



**STATE OF HAWAII  
DEPARTMENT OF HEALTH  
KA 'ŌIHANA OLAKINO  
P.O. BOX 3378  
HONOLULU, HI 96801-3378**

**MEETING NOTES**

**SCR16 SD1 Community Health Worker Professional Standards Task Force**

Thursday, August 28, 2025, 1:30 p.m. via Microsoft Teams  
Meeting ID: 226 629 668 063 3  
Password: 5p3wE7n6

<https://shorturl.at/JWKK8>

Dial in by phone:  
+1 808-829-485,933411081#  
Phone conference ID: 933 411 081#

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**1. Call to Order, Public Notice, and Quorum**

- a. [August 28 Attendance Quorum and Voting Sheet.xlsx](#)
- b. Quorum established

**2. Introduction of Task Force Members and Discussion of Task Force Purpose**

- a. Licensure and certification are distinct legal concepts and involve separate processes. The definitions/processes specific to each pathway were previewed on screen for participants.
- b. DOH extended its appreciation to members for their participation in interviews. Priorities identified during interviews included: Need for Recognition and Sustainability; Compensation and Living Wage; Certification Benefits and Risks; CHW Involvement in Decision-Making; Cultural Competence and Community Focus; Reimbursement and Funding Barriers; Core Competencies and Standards; and Avoiding Over-Regulation.
- c. DOH emphasized that the purpose of this task force is to identify *recommendations* by CHWs and Allies to determine professional standards, thus this task force will not result in direct policy change. The State of Hawaii has no authority to impose any standards on CHWs in the absence of licensure.
- d. While the Senate has asked that we determine professional standards for Community Health Workers, the two questions that we must ask before we can even begin to proceed on the "what" is whether CHWs should be subject at all to licensure, and/or, if a certification program for CHWs should exist.

**3. Discussion and Decision-Making**

- a. If this task force answers "no" to both questions, then this task force would report to the Legislature that no action should be taken at this time.

**b. Voting Item #1: “Shall the Legislature enact laws that mandate the professional licensure of Community Health Workers (CHWs) in the State of Hawaii?”**

- i. If we answer “yes” then the direction of this task force will proceed in determining the next steps of licensure requirements and enforcement, including administrative rules to govern this profession and its practitioners. This may include discussion of how the regulatory board would be appointed, registration fees, and many other factors which we have yet to discuss.
- ii. If we answer “no” then the direction of this task force will be to determine the best ways to support CHWs in the absence of licensure, such as voluntary certification or recommended legislation.
- iii. Member feedback:
  1. Gracie Flores, Hawaii County representative / HICHTWA: Would vote no. Feels that certification may be a better route, be voluntary, and not have a negative impact on the workforce.
  2. Chauncey Hautico, HICHTWA: Would vote no. Also feels that licensure would create barriers. Shared personal affects that CHWs (and kupuna) work in their community, which is rooted in trust, and licensure may not value their work in community connection and indigenous knowledge.
  3. Rosi Filemoni, HIPHI: Would vote no. Echoes recent comments. Highlights concerns with licensing regarding costs to CHWs, flexibility concerns with “trying to keep things broad and be as inclusive as we can” for licensure.
  4. ‘Atalina Pasi, NHPI CHW Alliance: Would vote no. Stated that licensure would be state controlled. CHWs are rooted in pilina. Requiring licensure could exclude kupuna and create barriers rather than bridges, especially for underserved communities. It also gives state authority to define who a CHW is, therefore they do not want the state to limit these definitions.
  5. David Maemae, HICHTWA: Creates Barriers to Entry: Would vote no. Typed comments, “This is a major concern. Requiring a license often comes with fees, mandated training, and continuing education. For many CHWs who are recruited for their lived experience, this can create an insurmountable barrier, eroding the diversity that is the core strength of the workforce. Risk of De-emphasizing Lived Experience: A focus on formal education and credentials can sideline the invaluable lived experience that a CHW brings to the role. This can disconnect the profession from its public health and grassroots origins.”
  6. Ashley Tone, Maui County representative: Would vote no. “Don’t think we’re there yet” (not ready for licensure). However, shared that there could be potential positives to this situation, should we get to that point, which could include: increased sustainability, liveable wage, and increased recognition for their work.
  7. Kahealani Naeole, Papa Ola Lokahi: Not interested in mandating at this time. Sees barriers for folks who are already doing CHW work. Concerned if we start to mandate licensing, this western practice could conflict with indigenous practices honoring lived experience. However, could see licensing as a possible future direction.

