LATE *Testimony submitted late may not be considered by the Committee for decision making purposes.

JOSH GREEN, M.D. GOVERNOR OF HAWAII KE KIA'ÄINA O KA MOKU'ÄINA 'O HAWAI'I



KENNETH S. FINK, M.D., M.G.A, M.P.H DIRECTOR OF HEALTH KA LUNA HO'OKELE

STATE OF HAWAII DEPARTMENT OF HEALTH KA 'OIHANA OLAKINO P. O. Box 3378 Honolulu, HI 96801-3378 doh.testimony@doh.hawaii.gov

Testimony in SUPPORT of S.B. 1472, S. D. 2 RELATING TO BEHAVIORAL HEALTH SERVICES

REPRESENTATIVE DELLA AU BELATTI, CHAIR HOUSE COMMITTEE ON HEALTH AND HOMELESSNESS

Hearing Date, Time and Room: Wednesday, March 22, 2023 at 9:00 a.m. in Room 329/VIDEO

- 1 Fiscal Implications: The Department of Health ("Department") requests that this measure be
- 2 considered as a vehicle to provide this needed funding so long as it does not supplant the
- 3 priorities and requests outlined in the Governor's executive budget request.
- 4 **Department Position:** The Department supports this measure, offers comments, and
- 5 proposed amendments.

6 **Department Testimony:** The Adult Mental Health Division (AMHD) provides the following

7 testimony on behalf of the Department.

8 The purpose of this measure is to appropriate funds to accommodate the increase in call 9 volume for the Hawaii CARES 988 call center. This measure also appropriates funds to expand 10 the coordination of crisis intervention services for adults and youth.

The Hawaii CARES 988 call center is currently managed by two separate entities; one which specializes in mental health crisis response and the other which specializes in substance use disorder treatment referrals. Specifically for mental health crisis response, the current contractor employs 20 full-time and 13 part-time staff to continue telephonic call center operations 24 hours a day, 7 days a week. In Calendar Year (CY) 2022, a total of 115,587 calls for mental health crisis response were received which resulted in 725 youth and 7,074 adults 1 utilizing community crisis intervention services including Crisis Mobile Outreach (CMO).

2 Additionally, in CY22, adult admissions to Licensed Crisis Residential Service (LCRS) beds totaled

3 1,169 and there were 948 admissions to adult stabilization beds.

4 We note that this measure proposes to expand the coordination of crisis intervention 5 services for adults and youth through four funding strategies. Our comments regarding each

6 are noted below along with a proposal for expansion of the continuum through the

7 development of a statewide Certified Community Behavioral Health Center (CCBHC) system.

8 Expanding Hawaii CARES services

9 Where staffing is available, AMHD and the Child Adolescent Mental Health Division
10 (CAMHD) support the expansion of Hawaii CARES call center staffing and operational
11 enhancements including tele-crisis support technology. We propose adding additional
12 positions for the Hawaii CARES 988 call center in anticipation of the expansion of 9-8-8 text and
13 chat features from its current 2:00 p.m. to 12:00 a.m. timeframe to 24 hours a day, 7 days a
14 week.

15 **Expanding and Enhancing CMO in Each County**

We see a benefit to having a CMO worker accompany a law enforcement officer (LEO) upon receipt of a mental health related call through 9-1-1; however, we do not believe that every call would warrant the necessity for a medical assessment. Instead, a potential better use of staffing resources is to have CMO workers available to consult with LEOs via Wi-Fi enabled tablets.

21 Expanding LCRS for Youth

Generally, we do support the expansion of youth crisis beds. To date, the CAMHD has posted three Request for Proposals (RFP) with no successful bids for this service. Currently, there is an 8-bed youth crisis stabilization unit which is routinely underutilized. Since the youth

