

**THE THIRTIETH LEGISLATURE
APPLICATION FOR GRANTS
CHAPTER 42F, HAWAII REVISED STATUTES**

Type of Grant Request:

Operating Capital

Legal Name of Requesting Organization or Individual: LANAI COMMUNITY HEALTH CENTER (LCHC)

Dbas:

Amount of State Funds Requested: \$300,000

Brief Description of Request (Please attach word document to back of page if extra space is needed): Chapter 42F operating funds will allow LCHC to establish and track a Dental Program (e.g. comprehensive exams, screening exams, fluoride applications, recare and restorative appointments) for children by leveraging our educational and screening presence at Lana'i High and Elementary School and as a WIC Program service provider. These funds will also allow for further program development, by providing the means to generate educational materials/supplies and translate health literacy programs, such as the Healthy Teeth, Healthy Kids Program, into culturally appropriate verbiage for the Hawaiian, Kosraean, Ilocano and Samoan groups on Lana'i.

Amount of Other Funds Available:

State: \$300,000 (if awarded)

Federal: \$631,627 (if awarded)

County: \$0.00

Private/Other: \$61,908 (if awarded)

Total amount of State Grants Received in the Past 5 Fiscal Years:

\$2,250,000

Unrestricted Assets:

\$869,850

New Service (Presently Does Not Exist): Existing Service (Presently in Operation):

Type of Business Entity:

- 501(C)(3) Non Profit Corporation
 Other Non Profit
 Other

Mailing Address: PO BOX 630142

City: LANAI CITY

State: Hawaii Zip: 96763

Contact Person for Matters Involving this Application

Name:
Diana M V Shaw, PhD, MPH, MBA, FACMPE

Title:
Executive Director

Email:
DShaw@lanaihealth.org

Phone:
808-565-6919

Federal Tax ID#:

██████████

State Tax ID#

████████████████████



Diana M V Shaw, Executive Director

01/14/2020

Authorized Signature

Name and Title

Date Signed

received
1/17/2020

12:52pm

Application Submittal Checklist

The following items are required for submittal of the grant application. Please verify and check off that the items have been included in the application packet.

- X 1) Certificate of Good Standing (If the Applicant is an Organization)
- X 2) Declaration Statement
- X 3) Verify that grant shall be used for a public purpose
- X 4) Background and Summary
- X 5) Service Summary and Outcomes
- X 6) Budget
 - a) Budget request by source of funds ([Link](#))
 - b) Personnel salaries and wages ([Link](#))
 - c) Equipment and motor vehicles ([Link](#))
 - d) Capital project details ([Link](#))
 - e) Government contracts, grants, and grants in aid ([Link](#))
- X 7) Experience and Capability
- X 8) Personnel: Project Organization and Staffing



DIANA M V SHAW, Executive Director

01/14/2020

AUTHORIZED SIGNATURE

PRINT NAME AND TITLE

DATE



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

LANA'I COMMUNITY HEALTH CENTER

was incorporated under the laws of Hawaii on 11/29/2004 ; 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 03, 2020

Director of Commerce and Consumer Affairs



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


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.

Lāna'i Community Health Center
(Typed Name of Individual or Organization)



(Signature) 01/14/2020

(Date)

Diana M V Shaw, PhD, MPH, MBA, FACMPE Executive Director
(Typed Name) (Title)

Attachment B

§42F-103 Standards for the award of grants. (a) Grants shall be awarded only to individuals who, and organizations that:

- (1) Are 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;
- (2) Comply 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;
- (3) Agree not to use state funds for entertainment or lobbying activities; and
- (4) Allow 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.

(b) In addition, a grant may be made to an organization only if the organization:

- (1) Is incorporated under the laws of the State; and
- (2) 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.

(c) Further, a grant may be awarded to a nonprofit organization only if the organization:

- (1) Has been determined and designated to be a nonprofit organization by the Internal Revenue Service; and
- (2) Has a governing board whose members have no material conflict of interest and serve without compensation.

(d) If a grant is used by an organization 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. This restriction shall be registered, recorded, and indexed in the bureau of conveyances or with the assistant registrar of the land court as an encumbrance on the property. Amounts received from the repayment of a grant under this subsection shall be deposited into the general fund. [L 1997, c 190, pt of §3; am L 2007, c 184, §1; am L 2014, c 96, §7]

Section 42F-102 Acknowledgement

The undersigned hereby confirms and acknowledges its compliance with Section 42F-103, Hawaii Revised Statutes, as stated above.

Lāna'i Community Health Center
(Typed Name of Organization)



January 14, 2020

Date

ATTACHMENT C

§42F-102 Applications for grants. Requests for grants shall be submitted to the appropriate standing committees of the legislature at the start of each regular session of the legislature. Each request shall state:

- (1) The name of the requesting organization or individual;
- (2) The public purpose for the grant;
- (3) The services to be supported by the grant;
- (4) The target group; and
- (5) The cost of the grant and the budget. [L 1997, c 190, pt of §3; am L 2014, c 96, §6]

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Section 42F-102 Acknowledgement

The undersigned hereby confirms and acknowledges that the grant will be used for a public purpose pursuant to Section 42F-102, Hawaii Revised Statutes, as stated above.

Lāna'i Community Health Center
(Typed Name of Organization)



Diana M V Shaw, PhD, MPH, MBA, FACMPE
Executive Director

January 14, 2020
Date

Application for Grants

If any item is not applicable to the request, the applicant should enter “not applicable”.

I. Certification – Please attach immediately after cover page

1. 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, 2019.

See Attachment A.

2. Declaration Statement

The applicant shall submit a declaration statement affirming its compliance with Section 42F-103, Hawaii Revised Statutes. ([Link](#))

See Attachment B.

3. Public Purpose

The applicant shall specify whether the grant will be used for a public purpose pursuant to Section 42F-102, Hawaii Revised Statutes. ([Link](#))

See Attachment C.

II. Background and Summary

This section shall clearly and concisely summarize and highlight the contents of the request in such a way as to provide the State Legislature with a broad understanding of the request. Please include the following:

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

Lāna‘i Community Health Center (LCHC) is a 501(c)3 nonprofit, federally qualified health center serving Lāna‘i, incorporated in 2004. Our mission is to take care of the community by directly providing health services and partnering with other organizations and providers. Though often misconceived, LCHC is not supported by Mr. Ellison, who owns 98% of the island. We fully own and fund our own programs. Our focus is on the un- and underinsured, low income, medically underserved population.

