the State's comprehensive framework to address homelessness across
- the system of care. The framework includes focus of efforts on three primary leverage points –
- affordable housing, health and human services, and public safety. This measure contains
- appropriations aimed at resourcing activities to conduct outreach to individuals and families with

- 1 multiple chronic conditions which align with plans developed between the DOH and the
- 2 Coordinator. The DOH recognizes that additional resources may be necessary to expand
- 3 services especially to target groups like homeless persons with addiction to drugs or alcohol and
- 4 individuals with severe mental illness. The DOH asks the Legislature's support of the
- 5 Governor's Executive Budget request which includes appropriations to the DOH for outreach
- 6 services to homeless persons with severe and persistent mental illness, and outreach, counseling,
- 7 and diversion services for unsheltered homeless persons experiencing substance abuse. The
- 8 DOH requests that any appropriations resulting from this bill do not supplant or replace priorities
- 9 requested in the Executive Budget.
- Thank you for the opportunity to provide testimony.

PANKAJ BHANOT DIRECTOR

CATHY BETTS
DEPUTY DIRECTOR

### STATE OF HAWAII DEPARTMENT OF HUMAN SERVICES

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

February 6, 2018

TO: The Honorable Representative John M. Mizuno, Chair

House Committee on Health and Human Services

The Honorable Representative Tom Brower, Chair

House Committee on Housing

FROM: Pankaj Bhanot, Director

SUBJECT: HB 1525 – RELATING TO HUMAN SERVICES

Hearing: Wednesday, February 7, 2018 9:30 a.m.

Conference Room 329, State Capitol

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

PURPOSE: The purpose of this bill requires DHS, in collaboration with the Department of Health (DOH), to review the progress of the Hawaii pathways project pilot and continue to pursue efforts to utilize Medicaid to provide supportive housing services for chronically homeless individuals. Provides considerations for DHS in planning for the expansion of supportive housing services provided through Medicaid managed care plans. Requires DHS to report to the legislature. Makes an appropriation.

DHS appreciates the intent of the measure to support our ongoing efforts to address needs of the chronically homeless population. For background, in 2013 DHS Homeless Programs Office (HPO) collaborated with the DOH in its initial application to the Substance Abuse and Mental Health Services Administration (SAMHSA) for federal funds for the Hawaii Pathways Project (HPP). By leveraging HPO Housing First Rental subsidies with

the SAMHSA grant funds, DOH developed the intensive level of care and support services provided to HPP clients.

To sustain Pathways/Housing First project, as noted in the bill, DHS Med-QUEST division (MQD) has been working with the DOH and others in building on the successful efforts of the Hawaii Pathways pilot project. DHS worked with DOH Alcohol and Substance Use Division, DOH Adult Mental Health Division, Hawaii Public Housing Authority, Hawaii Housing and Financing Development Corporation, and the Governor's Coordinator on Homelessness for over a year to prepare an amendment to our 1115 Medicaid waiver to address supportive services for the chronically homeless. The document outlines the details of the proposed population to be served as well as the services. After this collaborative effort, a waiver amendment has already been submitted to the Centers for Medicare and Medicaid Services (CMS) as of August 29, 2017, and the request is pending with CMS.

Thus, the bill requirement to apply to CMS for an amendment to our waiver to target supportive housing services for the chronically homeless population (Section 2 (a) – (b)(5)) has largely been done. MQD can make available today the waiver amendment to this committee, and here is a link to the document:

#### **QUEST Housing Support Waiver amendment 9-2017.**

Since the waiver amendment has already been submitted, the outlines of the types of services and the populations to be served have already been set. Any additional report is redundant since we already have the waiver amendment that includes the proposed services.

Finally, we are not requesting any dollars or appropriation for providing these services since they pay for themselves in a short period of time. Thus, no additional appropriation or funds are needed.

In sum, while we greatly appreciate the support for our efforts, and at this time we do not believe that a bill is necessary since we have already undertaken most if not all of the requirements.

Thank you for the opportunity to provide comments on this measure.

#### HB-1901

Submitted on: 2/5/2018 9:51:15 PM

Testimony for HHS on 2/7/2018 9:30:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Melodie Aduja	OCC Legislative Priorities	Support	No

Comments:

#### PRESENTATION OF THE

# OAHU COUNTY COMMITTEE ON LEGISLATIVE PRIORITIES DEMOCRATIC PARTY OF HAWAII

TO THE COMMITTEE ON HEALTH & HUMAN SERVICES

AND

**COMMITTEE ON HOUSING** 

**HOUSE OF REPRESENTATIVES** 

TWENTY-NINTH LEGISLATURE

**REGULAR SESSION OF 2018** 

Wednesday, February 7, 2018

9:30 a.m.

Hawaii State Capitol, Conference Room 329

RE: **Testimony in Support** of HB 1901, RELATING TO HUMAN SERVICES

To the Honorable John M. Mizuno, Chair; the Honorable Bertrand Kobayashi, Vice-Chair, and Members of the Committee on Health & Human Services:

To the Honorable Tom Brower, Chair; the Honorable Nadine K. Nakamura, Vice-Chair, and Members of the Committee on Housing:

Good morning. My name is Melodie Aduja. I serve as Chair of the Oahu County Committee ("OCC") Legislative Priorities Committee of the Democratic Party of Hawaii. Thank you for the opportunity to provide written testimony on House Bill No. 1901, regarding the Hawaii pathways project pilot and Medicaid,

The OCC Legislative Priorities Committee is in favor of House Bill No. 1901 and support its passage.

