

COPY



Grant-in-Aid Application

FY 2016

Grant Application Instructions
Fiscal Year 2016 (July 1, 2015 to June 30, 2016)

1. Fill out the application form in its entirety.
2. Submit the completed original of the application to the House Committee on Finance:

State Capitol, Rm. 306
Honolulu, HI 96813
Attn: GIA

3. **Submit (1) copy** of the application to the Senate Committee on Ways and Means:

State Capitol, Rm. 207
Honolulu, HI 96813
Attn: GIA

4. Do not include stapled or bound materials or brochures with applications. All materials submitted should be on 8 and ½ by 11 inch paper and clipped.
5. Applications may be submitted effective immediately. The deadline for receipt of applications is **January 30, 2015, at 4:30 pm** as determined by the official legislative calendar.

Please contact the House Committee on Finance staff at 586-6200 or Senate Committee on Ways and Means staff 586-6800 if you have questions.

Your application will be posted on the Legislature's website.

House District _____
Senate District _____

THE TWENTY-EIGHTH LEGISLATURE
APPLICATION FOR GRANTS
CHAPTER 42F, HAWAII REVISED STATUTES

Log No: _____

For Legislature's Use Only

COPY

Type of Grant Request:

GRANT REQUEST – OPERATING

GRANT REQUEST – CAPITAL

"Grant" means an award of state funds by the legislature, by an appropriation to a specified recipient, to support the activities of the recipient and permit the community to benefit from those activities.

"Recipient" means any organization or person receiving a grant.

STATE DEPARTMENT OR AGENCY RELATED TO THIS REQUEST (LEAVE BLANK IF UNKNOWN): _____

STATE PROGRAM I.D. NO. (LEAVE BLANK IF UNKNOWN): _____

1. APPLICANT INFORMATION:

Legal Name of Requesting Organization or Individual:

Hamakua Health Center, Inc.

Dbas: Hamakua-Kohala Health

Street Address: 45-549 Plumeria St., Honokaa HI 96727

Mailing Address: 45-549 Plumeria St., Honokaa HI 96727

2. CONTACT PERSON FOR MATTERS INVOLVING THIS APPLICATION:

Name MILTON CORTEZ

Title COO/COI

Phone # 808-775-7204

Fax # 808-775-1206

E-mail mcortez@hamakua-health.org

3. TYPE OF BUSINESS ENTITY:

- NON PROFIT CORPORATION INCORPORATED IN HAWAII
- FOR PROFIT CORPORATION INCORPORATED IN HAWAII
- LIMITED LIABILITY COMPANY
- OTHER
- SOLE PROPRIETORSHIP/INDIVIDUAL

6. DESCRIPTIVE TITLE OF APPLICANT'S REQUEST:

HHC, INC – PATIENT PORTAL

4. FEDERAL TAX ID # _____

5. STATE TAX ID #: _____

7. AMOUNT OF STATE FUNDS REQUESTED:

FISCAL YEAR 2016: \$ 92,640.92

8. STATUS OF SERVICE DESCRIBED IN THIS REQUEST:

- NEW SERVICE (PRESENTLY DOES NOT EXIST)
- EXISTING SERVICE (PRESENTLY IN OPERATION)

SPECIFY THE AMOUNT BY SOURCES OF FUNDS AVAILABLE AT THE TIME OF THIS REQUEST:

STATE \$ 92,640.92
FEDERAL \$ _____
COUNTY \$ _____
PRIVATE/OTHER \$ _____

TYPE NAME & TITLE OF AUTHORIZED REPRESENTATIVE:

AUTHORIZED SIGNATURE

IRENE J. CARPENTER, CEO
NAME & TITLE

JANUARY 28, 2015
DATE SIGNED



RECEIVED
1-30-15

✓

Application for Grants and Subsidies

COPY

I. Background and Summary

1. A brief description of the applicant's background;

Hamakua Health Center, Inc. is a 501(c)(3) Federally Qualified Community Health Center (FQHC), deemed in 2001 providing affordable, quality, culturally appropriate health care. It's foundation started in 1966 where five coastal plantation medical dispensaries were consolidated to form the Hamakua Infirmary. For 27 years it provided medical care to plantation families along the Hamakua Coast. In 1993, the infirmary transitioned to Hamakua Health Center, Inc., a community owned and governed Rural Health Center. It operates two Hawaii Island sites: Hamakua Health Center (HHC, INC.) in Honoka'a and its satellite Kohala Family Health Center in North Kohala and in 2011 added a mobile dental health van "The Amazing Toothbus".

HHC, INC. and its satellite in Kohala are the only Primary Care Providers based in the Hamakua and North Kohala serving a population of over 11,000 residents. Without these clinics there would be no access to primary care for the low-income and uninsured in North Hawaii. These sites also provide the only access for the entire communities of Hamakua and North Kohala as all of the private Providers in the service area are located in Kamuela. Our patient base is approximately 8,000 people and 23,000 patient encounters annually.

2. The goals and objectives related to the request;

We currently have less than 5% of patients requesting a copy of their health information because we do not have an Electronic Patient Portal. We are using scanners and paper copies to provide the health record. We have a scanning procedure in place, however, if the scanner is not available lab results, forms, medication records are not processed preventing a 3 day turn around. We expect to exceed the 50% threshold by reducing our backlog of documents that need to be scanned so that patients are able to have a copy of their health information electronically via a Patient Portal.

