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JAN 2 3 2020

A BILL FOR AN ACT

RELATING TO THE TRANSITION OF THE OAHU REGIONAL HEALTH CARE SYSTEM FROM THE HAWAII HEALTH SYSTEMS CORPORATION INTO THE DEPARTMENT OF HEALTH.

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

1	PART I
2	SECTION 1. The legislature finds that the Hawaii health
3	systems corporation is comprised of five semi-autonomous health
4	care regions within the State, including east Hawaii, west
5	Hawaii, Kauai, Oahu, and Maui. The Maui region no longer
6	operates any health care facilities.
7	The legislature further finds that the Oahu region is
8	unique and distinguishable from the other regions due to the
9	logistical complexities of the facilities in the Oahu region and
10	the limited but crucial nature of the services these facilities,
11	Leahi hospital and Maluhia, currently provide. Because the Oahu
12	facilities almost exclusively serve long-term care and medicaid
13	patients, groups traditionally underserved by private facilities
14	because of the high cost of their care, the Oahu region's long-
15	term care operations are run more as a safety-net social service



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and, compared to the other regions, have less opportunity for
 additional revenue generation.

While the need for long-term care beds on Oahu has 3 decreased in recent years, a study completed by the department 4 of business, economic development, and tourism has projected 5 that the population aged sixty-five and older will grow by one 6 7 hundred forty-eight per cent over the next twenty-five years. On Oahu, this translates to an estimated shortfall of one 8 9 thousand one hundred long-term care beds in the next five to ten years alone. Thus, despite the costs of long-term care, it is 10 11 vital that state facilities continue to operate to ensure that 12 beds remain available for our aging population.

Similar to the Oahu region, the department of health 13 operates the Hawaii state hospital, a facility that does not 14 15 generate revenue, but is nonetheless necessary to provide care and treatment for mentally ill patients in Hawaii. In recent 16 17 years, the Hawaii state hospital has experienced a challenge in providing sufficient bed space for admitted patients. As of 18 September 2019, two hundred twenty-six patients - well over the 19 20 maximum capacity of two hundred two - occupied beds at the 21 Hawaii state hospital. To meet its needs, the Hawaii state



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hospital was also required to contract with Kahi Mohala, a
 privately-run facility, to care for an additional forty-six
 patients.

Beyond the Hawaii state hospital, the department of health 4 has also been charged with addressing the significant gap in the 5 6 behavioral health care system between acute psychiatric care facilities and low acuity residential treatment. Data collected 7 in the State estimates that more than half of all individuals 8 experiencing a mental health crisis, or fifty-four per cent, 9 10 have needs that align better with services delivered within a subacute level of care facility rather than an emergency room. 11 Subacute residential stabilization services have been a 12 13 missing component of a comprehensive behavioral health continuum of care, which would bridge the gap between acute 14 15 hospitalization and lower level residential and community 16 resources. Many individuals who are taken to the emergency room 17 on an MH-1, or for emergency examination and hospitalization, are often not acute enough in their illness to warrant 18 psychiatric hospitalization. On the other hand, their 19 20 symptomology is too acute for them to be admitted to a group home, shelter, or other existing low acuity residential program, 21



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or, if they are admitted, they are often unsuccessful in those 1 environments. More often than not, they fail because they have 2 3 not had time to stabilize in an environment where they can be closely monitored. This lack of post-acute care contributes to 4 the poor outcomes of both acute behavioral health inpatient and 5 6 community-based services because many individuals are not 7 appropriate for either level, but fall somewhere in the middle. In its efforts to address the need for subacute residential 8 9 stabilization services, the department of health recognized the 10 lack of state facilities within the department that could be 11 utilized for this purpose. Through discussions with the Oahu Hawaii health systems corporation region, however, it was 12 13 determined that some of the facilities in the Oahu region, particularly at Leahi hospital, are currently underutilized and 14 15 have the potential to be re-purposed for other important health

16 care and social service needs.

17 The legislature further finds that, while statutorily tied 18 to the Hawaii health systems corporation, the Oahu region 19 operates mostly autonomously and its functions - including 20 target population - are unique from those of the other regional 21 health care systems. As such, there is little necessity to keep



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the facilities of the Oahu region as a part of the Hawaii health 1 systems corporation. With proper planning and implementation, 2 the Oahu region facilities could be strategically assimilated 3 into the department of health and its facilities could be used -4 in addition to long-term care - to help alleviate the need for 5 subacute residential mental health stabilization and other 6 7 subacute care services. 8 The purpose of this Act is set a date for the transition of 9 the Oahu region's health care facilities from the Hawaii health 10 systems corporation to the department of health and to establish a working group by and between the Oahu Hawaii health systems 11 12 corporation region and department of health that shall be 13 responsible for developing a comprehensive plan to address all 14 necessary components of such transition. 15 PART II 16 SECTION 2. Section 323F-2, Hawaii Revised Statutes, is 17 amended by amending subsection (b) to read as follows: 18 "(b) The corporate organization shall be divided into 19 [five] four regional systems, as follows: 20 [(1) The Oahu regional health care system; 21 (2) (1) The Kauai regional health care system;



