June 7, 2019

The Honorable Ronald D. Kouchi,
President
and Members of the Senate
Thirtieth State Legislature
State Capitol, Room 409
Honolulu, Hawai'i 96813

The Honorable Scott K. Saiki,
Speaker and Members of the
House of Representatives
Thirtieth State Legislature
State Capitol, Room 431
Honolulu, Hawai'i 96813

Dear President Kouchi, Speaker Saiki, and Members of the Legislature:

This is to inform you that on June 7, 2019, the following bill was signed into law:

HB1013 HD2 SD2 RELATING TO INVOLUNTARY HOSPITALIZATION
ACT 090 (19)

Sincerely,

DAVID Y. IGE
Governor, State of Hawai'i
A BILL FOR AN ACT

RELATING TO INVOLUNTARY HOSPITALIZATION.

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

SECTION 1. The legislature finds that chapter 334, Hawaii Revised Statutes, requires that individuals at risk of harm to self or others, as determined by mental health emergency workers in consultation with law enforcement officers, be transported by law enforcement to facilities designated by the director of health for further evaluation and potential involuntary hospitalization, a process commonly referred to as an MH-1. Some facilities have expressed concern about the lack of specialists and infrastructure to perform the emergency medical screening and any subsequent medically necessary treatment, while other facilities experience very high volumes of MH-1 patients that strain emergency department capacity. The legislature further finds that while the broader framework of mental health treatment needs restructuring, the magnitude and complexity of that task requires a significant long-term commitment of resources. However, incremental improvements may yield relief more presently by addressing
ambiguities and inconsistencies in chapter 334, Hawaii Revised
Statutes, as expressed by the community, that contribute to
concerns about access, resources, and capacity, and which may
impact continuity of care and public safety.

Therefore, the purpose of this Act is to establish an
involuntary hospitalization task force to examine certain
sections of chapter 334, Hawaii Revised Statutes, and make
recommendations to the legislature that will diminish
unnecessary emergency department admissions and improve access
for MH-1 patients to the most appropriate level of care.

SECTION 2. (a) There is established within the department
of health the involuntary hospitalization task force to:
(1) Develop criteria for the director of health to
designate facilities to transport, examine, and treat
patients transported and examined under section
334-59(a)(1), Hawaii Revised Statutes (MH-1 patients);
(2) Review existing laws, law enforcement protocols, and
procedures to identify inconsistencies, ensure MH-1
patients are appropriately transported, identify areas
that may need clarification to ensure standardized
transportation of MH-1 patients in jurisdictions
statewide, and recommend clarifying language that will
support consistent implementation in jurisdictions
statewide;

(3) Develop recommendations for an efficient and
appropriate distribution of transported patients for
emergency examination across health care facilities in
a given county that focuses on patient health and
community safety;

(4) Provide an assessment of current law enforcement and
health care facility needs and capacities for
evaluation and treatment of MH-1 patients, including
the availability of beds and services necessary for
treating patients experiencing a mental health crisis,
preventing crisis situations, and avoiding unnecessary
transport of patients;

(5) Develop recommendations for building a coordinated
system of care with capacity for crisis services,
community services, and outpatient and inpatient
services to address the needs of persons with mental
illness and substance use disorders who are in crisis,
including discussions on alternative sites of
treatment; and

(6) Develop recommendations for reimbursement to support
these efforts.

(b) The task force, at the invitation of the director of
health, shall be composed of the following individuals or their
designees:

(1) The deputy director of behavioral health
administration or the deputy director's designee, who
shall serve as the chairperson of the task force;

(2) Seven representatives from a hospital or hospital
system; provided that at least two representatives
shall represent a neighbor island and one shall
represent a public hospital;

(3) One representative from any federally qualified health
center designated to receive MH-1 patients;

(4) One representative from a residential mental health or
substance abuse treatment facility;

(5) One representative from the Healthcare Association of
Hawaii;
Two representatives from law enforcement, one of which shall represent a neighbor island;

One representative from a mental health services provider;

One representative from the department of human services; and

One representative from the behavioral health programs of the University of Hawaii system.

Representatives from the following entities shall be invited as additional participants of the task force:

The chief executive officers of facilities designated by the director of health pursuant to chapter 334, Hawaii Revised Statutes;

A patient advocate or mental health advocate;

A representative from a social services agency; and

A representative from a mental health emergency worker provider agency.

Members of the task force shall serve without compensation, but shall be reimbursed for reasonable expenses incurred, including travel expenses.
(e) Two or more members of the task force, but less than the number of members that would constitute a quorum for the task force, may discuss between themselves matters relating to official business of the task force to enable members to faithfully perform their duties to the task force and the organizations they represent, as long as no commitment to vote is made or sought. Such discussions shall be a permitted interaction under section 92-2.5, Hawaii Revised Statutes.

(f) The task force shall submit a report to the legislature of its findings and recommendations, including any proposed legislation, no later than twenty days prior to the convening of the regular session of 2020.

(g) The task force shall assure that:

(1) It leverages the coordinated policy framework utilized by the Hawaii opioid initiative to link and coordinate the efforts of any task force of similar focus that the legislature requires of the department of health;

and

(2) The department's behavioral health services administration continues to expand the use of the coordinated policy framework in its statutorily
required implementation of statewide mental health systems of care.

(h) The task force shall cease to exist on June 30, 2020; provided that the department may continue the work of the task force without the effect of this Act should the department deem necessary.

SECTION 3. This Act shall take effect on July 1, 2019.

APPROVED this 7 day of JUN, 2019

[Signature]
GOVERNOR OF THE STATE OF HAWAII
HB No. 1013, HD 2, SD 2

THE HOUSE OF REPRESENTATIVES OF THE STATE OF HAWAII

Date: April 25, 2019
Honolulu, Hawaii

We hereby certify that the above-referenced Bill on this day passed Final Reading in the House of Representatives of the Thirtieth Legislature of the State of Hawaii, Regular Session of 2019.

Scott K. Saiki
Speaker
House of Representatives

Brian L. Takeshita
Chief Clerk
House of Representatives
THE SENATE OF THE STATE OF HAWAI‘I

Date: April 9, 2019
Honolulu, Hawai‘i 96813

We hereby certify that the foregoing Bill this day passed Third Reading in the Senate of the Thirtieth Legislature of the State of Hawai‘i, Regular Session of 2019.

[Signature]
President of the Senate

[Signature]
Clerk of the Senate