

JAN 18 2019

A BILL FOR AN ACT

RELATING TO HEALTH.

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

1 SECTION 1. The legislature finds that homelessness is one
2 of the most pressing problems in Hawaii and requires a robust,
3 comprehensive solution to increase the pace at which the State
4 is gaining ground on addressing the issue. For the first time
5 in years, the homelessness rate in Hawaii decreased in 2017.
6 Hawaii is turning the tide on the homelessness crisis by
7 investing in proven programs like housing first and rapid
8 rehousing. The network of people and resources engaged in
9 addressing homelessness has begun to make more efficient use of
10 available resources by implementing a data-driven, collaborative
11 process that matches individuals and families experiencing
12 homelessness with the services they need. However, Hawaii
13 continues to have the highest per capita rate of homelessness of
14 any state in the United States, with an estimated 7,220
15 individuals living on the streets and in shelters. Therefore,
16 the legislature finds that it is imperative for the State to
17 increase the investment in and commitment to the solution.



1 The legislature has identified California's section 1115
2 demonstration project, known as the Whole Person Care pilot
3 program, which is a collaborative and comprehensive effort
4 authorized under California's Medi-Cal 2020 waiver. The Whole
5 Person Care pilot program is composed of five-year pilot
6 programs to test locally-based initiatives to coordinate
7 physical health, behavioral health, and social services for
8 vulnerable beneficiaries of the California Medical Assistance
9 Program (Medi-Cal), California's state medicaid program, who are
10 high users of multiple health care systems and continue to have
11 poor outcomes. Medi-Cal beneficiaries include, among other
12 groups, individuals who are experiencing homelessness or at risk
13 of homelessness. Pilot groups under the Whole Person Care pilot
14 program are composed of public and private entities that
15 determine the needs for their target populations and provide
16 services that cover activities, which would not otherwise be
17 reimbursed by medicaid, to improve care for their target
18 populations. Through collaborative leadership and systematic
19 coordination, Whole Person Care pilot groups share data between
20 systems, coordinate care in real time, and evaluate individual
21 and population health progress.



1 The Whole Person Care pilot program is authorized under a
2 section 1115 waiver, which is approved by the Secretary of
3 Health and Human Services as a project that is likely to promote
4 the objectives of the medicaid program by using methods that
5 differ from the standard federal medicaid requirements. The
6 purpose of these demonstrations, which give states additional
7 flexibility to design and improve their programs, is to
8 demonstrate and evaluate state-specific policy approaches to
9 better serve medicaid populations. Many states, such as
10 California for the Whole Person Care pilot program, have used
11 1115 medicaid waivers to expand medicaid to new groups or to
12 experiment with new or updated delivery systems.

13 The legislature further finds that, like California's Medi-
14 Cal 2020 program, Hawaii's QUEST Integration project is a
15 statewide section 1115 demonstration project that provides
16 medicaid coverage for medical, dental, and behavioral health
17 services through competitive managed care delivery systems.
18 Through the QUEST Integration demonstration project, the State
19 provides coverage to children and adults who are eligible under
20 the medicaid state plan as well as additional children and
21 adults, including former adoption assistance children, certain



1 parents, and certain individuals who receive home and community-
2 based services. All beneficiaries are eligible for state plan
3 benefits or, in the case of the Affordable Care Act childless
4 adult group, approved benefits under the alternative benefit
5 plan, as well as additional services based on medical necessity
6 and clinical criteria provided through an integrated managed
7 care delivery system.

8 The legislature notes that the department of human services
9 has a pending request for an extension and expansion of the
10 QUEST Integration section 1115 demonstration project to enable
11 the department to provide and coordinate supportive housing-
12 related activities and services, as appropriate, with the goal
13 of promoting community integration, optimal coordination of
14 resources, and self-sufficiency for beneficiaries experiencing
15 chronic homelessness who also have a disability, mental health
16 condition, substance abuse disorder, or complex health needs.
17 Services include outreach and engagement services, supported
18 employment services, and other services identified as necessary
19 to meet supportive housing goals for the beneficiary.