crisis stabilization program started, the 8-bed unit has only been at capacity once. Some of the 1 2 challenges are associated with the process of getting youth into a bed as it is sometimes a struggle to admit them in a timely manner. A 16-bed youth crisis facility may be needed 3 although we are unsure about utilization of this facility. We do not see that there is a need for 4 5 a nurse or an emergency medical technician to accompany CMO workers but we are supportive of utilizing preventive youth crisis teams to respond to calls from law enforcement personnel 6 7 requesting behavioral health assessment, referral and crisis care for youth who witnessed or 8 participated in potentially traumatic events. 9 **Expanding Stabilization Beds for Adults Across Counties** 10 Currently, there are 25 stabilization beds on Oahu and eight beds on Hawaii Island. 11 AMHD recently awarded stabilization bed contracts to two new providers, one on Maui for six to 12 beds, and the other on Hawaii Island for an additional eight beds. Despite multiple RFP 12 solicitations, AMHD has not been successful in procuring stabilization beds on Kauai. We plan to 13 continue to work to increase the number of stabilization beds in the state. 14 15 16 In an effort to expand the crisis care continuum and decrease fragmentation of care, the Department proposes to include funding support for the development of a statewide Certified 17 Community Behavioral Health Clinics (CCBHCs) system in this measure. 18 Expanding the Crisis Care Continuum with Certified Community Behavioral Health Clinics 19

20 Certified Community Behavioral Health Clinics (CCBHCs) are a critical component of the 21 crisis continuum of care. There are over 500 CCBHCs operating across the United States and 22 territories. CCBHCs are authorized under Section 223 of the Protecting Access to Medicare Act 23 (PAMA) (PL 113-93) and are designed to ensure access to coordinated and comprehensive 24 behavioral health care. A comprehensive array of behavioral and physical health services are 25 provided by CCBHCs so that individuals seeking mental health and substance use services do not receive fragmented care through multiple service providers. CCBHC services are provided
to anyone requiring mental health, substance use disorder, or physical health care and
treatment regardless of their ability to pay, their place of residence (or lack thereof), or age,
including developmentally appropriate care provided to children and youth.

5 The ideal crisis response system provides a continuum of services that address 6 increasing intensity of needs and connects individuals to care during and beyond crisis. CCBHCs 7 have shown to reduce: visits to the hospital emergency department; inpatient admissions; 8 incarceration; suicide; homelessness; unemployment; and recidivism. This blended care model 9 integrates behavioral health, substance use disorder, and physical health treatment services are 10 arranged and followed up on as part of the comprehensive CCBHC treatment team model.

The Department is currently in the process of planning and designing Hawaii's CCBHC 11 system. The AMHD Community Mental Health Center (CMHC) Branches are in various stages of 12 the planning and design process. Maui CMHC Branch has begun implementation of the Maui 13 CCBHC and anticipates full service delivery before the end of FY 2024. The Kauai CMHC and 14 Hawaii Island CMHC Branches have begun planning and development and anticipate full 15 implementation by the end of Fiscal Year 2025. We propose adding staffing for these three 16 17 CCBHC locations in anticipation of their operational timeline and to perform services that will 18 be provided to individuals through Hawaii CARES, crisis intervention and diversion intercepts, walk-in requests, and follow-up appointments. 19

20

21 Thank you for the opportunity to testify on this measure.

Offered Amendments: We respectfully offer the attached proposed H.D. 1 with proposed new
 language underlined and proposed deletions stricken.

A BILL FOR AN ACT

RELATING TO BEHAVIORAL HEALTH SERVICES.

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

1 SECTION 1. The legislature finds that the Hawaii 2 coordinated access resource entry system (CARES) is overseen by 3 the department of health's behavioral health administration and 4 is managed by two separately contracted entities; one 5 specializes in behavioral health crisis response, and the other specializes in substance use disorder treatment referrals. 6 On 7 October 1, 2019, contracts commenced to form a statewide network 8 of service providers that is focused around crisis intervention, 9 substance use disorder treatment, mental health, and other 10 behavioral health services. These service providers are 11 contracted through the administration's three behavioral health 12 divisions: adult mental health division, child and adolescent 13 mental health division, and alcohol and drug abuse division. 14 Hawaii CARES, through its crisis helpline, a statewide 15 crisis call line open twenty-four hours a day, seven days a 16 week, connects Hawaii residents who are experiencing a mental 17 health crisis with appropriate service providers to reduce