LCHC provides integrated health and wellness services embracing the ‘whole’ patient and engaging the patient as a partner in their care utilizing tools such as education and self-

awareness. Through the delivery of a wide range of health services, LCHC ensures access to residents experiencing significant health disparities. LCHC is a highly regarded provider of quality clinic, home, work and school based services. Since start-up, the LCHC's population base has grown from 52 patients in 2008 to 2,159 as of 12/31/19 (70% of the island's population) providing ongoing care and episodic care. We employ 45 staff and over a dozen contracted providers and fitness instructors. We are one of the major island employers.

2. The goals and objectives related to the request;

LCHC to establish and track a Dental Home Program (e.g. comprehensive exams, screening exams, fluoride applications, recare and restorative appointments) for children who are not receiving dental care by establishing them a Dental Home by leveraging our educational and screening presence at Lānaʻi High and Elementary School and as a WIC Program service provider. These funds will also allow for further program development, by providing the means to generate educational materials/supplies and translate health literacy programs, such as the Healthy Teeth, Healthy Kids Program, into culturally appropriate verbiage for the Hawaiian, Kosraean, Ilocano and Samoan groups on Lānaʻi.

Goal 1: Establish a Children Recare System focused on children without a Dental Home. This system is one of the most vital systems of our dental practice. A Recare System focused on children without a Dental Home will include the following:

- An assigned team member will be responsible/accountable for the Children Recare System without a Dental Home;
- Screenings at Lānaʻi High and Elementary will take place to identify children without a Dental Home. Once the child is identified, dental staff will follow-up with the child's parent/guardian via phone/home visit and a 'screening report' will also be sent home with the child;
- Hygiene hours will be available each month to accommodate all children without a Dental Home who are in need of their professional cleaning and oral examination; and
- Automatic scheduling of "recare" at the end of the visit, prior to the child leaving the practice.

Goal 2: Establish a Scope of Care designed specifically for children without a Dental Home, which will include: tracking comprehensive exams, screening exams, fluoride applications, and recare appointments and restorative appointments.

Objective: The main objective of the Dental Home Program is to create a Dental Home for children who are not receiving dental care, and thereby providing 85% (727 children) of the approximately 855 children on the island a Dental Home. As of 2018, LCHC serves as a Dental Home to 662 children (77% of the population under age 18), LCHC feels that this objective of 727 children (or 85% of the population under age 18) is reasonable and achievable.

Critical Note: Outmigration (as documented by DBEDT) + No/Underinsurance Insurance = Decreased Access to LCHC Services. LCHC is currently looking at the need to limit the type of oral health services we offer, as well as limiting services to current Medical Patients. As the only

dental service on our island, this will result in increased emergency services via hospital ER – and increased costs to the state and the patient. While our request is for support for our efforts for the community keiki, **if support is provided for the keiki, LCHC will be able to continue to provide services to adults who need oral health services – plugging the hole in the current state and private insurance coverage.**

3. The public purpose and need to be served;

The Lāna‘i Community Health Center’s mission is to take care of the community of Lāna‘i. A 501(c)3 nonprofit organization, LCHC takes care of the community with a focus on physical, mental, emotional, intellectual and spiritual welfare and by enriching and empowering lives to help build healthy families in a supportive environment. LCHC carries out its mission:

- By directly providing comprehensive health and wellness services.
- By working collaboratively with partners to provide needed services for Lāna‘i. LCHC serves individuals of all ages, ethnicity, gender, and residency.

LCHC’s target population consists of everyone on Lāna‘i, with a special focus on those who live at or below 200% of the federal poverty level (33.6% of the 2017 LCHC patients) and the under-/uninsured (12.7% of LCHC patients in 2017 were uninsured). LCHC provides services in a culturally sensitive manner – providing written and oral translation as needed. No one is turned away due to an inability to pay for service. LCHC serves individuals of all ages, ethnicity, gender, and residency — old timers, part-timers, and newcomers. LCHC accepts all insurances and assists its patients with understanding and navigating their insurance coverage questions. LCHC is a nonprofit organization, and a Federally Qualified Health Center (FQHC) with 330e status awarded in September 2007. Clinical services have been provided since August 2008.

4. Describe the target population to be served; and

Our target population are those who need care on the island of Lāna‘i. Lāna‘i is an isolated community described by the U.S. Census (Population Demographics for Lāna‘i City, Hawai‘i in 2016 and 2017) as:

- Small, geographically isolated island, pop. 3,102; part of Maui County administratively.
- Diverse population – Asian 53.2% (vast majority, 38.3%, are Filipino), White 10.9%, Hispanic/Latino 11.8%, Pacific Islander 5.1%, Native Hawaiian 7.1%, Two or more races 20.9%, Three or more races 7%.
- Families mainly low-income (cumulative data) from American Community Survey (5 year estimates 2011-2015): 50% of FPL – 5.1%; 125% of FPL – 10.1%; 150% of FPL – 14.8%; 200% of FPL – 29%; 300% of FPL – 46.4%; 400% of FPL – 64.8%; 500% of FPL – 76.9%.
- Household income (Economic Characteristics, 2011-2015 American Community Survey 5 year estimates (in 2015 inflation-adjusted dollars): Less than \$10,000 – .08%; \$10,000 to \$14,999 – 5.6%; \$15,000 to \$24,999 – 11.3%; \$25,000 to \$34,999 – 9.1%; \$35,000 to \$49,999 – 18%; \$50,000 to \$74,999 – 15.5%; \$75,000 to \$99,999 – 19.0%; \$100,000 to \$149,999 – 13.1%; \$150,000 to \$199,999 – 6.4%; \$200,000 or more – 1.2%.

