DAVID Y. IGE

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STATE OF HAWAII DEPARTMENT OF HEALTH

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

Testimony COMMENTING on HB1597 RELATING TO MENTAL HEALTH

REPRESENTATIVE JOHN M. MIZUNO, CHAIR HOUSE COMMITTEE ON HEALTH

Hearing Date and Time: Thursday, January 31, 2019 at 9:30 a.m. Room: 329

- 1 **Fiscal Implications:** Undetermined, although the bill proposes an appropriation.
- 2 **Department Testimony:** Thank you for the opportunity to provide comments on this measure.
- 3 HB1597 recommends the establishment of a new mental health facility that provides inpatient
- 4 and outpatient mental health services to individuals who are in need of such services. These
- 5 individuals are not subject to a criminal court order.

Inpatient services at the Hawaii State Hospital (HSH), a branch of the Department of Health, Adult Mental Health Division, are currently provided exclusively to a forensic population. This population includes individuals ordered to the care and custody of the Director of Health by a criminal court. Given past and recent trends, it is likely that services at the HSH will continue to focus on the forensic commitments, the number of which has continued to grow. With the steady increase in the forensic commitments and the length of time forensic patients remain at the HSH, it is difficult to accurately gauge what the demand will be in the coming years; however, it is safe to say the patient census at the HSH may continue to increase.

Currrently in Hawaii, non-forensic patients (civil commitments) are served in hospitals operated by the Hawaii Health Systems Corporation (HHSC) and private community hospitals. Hawaii statute currently requires that an individual civilly committed be committed to a hospital. Increasing statewide capacity in hospitals operated by the HHSC and private community hospitals to treat individuals under civil commitments would address a current and critical need.

insurance obtained through the Department of Human Services (DHS) MedQU (MQD). In a stand alone facility with at least 16 beds, services would not be condessed by the Department of Human Services would not be condessed by the Department of the proposed facility is not included in this measure; the unclear if the intent is to serve one county or all counties. If the facility is to ser arrangements for transport will need to be considered. Additionally, this measure proposes that homeless individuals be given admission. We note that there may be legal issues with prioritizing and limiting treatment in this manner. The responsible or operating entity of the proposed facility is not noted in measure. Finally, it is unclear if the proposed appropriation in this measure is anticonstruction or operation of the facility, or both. The DOH looks forward to continued collaboration with the House Component of the legislators, and community stakeholders in addressing the intent and spirit	It is assumed that treatment proposed is medically necessary. If medically necessary
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	The DOH looks forward to continued collaboration with the House Committee on Health
measure. Thank you for the opportunity to testify.	other legislators, and community stakeholders in addressing the intent and spirit of this
	measure. Thank you for the opportunity to testify.

Offered Amendments: None.





EXECUTIVE CHAMBERS HONOLULU

DAVID Y. IGE GOVERNOR

January 31, 2019

TO: The Honorable Representative John M. Mizuno, Chair

House Committee on Health

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

SUBJECT: HB 1597 – RELATING TO MENTAL HEALTH

Hearing: Thursday, January 31, 2019, 9:30 a.m.

Conference Room 329, State Capitol

<u>POSITION</u>: The Governor's Coordinator appreciate the intent of this measure, and respectfully offers comments. The Coordinator defers to the Department of Health (DOH) on the merits of the bill, and notes that the 2018 statewide homeless point in time count identified 1,612 homeless individuals with severe mental illness in Hawaii, including 1,055 individuals that are unsheltered.

<u>PURPOSE</u>: The purpose of the bill is to appropriate funds to DOH for the establishment of a long-term care facility that admits and treats non-forensic mental health patients for inpatient or out-patient temporary case management and requires that homeless patients receive priority admission for treatment.

Homelessness remains one of the most pressing challenges facing Hawaii, and the State has adopted a comprehensive framework to address homelessness that focuses on three primary leverage points – affordable housing, health and human services, and public safety. The Coordinator works closely with multiple state agencies and homeless service providers to implement this framework through the delivery of housing-focused services like Housing First and Rapid Re-Housing, as well as outreach and treatment services for unsheltered homeless individuals experiencing severe mental illness and/or addiction. The coordinated efforts to implement the State's framework to address homelessness have made progress in reducing the

number of homeless individuals statewide. Between 2017 and 2018, the number of homeless individuals in Hawaii decreased by 690 individuals (9.6%). The decrease was one of the largest numeric decreases in homelessness in the country, only exceeded by decreases in California, Florida and Michigan.

