



HAWAII STATE HEALTH PLANNING AND DEVELOPMENT AGENCY

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ADMINISTRATIVE APPLICATION - CERTIFICATE OF NEED PROGRAM

Application Number: #26-03A
To be assigned by Agency

Date of Receipt: STATE HEALTH PLANNING & DEV. AGENCY

APPLICANT PROFILE

Project Title: Establishment of 8 Bed Special Treatment Facility

Project Address: 2141 Ili'ili Road, Kihei, Maui, HI 96753

Applicant Facility/Organization: Koa Health LLC DBA Koa Recovery

Name of CEO or equivalent: Gal Cohen

Title: CEO

Address: 1476 South Kihei Road, Kihei, HI, 96753

Phone Number: 808 280 1101 Fax Number:

Contact Person for this Application: Amory Mowrey

Title: COO

Address: 1476 South Kihei Road, Kihei, HI, 96753

Phone Number: 415 864 9131 Fax Number:

CERTIFICATION BY APPLICANT

I hereby attest that I reviewed the application and have knowledge of the content and the information contained herein. I declare that the project described and each statement amount and supporting documentation included is true and correct to the best of my knowledge and belief.

Signature

4/30/2026
Date

Amory Mowrey
Name (please type or print)

Chief Operating Officer
Title (please type or print)

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1. TYPE OF ORGANIZATION: (Please check all applicable)

- Public _____
- Private X
- Non-profit _____
- For-profit X
- Individual _____
- Corporation _____
- Partnership _____
- Limited Liability Corporation (LLC) X
- Limited Liability Partnership (LLP) _____
- Other: _____

2. PROJECT LOCATION INFORMATION

A. Primary Service Area(s) of Project: (please check all applicable)

- Statewide: _____
- O`ahu-wide: _____
- Honolulu: _____
- Windward O`ahu: _____
- West O`ahu: _____
- Maui County: X
- Kaua`i County: _____
- Hawai`i County: _____

3. DOCUMENTATION (Please attach the following to your application form):

- A. Site Control documentation (e.g. lease/purchase agreement, DROA agreement, letter of intent) **SEE LEASE AGREEMENT AS ATTACHMENT C**
- B. A listing of all other permits or approvals from other government bodies (federal, state, county) that will be required before this proposal can be implemented (such as building permit, land use permit, etc.) **OHCA STF LICENSING APPROVAL AND COUNTY ZONING EXEMPTION**
- C. Your governing body: list by names, titles and address/phone numbers **SEE ATTACHMENT B**
- D. If you have filed a Certificate of Need Application this current calendar year, you may skip the four items listed below. All others, please provide the following:
 - Articles of Incorporation **SEE ATTACHMENT A**
 - By-Laws **N/A**
 - Partnership Agreements **N/A**
 - Tax Key Number (project's location) **390050130000**

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4. **TYPE OF PROJECT.** This section helps our reviewers understand what type of project you are proposing. Please place an "x" in the appropriate box.

	Used Medical Equipment (over \$400,000)	New/Upgraded Medical Equip. (over \$1 million)	Other Capital Project (over \$4 million)	Change in Service	Change in Beds
Inpatient Facility				X	
Outpatient Facility					
Private Practice					

5. **BED CHANGES.** Please complete this chart only if your project deals with a change in your bed count and/or licensed types. Again, this chart is intended to help our reviewers understand at a glance what your project would like to accomplish. Under the heading "Type of Bed," please use only the categories listed in the certificate of need rules.

Type of Bed	Current Bed Total	Proposed Beds for your Project	Total Combined Beds if your Project is Approved
STF	0	8	8
TOTAL			

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6. PROJECT COSTS AND SOURCES OF FUNDS

A. List All Project Costs:

AMOUNT:

- | | | |
|----|--|--------------------|
| 1. | Land Acquisition | _____ |
| 2. | Construction Contract | _____ |
| 3. | Fixed Equipment | _____ |
| 4. | Movable Equipment | _____ |
| 5. | Financing Costs | _____ |
| 6. | Fair Market Value of assets acquired by
lease, rent, donation, etc. | <u>\$4,043,500</u> |
| 7. | Other: _____ | _____ |