- Per capita family income – \$23,826.
- Poverty Level: Nearly 29% of the island’s population, or 1,254 individuals live below 200% of the federal poverty level. In 2018, 44% of LCHC patients were at or below 200% of the federal poverty level.
- Many residents are in low-paying jobs in various service and hotel accommodation services – 41%.
- An estimated 6% of residents are uninsured – 12% of LCHC patients are uninsured – many immigrants do not qualify for insurance, and many are “underinsured” with health plans that don’t cover all necessary services.
- Census 2010 data indicates that there are 235 children below the age of 5 and 198 children between the ages of 5 and 9. LCHC 2018 patient data indicates that following ages of children under the age of 8: below age 1 – 44 children; Age 3 – 28 children; and below age 8 – 300 children.
- According to the 2010 Census, the island’s gender mix for ages 9 and under is as follows: below age 5 – 118 males and 117 females; between ages 5 and 9 – 102 males and 96 females. Using LCHC 2018 patient data indicates that following genders of children under the age of 8: below age 1 – 23 males and 21 females; age 3 – 14 males and 14 females; and below age 8 – 156 males and 144 females. It is safe to estimate that our population is 52% male and 48% female.

5. Describe the geographic coverage.

LCHC’s geographic coverage is the island of Lānaʻi.

LCHC is located on the island of Lānaʻi, the smallest of the major Hawaiian Islands with a land area of 140 square miles. The island’s history is one of transition as the island was purchased by different owners. Each transition throughout this island’s history has forced a change in economic focus and lifestyle produced results that directly affected the island’s residents (and still affects all today). These changes have created the community as we know it today, which consist of an eclectic mix of ethnicities and cultures. This broad mix of ethnicities makes Lānaʻi unusual and different from other rural communities in the U.S. In addition, immigrants continue to relocate to Lānaʻi, because family members are able to sponsor their arrival — especially individuals from the Philippines — with 32% of our population foreign born and 10.3% of our households facing linguistic isolation. (Hawai`i Department of Health, “State of Hawai`i Primary Care Needs Assessment Data Book, 2012).

III. Service Summary and Outcomes

The Service Summary shall include a detailed discussion of the applicant’s approach to the request. The applicant shall clearly and concisely specify the results, outcomes, and measures of effectiveness from this request. The applicant shall:

1. Describe the scope of work, tasks and responsibilities;

The main objective of the Dental Home Program is to create a Dental Home for children who are not receiving dental care, and thereby providing 85% (727 children) of the approximately 855 children on the island a Dental Home.

The Dental Home for Children Program will operate through the school screenings, health education and WIC programs that LCHC already has in place. In addition, funding will be used for integrating the LCHC Clinical Health Workers from the targeted ethnic groups into the programs. By doing so, LCHC will provide culturally appropriate language and appeal in established health literacy programs to motivate parents to establish an ongoing relationship with LCHC for dental care for their children (e.g. comprehensive exams, screening exams, fluoride applications, recare and restorative appointments). Funding will also support the Dental Hygienist who will develop the workflow and record keeping that tracks and monitors the percentage of children who have established a Dental Home, because of this grant. Lastly, funding will be used for oral care supplies (e.g. finger brushes, infant toothbrushes and fluoride toothpaste).

The American Academy of Pediatric Dentistry (AAPD) and the American Dental Association (ADA) support the concept of a “Dental Home.” A Dental Home is an ongoing relationship between the dentist and the patient, and includes comprehensive oral health care, beginning no later than age one. In serving as a Dental Home, LCHC manages a child’s oral care in a comprehensive, continuously accessible, coordinated and family-centered manner. Utilizing best practices for the proper delivery of oral health care – we focus on prevention and education starting with infancy, which enhances our ability to provide optimal oral health care, beginning with age one. As the only WIC clinic provider on island, and also the only dental practice providing screenings in the school, LCHC is well positioned to serve as our community’s Dental Home.

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

YEAR ONE	
QTR 1 (January – March)	Program staff appointments (e.g. Dental Residents; Children Recare System; Clinical Health Workers; and Dental Hygienist). Educational materials developed and supplies ordered. Translate health literacy programs. Education and screening. Screening reports – parent/guardian contact. Increase hygiene hours.
QTR2 (April – June)	Education and screening ongoing. Screening reports – parent/guardian contact ongoing. Maintain increased hygiene hours. Professional cleaning and oral examination appointments scheduled. Tracking comprehensive exams, screening exams, fluoride applications, and recare appointments and restorative appointments. Automatic scheduling of “recare” at the end of the visit, prior to the child leaving the practice.

YEAR ONE	
	Integrated care with all healthcare disciplines. Supplies ordered, as needed. Educational materials updated as needed, inclusive of translations.
QTR3 (July – September)	Education and screening ongoing. Screening reports – parent/guardian contact ongoing. Maintain increased hygiene hours. Professional cleaning and oral examination appointments scheduled. Tracking comprehensive exams, screening exams, fluoride applications, and recare appointments and restorative appointments. Automatic scheduling of “recare” at the end of the visit, prior to the child leaving the practice. Integrated care with all healthcare disciplines. Supplies ordered, as needed. Educational materials updated as needed, inclusive of translations.
QTR4 (October – December)	Education and screening ongoing. Screening reports – parent/guardian contact ongoing. Maintain increased hygiene hours. Professional cleaning and oral examination appointments scheduled. Tracking comprehensive exams, screening exams, fluoride applications, and recare appointments and restorative appointments. Automatic scheduling of “recare” at the end of the visit, prior to the child leaving the practice. Integrated care with all healthcare disciplines. Supplies ordered, as needed. Educational materials updated as needed, inclusive of translations.

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

As and Federally Qualified Health Center (FQHC), LCHC has a sophisticated reporting system and extensive familiarity with setting goals, collecting data and reporting progress on goals. Our health informatics system and data collection strategy has three primary applications, the electronic health record (EHR), eClinicalWorks (eCW) version 10, data warehouse (BridgeIT) and, care management system (Comprehensive Disease Management System, CDMP). All three systems are interfaced with nightly data dumps from eCW to BridgeIT and in turn to CDMP. LCHC is fully automated with eCW at Stage 2 of Meaningful Use. BridgeIT provides extensive support for both clinical and financial reporting including fully automated UDS reporting. In addition, LCHC can easily develop customized reports for special projects, such as those needed for the Dental Home for Children Program. All three systems are powerful and well-developed: CDMP is a cloud-based application developed with leadership from the Joslin Diabetes Center funded by the Department of Defense and initially focused on comprehensive diabetes care. eCW is also cloud-based, and ONC 2014 Edition criteria and was certified as a Complete EHR on July 24th, 2013 by the Certification Commission for Health Information Technology (CCHIT®).