According to the 2018 statewide homeless point in time count, there are an estimated 1,612 homeless individuals with severe mental illness, representing 25% of the total homeless population. The total number of homeless individuals with severe mental illness identified in the point in time count has remained around the same level over the past four years – fluctuating between a low of 1,612 to a high of 1,690. Of the 1,612 homeless individuals with severe mental illness identified in 2018, the majority (67%) are on the island of Oahu.

DOH currently administers programs though its Adult Mental Health Division (AMHD) and Alcohol and Drug Abuse Division (ADAD) that serve homeless individuals with severe mental illness and addiction, including homeless outreach, intensive case management, and the Law Enforcement Assisted Diversion (LEAD) program. In addition, the DHS Med-QUEST Division recently received federal approval for its 1115 Medicaid waiver amendment for tenancy supports, which allows for the use of Medicaid funds to support housing-focused services such as housing navigation and case management for individuals with mental illness and other behavioral health needs.

While the Coordinator acknowledges the need to better address the mental health needs of homeless individuals, there is concern about the adverse impact that an appropriation for this measure may have on priorities in the Governor's executive budget proposal in SB 126 or HB 964, which includes the base budget and requested biennium budtget increases for DHS in one measure. Accordingly, the Coordinator respectfully requests the Legislature's support of the Governor's executive budget proposal, which includes funding for proven programs such as Housing First, Rapid Re-Housing, and homeless outreach.

Thank you for the opportunity to testify on this bill.

Submitted on: 1/29/2019 5:45:58 PM

Testimony for HLT on 1/31/2019 9:30:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Louis Erteschik	Hawaii Disability Rights Center	Comments	Yes

Comments:

One of the real crises in our current mental health delivery system is that there are few places to treat individuals either on a long term or short term basis. The "common wisdom" is that one must get arrested in order to receive mental health treatment. Needless to say, that is a pretty sad reflection upon our community. This bill appears to be intended in the right direction.

Submitted on: 1/30/2019 8:04:43 AM

Testimony for HLT on 1/31/2019 9:30:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing	
Jeffrey Akaka, MD	Individual	Support	No	

Comments:

House Committee on Health

Thursday, January 31, 2019, 9:00am.

Re: HB 1597

Position: Support

Dear Chair Mizuno and members of the House Committee on Health.

Please vote YES on HB 1597 because

People with severe psychiatric illness should not have to commit a crime in order to get the care they need, and which the Hawaii State Hospital in the past routinely provided.

Respectfully yours,

Jeffrey Akaka, MD

Psychiatrist



Thursday, January 31, 2019

House Bill 1597 Testifying in Support

Aloha Chair Mizuno, Vice Chair Kobayashi, and Members of the Committee on Health,

The Democratic Part of Hawai'i (The Party) stands in **support of HB1597 Relating to Mental Health**, which appropriates funds to the Department of Health for the establishment of a long-term care facility that admits and treats non-forensic mental health patients for in-patient or out-patient temporary case management and requires that homeless patients receive priority admission for treatment.

Creating and funding a facility, or multiple facilities, in every county that increase access both at the in-patient and out-patient level for those living with mental health diagnoses, would benefit everyone in the state of Hawai'i.

Governor Ige's Administration has demonstrated a strong commitment to addressing the intersection of mental and physical health and homelessness by appointing the Lt. Governor as the point person for a more comprehensive and holistic approach — which would be complemented well by the facilities called for in this proposal.

Prioritizing access for the homeless community will drastically reduce the financial strain on emergency services in the state, including hospital visits and crime. According to Hope Services, 33 percent of Hawai'i's homeless population are mentally ill and 21 percent suffer with a substance abuse disability. If we treat the underlying illnesses, homelessness will be drastically reduced; causing a safer and more productive community for all people.