1 unnecessary hospitalizations and arrests, and provides continual 2 care by staying in touch with the individual and providers 3 throughout the duration of treatment. Services provided through 4 Hawaii CARES include: 5 (1) Suicide crisis hotline services that provide 6 therapeutic support and de-escalation techniques to 7 active suicidal callers and connects them with crisis 8 services; 9 (2) Crisis support management services, a temporary 10 thirty-day case management service provided when 11 requested by the crisis mobile outreach team, which 12 provides face-to-face contact with each individual 13 within twenty-four hours after receiving a referral 14 and maximum effort to support and assist while linking 15 the individual to additional services; (3) Crisis mobile outreach services that send out local 16 17 crisis therapists to callers experiencing a mental 18 health crisis in a variety of community settings to 19 provide them with face-to-face, short term, intensive, 20 mental health services; trauma informed care response 21 with initial screening and comprehensive assessment;

| 1 | and | assistance | in | returning | to | their | baseline | level | of |
|---|------|-------------|----|-----------|----|-------|----------|-------|----|
| 2 | func | ctionality; | | | | | | | |

- 3 (4) Licensed crisis residential shelters offered on a
 4 temporary ten-day admission basis for purposes of
 5 stabilizing and preventing serious mental health
 6 decompensation, psychotic breaks, or hospitalization
 7 to individuals in crisis who would continue to be at
 8 high risk without the benefit of the twenty-four-hour
 9 support services; and
- 10 (5) Bed stabilization services, provided to individuals in 11 crisis with mental health concerns or a substance use 12 disorder and in need of a stabilization bed as a 13 bridge or a long-term solution in their continuum of 14 care, with case managers assigned to individuals to 15 ensure wrap-around service as needed.

16 <u>Hawaii CARES will also coordinate crisis intervention and</u>
17 <u>diversion for individuals who may be appropriate to receive</u>
18 <u>services provided through a certified community behavioral</u>
19 <u>health clinic (CCBHC). Hawaii's CCBHC model includes state-</u>
20 <u>operated clinics responsible for coordinating with contracted</u>
21 <u>service providers to provide crisis behavioral health services</u>
22 <u>and to integrate behavioral health with physical health care.</u>

| 1 | In addition to receiving calls made directly to its crisis |
|----|--|
| 2 | helpline, Hawaii CARES serves as Hawaii's local crisis center |
| 3 | for the National Suicide Prevention Lifeline, now known as the |
| 4 | 988 Suicide and Crisis Lifeline, a national network of two |
| 5 | hundred local crisis centers established by the federal |
| 6 | government to assist individuals in suicidal crisis or emotional |
| 7 | distress to connect with suicide prevention and mental health |
| 8 | support services at any time of the day or night. Calls to the |
| 9 | 988 Suicide and Crisis Lifeline, which can be made by dialing |
| 10 | "9-8-8" or a ten-digit, toll-free number, 1-800-273-TALK (8255), |
| 11 | are routed to a certified local crisis center closest to the |
| 12 | caller, as determined by the caller's area code. For Hawaii, |
| 13 | calls made from within the State to the 988 Suicide and Crisis |
| 14 | Lifeline are routed to the Hawaii CARES crisis helpline. |
| 15 | In 2020, the Hawaii CARES crisis helpline received 138,856 |
| | |

16 calls, which amounts to more than three hundred thirty calls per 17 day on average. The volume of calls has increased following the 18 transition of the National Suicide Prevention Lifeline's 19 telephone number to a new, easy-to-remember, three-digit dialing 20 code "9-8-8" in July 2022.

21 To accommodate the increased volume of calls and ensure22 that individuals who access the Hawaii CARES crisis helpline

| 1 | directly or | th | cough the 988 Suicide and Crisis Lifeline are | |
|----|-----------------------------|------|--|--|
| 2 | provided wi | th a | appropriate crisis intervention services and | |
| 3 | crisis care | cod | ordination, the behavioral health administration | |
| 4 | requires fu | nds | to improve or establish the necessary technology | |
| 5 | and infrast | ruct | ture, retain necessary personnel, and expand and | |
| 6 | enhance exi | stir | ng services provided by contracted service | |
| 7 | providers t | hrou | ugh the Hawaii CARES crisis helpline including: | |
| 8 | (1) E | xpar | nding and enhancing suicide crisis hotline and | |
| 9 | С | ris | is management services by: | |
| 10 | (. | A) | Providing high-quality crisis counseling; | |
| 11 | (| B) | Providing in-person intervention by trained | |
| 12 | | | mental health professionals as an alternative to | |
| 13 | | | law enforcement personnel; | |
| 14 | (| C) | Improving the coordination of linkages for | |
| 15 | | | individuals contacting the Hawaii CARES crisis | |
| 16 | | | helpline directly or through the 988 Suicide and | |
| 17 | | | Crisis Lifeline with ongoing care needs; and | |
| 18 | (| D) | Improving and expanding the use of tele-crisis | |
| 19 | | | support technology; | |
| 20 | (2) E | xpar | nding and enhancing crisis mobile outreach | |
| 21 | services in each county by: | | | |