20 The legislature further notes that the Hawaii Pathways
21 Project is the impetus for the request to expand the QUEST



1 Integration section 1115 demonstration project in order to
2 assist the department in providing further services and coverage
3 of eligible state medicaid beneficiaries who are experiencing
4 homelessness. The Hawaii Pathways Project was the first to
5 adopt the evidence-based Pathways Housing First model in Hawaii.
6 This initiative, which provided services from August 2014 to
7 March 2018, focused on providing permanent supportive housing to
8 chronically homeless individuals struggling with substance use
9 or substance use with mental illness. The model seeks to lower
10 the barriers to housing by providing housing first, then
11 implementing wraparound treatment and life skill services
12 necessary to help individuals stabilize, improve quality of
13 life, and maintain housing beyond the support of the project.
14 As a result of this collaborative program, ninety-nine
15 individuals moved into permanent housing and maintained a ninety
16 per cent housing retention rate. The results of the program
17 showed significant improvement in the quality of life and
18 physical health that clients experienced from the time of
19 enrollment to the close of the program. Furthermore, the total
20 estimated health care cost was reduced because of the decrease
21 in utilization of health care services.



1 With the proven success of the Hawaii Pathways Project, the
2 legislature finds that a similar project, such as California's
3 Whole Person Care pilot program, will be beneficial in enabling
4 the State in expanding and providing more comprehensive care and
5 services to a greater number of homeless individuals or
6 individuals who are at risk of being homeless. A comprehensive
7 program will facilitate a collaborative public and private
8 initiative that institutes reforms and focuses on evidence-based
9 interventions to drive better health outcomes and quality of
10 life improvements while decreasing costs in medical care and
11 intervention. Expanding the State's QUEST Integration
12 demonstration project to include services provided by this type
13 of comprehensive program to assist the homeless will allow the
14 State flexibility in instituting greater reform and impact
15 across various systems of care and service that are beyond the
16 federal standard.

17 The purpose of this Act is to:

18 (1) Require the department of human services to establish
19 and implement a whole person care pilot program to
20 test locally-based initiatives to coordinate physical
21 health, behavioral health, and social services for



1 beneficiaries of the State's QUEST Integration
2 program;

3 (2) Require the department of human services to submit an
4 application for an amendment to the QUEST Integration
5 section 1115 demonstration project to expand its QUEST
6 Integration project to provide for the whole person
7 care pilot program; and

8 (3) Appropriate funds to the department of human services
9 for the establishment and implementation of the whole
10 person care pilot program.

11 SECTION 2. (a) The department of human services shall
12 establish a whole person care pilot program to test locally-
13 based initiatives to coordinate physical health, behavioral
14 health, and social services for beneficiaries of the State's
15 QUEST Integration program. Each local pilot program established
16 in accordance with procedures adopted by the department of human
17 services shall integrate services among local entities that
18 serve the target population through collaboration procedures,
19 governance, and information sharing data systems and processes.
20 The department of human services shall adopt procedures and



1 requirements for local pilot programs and eligibility criteria
2 for pilot program enrollees.

3 (b) Each local pilot program shall be composed of the
4 following:

5 (1) A lead entity, which shall be:

6 (A) A county;

7 (B) A Hawaii health systems facility within a
8 regional health care system;

9 (C) A health care facility or hospital; or

10 (D) A consortium of any entities identified under
11 subparagraphs (A) through (C); and

12 (2) A group of participating entities, to be determined by
13 the lead entity through a collaborative process at the
14 local level, which shall include but not be limited
15 to:

16 (A) One health plan provider participating in the
17 State's QUEST Integration program;

18 (B) The Hawaii interagency council on homelessness;

19 (C) The behavioral health administration of the
20 department of health;



1 (D) The corrections division of the department of
2 public safety; and

3 (E) At least two community partners that have
4 significant experience serving the target
5 population, such as physician groups, clinics,
6 hospitals, and community-based organizations;
7 provided that the community partner shall not
8 serve as a lead entity;

9 provided that if the target population consists of
10 individuals who are experiencing or at risk of
11 homelessness and have a demonstrated medical need for
12 housing or supportive services, participating entities
13 shall include local housing authorities, local
14 continuum of care programs, and community-based
15 organizations serving homeless individuals.

16 (c) Each local pilot program shall work with participating
17 entities to determine and identify a target population composed
18 of high-risk, high-utilizing beneficiaries of the State's QUEST
19 Integration program in the geographic area that the local pilot
20 program serves and assess the target population's unmet need to
21 provide integrated services to high users of multiple systems.