There are less than 5% of patients with electronic access to their health information presently, as we have not had the budget to implement and conduct community outreach and training of the Patient Portal, however through this project we are confident that these percentages will drastically increase.

HHC, INC. currently has over 1500 referrals for patients, the referrals allow us to track whether the patient is taking their medicine, or followed up on a recommendation by a doctor. By providing 1 person dedicated to doing referrals via the Patient Portal and providing laptops to the nurses we expect that the number of

referrals will drop to less than 100 within 1 year. Tracking logs will be developed in the Electronic Health Record as a tool to evaluate our staff and to increase the outcomes over time allowing for reasonable adjustment of equipment. We scored 0% when the evaluation was conducted for our Patient Centered Medical Home evaluation, and anticipate we will increase our score at least 50% after implementing the necessary equipment, staffing and tools.

The implementation of a Patient Portal would provide Hamakua Health Center with the ability to extend our services to the community and provide medical record information to other health record to our patients. Patients would have the ability to give their records to other health institutions and increase the data available that will promote a more efficient means of medical care.

3. The public purpose and need to be served;

This project will support HHC, INC’s strategic plan and the organization’s mission to(Provide quality healthcare that is responsive to our patients’ and communities’ needs, while embracing the core values of Lokahi, Ka Kou, Pono, Aloha, Kuleana, Ho ohana. The need for HKH Patient Health Portal continue to grow into a community of users dependent on the portal to make their health care. The implementation of a Patient Portal would provide Hamakua Health Center with the ability to extend our services to the community and provide medical record information to other health record to our patients.

Patients would have the ability to give their records to other health institutions and increase the data available that will promote a more efficient means of medical care.

4. Describe the target population to be served; and

Poverty Level. A third of the population lives at or below 200% of the Federal Poverty Level, an estimated 6,627 individuals. All income and poverty indicators for the service area exceed statewide averages, with lower income and higher utilization of public benefits. Hawaii County has the highest rate of uninsured (10.1%, compared to 7.1% statewide), and the highest rate of Medicaid/QUEST insured (35.8%, compared to 22.9%) than any other county in the state.

	State of Hawaii	Hawai'i County	North Kohala	Hamakua	Hilo
<100% Federal Poverty Level	9.6%	14.4%	6.8%	8.1%	16.7%
Children in Households Receiving Assistance	17.2%	26.5%	6.0%	19.1%	29.4%
Households receiving SNAP	8.4%	12.6%	7.0%	9.8%	14.7%
% Uninsured adults	7.1%	10.1%	10.6%	9.8%	7.1%

Average Per Capital Income	\$28,900	\$26,200	\$24,800	\$23,400	\$24,500
Civilian Labor Force Unemployed	4.6%	6.3%	4.9%	5.1%	6.2%
Adults with no High School Diploma	10.2%	9.5%	9.0%	11.7%	10.5%
65 Years of Age and Over	14.0%	14.0%	12.0%	13.9%	17.3%
Under 18 Years of Age	22.6%	23.0%	27.9%	25.2%	20.9%
Households with Linguistic Isolation	6.2%	2.9%	2.0%	2.8%	3.7%
Foreign Born	17.7%	11.2%	7.8%	12.7%	9.1%

Ethnicity. Native Hawaiians and Filipinos are the predominant ethnic groups in the community. The rate of foreign born and individuals with Limited English Proficiency (LEP) is lower than state rates. *Native Hawaiians.* Of all of the ethnic groups living in the service area, the Native Hawaiians have some of the poorest documented health statistics of all groups in Hawai'i, with the highest rates of chronic disease than any other ethnic group. More than half are overweight and, together with Filipinos, are the farthest from meeting the state's Healthy People 2010 objectives.

Race (alone or in combination), 2010	State of Hawaii	Hawai'i County	North Kohala	Hamakua	Hilo
White	41.5%	54.8%	56.1%	57.3%	41.5%
Native Hawaiian	21.3%	29.7%	36.1%	25.9%	32.5%
Filipino	25.1%	22.1%	32.8%	38.7%	22.1%
Japanese	23.0%	19.2%	16.4%	15.6%	33.8%
Chinese	14.6%	12.2%	16.3%	13.4%	14.7%

Health disparities. Healthcare utilization rates among residents are poor, attributed to a number of factors that include the lack of health insurance, transportation and knowledge of the importance of preventative care. Almost one in five residents do not have a primary care doctor, and over one in ten residents needed to see a doctor in the past year, but did not because they did not feel they could afford the cost of the visit and/or the copay. *Elderly population.* The service area has a large population of elderly. Approximately one third of the public housing units in the service area are senior housing complexes, and a majority of these elderly access services at HHC. Each year almost one in five HHC, INC. patients is elderly (age 65 and older), and a majority of them are retired agricultural workers that preciously worked on the sugar plantations in the area. There are no geriatric physicians or psychiatrists in the service area. Elderly that require psychiatric consultation and other geriatric specialty services must travel to other islands for care.