| 1 | | (A) | Adding Providing access to a an on-call |
|----|-----|-------|--|
| 2 | | | registered nurse, emergency medical technician, |
| 3 | | | or paramedic to the crisis mobile outreach teams |
| 4 | | | for remote real-time consultation; and |
| 5 | | (B) | Establishing preventive youth crisis teams that |
| 6 | | | respond to calls from law enforcement personnel |
| 7 | | | requesting behavioral health assessment, |
| 8 | | | referral, and crisis care for youth who witnessed |
| 9 | | | or participated in potentially traumatic events, |
| 10 | | | to address current behavioral health crises and |
| 11 | | | also prevent future crises; |
| 12 | (3) | Expa | nding licensed crisis residential shelter services |
| 13 | | by a | cquiring a sixteen-bed facility to house sub-acute |
| 14 | | beds | to help stabilize youth, improve their condition, |
| 15 | | and j | prevent future decompensations, homelessness, |
| 16 | | hosp | italizations, and the involvement of law |
| 17 | | enfo | rcement agencies; and |
| 18 | (4) | Expa | nding bed stabilization services by adding forty |
| 19 | | adul | t stabilization beds across all counties. |
| 20 | (5) | Expa | nding the crisis care continuum to include the |
| 21 | | opera | ation of a certified community behavioral health |
| 22 | | clin | ics (CCBHC) on Kauai, Maui and Hawaii Island. |

1 The purpose of this Act is to appropriate moneys to 2 accommodate the increase in the volume of calls received by the 3 Hawaii CAREs crisis helpline and ensure that individuals who access the Hawaii CARES crisis helpline directly or through the 4 5 988 Suicide and Crisis Lifeline are provided with appropriate 6 crisis intervention services and crisis care coordination. 7 SECTION 2. There is appropriated out of the general 8 revenues of the State of Hawaii the sum of \$3,202,000.00 or so 9 much thereof as may be necessary for fiscal year 2023-2024 and 10 the same sum or so much thereof as may be necessary for fiscal 11 year 2024-2025 to fund the expansion and enhancement of the 12 suicide crisis hotline and crisis management services provided 13 by contracted service providers through the Hawaii CARES crisis 14 helpline. The funding shall be used to cover expenses for 15 services, including the provision of high-quality crisis 16 counseling and in-person intervention by trained mental health 17 professionals as an alternative to law enforcement personnel; improvement of coordination with individuals who contact the 18 19 Hawaii CARES crisis helpline directly or through the 988 Suicide 20 and Crisis Lifeline with ongoing care needs; and enhancement and

21 expansion of the use of tele-crisis support technology.

| | Tage 0 | S.B. NO. ¹⁴⁷² S.D. 2 PROPOSED H.D. 1 | | | |
|----|--|--|--|--|--|
| 1 | SECT | ION 3. There is appropriated out of the general | | | |
| 2 | revenues | of the State of Hawaii the sum of \$ <u>2,961,892.00</u> or so | | | |
| 3 | much ther | eof as may be necessary for fiscal year 2023-2024 and | | | |
| 4 | the same | sum or so much thereof as may be necessary for fiscal | | | |
| 5 | year 2024 | -2025 for the expansion and enhancement of the crisis | | | |
| 6 | mobile ou | treach services provided by contracted service | | | |
| 7 | 7 providers through the Hawaii CARES crisis helpline; provided | | | | |
| 8 | that, of | the sums appropriated: | | | |
| 9 | (1) | \$1,256,792.00 shall be expended for the addition of a | | | |
| 10 | | providing access to an on-call registered nurse, | | | |
| 11 | | emergency medical technician, or paramedic to crisis | | | |
| 12 | mobile outreach teams for on call remote real-time | | | | |
| 13 | <pre>consultation;</pre> | | | | |
| 14 | (2) | \$5,100.00 shall be expended for on-call remote real- | | | |
| 15 | time consultation to be used by on-call registered | | | | |
| 16 | | nurse, emergency medical technician, or paramedic for | | | |
| 17 | | real-time consultation with crisis mobile outreach | | | |

