



HAWAII HEALTH SYSTEMS

C O R P O R A T I O N

"Touching Lives Every Day"

Board of Directors

July 11, 2008

East Hawaii

Barry T. Mizuno
Barry K. Taniguchi
(Vice Chair)

Proposed Role of a Task Force in 2008 for HHSC/Legislature Interface from HHSC Corporate Board Finance & Information Systems and Audit Committee (FISAC)

West Hawaii

Shawn Cannon, RN
Richard J. Vidgen

Mr. Rick Vidgen
Chair, Corporate Board, FISAC

Maui Region

Avery B. Chumbley
Andrew Don, M.D.
(Chair)
Catherine L. N. Kim

Act 290 created a Regional System and, after a slow start, this is now beginning to work effectively with very involved and "empowered" regional boards to propose Strategies and Plans that will effect change. As well we have a Corporate Board which is constituted somewhat differently from pre Act 290 and sees itself as reducing Corporate costs and facilitating action by the Regions. It also sees itself (hopefully) out of any significant role within 2 years.

Kauai Region

Clifford L. Nakea
M. Jean Odo
William L. Shankel, M.D.
(Physician Rep)
Gerald S. Tomory, M.D.
(Physician Rep)

However, the actions that the regions can take to effect real change are limited and there is a need for enabling legislation to modify this position. The ideas for such legislation would be proposed by the Regions or the Corporate Board, and then discussed, modified and agreed by the key Stakeholders before translating the ideas into actual proposed Legislation for the 2009 session.

Oahu Region

Chiyome L. Fukino, M.D.
(Ex-Officio)
Roger K. Godfrey
Rosanne C. Harrigan, Ed.D.
Raymond S. Ono
(Secretary/Treasurer)

FISAC believes that the role of the proposed Task Force is to consider ideas and plans (from the Regional and Corporate Boards) and to reach agreement /consensus on what to present to the Legislature. Of course other Stakeholders may also have ideas but the key responsibility lies with the Act 290 Boards.

Legislation may cover such issues as changes in facility ownership structure (sale of all/part of a facility), how to effectively allow State Hospital Unions to have a separate Collective Bargaining negotiation, etc. It is not proposed to dis-enfranchise current employees in any way but rather to allow a different approach in the future.

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