	State of Hawai'i	Hawai'i County	North Hawai'i Island
No health care coverage	8.2%	10.8%	10.4%

Do not have a personal doctor or health care provider	14.9%	16.3%	19.4%
Needed to see a doctor in past year but did not because of cost	8.6%	12.6%	11.0%
Last visit to doctor over 5 years ago for checkup	8.5%	10.4%	10.2%
Had a flu shot	46.4%	39.0%	41.4%
No flu shot in past year	53.6%	61.0%	58.6%
Never had a mammogram	5.4%	9.5%	
Had a pap smear over 3 years ago	74.0%	76.8%	

In addition, although health insurance companies are required to pay for specialty care when necessary, including airfare to the outer islands for consultation with specialists, many residents decline this service as they prefer not to leave the island.

The low rates of healthcare utilization and preventative care are reflected in the general health status of residents. Compared to statewide rates, more residents report poor health and have difficulty managing activities of daily living because of a health related condition. This is also due to the large population of elderly living in the service area.

	State of Hawai'i	Hawai'i	North Hawai'i Island
Physical and mental health not good in past 30 days	13.7%	14.9%	16.3%
General health fair to poor	13.8%	15.0%	17.1%
Have serious difficulty concentrating due to health condition(s)	7.8%	11.0%	12.3%
Limited in activities because of health problems	15.2%	18.7%	20.4%
Difficulty dressing or bathing	2.1%	3.0%	NA
Difficulty doing errand alone	5.4%	7.2%	NA
Limited because of arthritis or joint symptoms	37.8%	40.4%	
Arthritis or joint symptoms affect work	31.1%	38.4%	

5. Describe the geographic coverage.

The service area of Hamakua Health Center, Inc. (HHC, INC.) encompasses three districts, North Kohala, Hamakua and North Hilo (Census Tracts 217.02, 218, 219, 220 and 221) that span approximately 1,040 square miles on the northern tip of Hawai'i Island. Both the remote rural island location and the size of the service area of HHC, INC. present geographical/transportation barriers to the 24,588 area residents.¹ The North Kohala and Hamakua districts share a common border but are

¹ U.S. Census Bureau, American Community Survey, 2008-2012, using American Factfinder, accessed on October 28, 2014 at <http://factfinder2.census.gov>.

separated by 1,000 foot high sea cliffs and deep, inaccessible valleys with dense tropical vegetation along the coastline.

A majority of residents live in small villages called "camps" along the coastline. These camps are connected to the main highways by former sugar plantation access roads, and are not served by public transportation. The public bus service operates on a limited schedule in North Kohala, passing through the service area only once per day. An automobile is essential to get anywhere within the service area.

II. Service Summary and Outcomes

1. Describe the scope of work, tasks and responsibilities;
With funding we will have one (1) Full Time Employee (FTE) to manage the Patient Portal, which will drive the interface of patients and electronic health records by having the in-house capability to develop and provide support to the community. In turn, Providers will be able to capture accurate information allowing us to provide patients with documents that are more meaningful to them. We have an enhanced disease registry, however this also requires constant review and coordination with the clinical staff. We currently have a one page plan of care, and it has made visits more productive and we see the potential for a large improvement in patient population /health management. If we have a person solely dedicated to providing patients access to their records, we will be able to assess our capacity during business hours and generate reports to obtain data to see how efficient after hours services are for the community and the organization.

The Patient Portal would enable us to convert current medical paper forms into user friendly forms within the EHR (Electronic Health Record) that can be hosted on our website and Patient Portal. By providing forms and an updates to our website we will meet PCMH (Patient Centered Medical Home) element 4, which requires updated documentation for patients. The Patient Portal will be a onetime cost and maintenance of the portal will continue to be part of our Operational budget.

Equipment requested will expand capability for responding to patient calls and requests for consultations and records. The current system is persistently overloaded in the middle of the day, and cannot accommodate messages from patients, only a message that all operators are busy and a request to call back in a few minutes. The additional phones will assist answering patients in a timely manner.

The laptops will enable nurses to have access equipment they can take with them to the patient room and add more details to enhance the visit. Currently there are insufficient computers for nurses to access the EHR to utilize the protocols and capture information. Our current plan of care protocol is based on the data that we have on the EHR, and we would like to provide nurses with the tools

necessary to have access to patient health information at all times. By providing nurses with laptops for use during patient visits, we expect to see an increase in patient information captured to make better healthcare decisions. Nurses will also have access to approved protocols immediately available during the patient visit, and we will improve population health management of our patients by improving the collection of demographic and clinical data, assessment, application of protocols, and documentation of risk factors.

The scanner will allow our Medical Records staff HIE (Health Information Exchange) to scan documents quickly to the medical record and be made available to the patients through the Patient Portal. This will lead to more complete patient information.

The printers will provide the doctors with the ability to print documents and provide them to the patient with instructions and health education.

2. Provide a projected annual timeline for accomplishing the results or outcomes of the service;

Please see "Attachment A"

3. Describe its quality assurance and evaluation plans for the request. Specify how the applicant plans to monitor, evaluate, and improve their results; and

Support from the GIA will help us make significant progress towards achievement of a Patient Centered Medical Home. Evaluation and measurement will be made in the progress achieved in each of the applicable Elements we are seeking assistance with in PCMH 1.

This project will address the outstanding items in achieving Patient Centered Medical Home (PCMH)1: Enhance Access and Continuity. The equipment and resources secured through this grant will enable Hamakua-Kohala health to progress towards achievement of five of the outstanding seven Elements: C: Electronic Access, E: Medical Home Responsibilities, and G: The Practice Team.