18 teams; and

19 (3) \$<u>1,700,000.00</u> shall be expended for the establishment
20 of preventive youth crisis teams that respond to calls
21 from law enforcement personnel requesting behavioral
22 health assessment, referral, and crisis care for youth

1

2

who witnessed or participated in potentially traumatic events.

3 There is appropriated out of the general SECTION 4. revenues of the State of Hawaii the sum of \$1,900,000.00 or so 4 5 much thereof as may be necessary for fiscal year 2023-2024 and 6 the same sum or so much thereof as may be necessary for fiscal year 2024-2025 for the expansion of licensed crisis residential 7 8 shelter services provided by contracted service providers 9 through the Hawaii CARES crisis helpline, by acquiring a 10 facility to house sixteen sub-acute beds to help stabilize 11 youth, improve their condition, and prevent future 12 decompensations, homelessness, hospitalizations, and involvement 13 of law enforcement agencies.

14 There is appropriated out of the general SECTION 5. revenues of the State of Hawaii the sum of \$8,205,200.00 or so 15 16 much thereof as may be necessary for fiscal year 2023-2024 and 17 the same sum or so much thereof as may be necessary for fiscal 18 year 2024-2025 to fund the expansion of bed stabilization 19 services provided by contracted service providers through the 20 Hawaii CARES crisis helpline, by adding forty adult 21 stabilization beds across all counties.

22 SECTION 6. There is appropriated out of the general

Page 10

| 1 | revenues of the State of Hawaii the sum of \$1,072,000.00 or so |
|----|---|
| 2 | much thereof as may be necessary for fiscal year 2023-2024 and |
| 3 | the same sum or so much thereof as may be necessary for fiscal |
| 4 | year 2024-2025 for nineteen FTE positions to support the |
| 5 | operations of the certified community behavioral health clinics |
| 6 | (CCBHC) on Kauai, Maui and Hawaii Island. |
| 7 | SECTION $\frac{6}{7}$. The sums appropriated in sections 2 through 5 |
| 8 | of this Act shall be expended by the department of health for |
| 9 | the purposes of this Act. |
| 10 | SECTION 78. This Act shall take effect on $\frac{1}{2}$ |
| 11 | 2050 July 1, 2023. |

Report Title:

Behavioral Health; Mental Health; Crisis Services; National Suicide Prevention Lifeline; 988 Suicide and Crisis Lifeline; Department of Health Behavioral Health Administration; Hawaii CARES Crisis Helpline; Certified Community Behavioral Health Clinic

Description:

Appropriates funds for the: expansion and enhancement of the suicide crisis hotline and crisis management services provided by contracted service providers through the Hawaii Coordinated Access Resource Entry System (CARES) Crisis Helpline; expansion and enhancement of the crisis mobile outreach services provided by contracted service providers through the Hawaii CARES Crisis Helpline; expansion of licensed crisis residential shelter services provided by contracted service providers through the Hawaii CARES Crisis Helpline; and expansion of bed stabilization services provided by contracted service providers through the Hawaii CARES Crisis Helpline; and expansion of certified community behavioral health clinics with services coordinated through the Hawaii CARES Crisis Helpline. Effective 12/31/2050 07/01/2023. (SD2 HD1)

The summary description of legislation appearing on this page is for informational purposes only and is not legislation or evidence of legislative intent.



Hawaii Medical Association

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COMMITTEE ON HEALTH & HOMELESSNESS Rep. Della Au Belatti, Chair Rep. Jenna Takenouchi, Vice Chair

Date: March 22nd, 2023 From: Hawaii Medical Association Bernard Robinson, MD, Public Policy Committee

Re: SB1472 SD2, RELATING TO BEHAVIORAL HEALTH SERVICES. Position: Support

The Hawaii Medical Association is deeply concerned about the impact of mental illness across the state. According to the National Alliance for the Mentally III (NAMI), Hawai'i lost 176 lives to suicide in a single year¹. Despite the high rate of suffering and death associated with mental health disorders, an astounding 67% of affected adults in Hawai'i do not receive proper treatment². This is the highest rate of any state in the country. The situation is even worse for our keiki. Prior to the outbreak of COVID, over 70% of children in Hawai'i suffering from a major depressive episode did not receive treatment³. During the pandemic, widespread isolation and social distancing has strained an already overburdened system. Calls to the Hawai'i Crisis Text Line increased by 54% in April 2020, indicating that an even higher proportion of patients are not receiving the mental health care that they need⁴.

