

### STATE HEALTH PLANNING AND DEVELOPMENT AGENCY

**DEPARTMENT OF HEALTH - KA 'OIHANA OLAKINO** 

JOSH GREEN, M.D. GOVERNOR OF HAWAI'I KE KIA'ÁINA O KA MOKU'ÁINA 'O HAWAI'I

KENNETH S. FINK, MD, MGA, MPH DIRECTOR OF HEALTH KALUNA HO'OKELE

JOHN C. (JACK) LEWIN, M.D. ADMINISTRATOR

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# Minutes Certificate of Need Review Panel Zoom Meeting February 21, 2024

Present: Nora Nomura, Don Chock, Martha Turner, Paul Yamashita, Jill Kelekoma, Amita Goyal

SHPDA: Jack Lewin, Darryl Shutter, Wendy Nihoa

- I. The meeting was called to order by Chair Nomura at 1:01 p.m.
- II. Staff reviewed the certificate of need criteria for participants.
- III. Certificate of Need Review:

Application #23-03 from Neogen Care LLC for the establishment of Home Health Agency services at 770 Kapiolani Blvd., Ste 714, Honolulu, HI, at a capital cost of \$416,750

There were no conflicts of interest declared.

Mary Espinida, Eric Johnson and Anju Satheesh presented an oral summary of the application. Public testimony was provided by Jason Espinida and Joy Otagura. The Panel members and SHPDA staff asked questions of the applicant regarding the Certificate of Need criteria. Questions included, but were not limited to: the availability of personnel resources and the recruiting strategy for the proposal, the need for the proposed services, the proposed accessibility to the services for ethnic minorities, and the availability of financial resources for the project.

After the question and answer period, it was moved/seconded to recommend approval of the application. The motion to recommend approval included the attached review of the application's relationship to the Certificate criteria. (see attached)

Members voted YES -5, NO -0, with one abstention (Goyal) to recommend approval of the application.

IV. The meeting was adjourned by Chair Nomura.



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1177 Alakea St., #402, Honolulu, HI 96813 Phone: 587-0788 Fax: 587-0783 www.shpda.org February 22, 2024

To:

Statewide Health Coordinating Council

Administrator, State Health Planning and Development Agency

From:

Nora Nomura, Chair

Certificate of Need Review Panel

SUBJECT:

Certificate of need application #23-03 from Neogen Care LLC for the establishment

of Home Health Agency services at 770 Kapiolani Blvd., Ste 714, Honolulu, HI, at a

capital cost of \$416,750

The Certificate of Need Review Panel met on February 21, 2024 to review the above-noted application.

The Panel recommends approval of this application by a vote of 5 to 0, with one abstention and offers the following comments regarding the application's relationship to the Certificate criteria:

#### 1. Relation to the State Health Services and Facilities Plan:

Met. The proposal is in alignment with the State Health Services and Facilities Plan. Home health and community-based services are a strategic approach to health care.

#### 2. Need and Accessibility:

Met. There is a need for additional home health services.

#### 3. Quality of Service/Care:

Met. Quality of care surveys and audits are part of the applicant's quality program.

#### 4. Cost and Finances:

Met. The applicant has met the cost and finance criteria.

#### 5. Relation to the Existing Health Care System:

Met. The applicant proposes to collaborate with existing health care resources.

#### 6. Availability of Resources:

Met. The applicant's organization has access to personnel resources.