

STATE COUNCIL ON MENTAL HEALTH (SCMH) MEETING

February 13, 9:00 a.m. – 12:00 p.m.

in-person at Hale F Conference Room, 2201 Waimano Home Road, Pearl City 96782 and via Zoom

APPROVED MINUTES

Members Present: Katherine Aumer, John Betlach, Lea Dias, Heidi Ilyavi, Jackie Jackson, Kathleen Merriam, Ray Rice, Richard Ries, Mary Pat Waterhouse

Members Absent: Antonino Beninato

Members Excused: Eileen Lau-James, Kristin Will, Jon Fujii, Naomi Crozier, Jean Okuda

DOH Present: Kenneth Fink, Maria Tsuji, Courtenay Matsu, Keli Acquaro, Madeleine Hiraga-Nuccio, Valerie Yin, Jocelyn Nazareno, Carolyn Weygan-Hildebrand

Guests: Governor Josh Green, Christie Montague-Hicks, Jessica Stevens, Raelyn Reyno-Yoeman, Deanne Aoki, Cyndy Dang

I. Call to Order

Katherine Aumer, chairperson, called the meeting to order at 9:01 am and quorum was established at time.

II. New Business Led by Chairperson

A. “Meet and Greet, Talk Story on Breaking Silos” - Governor Josh Green

(Close to transcript) Thank you for having me zoom in. My hope is just to be an open book to this group. I am passionate about mental health care for our people. That means our workers and our workforce and those who are wrestling with mental health issues in our community. I'm sharing my direct contact number for emergencies, and we can talk about key issues, especially on mental health care. My hope is to make sure that we advance our cause for access to healthcare, particularly mental health care and wellness during my term as governor. And I'm trying to do some things that are fundamentally and foundationally different than we have done before. For many years we simply don't have enough care for all those who need and that's been a perpetual challenge because it's difficult in healthcare to get people to go and work in mental health care. The Maui crisis delivered a traumatic blow where people are at isolation and challenges and many people had to do intense work in conditions that were super difficult. We need to be supportive. We were lucky to have our Trauma Informed Care Team and Tia Hartsock is the lead person; we use her to engage in all sorts of additional service and support. Trauma from the Maui Wildfires cascaded not only in Lahaina but rest of Maui. There were families and people displaced all over and this became a big issue for us. So, there is a couple of things we are doing: (1) Be a trauma informed care state, (2) we are amping our capacity to deliver behavioral health care, specifically about mental health care and addiction medicine. In the first year we created the Health Program, which is loan forgiveness. Loan forgiveness for any healthcare professionals across the spectrum. Any licensed healthcare delivery person can get their loans forgiven at a large clip. We did 485 scholarships in the first cohort, and we are doing another 515 to 700 which means we need a lot more personnel into the field and that's a big priority for me. We can build our resiliency up in partnership with Tia and the

providers, but we need to connect people to the care, this is another priority. Additional initiatives we're taking is pushing more money into Medicaid for those who are amongst our foreign 65,000 Medicaid individuals, our clients. Finally, we are spending extra energies on individuals who are housing unstable or displaced into a homeless condition and placing them in our Kau Hale Statewide System. The government are allowing us to use Medicaid resources to house people directly, to pay for housing. I'm releasing an executive order, declaring Hawaii is a Trauma-Informed State, which should guarantee that our departments when they are expanding, create trauma informed workplaces. This should give us the upper hand on grants, as we go forward in this space. There's a convened Summit on Maui about Hawaii Inform Mental Health Care and Wellness in the framework of our disaster. I will be speaking about some of these things in DC on February 24th with the National Governors' Association. We're trying to be a model and provide as much support as possible, it's going to be strong incremental improvements. So that's where I am as a physician, Governor.

Q&A, Discussion

Q- Like Maui, we have a bit of a shortage across other neighboring islands as well. What are some of your thoughts about addressing that in terms of what we've been seeing here, especially in our neighboring islands, there's quite a bit of shortage, recruiting people out there to provide the mental health care services that are needed. Do you see any point of strategy that you might want to implement or see or vision in that way?