4. List the measure(s) of effectiveness that will be reported to the State agency through which grant funds are appropriated (the expending agency). The measure(s) will provide a standard and objective way for the State to assess the program's achievement or accomplishment. Please note that if the level of appropriation differs from the amount included in this application that the measure(s) of effectiveness will need to be updated and transmitted to the expending agency.

Outcome Measurements. The effectiveness of the Patient Portal will be measured in the number of patients enrolling in the Patient Portal. The number of phone queries and requests will be monitored and patients will be educated on the use of the Portal. We expect to see an overall increase in patient participation.

Annual goals include:

- 90% of patients requesting Medical records will receive them within 3 days in a digital format.
- 60% increase in the use of the Patient Portal once it has been implemented. We expect an increase of 15% every quarter.

III. Financial

Budget

1. The applicant shall submit a budget utilizing the enclosed budget forms as applicable, to detail the cost of the request.

Please see Budget Forms attached.

2. The applicant shall provide its anticipated quarterly funding requests for the fiscal year 2016.

Quarter 1	Quarter 2	Quarter 3	Quarter 4	Total Grant
52,609.67	13,343.75	13,343.75	13,343.75	92,640.92

Wages, training and supplies allocated equitably on a quarterly basis, other cost all presumed purchased in first quarter.

3. The applicant shall provide a listing of all other sources of funding that they are seeking for fiscal year 2016.

- 330e Grant
- 340B program
- Title X – Family Planning
- BCCCP
- State Uninsured

4. The applicant shall provide a listing of all state and federal tax credits it has been granted within the prior three years. Additionally, the applicant shall provide a listing of all state and federal tax credits they have applied for or anticipate applying for pertaining to any capital project, if applicable.

n/a

5. The applicant shall provide a listing of all government contracts and grants it has been and will be receiving for program funding.

- 330e Grant
- Title X – Family Planning Clinical & Education
- BCCCP
- State Uninsured
- Medicare
- Medicaid

6. The applicant shall provide the balance of its unrestricted current assets as of December 31, 2014.

\$561,431

IV. Experience and Capability

A. Necessary Skills and Experience

The applicant shall demonstrate that it has the necessary skills, abilities, knowledge of, and experience relating to the request. State your experience and appropriateness for providing the service proposed in this application. The applicant shall also provide a listing of verifiable experience of related projects or contracts for the most recent three years that are pertinent to the request.

The project will be lead by Milton Cortez Chief Information officer Hamakua Kohala Health his main responsibility is to ensure that HHC can effectively plan for HHC, INC.'s technology needs and Project success. Milton Cortez oversees the IT department and EHR department; He has over 15 years of experience in project management and technical software deployment. He will provide technological guidance within the project , supervise information system and communications network. Develop and implement a customer service platform to serve the organization in every aspect.

Alexis McDougal is the IT manager for HHC, INC. she has over 8 years of experience in Electronic Health Record management she will participate in vendor contract negotiations for all new computer equipment and software purchased for the organization .She will Manage the day-to-day operations of the information technology department including directing staff, who will be supporting the EHR Patient Portal administration.

B. Facilities

The applicant shall provide a description of its facilities and demonstrate its adequacy in relation to the request. If facilities are not presently available, describe plans to secure facilities.

The EHR patient portal is dependent on internet capacity and bandwidth, HHC, INC. currently has high internet speed capability and requires no assistance in management .Our facilities will provide an working space for the Patient portal coordinator. All other aspect of the project are in a Hosted environment which HHC, INC. has a contractual agreement with a vendor to provide services for a monthly fee.

V. Personnel: Project Organization and Staffing

A. Proposed Staffing, Staff Qualifications, Supervision and Training

The applicant shall describe the proposed staffing pattern and proposed service capacity appropriate for the viability of the request. The applicant shall provide the qualifications and experience of personnel for the request and shall describe its ability to supervise, train and provide administrative direction relative to the request.

Please see Job Description - "Attachment B"

B. Organization Chart

The applicant shall illustrate the position of each staff and line of responsibility/supervision. If the request is part of a large, multi-purpose organization, include an organization chart that illustrates the placement of this request.

Please see Organization Chart 2015 – "Attachment C"

C. Compensation

The applicant shall provide the annual salaries paid by the applicant to the three highest paid officers, directors, or employees of the organization by position.

Position	Salary
Family Physician	139,610
Medical Director	157,500
Pediatrician	165,000

VI. Other

A. Litigation

The applicant shall disclose any pending litigation to which they are a party, including the disclosure of any outstanding judgment. If applicable, please explain.

n/a

B. Licensure or Accreditation

The applicant shall specify any special qualifications, including but not limited to licensure or accreditation that the applicant possesses relevant to this request.

n/a

C. Federal and County Grants

The applicant shall separately specify the amount of federal and county grants awarded since July 1, 2014.

FUNDER	REVENUE
SAC GRANT REQUEST Federal funds to support operations of CHC based upon changing conditions	745,697
STATE FUNDS 15,000 State Uninsured 20,000 BCCCP 75,000FP Clinical 24,500 FP Education	149,500

D. Private Educational Institutions

The applicant shall specify whether the grant will be used to support or benefit a sectarian or non-sectarian private educational institution. Please see Article X, Section 1, of the State Constitution for the relevance of this question.

n/a

E. Future Sustainability Plan

The applicant shall provide a plan for sustaining after fiscal year 2015-16 the activity funded by the grant if the grant of this application is:

- (1) Received by the applicant for fiscal year 2015-16, but
 - a. If funded the project cost is front loaded on purchasing hardware and software. The grant request is to fund the initial cost and burden of 1 year of project startup.
- (2) Not received by the applicant thereafter.

