

## STATE HEALTH PLANNING AND DEVELOPMENT AGENCY DEPARTMENT OF HEALTH - KA 'OIHANA OLAKINO

JOSH GREEN, MD GOVERNOR OF HAWAI'I KE KIA'ĀINAO KA MOKU'ĀINA 'O HAWAI'I

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

John C. (Jack) LEWIN, MD ADMINISTRATOR

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

August 5, 2025

## CERTIFIED MAIL, RETURN RECEIPT REQUESTED

Nicole Hokoana CEO Maui Youth and Family Services, Inc. 1931 Baldwin Avenue Makawao, HI 96768

Dear Ms. Hokoana:

The State Health Planning and Development Agency has evaluated Maui Youth and Family Services, Inc.'s Certificate of Need application #25-05A for the establishment of an 8 bed Special Treatment Facility at 1931 Baldwin Avenue, Makawao, HI, at a capital cost of \$100,000.

Pursuant to Title 11, Chapter 186 of the Hawaii Administrative Rules (HAR), the Agency finds that:

- (a) The proposal is eligible for administrative review as it meets one or more of the criteria in Subsection 11-186-99.1(b), HAR.
- (b) The applicant, Maui Youth and Family Services, Inc., has proven by a preponderance of the evidence that its proposal meets the Certificate of Need criteria in HAR 11-186-15(a).
- (c) There is no compelling public interest which will be served by requiring the application to go through the standard review process.

As required under Section 323D-43(b), Hawai'i Revised Statutes (HRS), the Agency concludes and determines that:

- 1. There is a public need for this proposal.
- 2. The cost of this proposal will not be unreasonable in light of the benefits it will provide and its impact on health care costs.

Accordingly, the State Health Planning and Development Agency hereby APPROVES and ISSUES a Certificate of Need to Maui Youth and Family Services, Inc., for the proposal described in Certificate of Need application #25-05A. The maximum capital expenditure allowed under this approval is \$100,000.

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

Administrator