We routinely report goals, results, and progress to federal, state and county governments, as well as private foundations that provide funds for special programs. LCHC has an appropriate accounting system with complete capacity to provide appropriate account for all funding awards. LCHC does not have any conditions and is compliant with all federal regulations and rules. LCHC utilizes QuickBooks for its financial information system. The accounting system provides the ability to track, analyze, and report key performance data related to the organization's financial status. The LCHC electronic medical record and practice management system, eClinicalWorks, provides billing and collection data, and an automated process for collecting and analyzing clinical performance data. This data is incorporated into financial performance data providing LCHC with an expanded capability to manage its operations and performance. This system is sufficient for its size. LCHC maintains accounting and internal control systems appropriate to the size and complexity of the organization, which permit tracking of the financial health of LCHC, including identification of trends or conditions that may warrant action by the organization to maintain financial stability. Systems reflect Generally Accepted Accounting Principles (GAAP). LCHC's financial management system is able to account for all funding awards in order to identify the source (receipt) and application (expenditure) of funds for activities in whole or in part. LCHC's financial records include information and related source documentation pertaining to authorizations, obligations, unobligated balances, assets, expenditures, income and interest under all funding awards. Non-grant funds generated from health center program activities, in excess of what is necessary to support the HRSA approved total health center budget, are utilized to further the objectives of LCHC by benefitting the patient population on Lāna‘i and are not used for any purpose that is prohibited.

Health Center expenditures are monitored to keep them consistent with the HRSA approved total budget and any additional applicable HRSA approvals that have been requested and received and to maintain effective control over, and accountability for, all funds, property, and other assets associated with the health center. All assets are safeguarded to assure that they are used solely for authorized purposes in accordance with the terms and conditions of the health center.

LCHC maintains a separation of functions appropriate to its small size to safeguard assets and maintain financial stability. LCHC has an annual independent financial audit which is performed in accordance with Federal audit requirements. Subsequent audits must demonstrate corrective actions have been taken to address all findings, questioned costs, reportable conditions, and material weaknesses cited in the previous audit report, if applicable. Provisions are in place at all levels, and include requirements and restrictions to ensure accountability and control – all checks must have two signatures, regardless of amount. Signature authority is vested only with the Executive Director, and several selected board members, including the Board President, Vice President, Secretary and Treasurer. Checks of \$10,001 or more must be signed by two Board members, plus the Executive Director. An annual independent financial audit is performed.

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.

The Dental Home for Children Program will focus on the following measures: Oral Health Screenings, Sealants, and Carries Risk Assessment completion. In addition, the Dental Assistant Certification is the other measure that will be monitored to determine our program's effectiveness.

LCHC has set goals for our oral health clinical measure. When possible, we use the Healthy People 2020 goals as a base; we then build our projections upon this base. We would ensure that 70% of the LCHC patients entering school programs for the first time would receive an oral health exam by LCHC. Our island is small and according to the 2010 US Census, there are only 235 children under the age of 5. According to our 2018 UDS report, LCHC currently sees 174 children under the age of 5 – with this population of our patient volume growing as a result of our OB program. Based upon these numbers, and funding from this grant, LCHC is confident that we will be able to achieve increase our original goal to 85% for this measure. (Note: Healthy People 2020 does not have a goal for this measure; we therefore, developed our estimate based upon our community experience.)

UDS dental sealant clinical performance measure: LCHC has set a goal for this measure (again, using Healthy People 2020 as a base) – i.e., number of children aged 6 through 9 years at moderate to high risk for caries who received a sealant on a permanent first molar tooth. Based upon our planned program, we feel that it is reasonable to reach 51% in 2022. (Note: Healthy People 2020 goal for this measure is 28.1%).

The Caries Risk Assessment (CRA) performance measure: LCHC has set a goal for this measure (again, using Healthy People 2020 as a base) – our baseline is 16%; our goal is that 80% of LCHC patients will have a CRA.

In addition to the above measures, the following items will be monitored and reported upon:

- % of children treated considered having a Dental Home at the end of the grant period.
- % of recall appointments made.
- % of patients with improved oral health status maintained/improved.
- % of patients with completed treatment plans.
- Number of pediatric referrals for IV sedation or treatment in the OR.

IV. Financial

Budget

1. The applicant shall submit a budget utilizing the enclosed budget forms as applicable, to detail the cost of the request.
 - a. Budget request by source of funds ([Link](#))
 - b. Personnel salaries and wages ([Link](#))
 - c. Equipment and motor vehicles ([Link](#))
 - d. Capital project details ([Link](#))

e. Government contracts, grants, and grants in aid ([Link](#))

2. The applicant shall provide its anticipated quarterly funding requests for the fiscal year 2021.

Quarter 1	Quarter 2	Quarter 3	Quarter 4	Total Grant
\$75,000	\$75,000	\$75,000	\$75,000	\$300,000

3. The applicant shall provide a listing of all other sources of funding that they are seeking for fiscal year 2021.

American Academy of Pediatric Dentistry Foundation; Hawaii Dental Services Foundation; Atherton Foundation; Cooke Foundation; Aloha Care; First Hawaiian Bank Foundation; Bank of Hawaii Foundation; Chalmers Foundation; HRSA 330 Grant; HRSA Supplement Grant; HRSA QI Grant; SOH Judiciary; County of Maui; WIC Grant; Family Planning Grant; Primary Care Grant; Susan Komen Grant; Weinberg Foundation; Hawaii Community Foundation; HMSA Foundation; Perinatal Grant.

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.

Not Applicable.

5. The applicant shall provide a listing of all federal, state, and county government contracts, grants, and grants in aid it has been granted within the prior three years and will be receiving for fiscal year 2021 for program funding.

HRSA 330 Grant; HRSA Supplement Grant; HRSA QI Grant; SOH Judiciary; County of Maui; WIC Grant; Family Planning Grant; Primary Care Grant; Perinatal Grant.

6. The applicant shall provide the balance of its unrestricted current assets as of December 31, 2019.

\$869,850

V. Experience and Capability

1. 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.

With the construction of its new building (in 2015), LCHC opened a state-of-the-art facility; its full in-house dental program started in February, 2016. Current staffing is with 2.5 FTE general dentists, 1.0 FTE dental hygienist and 4.0 FTE dental assistants. Pediatric specialty care is provided through a joint venture with the New York University Langone Pediatric Dental Residency Program, which provides a pediatric dental resident four days a week. The Dental Department provides care 51 hours per week (consistent with the Medical and Behavioral Health Departments), which includes evening hours two days a week, and Saturday hours each week.