TOTAL PROJECT COST: \$4,043,500

B. Source of Funds

- | | | |
|----|---|--------------------|
| 1. | Cash | _____ |
| 2. | State Appropriations | _____ |
| 3. | Other Grants | _____ |
| 4. | Fund Drive | _____ |
| 5. | Debt | _____ |
| 6. | Other: <u>FMV of leased property paid monthly</u> | <u>\$4,043,500</u> |

TOTAL SOURCE OF FUNDS: \$4,043,500

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7. **CHANGE OF SERVICE:** If you are proposing a change in service, then please briefly list what services will be added/modified. Be sure to include the establishment of a new service or the addition of a new location of an existing service. Please reference the Certificate of Need Rules Section 11-186-5 for the categories of services. If you are unable to determine which category best describes your project, please consult with agency staff.

This project calls for the establishment of an 8 bed STF in Kihei, HI. The

proposed beds will be used for short term residential behavioral health

and addiction treatment services for adult men and women.

8. **IMPLEMENTATION SCHEDULE:** Please present a projected time schedule for the completion of this project from start to finish. Include all of the following items that are applicable to your project:

- a) Date of site control for the proposed project, 5/1/2026
- b) Dates by which other government approvals/permits will be applied for and received, All other permits are being applied for concurrently
- c) Dates by which financing is assured for the project, N/A
- d) Date construction will commence, N/A
- e) Length of construction period, N/A
- f) Date of completion of the project, N/A
- g) Date of commencement of operation Upon receipt of OHCA STF License

Please remember that the Agency does monitor the implementation of Certificates approved. Non-implementation of a project as described in your application may result in a fine and/or withdrawal of the certificate of need.

9. **EXECUTIVE SUMMARY:** Please present a brief summary of your project. In addition, provide a description of how your project meets each of the certificate of need criteria listed below. If a new location is proposed, please attach an easy to read map that shows your project site.

- a) Relationship to the State of Hawai'i Health Services and Facilities Plan.
- b) Need and Accessibility
- c) Quality of Service/Care
- d) Cost and Finances (include revenue/cost projections for the first and third year of operation)
- e) Relationship to the existing health care system
- f) Availability of Resources.

PLEASE SEE ATTACHMENT D

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10. **Eligibility to file for Administrative Review.** This project is eligible to file for Administrative review because: (Check all applicable)

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It involves bed changes, which will have a capital expense of \$1,000,000 or less, and which will have an increased annual operating expense of less than \$500,000.

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It involves service changes which will have a capital expense of \$1,000,000 or less, and which will have an increased annual operating expense of less than \$500,000.

It is an acquisition of a health care facility or service, which will result in lower annual operating expenses for that facility, or service.

It is a change of ownership, where the change is from one entity to another substantially related entity.

It is an additional location of an existing service or facility.

The applicant believes it will not have a significant impact on the health care system.

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Executive Summary

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Koa Health LLC, doing business as Koa Recovery, is requesting a Certificate of Need (CON) for an 8-bed Special Treatment Facility to provide residential treatment for individuals with substance use disorders, co-occurring disorders, and primary mental health conditions. The program will operate as Koa Recovery and will deliver structured, evidence-based residential care.

Hawai'i has consistently identified access to substance use disorder treatment as a statewide priority. The Hawaii Opioid Initiative and subsequent overdose response efforts have placed "Access to Treatment" as a primary focus area, emphasizing the need to expand capacity and reduce barriers to timely entry into care. Despite these efforts, residential treatment availability on Maui remains limited, with persistent access constraints for individuals seeking in-state services.

The proposed project represents a targeted expansion within an already established and regulated level of care. It does not introduce a new service category or alter the structure of the existing healthcare delivery system. Rather, it adds limited, clinically appropriate capacity within the current continuum to help address a widely documented need.

The program will deliver structured, evidence-based residential treatment for adults with alcohol and drug addiction. Services will include individual and group therapy, psychiatric evaluation and medication management when indicated, relapse prevention planning, case management, and coordinated discharge planning. Clinical oversight will be provided by licensed professionals in accordance with Hawai'i regulatory standards.