The sustainability of the project will be incurred by HHC, INC. year on year after implementation, by increasing the efficiency of patient interactions, record exchanges, we expect an increase in patient flow as evidence by several studies and industry journals.

<http://www.chcf.org/~media/MEDIA%20LIBRARY%20Files/PDF/M/PDF%20MeasuringImpactPatientPortals.pdf>

F. Certificate of Good Standing (If the Applicant is an Organization)


If the applicant is an organization, the applicant shall submit one (1) copy of a certificate of good standing from the Director of Commerce and Consumer Affairs that is dated no earlier than December 1, 2014.

Please see Certificate of Good Standing - "Attachment D"

BUDGET REQUEST BY SOURCE OF FUNDS
 Period: July 1, 2015 to June 30, 2016

COPY

Applicant: Hamakua Health Center, Inc.

BUDGET CATEGORIES	Total State Funds Requested (a)	Total Federal Funds Requested (b)	Total County Funds Requested (c)	Total Private/Other Funds Requested (d)
A. PERSONNEL COST				
1. Salaries	40,000			
2. Payroll Taxes & Assessments	2,000			
3. Fringe Benefits	8,000			
TOTAL PERSONNEL COST	50,000			
B. OTHER CURRENT EXPENSES				
1. Airfare, Inter-Island	1,200			
2. Insurance				
3. Lease/Rental of Equipment				
4. Lease/Rental of Space				
5. Staff Training	1,175			
6. Supplies				
7. Telecommunication				
8. Utilities				
9				
10				
11				
12				
13				
14				
15				
16				
17				
18				
19				
20				
TOTAL OTHER CURRENT EXPENSES	2,375			
C. EQUIPMENT PURCHASES	40,266			
D. MOTOR VEHICLE PURCHASES				
E. CAPITAL				
TOTAL (A+B+C+D+E)	92,641			
SOURCES OF FUNDING		Budget Prepared By:		
(a) Total State Funds Requested	92,641	Milton Cortez	808-775-7204	
(b) Total Federal Funds Requested		Name (Please type or print)	Phone	
(c) Total County Funds Requested			1/29/2015	
(d) Total Private/Other Funds Requested		Signature of Authorized Official	Date	
TOTAL BUDGET	92,641	Irene J. Carpenter, CEO		
		Name and Title (Please type or print)		

BUDGET JUSTIFICATION - PERSONNEL SALARIES AND WAGES

Period: July 1, 2015 to June 30, 2016

Applicant: Hamakua Health Center, Inc.

POSITION TITLE	FULL TIME EQUIVALENT	ANNUAL SALARY A	% OF TIME ALLOCATED TO GRANT REQUEST B	TOTAL STATE FUNDS REQUESTED (A x B)
Patient Portal Coordinator	1	\$50,000.00	100.00%	\$ 50,000.00
				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
TOTAL:				50,000.00
JUSTIFICATION/COMMENTS:				

BUDGET JUSTIFICATION - EQUIPMENT AND MOTOR VEHICLES

Period: July 1, 2015 to June 30, 2016

Applicant: Hamakua Health Center, Inc.

DESCRIPTION EQUIPMENT	NO. OF ITEMS	COST PER ITEM	TOTAL COST	TOTAL BUDGETED
Laptops	12.00	\$923.16	\$ 11,077.92	\$ 11,077.92
Laptops Other Cost	12.00	\$130.00	\$ 1,560.00	\$ 1,560.00
Docking Stations	12.00	\$169.00	\$ 2,028.00	\$ 2,028.00
Phone Head Sets	8.00	\$200.00	\$ 1,600.00	\$ 1,600.00
Phones	20.00	\$300.00	\$ 6,000.00	\$ 6,000.00
Phones - Installation Labor Cost	1.00		\$ 1,000.00	\$ 1,000.00
Patient Portal	1.00	\$12,000.00	\$ 12,000.00	\$ 12,000.00
Patient Portal Coordinator	1.00	\$50,000.00	\$ 50,000.00	\$ 50,000.00
Printers	4.00	\$400.00	\$ 1,600.00	\$ 1,600.00
Document Scanner	3.00	\$800.00	\$ 2,400.00	\$ 2,400.00
Outreach Materials	1.00	\$1,000.00	\$ 1,000.00	\$ 1,000.00
Training	1.00	\$1,175.00	\$ 1,175.00	\$ 1,175.00
Training Travel Cost	1.00	\$1,200.00	\$ 1,200.00	\$ 1,200.00
TOTAL:	77		\$ 92,640.92	\$ 92,640.92

JUSTIFICATION/COMMENTS:

DESCRIPTION OF MOTOR VEHICLE	NO. OF VEHICLES	COST PER VEHICLE	TOTAL COST	TOTAL BUDGETED
			\$ -	
			\$ -	
			\$ -	
			\$ -	
			\$ -	
TOTAL:				

JUSTIFICATION/COMMENTS:

BUDGET JUSTIFICATION - CAPITAL PROJECT DETAILS

Period: July 1, 2015 to June 30, 2016

Applicant: Hamakua Health Center, Inc.