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1	[(3)]	(2) The Maui regional health care system;
2	[-(4)]	(3) The east Hawaii regional health care system,
3		comprising the Puna district, north Hilo district,
4		south Hilo district, Hamakua district, and Kau
5		district; and
6	[(5)]	(4) The west Hawaii regional health care system,
7		comprising the north Kohala district, south Kohala
8		district, north Kona district, and south Kona
9		district;
10	and shall	be identified as regional systems I, II, III, <u>and</u> IV,
11	[and V,]	respectively."
12	SECT	ION 3. Section 323F-3, Hawaii Revised Statutes, is
13	amended by	y amending subsection (b) to read as follows:
14	"(b)	The members of the corporation board shall be
15	appointed	as follows:
16	(1)	The director of health as an ex officio, voting
17		member;
18	(2)	The [five] three regional chief executive officers as
19		ex officio, nonvoting members;
20	(3)	Three members who reside in the county of Maui, two of
21		whom shall be appointed by the Maui regional system



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board and one of whom shall be appointed by the 1 governor, all of whom shall serve as voting members; 2 Two members who reside in the eastern section of the 3 (4)county of Hawaii, one of whom shall be appointed by 4 the East Hawaii regional system board and one of whom 5 shall be appointed by the governor, both of whom shall 6 7 serve as voting members; Two members who reside in the western section of the 8 (5) 9 county of Hawaii, one of whom shall be appointed by the West Hawaii regional system board and one of whom 10 11 shall be appointed by the governor, both of whom shall serve as voting members; 12 Two members who reside on the island of Kauai, one of 13 (6) whom shall be appointed by the Kauai regional system 14 board and one of whom shall be appointed by the 15 16 governor, both of whom shall serve as voting members; 17 [(7) Two-members who reside on the island-of Oahu, one of 18 whom shall be appointed by the Oahu regional system 19 board and one of whom shall be appointed by the 20 governor, both of whom shall serve as voting members;] 21 and



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[(8)] (7) One member who shall be appointed by the governor 1 2 and serve as an at-large voting member. 3 The appointed board members who reside in the county of Maui, eastern section of the county of Hawaii, western section 4 of the county of Hawaii, and on the island of Kauai [, and on the 5 island of Oahu] shall each serve for a term of four years; 6 7 provided that the terms of the initial appointments of the members who are appointed by their respective regional system 8 9 boards shall be as follows: one of the initial members from the 10 county of Maui shall be appointed to serve a term of two years and the other member shall be appointed to serve a term of four 11 years; the initial member from East Hawaii shall be appointed to 12 13 serve a term of two years; the initial member from West Hawaii 14 shall be appointed to serve a term of four years; and the initial member from the island of Kauai shall be appointed to 15 16 serve a term of two years; [and the initial member from the 17 island of Oahu shall be appointed to serve a term of four vears;] and provided further that the terms of the initial 18 19 appointments of the members who are appointed by the governor 20 shall be four years. The at-large member appointed by the 21 governor shall serve a term of two years.



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Any vacancy shall be filled in the same manner provided for 1 the original appointments. The corporation board shall elect 2 its own chair from among its members. Appointments to the 3 corporation board shall be as representative as possible of the 4 system's stakeholders as outlined in this subsection. The board 5 member appointments shall strive to create a board that includes 6 expertise in the fields of medicine, finance, health care 7 8 administration, government affairs, human resources, and law." 9 PART III 10 There is established a working group SECTION 4. (a) 11 comprised of board members of the Oahu Hawaii health systems corporation region and representatives of the department of 12 health to develop, evaluate, and implement the steps necessary 13 14 to transition the Oahu regional health care system into the 15 department of health. 16 The working group shall consist of the following (b) 17 members: 18 (1)The director of health, or the director's designee, 19 who shall serve as co-chair;



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1	(2)	The chair of the Oahu regional health care system
2		board, or the chair's designee, who shall serve as co-
3		chair;
4	(3)	The chief executive officer of the Oahu regional
5		health care system, or the chief executive officer's
6		designee;
7	(4)	One representative from the behavioral health
8		administration of the department of health;
9	(5)	One representative from the department of human
10		resources development;
11	(6)	One representative from the department of accounting
12		and general services;
13	(7)	The chair of the Hawaii health systems corporation
14		board, or the chair's designee;
15	(8)	One representative from the Hawaii health systems
16		corporation human resources department;
17 ·	(9)	One representative from the Hawaii health systems
18		corporation finance department; and
19	(10)	Others as recommended by the co-chairs.
20	(C)	The working group shall be responsible to complete the
21	following	items as part of the transition plan:

