
A BILL FOR AN ACT

RELATING TO HOMELESSNESS.

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

1 SECTION 1. The legislature finds that the State has one of
2 the highest rates of homelessness per capita in the nation.
3 Additionally, the legislature finds that The Queen's Medical
4 Center provides the majority of medical care to the State's
5 homeless population. According to the Laulima Data Alliance,
6 from January 2016 to September 2018, The Queen's Medical Center
7 experienced approximately sixty per cent of all hospital visits
8 by homeless persons on Oahu and forty-three per cent of all
9 hospital visits by homeless persons in the State.

10 Recognizing the high needs of the State's most medically
11 fragile homeless populations, the legislature established the
12 emergency department homelessness assessment pilot program and
13 the medical respite pilot program through Act 209, Session Laws
14 of Hawaii 2018. Through contracts with the department of human
15 services, The Queen's Medical Center was able to provide medical
16 respite services and intensive care navigation services to



1 patients experiencing homelessness or patients at risk of
2 experiencing homelessness.

3 Through the emergency department homelessness assessment
4 pilot program, the Queen's Care Coalition was able to identify
5 homeless patients with high utilization of emergency department
6 services and deliver short-term, post-discharge navigation
7 services to special populations to reduce reliance on acute care
8 by connecting patients to community services. The Queen's Care
9 Coalition provided one hundred thirty-one homeless adults with
10 navigation services during the contract period of September 1,
11 2018, to June 30, 2019. Of the homeless adults served:

12 (1) Ninety-four per cent were connected with community
13 resources;

14 (2) Sixty-five per cent were document ready for housing;
15 and

16 (3) Ninety-two per cent of the individuals that were
17 connected to permanent housing were able to maintain
18 permanent housing after three months.

19 The emergency department homelessness assessment pilot program,
20 as executed by the Queen's Care Coalition, was able to reduce:



- 1 (1) The number of unnecessary emergency department visits
2 by thirty-nine per cent;
- 3 (2) The number of hospitalized days by seventeen per cent;
4 and
- 5 (3) The amount of ambulance utilization by fifty-three per
6 cent.

7 The legislature further finds that Queen's Care Coalition
8 had significant cost saving to three major Med-QUEST managed
9 care plans. Analysis on total cost of care pre- and post-
10 Queen's Care Coalition has found an average of thirty-nine per
11 cent reduction in total cost of care.

12 The National Health Care for the Homeless Council
13 recognizes medical respite as a needed service and response to
14 the circumstances that people experiencing homelessness face.
15 These individuals suffer profound disparities in health and
16 mortality compared to the general population. After an acute
17 care stay, recovery is extremely difficult on the streets, while
18 shelters generally are not equipped to support people who are
19 sick or injured.

20 The need for medical respite care for individuals
21 experiencing homelessness is a critical part of the continuum of



1 care for this population. Through a partnership with the
2 Institute for Human Services, The Queen's Medical Center is able
3 to provide medical respite to homeless patients who have been
4 discharged and may need additional time to heal in a more
5 appropriate level of care setting.

6 The legislature also finds that the emergency department
7 homelessness assessment pilot program has demonstrated positive
8 results in delivering care coordination services, by a
9 multidisciplinary team, to mitigate the number of unnecessary
10 emergency department visits by patients experiencing
11 homelessness or patients at risk of experiencing homelessness
12 and merits continuation. Additionally, the legislature finds
13 that the medical respite pilot program has demonstrated positive
14 results in delivering medical respite services for eligible
15 individuals experiencing homelessness by providing certain
16 services, including meals; case management; and medical,
17 nursing, and psychiatric care and merits continuation.

18 Furthermore, the legislature finds that the department of
19 human services supports the continuation of both programs and is
20 in the process of transitioning the programs from the



1 department's homeless program office to the department's Med-
2 QUEST division.

3 Finally, the legislature finds that because the pilot
4 programs' funding ends on June 30, 2020, additional supports are
5 necessary to ensure no lapse in resources for the emergency
6 department homelessness assessment pilot program and medical
7 respite pilot program, as the programs are transitioned to the
8 Med-QUEST division.