New York Lutheran-Langone Pediatric Dentistry Residency Program: LCHC has entered into an agreement with New York Lutheran-Langone Pediatric Dentistry Residency Program, which places pediatric dental specialty services on the island of Lānaʻi for the first time. Through this collaboration, Pediatric Dental Residents rotate through LCHC and through other FQHC Dental programs on Oʻahu, Maui, Hawaiʻi and Molokaʻi. This provides LCHC with the opportunity to treat dental disease at an early age and ensure a lower level of tooth loss, which allows for better outcomes in adult function. Studies also indicate that a lower level of dental disease in children increases school performance. Additionally, resident rotation through the LCHC Dental Program improves outreach to the island's only school. LCHC feels that prevention of disease through education, screening exams, caries risk assessment and management, sealants and fluoride varnish application is the best and most effective intervention. A third benefit of this collaboration is that it gives LCHC access to a research infrastructure through which LCHC is developing metrics by which progress can be measured. The chronic disease processes involved in dental disease are difficult to study and are not well understood at this time. The isolated island of Lānaʻi represents a unique "petri dish" to look at the effectiveness of outreach strategies. Finally, serious cases of childhood dental disease are referred for treatment in a hospital setting at the Shriner's Hospital in Honolulu, also under the New York Lutheran-Langone Pediatric Residency Program.

All general dentists employed at LCHC have had General Practice or Hospital Dentistry Residency Training. LCHC is therefore able to provide an extended scope of dental services to include Third Molar Surgery, Endodontic Therapy, Surgical and Non-Surgical Periodontal treatment, and Monolithic Ceramic Crowns milled on site. This capability has afforded the island's residents to have wisdom teeth extracted on-island, saving families the cost of travel, hotel, and car rental. LCHC's services have saved many patients from extracting functional teeth, as the only other option would have been to travel to Oʻahu or Maui for Root Canal Therapy at a much greater cost.

LCHC provides low cost, high quality dental care and preventive services. This goal is accomplished directly with the service provided, along with LCHC's outreach programs developed to enhance preventive services through screening, fluoride varnishing and educational programs at the island's only school. Other outreach efforts include oral health education at local festivals, senior centers and in the WIC Program.

In the words of former Surgeon General C. Everett Koop, "You're not healthy without good oral health." The integrated health care provided at LCHC is well established through good communication between disciplines. Although the Dental Clinic's role is wide and varied, our

most important function is simply to restore dental function to a diseased mouth. No one, and especially children, the elderly and diabetics, can consume a proper diet if they cannot chew meats and vegetables.

Dental Services provided at LCHC:

- Pediatric Dentistry
- Adult Dentistry
- Routine Cleaning and Xrays
- Sealants
- Fillings
- Crowns and Bridges
- Extractions
- Minor Oral Surgery
- Complete and Partial Dentures
- Bridges and Dentures
- Emergency Care
- Integrated Behavioral Health
- Case Management
- Referrals
- Community Outreach
- Low Cost Prescription

LCHC also provides:

- Abdominal/Pelvic Ultrasound
- Behavioral Health
- Blood Draws and Labs
- Blood Pressure Management
- Case Management
- Community Outreach and Education
- Dental (Pediatric and Adult)
- Diabetes Management, including PILI program
- Drug Screening
- Family Planning
- Home Visits
- Health Education at Lāna‘i High and Elementary School
- Health Education, General Community
- Immunizations
- Insurance Assistance
- Low-Cost Prescription Program
- Nutrition
- OB/Pregnancy/Prenatal Care, with Coordinated OB Care Management
- OB Ultrasound and Non-Stress Testing
- Optometry, including Diabetes Retinal testing
- Patient Transportation

- Primary Medical Care
- Referrals and Care Coordination
- School and Sports PE
- Screenings, including TB, Hep B, STD, HIV, etc.
- Smoking Cessation
- Tele-Dermatology
- Tele-Psychiatry
- Tele-Cardiology and Echocardiograms (in progress)
- Well Child Checks
- Wellness and Fitness Classes
- WIC
- Women’s Health Exams
- Workforce Development

2. 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 6,800SF certified health care facility provides LCHC with the capability to provide patients and the community with a patient centered medical home. The facility has 9 exam/consult rooms, a procedure room, dental x-ray, 2 dental operatories and CLIA waived lab facilities, conference and administrative office facilities, and a community activity room. LCHC facilities provides LCHC patients with improved care through their ability to utilize medical, behavioral health, OBGYN, telemedicine, PT, dental, and cardiology services in one location, and even set up back-to-back appointments.

LCHC initiated a full service, state-of-the-art in-house oral health program when we completed construction of our new building (in 2015). Current staffing is with 1.5 FTE general dentists, 1.0 FTE dental hygienist and 4.0 FTE dental assistants. The Dental Department provides care 51 hours per week (consistent with the Medical and Behavioral Health Departments), which includes evening hours two days a week, and Saturday hours each week. Pediatric dental care is provided four days per week by pediatric dental residents from the NYU/Langone Pediatric Dental Residency program. Pedodontic Residents provide comprehensive exams, restorative care and recare, as well as home care instruction, nutritional counseling and health education. Pediatric patients requiring IV sedation or hospital based treatment are referred off-island through the NYU-Langone Pediatric Dental Residency Program. Due to a lack of specialty care on Lāna‘i, referrals are also made off-island for periodontal, orthodontic and oral surgical specialty care.

VI. Personnel: Project Organization and Staffing

1. 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.

The LCHC Dental Home for Children Program team will be comprised of Diana M V Shaw, PhD, MPH, MBA, FACMPE, LCHC Executive Director (acting as Co-Project Director); Cindy Figuerres, MBA, LCHC Associate Executive Director; Randy Kam, DDS, Dental Director (acting as Co-Project Director); Sean Benson, DDS, Dentist; Chanda Schutte, Dental Assistant Supervisor. Each individual brings specific talents and experiences that will fulfill the needs of Dental Home for Children Program.