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Residential treatment is one component of a broader recovery continuum. Koa Recovery will maintain formal referral relationships with Partial Hospitalization Programs (PHP), Intensive Outpatient Programs (IOP), outpatient providers, and sober living environments both within Hawai'i and on the mainland. Discharge planning will begin at admission to ensure continuity of care and appropriate step-down placement based on individual clinical needs.

Length of stay will be individualized and determined by medical necessity. While clinical research commonly supports longer treatment engagement for improved outcomes, final duration will reflect patient-specific assessment and, when relevant, insurer requirements. Upon completion of residential treatment, each client will be encouraged to transition to a lower level of care aligned with their geographic and clinical circumstances.

A.) Relationship to the State of Hawai'i Health Services and Facilities Plan

Chapter 2: Thresholds and Suboptimization Clause

While the applicable State Health Planning threshold for substance abuse/chemical dependency beds is an average annual occupancy rate of at least 75% for licensed providers within the service area, SHPDA expressly recognizes that sub-optimum utilization may be appropriate when the benefits to the community outweigh the costs of underutilization. Such benefits include improved access, increased competition, enhanced quality of care, innovation in service delivery, and addressing the needs of an actual population rather than relying solely on statistical utilization thresholds.

Existing utilization data should be interpreted with caution. In 2024, Maui County's licensed Special Treatment Facilities reported varying occupancy rates. Aloha House reported an

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occupancy rate of 72.87%, narrowly below the 75% threshold. Maui Recovery reported an occupancy rate of 61.30%; however, with only eight licensed beds, relatively small changes in census would have materially affected its annual occupancy percentage. In practical terms, the addition of only a modest number of admissions over the course of the year could have resulted in occupancy levels approaching or exceeding the planning threshold. Further, 'Ai Pono Maui serves a highly specialized eating disorder population and does not function as a direct substitute for substance use disorder treatment services. As such, its occupancy should not be viewed as representative of demand for general substance use disorder residential treatment on Maui.

Koa Recovery will also improve geographic access to residential treatment services within Maui County. Existing licensed substance use disorder treatment providers are concentrated in other regions of the island, with Maui Recovery located on the west side of Maui and Aloha House located in Upcountry Maui. The proposed facility will be located in South Maui, creating treatment capacity in a region that is currently underserved by residential substance use disorder treatment providers. This geographic distribution is consistent with SHPDA's recognition that need should be evaluated based on actual access to care for the population being served, rather than solely on aggregate utilization statistics. By expanding treatment availability into South Maui, the proposed project will reduce geographic barriers to care, increase consumer choice, and improve access for residents, families, and referral sources located in one of Maui's largest population centers.

The applicant has also observed anecdotal evidence suggesting that demand may exceed what is reflected in annual occupancy statistics. During prior professional experience within Maui's treatment system, referrals to existing residential providers were at times delayed or waitlisted despite reported occupancy levels below the planning threshold. While occupancy statistics

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provide a useful planning tool, they do not always capture fluctuations in bed availability, admission timing, payer limitations, clinical appropriateness, gender-specific bed availability, or other operational constraints that affect real-world access to care.

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For these reasons, the applicant believes the proposed facility satisfies the intent of the State Health Planning Program by improving access, increasing treatment options, encouraging innovation, and addressing the demonstrated need for high-quality residential substance use disorder treatment services in Maui County.

Chapter 3: Statewide and Regional Priorities

Koa Recovery will contribute to the existing behavioral health continuum on Maui by adding limited residential capacity within an established and regulated level of care. The Hawai'i Health Services and Facilities Plan (HSFP) emphasizes improving cost-effective access to necessary health services and strengthening behavioral health infrastructure statewide. This project aligns directly with those objectives by expanding in-state residential treatment availability.

Although Hawai'i maintains one of the highest insurance coverage rates in the nation, insurance coverage alone does not ensure timely access to residential care. National data from SAMHSA consistently show that approximately 80% or more of individuals meeting criteria for substance use disorder do not receive specialty treatment in a given year, reflecting persistent treatment penetration gaps. Hawai'i's access constraints mirror this broader national pattern, particularly when residential bed availability is limited.

Historically, residential capacity limitations on neighbor islands have resulted in residents being referred to O'ahu or to mainland facilities due to lack of available beds. Prior planning materials and utilization reports have documented residential wait times ranging from several weeks to

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multiple months for residential treatment in neighbor islands. Off-island placements impose additional financial and social burdens, including travel expenses and separation from family support systems, which can negatively impact continuity of care and discharge planning.