1 The target population shall be identified through a collaborative
2 data approach to identify common patients who frequently access
3 urgent and emergent services across multiple systems. Target
4 populations may include but not be limited to individuals:

- 5 (1) With repeated incidents of avoidable emergency use,
6 hospital admissions, or nursing facility placement;
 - 7 (2) With two or more chronic conditions;
 - 8 (3) With mental health or substance use disorders;
 - 9 (4) Who are experiencing homelessness; and
 - 10 (5) Who are at risk of homelessness, including individuals
11 who may experience homelessness upon release from
12 medical or mental health facilities or incarceration.
- 13 Beneficiaries of the State's QUEST Integration program who are
14 included in an identified target population shall be enrolled in
15 the pilot program. Individuals within a target population who
16 are not beneficiaries of the State's QUEST Integration program
17 may enroll in the pilot program only at the discretion of the
18 local pilot program, but funding in support of any services
19 provided to these individuals shall not be eligible for federal
20 financial participation.



1 (d) Each local pilot program shall develop a plan to
2 support activities that will:

3 (1) Build infrastructure to integrate services among local
4 entities that serve the target population;

5 (2) Provide services that are not otherwise covered or
6 directly reimbursed by the State's QUEST program to
7 improve care for the target population, such as
8 housing components; and

9 (3) Assist in the implementation of strategies to improve
10 integration, reduce unnecessary utilization of health
11 care services, and improve health outcomes.

12 (e) Services that a local pilot program may provide
13 include but are not limited to:

14 (1) Individual housing transition services to assist pilot
15 program enrollees with obtaining housing, including:

16 (A) Conducting a tenant screening and housing
17 assessment that identifies the pilot program
18 enrollee's preferences and barriers related to
19 successful tenancy;

20 (B) Developing an individualized housing support plan
21 based upon the housing assessment that addresses



- 1 identified barriers, including short- and long-
2 term measurable goals for each issue, establishes
3 the pilot program enrollee's approach to meeting
4 the goals, and identifies when other providers or
5 services, reimbursed and not reimbursed by
6 medicaid, may be required to meet each goal;
- 7 (C) Assisting with the housing application and search
8 process, including identifying and securing
9 available resources to assist with subsidizing
10 rent;
- 11 (D) Identifying and securing resources to cover
12 expenses, such as the security deposit, moving
13 costs, furnishings, adaptive aids, environmental
14 modifications, moving costs, and other one-time
15 expenses;
- 16 (E) Ensuring that the living environment is safe and
17 ready for occupancy;
- 18 (F) Assisting in arranging for and supporting the
19 details of the transition;



- 1 (G) Developing a housing support crisis plan that
- 2 includes prevention and early intervention
- 3 services when housing is jeopardized; and
- 4 (H) Other housing transition services as determined
- 5 by the local pilot program that best serve the
- 6 needs of the target population;
- 7 (2) Individual housing and tenancy sustaining services to
- 8 support individuals in maintaining tenancy once
- 9 housing is secured, including:
 - 10 (A) Providing early identification and intervention
 - 11 for behaviors that may jeopardize housing, such
 - 12 as late rental payment and other lease
 - 13 violations;
 - 14 (B) Educating and training on the role, rights, and
 - 15 responsibilities of the tenant and landlord;
 - 16 (C) Coaching on developing and maintaining key
 - 17 relationships with landlords or property managers
 - 18 with a goal of fostering successful tenancy;
 - 19 (D) Assisting in resolving disputes with landlords or
 - 20 neighbors to reduce risk of eviction or other
 - 21 adverse action;



- 1 (E) Advocating and linking individuals to community
- 2 resources to prevent eviction when housing is or
- 3 may potentially become jeopardized;
- 4 (F) Assisting with the housing recertification
- 5 process;
- 6 (G) Coordinating with the tenant to review, update,
- 7 and modify the tenant's housing support and
- 8 crisis plan on a regular basis to reflect current
- 9 needs and address existing or recurring housing
- 10 retention barriers;
- 11 (H) Continuing training in being a responsible tenant
- 12 and lease compliance, including ongoing support
- 13 with activities related to household management;
- 14 and
- 15 (I) Other housing and tenancy sustaining services as
- 16 determined by the local pilot program that best
- 17 serve the needs of the target population;
- 18 (3) Transportation services; provided that such services
- 19 are:
- 20 (A) Necessary to achieve or maintain medical or
- 21 behavioral health stability;