House Bill No.1901 is in accord with the Platform of the Democratic Party of Hawai'i ("DPH"), 2016, as it provides that the department of human services, in collaboration with the department of health, shall review the progress of the Hawaii pathways project pilot and continue to pursue efforts to utilize Medicaid to provide supportive housing services for chronically homeless individuals.

Specifically, the DPH Platform provides that we "believe in the concept of "Housing First" to develop affordable, stable housing and support services to break the cycle of homelessness for people with the fewest housing options.

We support dedicated social services and housing opportunities for Hawaii's homeless population to get them off the streets and reintegrated into society, with specific devoted services for disenfranchised groups including but not limited to, the Hawaiian community, aged-out foster kids, youth, returning veterans, the aged, and lesbian, gay, bisexual and transgender homeless." (Platform of the DPH, P. 7, Lines 352-358 (2016)).

Given that House Bill No.1901 provides for the continuation and expansion of the Hawaii pathways project pilot, it is the position of the OCC Legislative Priorities Committee to support this measure.

Thank you very much for your kind consideration.

Sincerely yours,

/s/ Melodie Aduja

Melodie Aduja, Chair, OCC Legislative Priorities Committee

Email: legislativeprorities@gmail.com, Tel.: (808) 258-8889



February 7, 2018

The Honorable John M. Mizuno, Chair House Committee on Health and Human Services

The Honorable Tom Brower, Chair House Committee on Housing

Re: HB 1901 – Relating to Human Services

Dear Chair Mizuno, Chair Brower, and Members of the Committees:

The Hawaii Medical Service Association (HMSA) supports the intent of HB 1901, which requires DHS, in collaboration with DOH, to review the progress of the Hawaii pathways project pilot and continue to pursue efforts to utilize medicaid to provide supportive housing services for chronically homeless individuals, and provides considerations for DHS in planning for the expansion of supportive housing services provided through medicaid managed care plans.

HMSA appreciates and supports the intent of this Bill. We have worked closely with the State Department of Health's Hawaii Pathway Project to help provide housing and services to the chronically homeless with behavioral health problems. Likewise, we have taken part in the DHS Med-QUEST division's efforts to develop and implement a supportive housing system via the 1115 waiver process; we applaud this work and continue to support similar efforts as suggested in HB 1901.

Thank you for allowing us to provide comments on HB 1901.

Sincerely,

Pono Chong

Vice-President, Government Relations



To: The Honorable John M. Mizuno, Chair

The Honorable Bertrand Kobayashi, Vice Chair Members, Committee on Health and Human Services

The Honorable Tom Brower, Chair

The Honorable Nadine K. Nakamura, Vice Chair

Members, Committee on Housing

From: Paula Yoshioka, Vice President, Government Relations and External Affairs, The

Queen's Health Systems

Date: February 6, 2018

House Committee on Health and Human Services and Committee on Housing Joint Hrg:

Hearing; Wednesday, February 7, 2018 at 9:30 AM in Room 329

Support for H.B. 1901, Relating to Human Services Re:

My name is Paula Yoshioka, and I am a Vice President at The Queen's Health Systems (Queen's). I would like to express my support for H.B. 1901, Relating to Human Services. The bill would support the current efforts by the Department of Human Services to provide supportive housing services for individuals who are chronically homeless and have a behavioral or physical illness or a substance abuse diagnosis.

The mission of Queen's is to provide quality health care services to improve the well-being of Native Hawaiians and all the people of Hawaiii, which includes our most vulnerable and underserved patient populations like the homeless. Hawaii 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 An upwards of 64% of all hospital visits by the homeless are at Queen's, where care is delivered at partial or no reimbursement.

There is a high utilization of Emergency Department (ED) resources by homeless individuals for non-emergent needs. Many of our homeless patients are Super Utilizers of the ED and suffer from mental health and substance abuse issues.<sup>3</sup> Queen's believes that increasing coordinated care services for our homeless patients and connecting them to community resources such as supportive housing services, social services, behavioral health, etc. will address underlying issues that may stem from their unique circumstances. Therefore, we respectfully request consideration for the inclusion of the Emergency Department Homelessness Assessment Pilot Program from H.B. 1761 into the bill.

<sup>&</sup>lt;sup>1</sup> The Department of Housing and Urban Development, "The 2017 Annual Homeless Assessment Report (AHAR) to Congress", December 2017

<sup>&</sup>lt;sup>2</sup> State of Hawaii, Homeless Point-in-Time Count, January 22, 2017

<sup>&</sup>lt;sup>3</sup> HHIC Special Homeless Project, 2016

Queen's believes that community partnerships to provide medical respite is critical in the healing process for our homeless patients, who require additional time to recover in a more appropriate level of care setting after their acute care treatment. We would appreciate the committee's consideration of establishing a pilot program for medical respite care for the chronically homeless to leverage community-based resources to deliver care coordination and navigation in a cost-effective manner. Those who experience homelessness deserve to have access to community resources and the care they need in more appropriate settings.

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. There are still unmet needs for our homeless patients and while Queen's has been a leader in care coordination, we know that much more needs to be done within the community to close the gaps in services and supports for our homeless population. Thank you for your time and attention to this important issue.