HOUSE OF REPRESENTATIVES THIRTIETH LEGISLATURE, 2020 STATE OF HAWAII H.B. NO. ²⁵²⁵ H.D. 2

A BILL FOR AN ACT

RELATING TO HOMELESSNESS.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF HAWAII:

1 SECTION 1. The legislature finds that the State has one of 2 the highest rates of homelessness per capita in the nation. 3 Additionally, the legislature finds that The Queen's Medical 4 Center provides the majority of medical care to the State's homeless population. According to the Laulima Data Alliance, 5 6 from January 2016 to September 2018, The Queen's Medical Center 7 experienced approximately sixty per cent of all homeless visits 8 on Oahu and forty-three per cent of all homeless visits in the 9 State.

Recognizing the high needs of the State's most medically
fragile homeless populations, the legislature established the
emergency department homelessness assessment pilot program and
the medical respite pilot program through Act 209, Session Laws
of Hawaii 2018. Through contracts with the department of human
services, The Queen's Medical Center was able to provide medical
respite services and intense care navigation services to



patients experiencing homelessness or patients at risk of
 experiencing homelessness.

3 Through the emergency department homelessness assessment 4 pilot program, the Queen's Care Coalition was able to identify 5 homeless patients with high utilization of emergency department 6 services and deliver short-term, post-discharge navigation 7 services to special populations to reduce reliance on acute care 8 by connecting patients to community services. The Queen's Care 9 Coalition provided one hundred thirty-one homeless adults with 10 navigation services during the contract period of September 1, 11 2018, to June 30, 2019. Of the homeless adults served:

- 12 (1) Ninety-four per cent were connected with community
 13 resources;
- 14 (2) Sixty-five per cent were document ready for housing;15 and
- 16 (3) Ninety-two per cent of the individuals that were
 17 connected to permanent housing were able to maintain
 18 their permanent housing after three months.
- 19 The emergency department homelessness assessment pilot program,20 as executed by the Queen's Care Coalition, was able to reduce:

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1	(1)	The number of unnecessary emergency department visits	
2		by thirty-nine per cent;	
3	(2)	The number of hospitalized days by seventeen per cent;	
4		and	
5	(3)	The amount of ambulance utilization by fifty-three per	
6		cent.	
7	The	legislature further finds that Queen's Care Coalition	
8	had signi	ficant cost saving to three major Med-QUEST managed	
9	care plan	as. Analysis on total cost of care pre- and post-	
10	Queen's Care Coalition has found an average of thirty-nine per		
11	cent reduction in total cost of care.		
12	The National Health Care for the Homeless Council		
13	recognizes medical respite as a needed service and response to		
14	the circumstances that people experiencing homelessness face.		
15	These individuals suffer profound disparities in health and		
16	mortality compared to the general population. After an acute		
17	care stay, recovery is extremely difficult on the streets, while		
18	shelters generally are not equipped to support people who are		
19	sick or injured.		

20 The need for medical respite care for individuals21 experiencing homelessness is a critical part of the continuum of

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care for this population. Through a partnership with the
 Institute for Human Services, The Queen's Medical Center is able
 to provide medical respite to homeless patients who have been
 discharged and may need additional time to heal in a more
 appropriate level of care setting.

The legislature also finds that the emergency department 6 7 homelessness assessment pilot program has demonstrated positive 8 results in delivering care coordination services, by a multidisciplinary team, to mitigate the number of unnecessary 9 10 emergency department visits by patients experiencing 11 homelessness or patients at risk of experiencing homelessness 12 and merits continuation. Additionally, the legislature finds 13 that the medical respite pilot program has demonstrated positive 14 results in delivering medical respite services for eligible 15 individuals experiencing homelessness by providing services such 16 as meals; case management; and medical, nursing, and psychiatric 17 care and merits continuation.

18 Furthermore, the legislature finds that the department of 19 human services supports the continuation of both programs and is 20 in the process of transitioning the programs from the

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department's homeless program office to the department's Med QUEST division.

Finally, the legislature notes that given that the pilot programs' funding ends on June 30, 2020, additional supports are necessary to ensure no lapse in resources for the emergency department homelessness assessment pilot program and medical respite pilot program, as they are transitioned to the Med-QUEST division.