FUNDING AMOUNT REQUESTED						
TOTAL PROJECT COST	ALL SOURCES OF FUNDS RECEIVED IN PRIOR YEARS		STATE FUNDS REQUESTED	OF FUNDS REQUESTED	FUNDING REQUIRED IN SUCCEEDING YEARS	
	FY: 2013-2014	FY: 2014-2015	FY:2015-2016	FY:2015-2016	FY:2016-2017	FY:2017-2018
PLANS	N/A					
LAND ACQUISITION						
DESIGN						
CONSTRUCTION						
EQUIPMENT						
TOTAL:						
JUSTIFICATION/COMMENTS:						

GOVERNMENT CONTRACTS AND/OR GRANTS

Applicant: Hamakua Health Center, Inc.

	CONTRACT DESCRIPTION	EFFECTIVE DATES (BUDGET PERIOD)	AGENCY	GOVERNMENT ENTITY (U.S. / State / Haw / Hon / Kau / Mau)	CONTRACT VALUE
1.	HRSA 330e	3/1/2014-2/28/2015	HRSA	US	773,072.00
2.	Title X – Family Planning	6/30/2014- 6/29/2015	State of HI	State	98,500.00
3.	BCCCP	6/30/2014- 6/29/2015	State of HI	State	18,000.00
4.	State Uninsured Program	7/1/2014-6/30/2015	State of HI	State	35,000.00
5.					
6.					
7.					
8.					
9.					
10.					
				TOTAL	924,572.00

**DECLARATION STATEMENT OF
APPLICANTS FOR GRANTS PURSUANT TO
CHAPTER 42F, HAWAI'I REVISED STATUTES**

COPY

The undersigned authorized representative of the applicant certifies the following:

- 1) The applicant meets and will comply with all of the following standards for the award of grants pursuant to Section 42F-103, Hawai'i Revised Statutes:
 - a) Is licensed or accredited, in accordance with federal, state, or county statutes, rules, or ordinances, to conduct the activities or provide the services for which a grant is awarded;
 - b) Complies with all applicable federal and state laws prohibiting discrimination against any person on the basis of race, color, national origin, religion, creed, sex, age, sexual orientation, or disability;
 - c) Agrees not to use state funds for entertainment or lobbying activities; and
 - d) Allows the state agency to which funds for the grant were appropriated for expenditure, legislative committees and their staff, and the auditor full access to their records, reports, files, and other related documents and information for purposes of monitoring, measuring the effectiveness, and ensuring the proper expenditure of the grant.

- 2) If the applicant is an organization, the applicant meets the following requirements pursuant to Section 42F-103, Hawai'i Revised Statutes:
 - a) Is incorporated under the laws of the State; and
 - b) Has bylaws or policies that describe the manner in which the activities or services for which a grant is awarded shall be conducted or provided.

- 3) If the applicant is a non-profit organization, it meets the following requirements pursuant to Section 42F-103, Hawai'i Revised Statutes:
 - a) Is determined and designated to be a non-profit organization by the Internal Revenue Service; and
 - b) Has a governing board whose members have no material conflict of interest and serve without compensation.

Pursuant to Section 42F-103, Hawai'i Revised Statutes, for grants used for the acquisition of land, when the organization discontinues the activities or services on the land acquired for which the grant was awarded and disposes of the land in fee simple or by lease, the organization shall negotiate with the expending agency for a lump sum or installment repayment to the State of the amount of the grant used for the acquisition of the land.

Further, the undersigned authorized representative certifies that this statement is true and correct to the best of the applicant's knowledge.

Hamakua Health Center, Inc.

(Typed Name of Individual or Organization)



(Signature)

(Date)