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Koa Recovery will accept commercial insurance and coordinate benefits to reduce financial barriers to entry. By expanding in-state capacity, the project supports family involvement in treatment, strengthens discharge planning, and reduces the need for out-of-state placements.

Koa Recovery will address the State Health Coordination Council (SHCC) priorities in the following areas:

- **Promote and support the long-term viability of the health care delivery system:**

A sustainable healthcare delivery system requires a complete and coordinated continuum of behavioral health services, including residential treatment. Behavioral health-related emergency department visits and hospitalizations represent a significant portion of acute care utilization in Hawai'i. Strengthening community-based and residential treatment capacity can reduce avoidable crisis utilization and improve system efficiency.

By adding eight residential beds within the Special Treatment Facility framework, Koa Recovery will help strengthen system capacity without introducing a new service category or displacing existing providers. The project represents an incremental expansion within an established level of care.

- **Expand and retain the health care workforce to enable access to the appropriate level of care in a timely manner:**

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Koa Recovery will create employment opportunities for licensed clinicians, therapists, medical providers, behavioral health technicians, support staff, administrators, and a wide variety of other contractors. The facility will maintain 24/7 staffing consistent with regulatory standards.

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- **Ensure that any proposed service will maintain overall access to quality healthcare at a reasonable cost:**

Limited residential capacity has historically resulted in delayed admissions and out-of-state placements. By providing in-state services and accepting commercial insurance, Koa Recovery will reduce travel-related costs for families and improve continuity of care. Local access supports family participation in treatment and facilitates coordinated step-down planning. In addition, by operating within typical commercial insurance reimbursement structures and avoiding ultra-luxury pricing models, Koa Recovery is designed to remain financially accessible to a broader patient population while maintaining high-quality clinical care.

- **Strive for equitable access to health care services:**

Hawai'i's high insurance coverage rate demonstrates that financial coverage is not the primary barrier to care. When residential beds are unavailable, insured residents may still face extended wait times or be required to leave the state for treatment. Expanding local residential capacity improves equitable access by aligning available services with documented demand for insured individuals requiring this level of care.

By providing in-state services and accepting commercial insurance, Koa Recovery will reduce travel-related costs and out-of-pocket burden for families while improving continuity of care.

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The program is structured to operate within standard commercial reimbursement rates rather than premium cash-pay models, supporting access at a reasonable cost for a broader population. 26 JUN -3 AIO :35

This approach is consistent with national trends. According to SAMHSA (2016), while overall treatment costs remained stable, the share covered by commercial insurance increased significantly following the Affordable Care Act, reducing out-of-pocket expenses. However, SAMHSA (2015) also identified financial barriers as a leading reason young adults do not receive recommended care, underscoring the importance of both coverage and accessible in-state capacity.

- **Ensure all projects are appropriate for the regional and statewide continuum of care:**

This project is designed to complement existing providers and operate within Hawai'i's established behavioral health framework. Koa Recovery will coordinate with outpatient providers, PHP and IOP programs, hospitals, and step-down facilities to ensure appropriate referrals and continuity across levels of care.

- **Encourage and support health education, promotion, and prevention initiatives:**

Koa Recovery will work with local clinics and providers to assure clients receive appropriate services in capacities both higher and lower than residential treatment. In doing so, we will work with other providers and agencies to assure the complete continuum of care is realized. We will be a needed link in the full spectrum of care. Along with providing a link in the state's continuum of care, we will work to educate other facilities, health care providers, and residents as to the importance of recovery and the steps needed to obtain and maintain recovery from

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alcohol and substance abuse. These outreach efforts will include a needed educational component focusing on awareness of the disease of alcohol and substance abuse as well as how to treat it and available community resources.

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• Promote the financial viability of the health care delivery system:

Koa Recovery will add stability to the current health infrastructure of Maui. By adding additional residential treatment beds and outpatient services, we will reduce the strain on existing providers that are beyond their capacities.