Diana V. Shaw (PhD, MBA, MPH, FACME) was appointed as the Executive Director of the Lānaʻi Community Health Center in October 2008. As a federally qualified health center (FQHC), the organization's mission is to provide basic primary care services to the un- and underinsured. Dr. Shaw represents the Center in its interactions with the community, legislature, and executive branch of government, federal government officials and other leaders in the health care community. Dr. Shaw has been in various health care administrative positions for over 30 years, and has been a Malcolm Baldrige Quality Award of Excellence Examiner. She is past Board President for the Hawaii State Rural Health Association and a member since 2010. Dr. Shaw is a member of the Board of Directors (since 2008) of the Hawaii Primary Care Association. Dr. Shaw also serves as a reviewer for HRSA (federal agency, Health Resources and Services Administration), and periodically for various professional organizations. She is originally from Upstate New York, but relocated to Kauaʻi in September 2003, and then relocated to Lānaʻi. She received her PhD in Social Policy from Brandeis University's Heller School of Public Policy and Management in Waltham, Massachusetts; her Masters of Business Administration from St. John Fisher College; and her Masters in Public Health is from the University of Rochester; both colleges are located in Rochester, New York.

Cindylou Figuerres (MBA) is the Associate Executive Director of the Lānaʻi Community Health Center. Mrs. Figuerres has been with the health center since July 2011, Cindylou Figuerres was promoted to CFO/ IT Director in September 2012, and then promoted to Associate Executive Director in August 2018. Starting as an Accounting Clerk/Front Desk Supervisor, she quickly rose through the ranks with her strong background in finance and accounting as well as information technology. She earned her Associates Degree in Accounting from Heald Business College, her Bachelor's Degree in Accounting from Hawaii Pacific University and graduated in 2015 from the University of Phoenix with her Master of Business Administration. She began to pursue a Master of Public Health Degree from Argosy University in September 2018 until the university's closure in March 2019. She will continue this degree at another university later this year. A native of the island of Lānaʻi, Cindylou Figuerres is dedicated to moving LCHC forward in providing health and wellness classes, and provide educational and workforce development training classes to the community.

Randy Kam (DDS, FAGD, FICD) is the Dental Director of of the Lānaʻi Community Health Center who will act as co-project director with Mrs. Shaw. Dr. Kam joined LCHC in February 2016 as Dental Director. He leads our dental program and also provides dental services in the

Health Center. A graduate of Punahou School, Dr. Kam earned a BS in Biochemistry at UCLA in 1981 and his dental degree from UCSF in 1985. After completing his Residency in Hospital Dentistry at San Francisco General Hospital, he practiced dentistry in Honolulu from 1986 until 2015. In 1998, he earned his Fellowship in the Academy of General Dentistry and was inducted as a Fellow of the International College of Dentists in 2011. Dr. Kam is also a Lua and Laʻau Lapaʻau practitioner. He has studied the Hawaiian language since November of 2014 in the Kealaleo Hawaiian Language Immersion Program.

Sean Benson (DDS, FICD, FACD) is a Dentist at LCHC. Sean Benson joined LCHC in October of 2018 as a full time staff dentist. He earned a degree in Biology from Ball State University, and dental degree from The Ohio State University in 1998. After completing his General Practice Residency he practiced in Eastern Oregon from 1999 until 2012. He was appointed as director, and started the General Practice Residency program at Oregon Health and Science University 2012. In 2017, he subsequently was appointed Associate Dean of Hospital Dental Services and supervised the \$1.2M remodel of the hospital dental clinic, and fostered a combined medical/dental EHR for Pediatric Dentistry, Oral and Maxillofacial , and Adult Hospital Dentistry. He is PI/ and director of 2018 HRSA Faculty Loan Repayment Grant for OHSU. He is a fellow of the Pierre Fauchard Academy, International College of Dentists, and American College of Dentists.

Chanda Schutte serves as the Dental Assistant Supervisor at LCHC. Ms. Schutte joined LCHC in June of 2016, as a full-time dental assistant. Chanda completed her on the job and distance learning training and received her dental assistant certificate in 2016. Prior to joining LCHC, she graduated from Waiʻanae High School in 2012 as magna cum laude. Chanda was born on Oʻahu and moved to Lānaʻi in 2013 to start her family. Chanda is interested in preserving her Hawaiian heritage and has undertaken course study towards that end. She also has experience in coordination of services for the homeless in Waiʻanae. She was promoted to LCHC Dental Assistant Supervisor in 2019. Her duties include supervision of the three dental assistants in the clinic and day-to-day oversight of operational activities, including (but not limited to) clinic coverage of staff, supply and inventory, accounting with RCM360 and infection control.

With the construction of its new building (in 2015), LCHC opened a state-of-the-art facility; its full in-house dental program started in February, 2016. Current staffing is with 2.5 FTE general dentists, 1.0 FTE dental hygienist and 4.0 FTE dental assistants. Pediatric specialty care is provided through a joint venture with the New York University Langone Pediatric Dental Residency Program, which provides a pediatric dental resident four days a week. The Dental Department provides care 51 hours per week (consistent with the Medical and Behavioral Health Departments), which includes evening hours two days a week, and Saturday hours each week.

All general dentists employed at LCHC have had General Practice or Hospital Dentistry Residency Training. LCHC is therefore able to provide an extended scope of dental services to include Third Molar Surgery, Endodontic Therapy, Surgical and Non-Surgical Periodontal treatment, and Monolithic Ceramic Crowns milled on site. This capability has afforded the island's residents to have wisdom teeth extracted on-island, saving families the cost of travel, hotel, and car rental. LCHC's services have saved many patients from extracting functional teeth, as the only other option would have been to travel to Oʻahu or Maui for Root Canal Therapy at a much greater cost.

2. 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.

See Attachment D.

3. Compensation

The applicant shall provide an annual salary range paid by the applicant to the three highest paid officers, directors, or employees of the organization by position title, not employee name.

Medical Director; \$200,000 - \$225,000 FTE

Executive Director; \$150,000 - \$175,000 FTE

Associate Medical Director; \$150,000 - \$175,000 FTE

VII. Other

1. Litigation

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

Not Applicable.

2. 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.

CLIA; FQHC; PCMH; Radiation Facility License

3. 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.

Not Applicable.

4. Future Sustainability Plan

The applicant shall provide a plan for sustaining after fiscal year 2020-21 the activity funded by the grant if the grant of this application is:

- (a) Received by the applicant for fiscal year 2020-21, but
- (b) Not received by the applicant thereafter.