A-Yes. We took one initial action; we had an opportunity for Big Island. We have severe shortages on all the neighbor islands, but Big Island has always had this deep shortage. So, in addition to the 30 million that had been allocated for the help program for this two-year cycle, 485 people going in in year one, and with that was the \$10 million hunk. So, the \$20 million hunk will be even larger, although some will be carryover because people are more than one year, in a lot of cases. We got a \$5 million bonus from a philanthropist, Marc Benioff, over on Big Island to do only Big Island additional \$5 million with a loan forgiveness. And now we will pivot also to individual philanthropy, and others that are interested in this approach in each of the other neighbor island counties. So, it really helped us because that essentially doubled the number of people that we could direct towards Big Island. So, we're trying to direct additional people to Maui County right now because the likelihood of PTSD there is so high to help with the shortage. Our expectation is to ask for \$20 million a year going forward for the better part of five or seven years, because by that point we probably are going to have a surplus of healthcare providers that are debt free. And then we'll maybe tone it down.

Q- There are a couple of acupuncturists that work with people that are traumatized, as well as the drug treatment programs. Also, the PTs say that they're not covered by this loan forgiveness program.

A-It's for anyone who is a licensed health care professional. Acupuncture is licensed in the state, so they're covered. They may not have gotten it in the first round, because we had a couple 1000 applicants, but there will be some. The criteria are needs based. That's why we're doing a lot of extra scholarships for Maui.

Q-For the provisional licensing, a lot of professionals talking about the hardship of internship. It can be hard for them to get in their hours. What about them being covered through the provisional licensing in that process of getting their license?

A-For the scholarships, we extended it to residence. Residents can get up to a quarter of the value of the \$50,000 per year if people are in their training program. But for the most part, people should just continue their program and get it done so that they can be fully licensed.

Q-Do you support that provisional licensing for intern who are on their way, in other words they can have a provisional license in behavioral health care and build those hours through Medicare? It's a new bill that's going out on the table.

A-No, if it becomes law, I'll look at it.

Q.-Because we are struggling significantly on the Big Island, especially on the Kona side; during the staffing issue, housing is a huge issue for our staff. That's been a big hold back on what we're trying to get staff who can do affordable housing within the community in Kona, are you familiar with the Manago Project? The Manago Hotel will be converted into a workforce housing and open to also mental health, not limited to just hospitals. It would be people for nonprofits working within the community. I would really appreciate if your hands were on that project and help it move along. I feel like as we get closer and closer to it more and more people are getting involved to put their hands up and slow the process down. That any hands on would be greatly appreciated on our part.

A-Yes, these are county things you are mentioning but we can work with Mayor Roth and see if we can help them out. The mayor could do an emergency declaration or emergency mayor's order.

Q-CAMHD contracts with mental health providers across the state to provide intensive mental health services to Medicaid eligible youth. And the contracted providers see this loan forgiveness program as a huge potential way to boost our behavioral health workforce. They do not bill Medicaid directly, they bill CAMHD, and we pull down the Medicaid reimbursement. Although they are serving the population that's required by the loan forgiveness program, because they're not billing Medicaid directly, they were asking if they would still be candidates for the loan forgiveness program.

A-Yes, absolutely. And we will put a caveat in the descriptor. So, you can tell them that they should apply?

Q-Have you've had any thoughts or ideas around destigmatizing mental health especially for keikis; for adults as well, but especially for our keiki in schools? And if you've had any specific strategy or agenda regarding mental health care, especially for children and keikis in Hawaii,

A-We'd like to do some public service announcements and just some community gatherings, especially at schools, where we have our trauma team come in, and invite other providers from the community to do talk story at the schools about what struggles people have and what is so common and normal to see. One of the things that we're going to do is have these 2000 healthcare workers that come through Hawaii Health Corps Scholarship, enlist them to be a part of the dialogue in lots of different areas. Sometimes it'll be medical outreach work that we do, when we have a neat project to all kind of do it in a mission driven way. Sometimes it'll be schools and education because health literacy is a big missing part of what we have been able to do, because we still have enough people all these years. And I think this is going to be a benefit.

Q-There is a lack of pediatric mental health beds on the Big Island and a lot of times pediatric patients must be flown to Oahu. I heard from a representative of the Department of Health, that there was an offer from a hospital on island on Big Island, to provide beds if the Department of Health would staff them for pediatric mental health, behavioral health patients. And there was a question of we can't get staffing. Is that something you might be able to work on to maybe recruit an expert psychiatrist and

pediatric mental health issues and bring them in whatever it costs and staff these beds and use this person to consult on other islands for in that specialty?

A-The answer is no, we can't do it at any cost, because we can't function that way. We don't have that capacity. The Department of Health isn't necessarily the right group. The right group is through Hawaii Health Systems Corporation and have them staff at some of the hospitals. So, they should hire inpatient psychiatrist and pediatric psychiatrist. The challenge is that the volume is difficult.