In the absence of a comprehensive crisis stabilization system, patients experiencing a mental health crisis face limited options. Law enforcement and emergency medical services (EMS) offer immediate response 24 hours a day, but often lead to excessive costs, delays in care, and/or inadequate treatment4. Emergency departments (ED) are appropriate for severely mentally ill patients (i.e. acutely psychotic or actively threatening themselves or others), but are not designed for prolonged treatment over 8-12 hours.

The Substance Abuse and Mental Health Services Association (SAMHSA) identified "regional crisis call center, crisis mobile team response and crisis receiving and stabilization facilities as the "three core components of an effective crisis system"⁵. Research assessing the impact of these programs to be associated with healthcare cost savings, reductions in emergency department visits and psychiatric admissions, and improved connection to mental health resources. However, variation in success of

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individual programs and complications with their implementation, such as inadequate capacity for the case load and delayed response times^{6,7}. To increase potential funding and ensure quality of care, the HMA recommends that the crisis outreach program meet the standards to qualify for the 85-Percent Enhanced Federal Medical Assistance Percentage as outlined in Section 9813 of the American Rescue Plan Act (ARPA)⁷. To ensure that the State qualifies for enhanced federal matching, the HMA offers changes as follows for Page 5, Lines 15-21 and Page 6, Lines 1-5, with new text underlined:

- (2) Expanding and enhancing crisis mobile outreach services in each county by
 - (A) Ensuring that the mobile crisis outreach system meets standards as defined by 42 U.S.C § 1396w–6.
 - (B) Adding a registered nurse, emergency medical technician, or paramedic to the crisis mobile outreach teams; and
 - (C) Establishing preventive youth crisis teams that respond to calls from law enforcement personnel requesting behavioral health assessment, referral, and crisis care for youth who witnessed or participated in potentially traumatic events, to address current behavioral health crises and also prevent future crises;

Properly funding a comprehensive behavioral health crisis stabilization system for Hawaii will save lives. Thank you for allowing the Hawaii Medical Association to testify in support of this measure.

REFERENCES

1. Resources – National Alliance for Mental Illness Hawaii. (n.d.). Retrieved February 20, 2022, from <u>https://namihawaii.org/resources/</u>

2. Adult Data 2021. (n.d.). Mental Health America. https://www.mhanational.org/issues/2021/mental-healthamerica-adult-data

3. Youth data 2022. (n.d.). Mental Health America. <u>https://www.mhanational.org/issues/2022/mental-healthamerica-youth-data</u>

4. Child & Adolescent Mental Health Division. (n.d.). State of Hawaii Department of Health. <u>https://health.hawaii.gov/camhd/</u>

5. The Substance Abuse and Mental Health Services Administration. (n.d.). Crisis Services: Meeting Needs, Saving Lives | SAMHSA Publications and Digital Products. US Department of Health and Human Services. <u>https://store.samhsa.gov/product/crisisservices-meeting-needs-saving-lives/PEP20-08-01-001</u>

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Angela M. Pratt, MD, President • Elizabeth Ann Ignacio, MD, President Elect • Michael Champion, MD, Immediate Past President Nadine Tenn-Salle, MD, Treasurer • Thomas Kosasa, MD, Secretary • Marc Alexander, Executive Director 6. Assessing the Impact of Mobile Crisis Teams: A Review of Research. (n.d.). Retrieved March 1, 2022, from

https://www.theiacp.org/sites/default/files/IDD/Review%20of%20Mobile%20Crisis%20T eam%20Evaluations.pdf.

7. Mobile Crisis Teams: A State Planning Guide for Medicaid-Financed (n.d.). Retrieved March 1, 2022, from https://www.tacinc.org/resource/state-planning-guide-for-medicaid-financed-mobile-crisis-response.