Homelessness among mentally ill is associated with fewer psychiatric hospital beds. In 2006, Markowitz published data on 81 US cities, looking at correlations between the decreasing availability of psychiatric hospital beds and the increase in crime, arrest rates, and homelessness. As expected, he found direct correlations. This is consistent with past studies in Massachusetts and Ohio that reported that 27 and 36 percent of the discharges from state mental hospitals had become homeless within six months. It is also consistent with a study in New York that found that 38 percent of discharges from a state hospital had "no known address" six months later.

The need for both inpatient and outpatient treatment for those living with severe mental illness, including those who are homeless, is a need that it exists in every County. As it stands right now, those living on neighbor Islands who require this type of assistance in order to live as productively as they are able, must get on a waiting list for the one facility that exists in Honolulu County.

Every person, regardless of the disability that they might be living with, deserves an opportunity to live with grace and dignity. For those that require medical attention, this includes making sure that they have access to help when needed.

For these reasons we urge to vote favorably on this bill.

Mahalo for the opportunity to testify,

Zahava Zaidoff

Co-Chair, Legislation Committee

Democratic Party of Hawai'i

1. https://mentalillnesspolicy.org/consequences/homeless-mentally-ill.html

Submitted on: 1/30/2019 11:23:16 AM

Testimony for HLT on 1/31/2019 9:30:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Molly Palmer	Mental Health Kokua	Support	No

Comments:

Re: HB 1597

Position: Support

Dear Chair Mizuno and members of the House Committee on Health.

Please vote YES on HB 1597. I am a Psychiatric Mental Health Nurse Practitioner working on Maui and personally see an increasing need for non-forensic mentally ill patients to receive higher level of treatment that an outpatient provider cannot provide. Families, case workers, and mental health providers are burdened with the responsibility to provide treatment and support treatment for patients that are severely mentally ill, but have no resources or control to do so. Often times, SMI patients refuse or stop taking medications because they do not understand the severity of their illness or do not believe they are ill. When patients stop taking their antipsychotic medications or mood stabilizing agents, they quickly destabilize, becoming manic, depressed, and/or psychotic, posing a potential risk to the community and to themselves. Damage is also done to the brain and mental illness is progressive, making it more difficult to re-stabilize the patients. Providers like myself carry a high level of liablity/responsibility when required to treat SMI patients, but feel helpless because we have way to enforce treatment unless a patient commits a crime.

I am about to attend a hearing tomorrow on Maui about my ACT(Asssisted Community Treatment) petition to treat a patient who is currently in the hospital and about to be discharged back into the community. This will be her 13th hospitalization. Unfortunately, the ACT statute is flawed and because there is no way to enforce it. It is geared to protect patient rights, not the safety of a community.

Please help us treat the severely mentally ill population by opening up a "step-down" locked facility to treat those non-forensic patients who need a higher level of care than our outpatient clinics can provide. Help us prevent crisis, not enable it.

Molly Palmer, APRN, PMHNP-BC

HB-1597 Submitted on: 1/30/2019 11:11:21 AM

Testimony for HLT on 1/31/2019 9:30:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Melodie Aduja	O`ahu County Committee on Legislative Priorities of the Democratic Party of Hawai`i	Support	No

Comments:

<u>HB-1597</u> Submitted on: 1/28/2019 9:37:54 PM

Testimony for HLT on 1/31/2019 9:30:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Wailua Brandman	Individual	Support	No

Comments:

<u>HB-1597</u> Submitted on: 1/29/2019 12:13:35 PM

Testimony for HLT on 1/31/2019 9:30:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Shannon Rudolph	Individual	Support	No

Comments:

STRONGLY SUPPORT!!!

<u>HB-1597</u> Submitted on: 1/29/2019 2:56:32 PM

Testimony for HLT on 1/31/2019 9:30:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Joy Marshall	Individual	Support	No

Comments:

<u>HB-1597</u> Submitted on: 1/29/2019 7:46:53 PM

Testimony for HLT on 1/31/2019 9:30:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Marilyn Creagan	Individual	Support	No

Comments:

Submitted on: 1/29/2019 7:59:14 PM

Testimony for HLT on 1/31/2019 9:30:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Chuck Flaherty	Individual	Support	No

Comments:

Aloha Chair Mizuno and members of the Committee on Health,

I support House Bill 1597.

Since President Ronald Reagan initiated the dismantlement of our nation's mental health care system and institutions, our jails and prisons have become the defacto place for housing severely mentally-ill people.