11/29/2015

Irene J. Carpenter, CEO

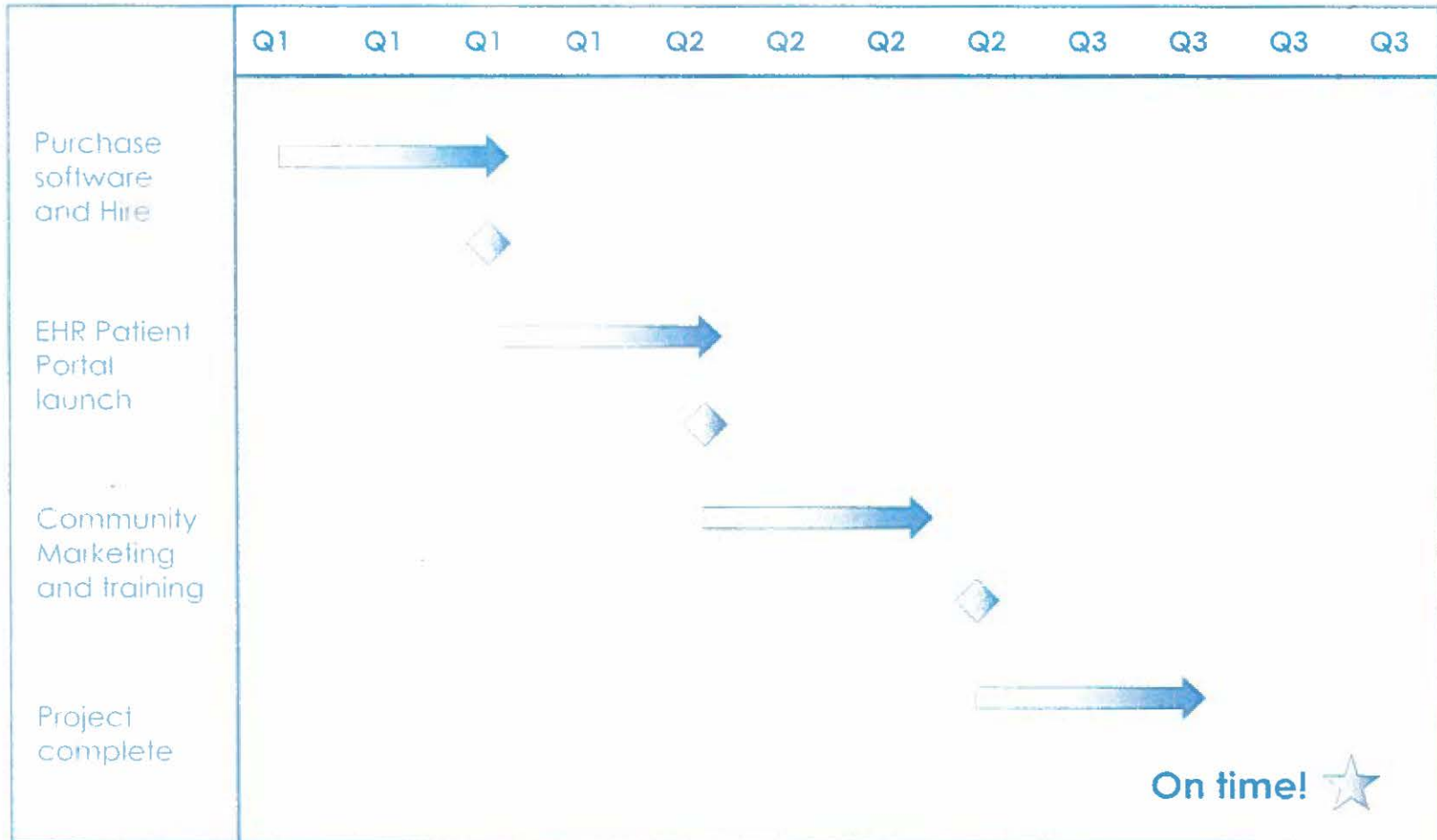
(Typed Name)

CEO

(Title)



EHR Patient Portal Timeline



“Attachment A”

**HAMAKUA HEALTH CENTER, INC.
JOB DESCRIPTION**



JOB TITLE: Patient Portal Coordinator

REPORTS TO: IT Manager

SUPERVISES: None

STATUS:

Job Summary:

This position will support Hamakua Kohala Health's strategic plan and the organization's mission to (mission statement), while embracing the core values of (words). The need for HKH Patient Health Portal continue to grow into a community of users dependent on the portal to make their health care. As an example, the use of technology by patients has continued to grow and the administrative needs of the portal have also grown across the board in customer service, marketing, education, training and quality control. There is a need for a single entity to be identified as the portal owner to be responsible for the following portal administrative functions. The EHR Portal Coordinator will work with internal clients, including IT, to ensure that the ERH Patient portal integrates from both an aesthetic and functional perspective. Functionality is a core responsibility, and that the patient portal is being promoted and marketed appropriately online. The Portal Coordinator will leverage IT, designers, developers, multimedia and graphics, Social Media and other support staff. The Portal coordinator is responsible for developing and conducting an ongoing review of data, identifying area's that require improvement/modification of clinical documentation and to assure ongoing data integrity of the EHR where quality measures are concerned.

Essential Functions:

- Demonstrates positive interpersonal relations in dealing with physicians, patients, patient families, visitors, and co-workers in a professional and confidential manner.
- Embraces the philosophy of continuous quality improvement.
- Embraces and projects the values of Hamakua Kohala Health: Lokahi, Ka kou, Pono, Aloha, Kuleana, Ho 'ohana
- Applies problem solving and conflict resolution skills where needed.
- Promptly identifies problems and effectively utilizes resources to address problems in a satisfactory manner.
- Demonstrates appropriate utilization of electronic medical record
- Maintains a clear understanding of the documentation requirements for quality measures
- Maintains a clear understanding of how data is filtered for internal and external reporting
- Makes informational and educational presentations to employees and providers.

Duties and Responsibilities:

- Responsible for the management and communication with patients through the Patient portal.
- Provides leadership in making Health Information Exchange between other organizations.
- Review patient records request for timeliness, completeness, accuracy, and appropriateness of data
- Organize and maintain data for clinical databases and registries
- Track patient outcomes for quality assessment
- Use classification software to assign clinical codes for reimbursement and data analysis
- Electronically record data for collection, storage, analysis, retrieval, and reporting
- Protect patients' health information for confidentiality, authorized access for treatment, and data security

- EMR/PM Software Enhancement
- External Networking and Working Relationships

Job Specifications:**Education/Certification/Experience:**

- post-secondary education and training; Bachelors Degree in a related field is preferred or the equivalent in IT support experience
- Two years experience in IT support or software development preferred
- Experience in a medical or health care environment preferred
- EMR Certification is preferred

Skills/Abilities:

- Proficient in Microsoft Office and EMR applications
- Common database applications processing skills preferred
- Strong verbal and written communication skills including record keeping and preparing reports
- Ability to read, analyze and interpret EMR and PM reports
- Good attention to details and follow up; good time management
- Ability to plan, organize and manage QI projects as part of a team effort
- Ability to work effectively with different types of people
- Maintains a positive and helpful attitude
- Ability to maintain confidentiality and patient privacy
- Creative problem solving and analytic abilities
- High level of initiative and ability to self-direct

- Ability to maintain and effectively work within a network of professional contacts and relationships

Position Environment

This position requires a full range of body motion, manual and finger dexterity and eye-hand coordination. Requires sitting for long periods of time at computer keyboard. Occasionally lifts and carries items weighing up to 20 pounds unassisted. Requires corrected vision and hearing to normal range. Requires working under stressful conditions or working irregular hour.