• Increase and improve access to substance abuse programs, services, and education:

Koa Recovery will add eight residential beds to Maui's behavioral health infrastructure. While modest in scale, this expansion will be a step in the right direction to help address documented access constraints and reduce reliance on out-of-state treatment placements.

b) Need and Accessibility

In the State of Hawai'i, approximately 95% of residents are insured, with the majority covered through commercial insurance plans. Despite this high rate of coverage, access to residential behavioral health treatment remains constrained by limited in-state bed capacity rather than lack of payer coverage.

A report from one of Hawai'i's major insurance carriers revealed that approximately 59% of commercially insured members who received inpatient substance use treatment accessed that care outside of the state. This pattern reflects capacity limitations within Hawai'i's residential

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treatment infrastructure and demonstrates continued reliance on mainland placement for medically necessary care.

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Nationally, death rates from drug overdoses rose from fewer than 20,000 annually in 2001 to more than 100,000 in recent years. While Hawai'i's total numbers are smaller than national figures, the upward trajectory over the past decade underscores the sustained need for accessible, structured treatment services.

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Maui and the State of Hawai'i face a unique geographic barrier. Unlike mainland jurisdictions, residents cannot easily access alternative treatment markets without incurring significant travel costs and separation from family and primary support systems. Out-of-state placement may delay treatment entry, limit family engagement, and complicate discharge planning. Expanding in-state residential capacity directly reduces this structural barrier.

Koa Recovery will provide needed access to residents of Hawai'i and Maui County. We will provide residential treatment for adults age 18 and older. Services will be available without discrimination based on race, ethnicity, gender, age, disability, or socioeconomic status.

Clients will be able to utilize insurance benefits for covered services. Coverage will be verified prior to admission, and staff will assist clients in understanding and coordinating reimbursement. Individuals without insurance may access services on a fee-for-service basis at rates commensurate with national industry standards. As financial stability permits, the organization intends to develop a structured scholarship or financial assistance program to support underserved populations.

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Koa Recovery will be accessible to elderly individuals, low-income persons, racial and ethnic minorities, women, persons with disabilities, and other underserved groups. Individuals whose clinical needs exceed the program's scope of practice will be referred to appropriate higher-acuity providers, and those requiring lower levels of care will be transitioned accordingly within the continuum

c) Quality of Service/Care

Koa Recovery will employ qualified, licensed behavioral health professionals with experience in substance use and co-occurring disorder treatment. All clinical staff will meet applicable state licensure and credentialing requirements and will participate in ongoing continuing education. Clinical services will be delivered using evidence-based and best-practice treatment models consistent with nationally recognized standards of care.

The program will utilize a multidisciplinary treatment team model. Clinical consultation will occur regularly to ensure coordinated treatment planning and shared oversight of each patient's care. When clinically appropriate and consistent with HIPAA regulations, coordination of care will occur with referring providers, family members, outpatient programs, and step-down facilities to ensure continuity across the treatment continuum.

Anticipated leadership and staffing will include but not be limited to a Medical Director, Clinical Director, Chief Executive Officer, Chief Operations Officer, Program Director, Admissions Director, Client Wellness Director, licensed master-level therapists and/or certified substance use disorder counselors, and behavioral health technicians. Staffing ratios will be maintained in

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accordance with industry standards, insurance requirements, accrediting body expectations, and applicable regulatory guidelines.

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Koa Recovery will provide a structured, therapeutic residential environment designed to support stabilization, engagement, and sustained behavioral change. The program will integrate evidence-based psychotherapies commonly utilized in residential treatment settings, including cognitive behavioral therapy (CBT), dialectical behavior therapy (DBT)-informed skills training, motivational interviewing (MI), relapse prevention planning, and trauma-informed care practices. Medication management and psychiatric oversight will be available when clinically indicated.

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The clinical framework will recognize substance use disorders as chronic, relapsing conditions that frequently co-occur with mental health disorders. National data indicate that co-occurring mental health conditions are common among individuals with substance use disorders. Treatment will therefore address both substance use and underlying psychiatric conditions through integrated dual-diagnosis programming.

Family engagement, psychoeducation, and discharge planning will be incorporated into treatment from admission forward. Emphasis will be placed on relapse prevention, coping skill development, emotional regulation, and preparation for transition to lower levels of care.