Jails and prisons are not designed, nor do they have the resources and staff to provide the assistance, empathy, therapy, and healthcare severely mentally ill people require. For this reason, jails and prisons only worsen the mental state of mentally ill people, not to mention the mental health of those interacting with them who do not have the proper education and training to support and assist these special needs individuals.

I question whether an appropriation of only \$2,000,000 is sufficient to provide a long-term care facility with sufficient staffing. If this is an amount determined from a prior study, the bill should be amended to provide the executive summary of the study or report. Regardless, the basis upon which this monetary amount was reached should be disclosed within the body of the bill.

Please allow me to once again express my support of the intention of this bill with the hope that additional details and funding for a long-term care facility and outpatient treatment program will be forth coming in future versions of the bill.

Mahalo nui loa,

Charles Flaherty

P O Box 922

Captain Cook HI 96704

Submitted on: 1/30/2019 3:26:30 PM

Testimony for HLT on 1/31/2019 9:30:00 AM



Submitted By	Organization	Testifier Position	Present at Hearing
Maria Teresa Belardo	Individual	Support	No

Comments:

Aloha Legislators,

It is vitally important to have a long-term care health facility that admits and treats mental health patients, and provide case management. It is of equal importance to require that homeless patients receive priority admission for treatment. I believe this is needed in every community. Please support this bill.

Mahalo,

Maria B.

Submitted on: 1/30/2019 3:45:30 PM

Testimony for HLT on 1/31/2019 9:30:00 AM



Submitted By	Organization	Testifier Position	Present at Hearing
Adam Coles, MD	Individual	Support	No

Comments:

In principle I agree with the desperate need for non-incarceration options for the safe housing and crisis management of severely mentally ill individuals. This bill, while it is short of what is needed (most obviously a provision for mental health treatment in the text and appropriation) is a solid first step toward building a needed service array and decreasing hospital, emergency room and homeless shelter burden.

Sincerely

Adam Coles, MD

Adult, Child and Adolescent Psychiatrist



Submitted on: 1/30/2019 8:49:00 PM

Testimony for HLT on 1/31/2019 9:30:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
rika suzuki	Individual	Support	No

Comments:

House Committee on Health

Thursday, January 31, 2019, 9:00am.

Re: HB 1597

Position: Support

Dear Chair Mizuno and members of the House Committee on Health.

Please vote YES on HB 1597—In Hawaii today, there remains a continued challenge in acute, subacute and longterm psychiatric care, with which I have firsthand work experience.

In our community clinics, in particular, patients who are not legally encumbered (some off conditional release from past charges and some who never incurred legal charges) are faced with the lack of appropriate or necessary hospitalization, placement and housing opportunities due to a perceived lack of acuity.

The reality is that a segment of our population with chronic mental illness live a life of sporadic or inadequate treatment in high risk environments due to the inability to regularly access medical and psychiatric care and housing. Case management as well as medical and psychiatric care are vital to the overall wellbeing of these patients and the shelter of a facility to deliver these services is seminal.

Respectfully yours,

Rika Suzuki MD, adult and geriatric psychiatrist







Thursday, January 31, 2019 at 9:30 AM Conference Room 329

House Committee on Health

To: Representative John Mizuno, Chair

Representative Bertrand Kobayashi, Vice Chair

From: Michael Robinson

Vice President, Government Relations & Community Affairs

Re: Testimony in Support of HB 1597

Relating to Mental Health

My name is Michael Robinson, Vice President, Government Relations & Community Affairs at Hawai'i Pacific Health. Hawai'i Pacific Health is a not-for-profit health care system comprised of its four medical centers – Kapi'olani, Pali Momi, Straub and Wilcox and over 70 locations statewide with a mission of creating a healthier Hawai'i.

I write in support of HB 1597 which appropriates funds to the Department of Health for the establishment of a long-term care facility that admits and treats non-forensic mental health patients for in-patient or out-patient temporary case management. The measure also requires that homeless patients receive priority admission for treatment.