8. Nicole Moore, Hui Mālama Ola Nā 'Ōiwi: Concern over cutting off existing CHWs who would essentially need to be grand parented. Unsure if licensure is required to process Medicaid reimbursement for CHW services, how we sustain the CHW workforce, and if certification would allow us to get to that point down the road.
9. Adrienne Dillard, UH JABSOM-DNHH: Echoed comments. Concerned over state government control over requirements, fees, how CHWs could be reimbursed, and form of payment (mentioned an example of gift cards vs payment). Does not feel this is the correct way to prove the valued work of CHWs.
10. Auntie Jessie Marques, Ka'u Rural Health Community Association: Would vote no. Reiterated concerns over state government mandating CHW requirements. Unsure if licensure is required for CHW billing reimbursement.
11. Janna Hoshide, Healthcare Association of Hawaii: Would vote no. Feel that it would create barriers from an employer perspective in attracting and maintaining a workforce. Also, expressed that they are trying to learn more about CMS Medicaid codes and would like to discuss that more in the future.
12. **Results: 15 Naes, 3 Abstain, 1 Excused**

**c. Voting Item #2: “Shall the SCR16 SD1 Professional Standards Task Force recommend that nongovernmental entities and private employers in the State of Hawaii create a voluntary certification program for Community Health Workers (CHWs)?”**

- i. If we answer “yes” to this question then the task force will look to you to create a list of basic requirements that would make a certified community health worker, and to determine which nongovernmental and private entities should consider collaborating to make this happen.
- ii. Because the State has no power to compel nongovernmental and private association, this is something that will require advocacy and outreach by task force members.
- iii. If we answer “no” to this question, but “yes” to Question One, this task force will report to the Legislature strictly on matters of licensure.
- iv. Member feedback:
  1. Kāhealani Naeole, Papa Ola Lokahi: Asked why private employers are not encompassed in nongovernmental entities. Blythe responded acknowledging that the wording of this question is to be inclusive. Additionally, followed up to say they would vote yes. Would like to see this task force continue conversation and have an inclusive approach to CHWs in Hawaii. Feel that a voluntary certification could be positive and a means to avoid putting formal education barriers in place.
  2. David Maemae, City and County of Honolulu representative / HICHWA: Provided experience working with organizations that employ CHWs. Gave an example that California has two pathways to certification through completion or work experience. Noted that in terms of sustainability and reimbursement via the federal government, sees certification as something needed to seek Medicaid reimbursement, however he does not want to leave behind those with village knowledge. Also, expressed concern on the agency that would oversee maintaining certification. Offered

that certification could be a good option for CHWs, but not a requirement. Followed up to express need for multiple certification programs. This could lead to new pathways to CHWs becoming trainers for the next generation.

3. 'Atalina Pasi, NHPI CHW Alliance: Want to know how we honor and strengthen the role of CHWs, especially among nongovernmental partners. Mentioned other states have seen success in voluntary certification, such as Texas, Oregon, Minnesota. Trusting pilina and cultural knowledge are important to Hawaii. Described the CHR program as a successful example of utilizing and funding CHWs in Hawaii. Instead, recommend a nongovernmental community-led certification program, grandparenting clause, CHW registry, CHW code of ethics rooted in aloha and kuleana.
4. Auntie Jessie Marques, Ka'u Rural Health Community Association: Agree with Atalina's comments. Stated interest in governmental agencies (that make decision on CHW billing/recognition) to support Hawaii CHWs in the path forward.
5. Adrienne Dillard, UH JABSOM-DNHH: Expressed concerns over credentialing organizations that employ CHWs. Need to be able to bill Medicaid and have the community create an alliance of a billing entity
6. Crystal Caday-Bargayo, Kauai County representative: Expressed concern working for a CBO regarding billing.
7. **Florlyn: proposed an amendment, "Shall the SCR16 SD1 Professional Standards Task Force recommend that community and nongovernmental entities and private employers in the State of Hawaii create a voluntary certification program for Community Health Workers (CHWs)?"**
8. **Results: 14 Ayes, 0 Naes, 1 Abstain, 4 Excused**

#### **4. New Business**

- a. Discuss the components of voluntary certification programs. In advance of the meeting, a survey will be disseminated.
- b. Address the proposed amendment to the second question.
- c. Further discussion of member feedback/abstaining from voting.

#### **5. Schedule Next Task Force Meeting**

- a. Thursday, September 25<sup>th</sup> at 1:30—3:00pm

#### **6. Announcements**

- a. Recording and Microsoft Teams transcript will be shared.

#### **7. Adjournment**