- 1 (B) Directly linked to the overarching strategies and
- 2 goals identified by the local pilot program for
- 3 the target population; and
- 4 (C) Not covered by medicaid;
- 5 (4) Recuperative care or medical respite services that
- 6 provide short-term residential care after an acute or
- 7 post-acute medical discharge of individuals who are
- 8 homeless or those with unstable living situations and
- 9 are too ill or frail to recover from a physical
- 10 illness or injury in their usual living environment,
- 11 but are not ill enough to be in a hospital; provided
- 12 that such services are:
 - 13 (A) Necessary to achieve or maintain medical
 - 14 stability, which may require behavioral health
 - 15 interventions;
 - 16 (B) Directly linked to the overarching strategies and
 - 17 goals identified by the local pilot program for
 - 18 the target population;
 - 19 (C) Not provided for more than ninety days in
 - 20 continuous duration;



- 1 (D) Not funded by moneys dedicated to building
2 modification or building rehabilitation; and
3 (E) Not covered by medicaid;
- 4 (5) Sobering centers that provide a safe, supportive
5 environment for individuals found to be publicly
6 intoxicated, primarily for those who are homeless or
7 those with unstable living situations; provided that
8 such services are:
- 9 (A) Necessary to achieve or maintain medical
10 stability, which may require behavioral health
11 interventions;
- 12 (B) Directly linked to the overarching strategies and
13 goals identified by the local pilot program for
14 the target population;
- 15 (C) Not provided for more than twenty-four hours in
16 continuous duration;
- 17 (D) Not funded by moneys dedicated to building
18 modification or building rehabilitation; and
19 (E) Not covered by medicaid;
- 20 (6) Field-based care, which includes but is not limited to
21 the delivery of services by case managers, therapists,



1 or nurses on the streets or at shelters; provided that
2 such services are:

3 (A) Necessary to achieve or maintain medical or
4 behavioral health stability;

5 (B) Directly linked to the overarching strategies and
6 goals identified by the local pilot program for
7 the target population; and

8 (C) Not covered by medicaid; and

9 (7) Benefits advocacy and legal assistance to allow pilot
10 program enrollees to enroll in benefits and remove
11 barriers to benefit enrollment, health care, and
12 housing.

13 (f) The department of human services shall develop and
14 implement policies and procedures for the funding of the pilot
15 program and each local pilot program, including eligibility
16 criteria for the funding of services provided to each target
17 population as well as criteria for the use of federal funds, if
18 applicable.

19 (g) The department of human services shall develop and
20 implement policies and procedures to require local pilot
21 programs to collect data related to the target population and



1 services provided, share data across systems, coordinate care in
2 real time, and evaluate individual and target population health
3 progress.

4 (h) The department of human services shall submit progress
5 reports, including any proposed legislation, to the legislature
6 no later than twenty days prior to the convening of the regular
7 sessions of 2020 to 2023 and a final report, including any
8 proposed legislation, no later than twenty days prior to the
9 convening of the regular session of 2024.

10 (i) The whole person care pilot program shall cease to
11 exist on June 30, 2024.

12 SECTION 3. The department of human services shall submit
13 an application to the United States Secretary of Health and
14 Human Services for an amendment to the QUEST Integration section
15 1115 demonstration project to expand its QUEST Integration
16 project to provide for the whole person care pilot program.

17 SECTION 4. There is appropriated out of the general
18 revenues of the State of Hawaii the sum of \$200,000,000 or so
19 much thereof as may be necessary for fiscal year 2019-2020 and
20 the same sum or so much thereof as may be necessary for fiscal



S.B. NO. 431

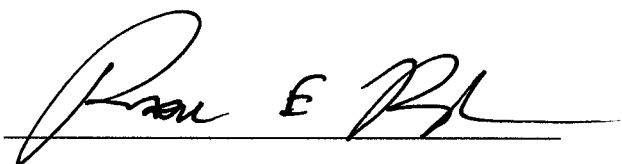
1 year 2020-2021 for the establishment and implementation of the
2 whole person care pilot program.

3 The sums appropriated shall be expended by the department
4 of human services for the purposes of this Act.

5 SECTION 5. This Act shall take effect on July 1, 2019.

6

INTRODUCED BY:



Kurt Jewell



S.B. NO. 431

Report Title:

Homelessness; Medicaid; Section 1115 Demonstration Project; Whole Person Care Pilot Program; Department of Human Services; Appropriation

Description:

Requires the department of human services to establish and implement a whole person care pilot program and submit an application for an amendment to the QUEST Integration section 1115 demonstration project to expand its QUEST Integration project to provide for the whole person care pilot program. Appropriates funds to the department of human services for the establishment and implementation of the whole person care pilot program.

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