The Hawaii state hospital has been the sole long-term care facility providing treatment for the State's forensic and non-forensic mentally ill patients across the spectrum of acuteness. However, the Hawaii state hospital has reached capacity due to an overload of forensic patients, and currently has no capacity for non-forensic patients. Consequently, an increasing number of non-forensic mental health patients have resorted to use of acute care hospitals. Acute care hospitals across the state have also experienced an increase in the admission of homeless patients, many of whom are in need of mental health services and counseling. Hawai'i Pacific Health's hospitals are not licensed as psychiatric units. However, as the attached chart on the percentages of discharges of homeless versus non-homeless patients demonstrates, the affiliated hospitals of Hawai'i Pacific Health shoulder a good part of the burden of caring for the homeless population, which is not an optimum situation. Our hospitals are not equipped to provide the level of sustainable mental health treatment needed by this population. Therefore, establishing a long-term care facility that admits and treats non-forensic mental health patients for in-patient or out-patient care as envisioned in this measure would provide an alternative site for treatment which is much needed.

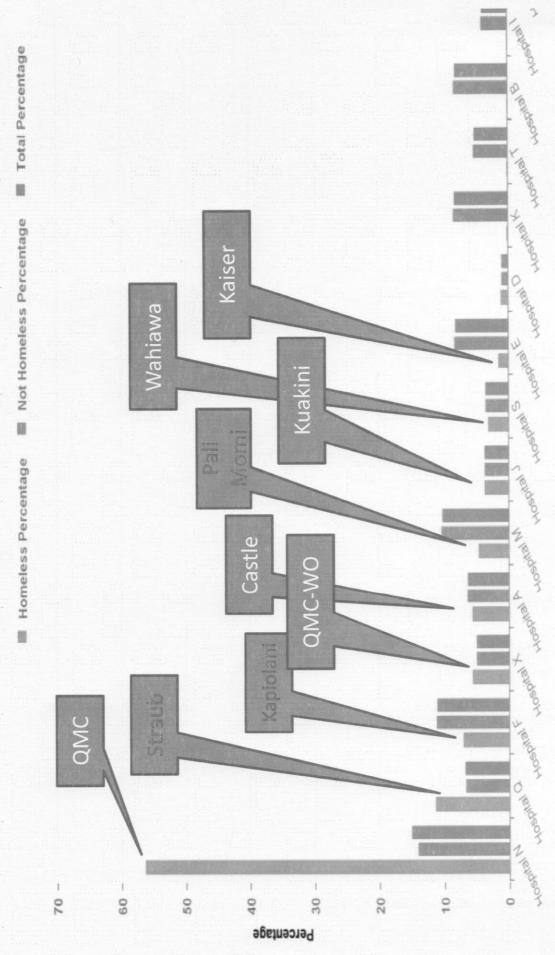
Thank you for the opportunity to testify.



HAWAII HEALTH INFORMATION CORPORATION

Hospital table

Percentage of Discharges - Homeless vs. Non-Homeless







To: The Honorable John M. Mizuno, Chair

The Honorable Bertrand Kobayashi, Vice Chair

Members, Committee Health

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

Queen's Health Systems

January 31, 2019 Date:

Hrg: House Committee on Health Hearing: Thursday, January 31, 2019 at 9:30 AM in Room

329

Re: Support for H.B. 1597, Relating to Mental Health

The Queen's Health Systems (Queen's) is a not-for-profit corporation that provides expanded health care capabilities to the people of Hawai'i and the Pacific Basin. Since the founding of the first Queen's hospital in 1859 by Queen Emma and King Kamehameha IV, it has been our mission to provide quality health care services in perpetuity for Native Hawaiians and all of the people of Hawai'i. Over the years, the organization has grown to four hospitals, 66 health care centers and labs, and more than 1,600 physicians statewide. As the preeminent health care system in Hawai'i, Queen's strives to provide superior patient care that is constantly advancing through education and research.

Queen's appreciates the opportunity to provide testimony in support of H.B. 1597. Relating to mental health. This measure would establish a long-term care facility that admits and treats nonforensic mental health patients and require that homeless patients receive priority admission for treatment. The Queen's Medical Centers – Punchbowl (QMC-PB) provides inpatient mental health services for non-forensic behavioral health patients. In FY2017, approximately 11% of all emergency department patients were psych patients, that is about 18 patients per day on average. This measure would ease the strain on non-for-profit health care facilities from carrying the undue burden of treating a majority of these patients and would allow for a more equitable distribution of care.

Thank you for the opportunity to testify on this measure.