



HAWAII STATE HEALTH PLANNING AND DEVELOPMENT AGENCY (SHPDA)
 1177 Alakea Street, Suite 402 • Honolulu, HI 96813 • Phone: (808) 587-0788 • www.shpda.org
 Universal Access Advisory Council - Plan Development Committee

Draft

Meeting Minutes

March 11, 2026 | 12:00 PM Hawaii Time

Virtually via Zoom and Physical Meeting Location at
 The Keoni Ana Building, 1177 Alakea Street, Suite 402

https://www.zoomgov.com/rec/share/qsDFJfk_WnZLEQQVjObaxoRDc9_MSLSExZsn1dFsmta5qjGM_2Q1go6dFu8dJ2-k.EufUMfPNfCouosiB

Passcode:!3Pu!CT@

MEMBERS: Marc Alexander, Jonathan Ching, Jenn Diesman, John McComas, Gary Okamoto, Sheri Daniels, Michael Robinson, Melvin Sakurai, Marilyn Seeley, Rae Seitz, Charlene Young, Linda Rosen, Nadine Tenn Salle, John Yang,

MEMBERS ABSENT: Eric Gill, Lawrence Nitz, Beth Giesting,

GUESTS: None

SHPDA: John Lewin, Terry Visperas

ATTENDANCE RECORD OF MEMBERS

Date	1/22/24	1/30/24	2/7/24	2/23/24	3/12/24	6/6/24	8/14/24	10/23/24	2/10/2025	3/11/26
Marc Alexander	X	O	/	/	X	X	X	X	0	X
Jonathan Ching	X	X	/	/	O	X	O	X	X	X
Sheri Daniels	O	O	/	/	O	O	O	O	0	X
Jenn Diesman	O	X	/	/	X	X	X	X	X	X
Beth Giesting	X	X	/	/	X	X	X	X	X	0
Eric Gill	O	O	O	O	O	O	O	O	X	0
John McComas	X	X	/	/	O	X	X	X	X	X
Lawrence Nitz	O	X	/	/	O	O	O	O	0	X
Gary Okamoto	X	X	/	/	O	X	X	X	X	X
Michael Robinson*	X	X	/	/	X	X	X	X	X	X
Linda Rosen	O	X	/	/	X	X	X	O	X	X
Melvin Sakurai	X	X	/	/	X	X	X	X	X	X
Marilyn Seeley	O	X	/	/	O	X	X	X	X	X
Rae Seitz	O	X	/	/	X	X	O	X	X	X
Nadine Tenn Salle	O	O	/	/	O	X	O	O	0	X
John Yang	/	/	/	/	O	O	O	O	0	X
Charlene Young	/	X	/	/	X	X	X	X	x	X

Legend: X=Present; O=Absent; /=No Meeting/Cancellation | *-Chair, **-Vice Chair

TOPIC	DISCUSSION	ACTION
Call to Order	<p>A quorum was established. The meeting was called to order at 12:04 p.m. by M. Robinson, Chairperson, Universal Access Advisory Council (UAAC) presiding.</p> <p>M. Robinson welcomed members.</p>	
Roll Call	<p>Member roll call.</p>	
Minutes	<p>Approval of the minutes from February 10, 2025. Motion to accept the minutes from the dates noted above. "Thank you, Gary and Linda." Vote: Unanimous. Motion carried.</p> <p>Public Testimony - none.</p>	
Chair's Opening Remarks	<p>Michael Robinson reviewed the eight UAAC priority areas, including:</p> <ul style="list-style-type: none"> • Uninsured crisis • Medical debt • Healthcare workforce • Rising healthcare costs • Federal funding equity gap • Healthcare performance <p>He noted the full agenda and the possibility of a future meeting to complete remaining items.</p> <p>Presentation: Coverage of Uninsured & Legislative Context</p> <p>Presenter: Dr. Jack Lewin</p> <p>Key Points</p> <ul style="list-style-type: none"> • Projected Coverage Losses: <ul style="list-style-type: none"> ○ Estimated 20,000–40,000 individuals may lose MedQuest coverage due to new work and reporting requirements. <i>"Meredith estimates between 20,000 to 40,000 people will lose coverage due to the work requirements."</i> 	

- Additional **13,000** may lose ACA exchange coverage due to loss of federal tax credits.
- **Total Potential Impact:**
 - **40,000–50,000** newly uninsured statewide.
- **Cost Projections:**
 - Estimated **\$200–\$250 million annually** to provide temporary coverage at ~\$5,000 per beneficiary.
 - Full coverage for all uninsured people could exceed **\$300 million annually**.
- **State Health Insurance Plan (SHIP) Review:**
 - Legislature revisiting the 1989–1990 SHIP model as a potential interim solution.
 - SHIP historically covered up to **50,000** uninsured residents and was largely self-funded. *“90% of the beneficiaries paid their entire premium... the program was always in the black.”*
- **Hospital Reimbursement Constraints:**
 - Current federal rules cap Medicaid reimbursement at Medicare rates, limiting quality incentives. *“We can't do any quality incentives, because we break the law... exceeding 100% of Medicare.”*

AHEAD Grant Update

Program Overview

- 10-year CMS innovation grant running through **2036**.
- Focus areas include:
 - Increasing primary care investment
 - Transitioning to value-based payment models
 - Reducing unnecessary healthcare spending
 - Improving population health outcomes

Key Updates

- Implementation was delayed to **January 2028**, giving Hawaii more preparation time. *“They moved the whole project back... to January of 2028... thank God they did that.”*
- CMS remains committed to the program despite federal changes.
- Challenges remain due to reimbursement caps tied to Medicare rates.

Rural Health Transformation Grant Update

Funding Overview

- Hawaii awarded **\$189 million**, including:
 - **\$25 million annually** for rural value-based initiatives
 - **\$45 million** for statewide EHR and interoperability improvements

Planned Uses

- Support for rural hospitals, clinics, and independent providers
- Investment in health information exchange infrastructure
- Development of a **state-sponsored Accountable Care Organization (ACO)** *“We are starting an accountable care organization as one choice... to get ready for value-based reimbursement.”*

Urgency

- Funds must be **encumbered by October 1** to avoid clawback. *“If we encumber the money... we can spend it over that next year if we don't lose it.”*

Open Discussion

Member Comments

- **Linda Rosen** expressed desire to contribute more actively, especially in EMS, trauma systems, and rural health. *“Where... I can best contribute... I'd like to really try to explore where I can help more.”*
- Dr. Lewin welcomed one-on-one follow-up discussions with members.

Next Steps & Action Items

Action Items

- **Dr. Lewin & SHPDA team**
 - Prepare additional materials on SHIP model feasibility.
 - Develop strategies to navigate Medicaid reimbursement caps.
 - Advance planning for state-sponsored ACO launch by July.
- **Council Members**
 - Provide input on uninsured coverage strategies at next meeting.
 - Engage in one-on-one follow-ups with Dr. Lewin as needed.
- **Terry Visperas**
 - Monitor public testimony submissions.
 - Coordinate scheduling for the next UAAC meeting after legislative session concludes.

Public Testimony – none.

Next Meeting

- To be scheduled **after the close of the legislative session** to review outcomes and refine priorities.

Adjournment

- Meeting adjourned at **1:00 PM**.