I am able to perform these tasks without accommodation: _____ Yes _____ No
If no, list required accommodations:

I have read and understand the above job description, and I accept all the responsibilities of the position.

Employee's Signature Date

Signature of Chief Executive Officer Date

The above statements are intended to describe the general nature and level of work being performed by people assigned to this classification. They are not to be construed as an exhaustive list of all responsibilities, duties, and skill required of personnel so classified. All personnel may be required to perform duties outside of their normal responsibilities from time to time as needed.

HAMAKUA HEALTH CENTER IS AN EQUAL OPPORTUNITY EMPLOYER

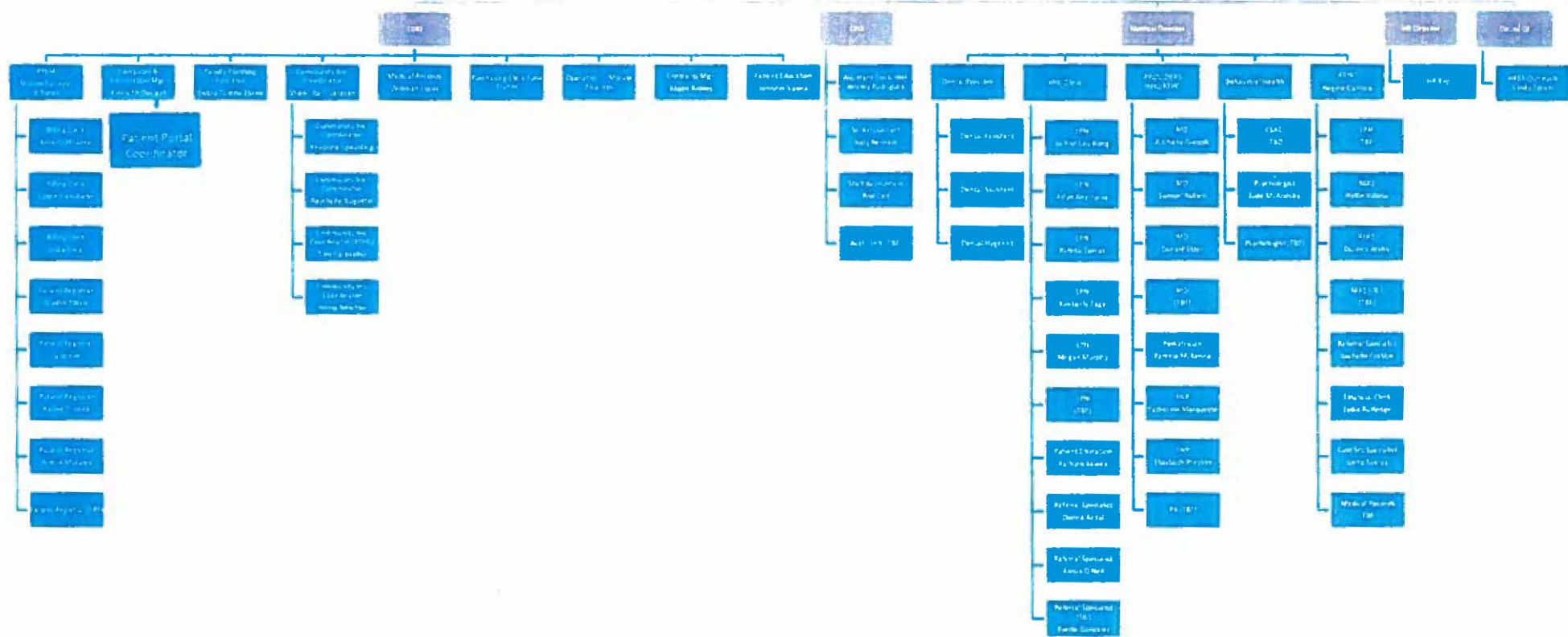
ORGANIZATIONAL CHART 2015



Revisi 2015

2015

Departemen



"Attachment C"



Department of Commerce and Consumer Affairs

CERTIFICATE OF GOOD STANDING

I, the undersigned Director of Commerce and Consumer Affairs of the State of Hawaii, do hereby certify that

HAMAKUA HEALTH CENTER, INC.

was incorporated under the laws of Hawaii on 10/30/1964 ; that it is an existing nonprofit corporation; and that, as far as the records of this Department reveal, has complied with all of the provisions of the Hawaii Nonprofit Corporations Act, regulating domestic nonprofit corporations.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the seal of the Department of Commerce and Consumer Affairs, at Honolulu, Hawaii.

Dated: January 23, 2015

Interim Director of Commerce and Consumer Affairs