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SB1472 SD2 Mental Health Diversion to Crisis Beds COMMITTEE ON HEALTH & HOMELESSNESS Rep. Della Au Belatti, Chair Rep. Jenna Takenouchi, Vice Chair Wednesday, Mar 22, 2023: 9:00 : Room 329 Videoconference

Hawaii Substance Abuse Coalition supports SB1472 SD2

ALOHA CHAIR, VICE CHAIR AND DISTINGUISHED COMMITTEE MEMBERS. My name is Alan Johnson. I am the current chair of the Hawaii Substance Abuse Coalition (HSAC), a statewide organization for substance use disorder and co-occurring mental health disorder treatment and prevention agencies and recovery services.

Suicide issues are at an all-time high such that CARES Crisis Line for mental illness needs to expand with staffing and IT needs.

The crisis mobile services are ideal to reach people in rural areas as well as high risk areas where people are reluctant to access care. This is literally meeting patients where they are at.

A CMO worker accompanying police for a mental health 911 call needs to be coordinated for which call do they respond to as well as define what is needed for more training.

Now that CARES is referring people, there is a growing need to expand licensed crisis residential shelter services as well as bed stabilization services.

- Youth crisis beds have problems keeping the existing 8 beds occupied, but adding 16 more is planning for the future.
- Expanding the 25 Stabilization Beds for Adults on Oahu, and then 8 on the Big Island can help alleviate shortage of bed issues. Already AMHD recently added more than 6 beds on Maui and another 8 on Big Island.

With more than \$12M in this bill, that should help considerably with all the issues from CARES/medical staffing to crisis beds.

We appreciate the opportunity to testify and are available for questions.

<u>SB-1472-SD-2</u> Submitted on: 3/17/2023 6:46:55 PM Testimony for HLT on 3/22/2023 9:00:00 AM

| Submitted By | Organization | Testifier Position | Testify |
|-----------------|------------------------------------|---------------------------|---------------------------|
| Louis Erteschik | Hawaii Disability Rights Center | Support | Written Testimony Only |

Comments:

We are in support of funding for all these vital services that are part of the continuum of care for people with a mental illness in our community.

SB-1472-SD-2

Submitted on: 3/18/2023 6:29:41 PM Testimony for HLT on 3/22/2023 9:00:00 AM

| Submitted By | Organization | Testifier Position | Testify |
|--------------|--------------|---------------------------|---------------------------|
| Will Caron | Individual | Support | Written Testimony Only |

Comments:

Hawai'i CARES connects Hawai'i residents who are experiencing a mental health crisis with appropriate service providers to reduce instances of hospitalizations, arrests, suicide or other harm through its crisis helpline, a statewide crisis call-line open 24 hour a day, seven days a week.

Hawai'i CARES provides continual care by staying in touch with the individual and providers throughout the duration of treatment. This service is critical to many of Hawai'i's residents, and as the pressures of rising costs of living only grow, so will its importance. Please fund the expansions proposed in this bill. Mahalo.

<u>SB-1472-SD-2</u> Submitted on: 3/20/2023 9:17:17 AM Testimony for HLT on 3/22/2023 9:00:00 AM

| Submitted By | Organization | Testifier Position | Testify |
|-----------------|--------------|---------------------------|---------------------------|
| Shannon Rudolph | Individual | Support | Written Testimony Only |

Comments:

Support

<u>SB-1472-SD-2</u> Submitted on: 3/20/2023 9:41:55 AM Testimony for HLT on 3/22/2023 9:00:00 AM

| Submitted By | Organization | Testifier Position | Testify |
|----------------------|--------------|---------------------------|---------------------------|
| Raelyn Reyno Yeomans | Individual | Support | Written Testimony Only |

Comments:

I am in strong support of SB1472 SD2.

<u>SB-1472-SD-2</u>

Submitted on: 3/21/2023 9:14:12 PM Testimony for HLT on 3/22/2023 9:00:00 AM

| Submitted By | Organization | Testifier Position | Testify |
|----------------|--------------|---------------------------|---------------------------|
| jeanne wheeler | Individual | Support | Written Testimony Only |

Comments:

I strongly support this bill - PLEASE pass it! Mahalo, JW