9 The purpose of this Act is to:

- 10 (1) Extend the duration of the emergency department
- 11 homelessness assessment pilot program and medical
- 12 respite pilot program to December 31, 2021; and
- 13 (2) Appropriate funds for the pilot programs.

14 SECTION 2. Act 209, Session Laws of Hawaii 2018,
15 section 7, as amended by Act 128, Session Laws of Hawaii 2019,
16 section 1, is amended as follows:

17 1. By amending subsection (c) to read:

18 "(c) The department of human services shall work with the
19 participating hospital under the emergency department
20 homelessness assessment pilot program to collect and analyze
21 data to be included in a report that contains a summary and



1 explanation of the data regarding the efficacy of emergency
2 department intervention by the multidisciplinary team in
3 mitigating the number of unnecessary emergency department visits
4 by patients experiencing homelessness or patients at risk of
5 experiencing homelessness. The report shall contain findings
6 and recommendations, including any proposed legislation, for
7 continuation, modification, or termination of the pilot program.
8 The department of human services shall submit the report to the
9 legislature no later than twenty days prior to the convening of
10 the regular [~~session~~] sessions of 2020[-] and 2021."

11 2. By amending subsection (e) to read:

12 "(e) The emergency department homelessness assessment
13 pilot program shall cease to exist on [~~June 30, 2020.~~]
14 December 31, 2021."

15 SECTION 3. Act 209, Session Laws of Hawaii 2018,
16 section 9, as amended by Act 128, Session Laws of Hawaii 2019,
17 section 1, is amended as follows:

18 1. By amending subsection (c) to read:

19 "(c) The department of human services shall submit a
20 report to the legislature of its findings and recommendations,
21 including any proposed legislation, regarding the pilot program



1 no later than twenty days prior to the convening of the regular
2 [~~session~~] sessions of 2020[-] and 2021."

3 2. By amending subsection (e) to read:

4 "(e) The medical respite pilot program shall cease to
5 exist on [~~June 30, 2020.~~] December 31, 2021."

6 SECTION 4. There is appropriated out of the general
7 revenues of the State of Hawaii the sum of \$ or so
8 much thereof as may be necessary for fiscal year 2020-2021 for
9 the department of human services to continue the emergency
10 department homelessness assessment pilot program; provided that:

11 (1) The department of human services shall reimburse the
12 participating hospital for expenses directly related
13 to the emergency department homelessness assessment
14 pilot program;

15 (2) No funds shall be disbursed to a participating
16 hospital unless matched on a dollar-for-dollar basis
17 by the participating hospital; and

18 (3) All funds designated as matching funds by the
19 participating hospital shall be expended by the
20 participating hospital for the pilot program.



1 The sum appropriated shall be expended by the department of
2 human services for the purposes of this Act.

3 SECTION 5. There is appropriated out of the general
4 revenues of the State of Hawaii the sum of \$ or so
5 much thereof as may be necessary for fiscal year 2020-2021 for
6 the department of human services to continue the medical respite
7 pilot program; provided that:

8 (1) The department of human services shall reimburse a
9 participating hospital for expenses directly related
10 to the medical respite pilot program;

11 (2) No funds shall be disbursed to a participating
12 hospital unless matched on a dollar-for-dollar basis
13 by the participating hospital; and

14 (3) All funds designated as matching funds by the
15 participating hospital shall be expended by the
16 participating hospital for the pilot program.

17 The sum appropriated shall be expended by the department of
18 human services for the purposes of this Act.

19 SECTION 6. Statutory material to be repealed is bracketed
20 and stricken. New statutory material is underscored.



1 SECTION 7. This Act shall take effect on December 31,
2 2059; provided that sections 4 and 5 shall take effect on July
3 1, 2050.



Report Title:

Department of Human Services; Emergency Department Homelessness Assessment Pilot Program; Medical Respite Pilot Program; Appropriation

Description:

Extends the emergency department homelessness assessment pilot program and medical respite pilot program to December 31, 2021. Appropriates funds. Effective 12/31/2059. (HD1)

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