9 The purpose of this Act is to:

10 (1) Extend the duration of the emergency department
11 homelessness assessment pilot program and medical
12 respite pilot program to December 31, 2021; and
13 (2) Appropriate funds for the pilot programs.
14 SECTION 2. Act 209, Session Laws of Hawaii 2018, section
15 7, as amended by Act 128, Session Laws of Hawaii 2019, section

16 1, is amended as follows:

17 1. By amending subsection (c) to read:

18 "(c) The department of human services shall work with the 19 participating hospital under the emergency department 20 homelessness assessment pilot program to collect and analyze 21 data to be included in a report that contains a summary and



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explanation of the data regarding the efficacy of emergency 1 department intervention by the multidisciplinary team in 2 mitigating the number of unnecessary emergency department visits 3 4 by patients experiencing homelessness or patients at risk of 5 experiencing homelessness. The report shall contain findings 6 and recommendations, including any proposed legislation, for 7 continuation, modification, or termination of the pilot program. The department of human services shall submit the report to the 8 legislature no later than twenty days prior to the convening of 9 the regular [session] sessions of 2020[-] and 2021." 10 11 2. By amending subsection (e) to read: "(e) The emergency department homelessness assessment 12 13 pilot program shall cease to exist on [June 30, 2020.] December 14 31, 2021." 15 SECTION 3. Act 209, Session Laws of Hawaii 2018, section 9, as amended by Act 128, Session Laws of Hawaii 2019, section 16 17 1, is amended as follows: 18 1. By amending subsection (c) to read: 19 "(c) The department of human services shall submit a 20 report to the legislature of its findings and recommendations, including any proposed legislation, regarding the pilot program 21



1 no later than twenty days prior to the convening of the regular 2 [session] sessions of 2020[-] and 2021." 3 2. By amending subsection (e) to read: 4 "(e) The medical respite pilot program shall cease to 5 exist on [June 30, 2020.] December 31, 2021." 6 SECTION 4. There is appropriated out of the general 7 revenues of the State of Hawaii the sum of \$ or so 8 much thereof as may be necessary for fiscal year 2020-2021 for 9 the department of human services to continue the emergency 10 department homelessness assessment pilot program; provided that: 11 (1)The department of human services shall reimburse the 12 participating hospital for expenses directly related 13 to the emergency department homelessness assessment 14 pilot program; 15 (2) No funds shall be disbursed to a participating 16 hospital unless matched on a dollar-for-dollar basis 17 by the participating hospital; and 18 (3) All funds designated as matching funds by the 19 participating hospital shall be funds expended by the 20 participating hospital for the pilot program.



1	The s	sum appropriated shall be expended by the department of	
2	human services for the purposes of this Act.		
3	SECTION 5. There is appropriated out of the general		
4	revenues c	of the State of Hawaii the sum of \$ or so	
5	much thereof as may be necessary for fiscal year 2020-2021 for		
6	the department of human services to continue the medical respite		
7	pilot program; provided that:		
8	(1)	The department of human services shall reimburse a	
9		participating hospital for expenses directly related	
10		to the medical respite pilot program;	
11	(2)	No funds shall be disbursed to a participating	
12		hospital unless matched on a dollar-for-dollar basis	
13		by the participating hospital; and	
14	(3)	All funds designated as matching funds by the	
15		participating hospital shall be funds expended by the	
16		participating hospital for the pilot program.	
17	The s	sum appropriated shall be expended by the department of	
18	human services for the purposes of this Act.		
19	SECTION 6. Statutory material to be repealed is bracketed		
20	and stricken. New statutory material is underscored.		



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SECTION 7. This Act shall take effect on December 31,
 2059; provided that sections 4 and 5 shall take effect on July
 1, 2020.



Report Title:

DHS; Emergency Department Homelessness Assessment Pilot Program; Medical Respite Pilot Program; Appropriation

Description:

Extends the emergency department homelessness assessment pilot program and medical respite pilot program to December 31, 2021. Appropriates funds. Effective December 31, 2059. (HD2)

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