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1 (1)Develop a statutory framework to govern the transition 2 of the Oahu regional health care system into the department of health that shall, where possible, 3 preserve the rights and exemptions that the Oahu 4 regional health care system enjoyed as a region within 5 the Hawaii health systems corporation; 6 Identify all real property, appropriations, records, 7 (2) 8 equipment, machines, files, supplies, contracts, 9 books, papers, documents, maps, and other property 10 made, used, acquired, or held by the Oahu regional health care system that will be transferred to the 11 12 department of health; Identify all debts and other liabilities that will 13 (3) 14 remain with the Hawaii health systems corporation and 15 those that will be transferred to the department of 16 health; Identify and resolve all contractual arrangements and 17 (4) 18 obligations, including but not limited to those 19 related to personal service contracts, vendor 20 contracts, and capital improvement projects;



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(5) Develop a comprehensive plan to transition all
 employees into the classification system of the
 executive branch and the department of health with due
 consideration of collective bargaining rights and
 civil service rules;

- 6 (6) Develop and implement any and all policies and
 7 procedures necessary to ensure that the facilities
 8 within the Oahu regional health care system remain
 9 compliant with all federal, state and local laws and
 10 regulations; and
- 11 (7) Develop a proposed budget for the Oahu regional health 12 care system during the transition period and a plan to 13 transfer all fiscal and accounting functions to the 14 department of health.

(d) Members of the working group shall serve without compensation but shall be reimbursed for reasonable expenses necessary for the performance of their duties, including travel expenses. No member of the working group shall be subject to chapter 84, Hawaii Revised Statutes, solely because of the member's participation in the working group.



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(e) Two or more members of the working group, but less 1 than the number of members which would constitute a quorum for 2 3 the working group, may discuss between themselves matters relating to official business of the working group to enable 4 them to faithfully perform their duties to the working group and 5 6 the organizations they represent, as long as no commitment to vote is made or sought. Such discussions shall be a permitted 7 interaction under section 92-2.5, Hawaii Revised Statutes. 8 9 The working group shall submit a report of its (f) 10 transition plan, including any proposed legislation, to the legislature no later than twenty days prior to the convening of 11 the regular session of 2021. 12 The transition plan shall be subject to the following 13 (q) 14 conditions: The attorney general shall approve the legality and 15 (1)form of any transition plan created by the working 16 group, and the director of finance shall evaluate and 17 approve any expenditure of public funds determined to 18 19 be in accordance with the budget laws and controls in 20 force;

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Any and all liabilities of the Oahu regional health 1 (2)care system that were transferred to the Hawaii health 2 3 systems corporation upon its creation by Act 262, Session Laws of Hawaii 1996, or to the Oahu regional 4 health care system upon its establishment by Act 290, 5 Session Laws of Hawaii 2007, and all other contractual 6 7 liabilities of the Oahu regional health care system, including those related to collective bargaining 8 contracts negotiated by the State, shall become the 9 responsibility of the State upon the transition of the 10 11 Oahu regional health care system into the department 12 of health;

(3) All employees who occupy civil service positions and 13 14 whose functions are transferred to the department of health by this Act shall retain their civil service 15 16 status, whether permanent or temporary. Employees shall be transferred without loss of salary, seniority 17 18 (except as prescribed by applicable collective bargaining agreements), retention points, prior 19 20 service credit, any vacation and sick leave credits previously earned, and other rights, benefits, and 21



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privileges, in accordance with state personnel laws 1 and this Act; provided that the employees possess the 2 minimum qualifications and public employment 3 requirements for the class or position to which 4 transferred or appointed, as applicable; provided 5 further that subsequent changes in status may be made 6 7 pursuant to applicable civil service and compensation 8 laws; and 9 Any employee who, prior to this Act, is exempt from (4) 10 civil service or collective bargaining and is transferred as a consequence of this Act shall be 11 12 transferred without loss of salary and shall not suffer any loss of prior service credit, contractual 13 rights, vacation or sick leave credits previously 14 earned, or other employee benefits or privileges and 15 shall be entitled to remain employed in the employee's 16

17 current position for a period of no less than one year18 after being transferred.

(h) The working group shall be dissolved on June 30, 2022,
or upon completion of the transition of the Oahu regional health
care system into the department of health, whichever is later.

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1	PART IV
2	SECTION 5. Statutory material to be repealed is bracketed
3	and stricken. New statutory material is underscored.
4	SECTION 6. This Act shall take effect upon its approval;
5	provided that part II of this Act shall take effect on
6	June 30, 2022.

INTRODUCED BY:

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Report Title:

Hawaii Health Systems Corporation; Oahu Region; Department of Health; Transition; Working Group

Description:

Sets a date for the transition of the Oahu region's health care facilities from the Hawaii health systems corporation to the department of health. Establishes a working group to develop a comprehensive plan that addresses all necessary components of such transition.

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