LCHC views this grant as seed funding. Seed funding will provide us with the ability to expand our current education and prevention activities, as well as establish the trust of new patients and break down fear-barriers that often exist with children; and thereby funding after the fiscal year 2020-21 will not be a necessity as it relates to the goals and objectives outlined in this grant proposal. Furthermore, sustainability will be achieved via increased patient income supplemented by unrestricted LCHC funds, once practices and workflows are established.

Of course, maintaining a Dental Home for Children is not just about funding. Establishing the trust of our patients will be critical to instill their desire to maintain LCHC as their Dental Home, as they become adults and as adults. Our Children Recare System will provide us with the ability to ensure that the parents/guardians and their child understand the importance of their treatment and completion of treatment recommendations. We view this grant as seed funding. Seed funding will provide us with the ability to design and implement a health literacy program that addresses the various cultural barriers on Lāna‘i. We intend to develop programs and methodologies to overcome the cultural norms that parents/guardians currently use in making health care decisions for their children, and to break down fear barriers that often exist with children.

Our Recare System works to ensure that each patient seen at LCHC has a next visit scheduled. By doing so, we are able to auto-populate a “recall system” in case the patient was not seen (either no show or cancelled appointment), inclusive of patients who are children. With our Lāna‘i High and Elementary and WIC education and screening programs to be further strengthened via this grant (if awarded), LCHC will send ‘screening reports’ home with children to notify their parents/guardians whether caries (tooth decay, cavities, or caries, is a breakdown of teeth due to activities of bacteria) were present and if they should see a dentist immediately for follow-up, which a LCHC dentist will be made available. Parents/guardians will also receive phone/home visit(s) by dental staff, as needed. LCHC’s “recare” also provides for scheduled fluoride application for children and will track said applications for children to make sure that they are receiving the “right/correct” amount of fluoride.

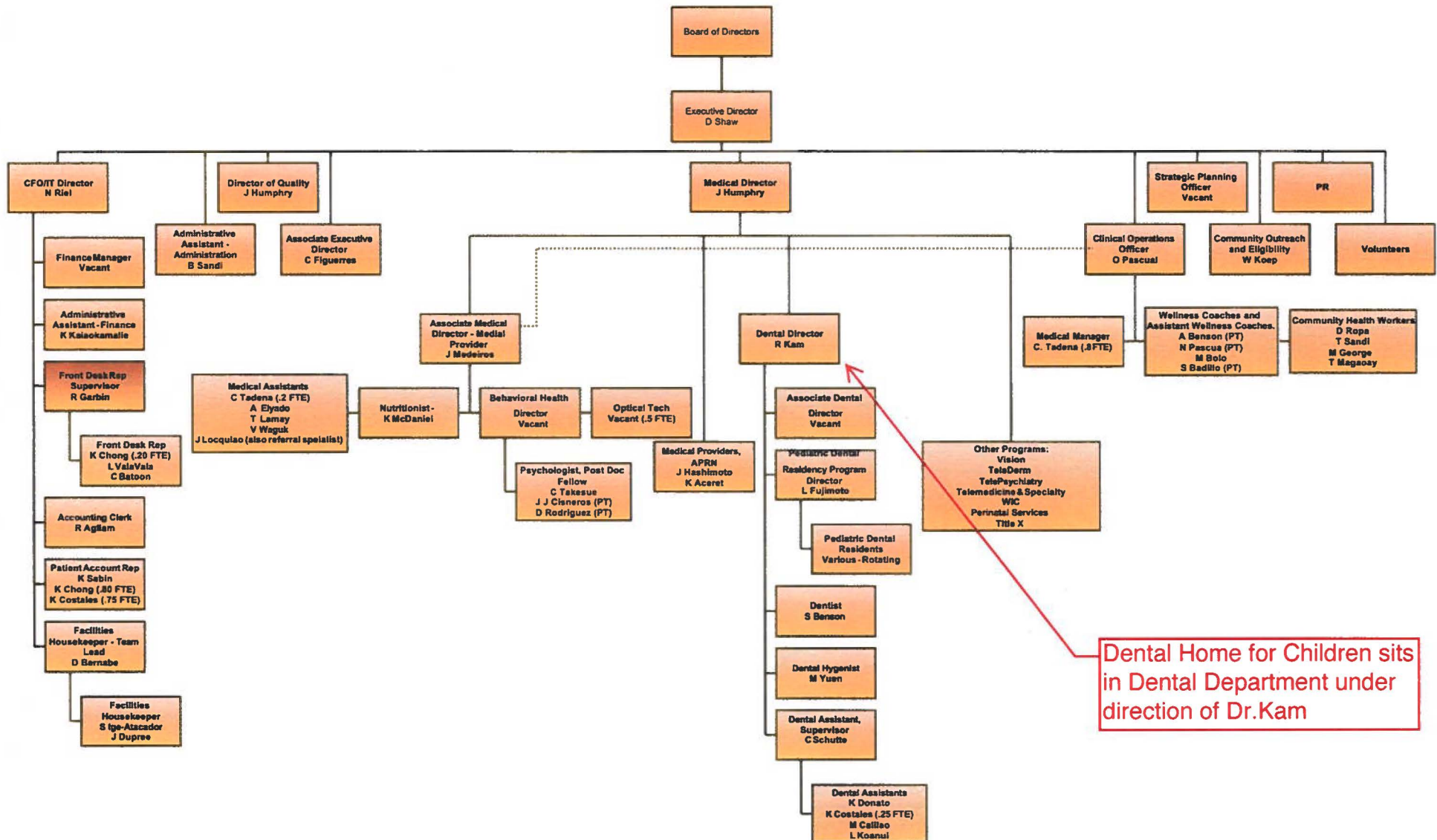
Integrated care with all healthcare disciplines at LCHC further reinforces “recare” efforts through overlap with medical, behavioral and optical services. Additionally, Clinical Health Workers (CHWs) perform home visits and further outreach, which provides additional points of contact in reinforcing the importance of “recare” visits.

Ongoing dental care for children who choose LCHC as their Dental Home will be provided by the dental residents from the NYU-Langone Pediatric Dental Residency Program and our hygienist. As consistent care is established, dental care for children will become preventative

dental care (combination of regular dental check-ups – regular oral exams, usually every 6 months, teeth cleaning, routine X-rays – along with developing good habits like brushing and flossing). We also find that this improves the continuity of care (the Pediatric Residents rotate through LCHC on a monthly basis), familiarizes the children with the clinical setting, desensitizes fearful children and provides another point of contact with parents/guardians.



