

STATE HEALTH PLANNING AND DEVELOPMENT AGENCY

DEPARTMENT OF HEALTH - KA 'OIHANA OLAKINO

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

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ADMINISTRATOR'S REPORT September 2025

Subarea Health Planning Councils (SACs)

Hawaii County Subarea Health Planning Council (HCSAC) Honolulu Subarea Health Planning Council (HONSAC) Kauai County Subarea Health Planning Council (KCSAC) Tri-Isle Subarea Health Planning Council (TISAC) West Oahu Subarea Health Planning Council (WOSAC) Windward Oahu Subarea Health Planning Council (WISAC)

	Date of	Date of	Date of
	SAC		
SACs	0 2.50	Latest Updates Available at	Next Meeting/Activity
	Meeting/Activity	https://health.hawaii.gov/shpd	Scheduled
	in August	a/public-meeting-minutes/	
Hawaii	Scheduled	July 15, 2025	September 16, 2025
	meeting on August	•	•
	19, 2025 was		
	cancelled due to		
	unforeseen		
	situation		
Honolulu	August 8, 2025	August 8, 2025	September 12, 2025
Kauai	Did not meet	December 16, 2024	Has not been scheduled
Tri-Isle	August 8, 2025	August 8, 2025	Has not been scheduled
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West Oahu	August 7, 2025	August 7, 2025	September 18, 2025
Windward Oahu	Did not meet	Not Available	Has not been scheduled

Statewide Health Coordinating Council (SHCC)

Date of SHCC Meeting/Activity in August	Date of Latest Updates Available at https://health.hawaii.gov/shpda/public-meeting-minutes/	Date of Next Meeting/Activity Scheduled
August 20, 2025	December 9, 2024 (Update pending for meeting on August 20, 2025)	Has not been scheduled

Statewide Health Coordinating Council-Plan Development Committee (PDC)

Date of PDC Meeting/Activity in August	Date of Latest Updates Available at https://health.hawaii.gov/shpda/public-meeting-minutes/	Date of Next Meeting/Activity Scheduled
Did not meet	November 18, 2024	Has not been scheduled

Advisory Councils

Health Data Advisory Council
Keiki Advisory Council
Kupuna Advisory Council
Universal Access Advisory Council

Advisory Councils	Date of Advisory Council Meeting/Activity in August	Date of Latest Updates Available at https://health.hawaii.gov/shp da/public-meeting-minutes/	Date of Next Meeting/Activity Scheduled
Data	Did not meet	July 22, 2025	Has not been scheduled
Keiki	Did not meet	November 1, 2024	Has not been scheduled
Kupuna	Did not meet	March 11, 2025	Has not been scheduled
Universal Access	Did not meet	February 10, 2025	Has not been scheduled

Health System Reform

Last month we discussed that health system reform policy had been suddenly dominated by passage of the HR 1 (One Big Beautiful Bill Act), and its concerning implications for Med-Quest coverage and the ACA (Affordable Care Act) Insurance Exchanges in Hawai`i. It is clear that funding cuts from this legislation will force reductions in beneficiaries and/or covered benefits for Hawai`i residents in both of these programs. Both Med-Quest (with well over 400,000 beneficiaries here, including half of the state's keiki) and the ACA Exchange (with 26,000 beneficiaries here) will experience serious financial stresses, resulting in a likely significant rise in numbers of uninsured persons, and causing negative cost shifts to hospitals as well as adding stresses on providers. The state could ultimately be subject to these cost shifts to continue to meet the essential healthcare needs of residents.

As a result, we have shifted our attention to a last-minute provision in the bill called the Rural Health Transformation Fund (RHTF) which provides \$50 billion over 5 years (\$10 billion a year from 2026 to 2030) to states who apply for the money in two different tranches. One tranche provides \$25 billion (\$5 billion a year x 5 years from 2026 to 2030) for general state applications for rural health focus areas, including clinical care technology, workforce training, broadband/internet access, electronic health record access, chronic disease management, and other innovations in care delivery for rural beneficiaries. Hawaii is likely to be funded at approximately \$100 million a year from the first 5-year tranche given we are a very rural state, although we may need to re-apply each year based on CMS perceived results from the previous year. The second tranche, again \$25 billion over 5 years from 2026 to 2030 (\$5 billion a year) will be available at CMS discretion to state applicants with dynamic additional proposals. Hawai'i will go for both tranches. The federal Notice of Funding Opportunity (NOFO) for these grant funds will be published this month, and grant applications are due in December. It's a very tight time schedule.

As priorities for the use of these new funds, SHPDA has proposed (similar to last year's HB 716) EHR's for rural clinics, hospitals, other providers, including DOH safety net programs. We have also proposed a kupuna home health program using CHWs and volunteers armed with laptops and accurate patient data and robust telemedicine access to extend the reach of doctors, nurses, MSWs and other caregivers in short supply to rural kupuna, disabled, and others in need. This will be valuable in particular for Medicare beneficiaries, and others not eligible for Med-QUEST home care benefits. The volunteers could also elect to become CHWs. Medicaid beneficiaries who lose coverage due to work requirements in the HR 1 bill could conceivably elect to be trained as CHWs, get paid to work, and thus retain their Med-QUEST benefits.

We are further proposing use of OnMed modular clinics with telemedicine care services and virtual health care staff to provide non-emergent care in rural locations. Options for such use could include communities with no healthcare services; FQHCs for after-hour care; and Critical Access Hospitals where ED wait times are excessive.

Health System Reform (continued)

And we also propose money for new training programs for health professionals in short supply with loan repayment, housing subsidies and other built-in incentives to practice and live in rural areas. In addition to training for CHWs and other rural health workers, these funds could also expand new JABSOM and other academic residency and fellowship positions for physicians, as well as to nursing and other professional training programs, again attached to loan repayment, and/or housing incentives, in return for spending 3-5 years practicing in rural areas. Even new school health clinics in rural communities could be considered, including oral health services and use of such clinics for community members after school hours.

All in all, this is a major opportunity for improving rural health, access to care, and workforce shortages in Hawai`i.

More to come!

Mahalo, Jack Lewin

Research and Statistics

The SHPDA's annual healthcare utilization survey for calendar year 2024 was concluded. The 2024 Healthcare Utilization Report will be available in September 2025.

The Hawaii Health Data Center (HHDC) Project Team

(Updates will be provided in the February, May, August, and November reports.)

Certificate of Need Applications

#25-02A Maui Medical Building LLC

Establishment of Radiation Therapy services and Positron Emission

Tomography/Computed Tomography (PET/CT) services at 214 Kupuohi St.,

Lahaina, HI.

Public noticed August 14, 2025.

<u>Certificate of Need Applications</u> (continued)

#25-05A Maui Youth and Family Services, Inc.

Establishment of 8 bed Special Treatment Facility at 1931 Baldwin Avenue,

Makawao, HI.

Approved August 5, 2025.

#25-10 Pacific Pearl Medical, LLC

Establishment of Positron Emission Tomography/Computed Tomography (PET/CT) scanner services at 800 Kamaaha Avenue, Unit #6 and #7,

Kapolei, HI.

Oahuwide Certificate of Need Review Committee meeting scheduled for

September 4, 2025.