To ensure adherence to nationally recognized quality standards, Koa Recovery intends to pursue accreditation through The Joint Commission. Accreditation demonstrates compliance with rigorous standards related to patient safety, clinical quality, risk management, and organizational governance.

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Koa Recovery will seek licensure as a Special Treatment Facility (STF) through the Hawai'i Department of Health Office of Health Care Assurance (OHCA) and will operate in full compliance with applicable state regulations.

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The organization will implement ongoing quality assurance and performance improvement processes. Clinical outcomes, incident reporting, policy adherence, and patient safety metrics will be reviewed regularly by leadership and medical oversight. External oversight will include regulatory review by OHCA, payer audits, and accreditation surveys.

d) Cost and Finances (include revenue/cost projections for the first and third year of operation)

Year	Sales	Costs	Profit
2027	\$2,160,000	1,920,000	\$240,000
2029	\$2,970,000	\$2,484,000	\$486,000

e) Relationship to the existing health care system

Koa Recovery is designed to function as a complementary component of Maui County's existing behavioral health infrastructure. The facility will address identified gaps in residential capacity without duplicating services or displacing current providers. The addition of eight Special Treatment Facility beds represents an incremental expansion within an established level of care.

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The program will collaborate with existing residential providers, outpatient programs, hospitals, and Intensive Outpatient Programs (IOP) on Maui. Koa Recovery may serve as an additional referral destination when other residential programs are at capacity and will also function as a referral source to established IOP and outpatient providers for step-down care following discharge.

The facility will coordinate closely with community partners to ensure appropriate placement within the continuum of care. Individuals requiring higher-acuity medical or psychiatric services beyond the scope of the program will be referred or transferred accordingly.

In the event of a medical emergency, patients will be transported by emergency medical services to Maui Memorial Medical Center or another appropriate acute care facility as determined by EMS personnel. The proposed facility is located approximately 14 miles from Maui Memorial Medical Center, allowing for timely access to emergency medical services.

f) Availability of Resources

Koa Recovery is a new residential treatment program; however, we have already commenced recruiting and retaining the highest caliber staff available. These professionals have extensive experience in working at substance abuse facilities, mental health settings, and helping those with addiction problems.

The following leadership team is already committed to becoming employees or regular contractors:

- **A Chief Executive Officer** who has founded multiple highly successful companies across Maui, with a proven track record of excellence across multiple industries.

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• **A Chief Operating Officer** who holds a Masters Degree in Public Health and who carries nearly a decade of experience in the recovery field, including 5+ years of senior leadership of residential treatment facilities.

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• **A Clinical Director** who holds a masters in counseling, combined with previous experience in leadership in a residential facility.

• **A Medical Director** who is dual board certified, has over 25 years of experience in medicine, and who specializes in addiction treatment.

• **A Program Director** with extensive experience in the residential recovery setting, including multiple years of leadership experience.

• **Multiple Recovery Technicians** who are committed to being available as supports to clients on a rotating 24/7 basis.

Additional staff - such as therapists, A case manager, and psychiatric and nursing providers - are actively being recruited and will be retained as we draw nearer to the completion of our Department of Health licensing process.

Capital requirements for start-up and initial operations expenses will come from personal funding reserves sufficient to cover the projected costs and losses projected. Additional income will come from the clients participating in the program. Our working capital of \$250,000.00 is currently in the Bank of Hawai'i business account under Koa Recovery. The lease submitted with this application will be paid out of our bank account. The LLC members also have access to

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personal funds that can be utilized by/granted to the LLC if needed for additional operating expenses.

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Lastly, in addition to the statewide priorities, the proposed project is also consistent with several Maui County/Tri-Isle Subarea Council health planning priorities. Specifically, the project advances the County's goal of improving access to mental health services by increasing the availability of residential treatment for individuals with substance use disorders and co-occurring mental health conditions. The project further supports the priority of providing community-based health services to underserved communities by establishing residential treatment capacity in South Maui, a region of the island that is not currently served by an existing Special Treatment Facility. Finally, the project modernizes Maui County's behavioral health infrastructure through the development of a high-quality residential treatment facility designed to meet contemporary standards of care. Collectively, these benefits support Maui County's broader objective of improving access to needed behavioral health services and expanding treatment options for residents of Maui County.

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