Approved at 11-19-2019 LCHC Board of Director Routine Meeting



Dental Home for Children sits in Dental Department under direction of Dr. Kam

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


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.

Lāna'i Community Health Center
(Typed Name of Individual or Organization)



(Signature)

01/14/2020

(Date)

Diana M V Shaw, PhD, MPH, MBA, FACMPE
(Typed Name)


Executive Director

(Title)

BUDGET REQUEST BY SOURCE OF FUNDS

Period: July 1, 2020 to June 30, 2021

Applicant: Lanai Community Health Center

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	77,211	509,463	0	0
2. Payroll Taxes & Assessments	12,361	81,565	0	0
3. Fringe Benefits	4,511	40,599	0	0
TOTAL PERSONNEL COST	94,083	631,627	0	0
B. OTHER CURRENT EXPENSES				
1. Airfare, Inter-Island	15,000			
2. Insurance				10,500
3. Lease/Rental of Equipment				
4. Lease/Rental of Space				21,000
5. Staff Training				
6. Supplies	92,500			
7. Telecommunication	16,342			1,158
8. Utilities				14,750
9. Contractual Services	6,000			
10. Laboratory Services	22,200			
11. Public Relations/Marketing	12,500			
12. IT Support	41,375			0
13. Minor Equipment				14,500
14				
15				
16				
17				
18				
19				
20				
TOTAL OTHER CURRENT EXPENSES	205,917			61,908
C. EQUIPMENT PURCHASES				
D. MOTOR VEHICLE PURCHASES				
E. CAPITAL				
TOTAL (A+B+C+D+E)	300,000	631,627		61,908
SOURCES OF FUNDING		Budget Prepared By:		
(a) Total State Funds Requested	300,000	Cindylou Figueres, Associate Executive Director		
(b) Total Federal Funds Requested	631,627	Name (Please type or print) Phone		
(c) Total County Funds Requested	0			
(d) Total Private/Other Funds Requested	61,908	01/14/2020		
		Signature of Authorized Official Date		
TOTAL BUDGET	993,535	Diana M V Shaw, PhD, MPH, MBA, FACMPE Executive Director		
		Name and Title (Please type or print)		

BUDGET JUSTIFICATION - PERSONNEL SALARIES AND WAGES

Period: July 1, 2020 to June 30, 2021

Applicant: Lanai Community Health Center

POSITION TITLE	FULL TIME EQUIVALENT	ANNUAL SALARY A	% OF TIME ALLOCATED TO GRANT REQUEST B	TOTAL STATE FUNDS REQUESTED (A x B)
Medical Director	0.5	\$107,902.24	5.00%	\$ 5,395.11
Dentist	0.5	\$72,999.17	15.00%	\$ 10,949.88
Dentist	1	\$156,066.88	15.00%	\$ 23,410.03
Dental Hygienist	1	\$78,594.02	15.00%	\$ 11,789.10
Dental Assistant	1	\$40,374.51	15.00%	\$ 6,056.18
Dental Assistant	1	\$33,100.08	15.00%	\$ 4,965.01
Dental Assistant	1	\$32,896.50	15.00%	\$ 4,934.48
Dental Assistant	1	\$32,370.00	15.00%	\$ 4,855.50
Dental Assistant	1	\$32,370.00	15.00%	\$ 4,855.50
				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
TOTAL:				77,210.79
JUSTIFICATION/COMMENTS:				

BUDGET JUSTIFICATION - EQUIPMENT AND MOTOR VEHICLES

Period: July 1, 2020 to June 30, 2021

Applicant: Lanai Community Health Center

DESCRIPTION EQUIPMENT	NO. OF ITEMS	COST PER ITEM	TOTAL COST	TOTAL BUDGETED
NOT APPLICABLE			\$ -	
			\$ -	
			\$ -	
			\$ -	
			\$ -	
TOTAL:				
JUSTIFICATION/COMMENTS:				

DESCRIPTION OF MOTOR VEHICLE	NO. OF VEHICLES	COST PER VEHICLE	TOTAL COST	TOTAL BUDGETED
NOT APPLICABLE			\$ -	
			\$ -	
			\$ -	
			\$ -	
			\$ -	
TOTAL:				
JUSTIFICATION/COMMENTS:				

BUDGET JUSTIFICATION - CAPITAL PROJECT DETAILS

Period: July 1, 2020 to June 30, 2021

Applicant: Lanai Community Health Center

NOT APPLICABLE

FUNDING AMOUNT REQUESTED						
TOTAL PROJECT COST	ALL SOURCES OF FUNDS RECEIVED IN PRIOR YEARS		STATE FUNDS REQUESTED	OTHER SOURCES OF FUNDS REQUESTED	FUNDING REQUIRED IN SUCCEEDING YEARS	
	FY: 2018-2019	FY: 2019-2020	FY: 2020-2021	FY: 2020-2021	FY: 2021-2022	FY: 2022-2023
PLANS						
LAND ACQUISITION						
DESIGN						
CONSTRUCTION						
EQUIPMENT						
TOTAL:						
JUSTIFICATION/COMMENTS:						

GOVERNMENT CONTRACTS, GRANTS, AND / OR GRANTS IN AID

Applicant: Lanai Community Health Center

Contracts Total: 2,215,905

	CONTRACT DESCRIPTION	EFFECTIVE DATES	AGENCY	GOVERNMENT ENTITY (U.S. / State / Haw / Hon / Kau / Mau)	CONTRACT VALUE
1	HRSA 330e	3/1/19	HRSA	U.S.	1,669,959
2	HRSA Supplement Grants	9/1/19	HRSA	U.S.	255,000
3	HRSA QI	9/1/19	HRSA	U.S.	46,236
4	State of Hawaii Judiciary	7/1/19	State of Hawaii	State	15,000
5	Women, Infants, Children	10/1/19	State of Hawaii	State	27,000
6	Family Planning Title X	7/1/19	State of Hawaii	State	87,200
7	Primary Care - Uninsured Contract	7/1/19	State of Hawaii	State	20,400
8	Perinatal Support and Services Contract	7/1/19	State of Hawaii	State	12,500
9	County of Maui - Behavioral Health	7/1/19	Maui County	Maui	82,610
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