B. Approval of Minutes

Lea Dias moved to approve the January 9, 2024 minutes. Mary Pat Waterhouse seconded. The minutes was approved unanimously.

C. Community Input

None

III. Old Business

A. 2024 Legislation by Ad Hoc on 2024 Legislation Committee

Mary Pat Waterhouse guided the Council on the legislative bills that the ad hoc committee reviewed, and their recommendations to support, oppose or have no action on legislative bills.

In summary, the Council voted to support the following bills (and/or their companion bills) as follows: SB343 SD1, SB1444 SD1 & HB1830, SB2071, HB3141, HB1648, SB3094, SB2345, SB2246, SB3139, SB1831, SB2005, SB2467, SB2460, SB3137, SB2465, HB2800.

The Council voted to support the following with other actions.

SB760. A motion for Council to support the intent of the bill but would like the measure to address some concerns – training, patient safety, and complexity of consumers medication. K. Aumer motioned to postpone voting and invite presenters to come to the March meeting. Richard Ries seconded. The motion passed with the following votes: Yes -L. Dias, Jackie Jackson, Kathleen Merriam, M.P. Waterhouse, K. Aumer, R. Ries; No- J. Betlach; Abstained- Ray Rice. Cyndy Dang, guest, recommended inviting Dr. Gerard Akaka or Judy (?).

HB1906. A motion to support this bill was not seconded. To help the Council understand more about the platform mentioned in the bill, the Department of Education will be invited to provide more information. Christine Montague-Hicks, guest from DOE, agreed to the request.

HB2451 HD1 -M.P. Waterhouse motioned that the Council support with comments, and specifically support telehealth and adequate care but leaving open the potential of stay. Heidi Ilyavi seconded. The motion was unanimously supported.

HB2451 HD1 – M. Waterhouse make a motion that Council support the telehealth and adequate care. H. Ilyavi seconded. The Council is in support of the telehealth aspect of the bill. For the length of stay, they should leave it open for the potential of the stay. Support with comments.

HB2630 – K. Aumer commented that bill has change and Council is not ready to provide testimony.

K. Aumer referred to the Office of Information Practice handout on the options that the Council have to move forward. She moved to go with second option and allow staff to lead in regard to

writing testimonies with active participation of the members that led the review of the bills. J. Betlach seconded. The motioned was approved unanimously. Staff will work with M.P. Waterhouse (ACT, CIP measures), K. Aumer (Workforce measures), Kathleen Merriam (Crisis measures), H. Ilyavi (Forensic measures), J. Jackson (Youth measures). For all the topics, she will work with M.P. Waterhouse further if needed.

B. Council Planning Retreat Update by Council Staff

The Council decided to have the retreat on May 14, 2024. Staff will continue to plan for the retreat.

VI. Information Reports Council Members

A. Island Representative Reports – Jackie Jackson

Oahu Service Area Board (OSAB). (Transcript) The SAB is keeping an eye on provisional licensure prescriptive authority and the AC T bills that are coming up this session.

Hawaii Service Area Board (HSAB). – J. Betlach

There is an issue regarding insurance. One heard : United Health AlohaCare saying they just don't pay, you can file the claims for services for mental health, but they just don't pay them. They'll take them but then they don't pay out on them; Sixty percent is what AlohaCare pays when they do pay for counseling. Aloha pays 20 to 30% less in some cases; Also, Ohana Care once approved, they only get case management and behavioral health is not on an outpatient. There're no outpatient contracts given or providers. The SAB tabled the agenda item until further information from J. Fujii is given.

There were no other reports.

VII. Meeting Evaluation/Future Agenda Items

None other than those discussed already.

VIII. Adjournment

The meeting was adjourned at 11:54 a.m.

Handouts (Meeting Packet)

1. State Council on Mental Health (SCMH) February 13, 2024 Meeting Agenda
2. SCMH List of Bills for February 13, 2024 Voting
3. Measure Tracking Report SCMH Ad Hoc on 2024 Legislation Committee as of February 10, 2024
4. Sunshine Law Options to Address State Legislative Issues and Measures January 2015
5. SCMH-DVR-VRA Report 2.13.24
6. SCMH Attendance Log SFY 2023 January 2024
7. State Council on Mental Health Draft Minutes for January 9, 2024
8. SB263_SCMH_02-13-24 HWN and HHS Written Testimony Only

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