

## 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 11, 2022

Director of Commerce and Consumer Affairs

## 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.*

- 1) Certificate of Good Standing (If the Applicant is an Organization)
- 2) Declaration Statement
- 3) Verify that grant shall be used for a public purpose
- 4) Background and Summary
- 5) Service Summary and Outcomes
- 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](#))
- 7) Experience and Capability
- 8) Personnel: Project Organization and Staffing

  
AUTHORIZED SIGNATURE

IRENE CARPENTER, CHIEF EXECUTIVE OFFICER  
PRINT NAME AND TITLE

JANUARY 10, 2023  
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, 2022.

See attached Certificate of Good Standing.

#### **2. Declaration Statement**

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

See attached Declaration Statement.

#### **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](#).

If awarded State Grant-in-Aid, funds would be used for a public purpose as described in **Section II. Background and Summary**, to support construction/renovation and all related costs of the new Kohala Health and Wellness Center. Once completed, the Center will serve over 2,800 low-to-moderate income patients per year.

### **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;

Hamakua Health Center, Inc. dba Hamakua-Kohala Health is a Federally Qualified Health Center (FQHC) that provides comprehensive primary and preventive healthcare to persons of all ages, regardless of ability to pay. Rooted in the rich history of sugar plantations, Hamakua-Kohala Health was initially established as Hamakua Infirmary in 1966 when plantation dispensaries along Hamakua Coast were consolidated into one hospital. In 1993, the Infirmary was given new life as Hamakua Health Center after

closure of Hamakua Sugar, but was renamed Hamakua-Kohala Health in 2014 after acquiring Kohala Family Health Center in 2006 at the request of Kohala residents when healthcare services were reduced in North Kohala.

With the mission of providing quality healthcare responsive to our patients' and communities' needs, we serve nearly 12,000 residents annually, representing over 20,000 patient visits at four locations on Hawaii Island, including Honoka'a on the Hamakua Coast, Laupahoehoe, Waimea and Kapa'au. As the only provider of primary care services in three of the county districts served, we offer primary medical care, behavioral health, patient/family education, family planning, women's health, support groups and transition services.

2. The goals and objectives related to the request;

With the goal of establishing the new Kohala Health and Wellness Clinic, we plan to accomplish the following objectives:

1. Construct a Facility to accommodate patients at the new Kohala Health and Wellness Center;
2. Serve over 2,800 low-to-moderate income patients each year and;
3. Increase access to healthcare by 10% - 20% for low-to-moderate income patients per year.

3. The public purpose and need to be served;

Our over 66-year-old current healthcare facility in Kapa'au that is rented on a month-to-month lease is in disrepair due to mold and severe termite damage. Beyond renovation, this current facility can be sold at any time, which would leave the Kohala community without a healthcare safety net.

Hawaii County has limited access to medical care based on the State of Hawaii Community Health Needs Assessment. Hawaii Island's geography exacerbates this issue, underscoring the need to provide low-to-moderate income individuals with access to high quality healthcare services effectively coordinated within a strong public health system. Without a suitable permanent clinic home for Kohala residents and contiguous communities, patients would be required to travel over 60 minutes each way to access services at the nearest healthcare facility.

With nearly 25% of Hawaii Island residents filing for unemployment due to the COVID-19 pandemic, the reality of thousands losing their healthcare insurance is a grim reality. Unfortunately, none of the private practice physicians in the Kohala community accept Medicare, Medicaid or Med-QUEST patients. Upon completion of the new Kohala Health and Wellness Center, we will be able to help lift the anxiety and uncertainty for residents in Kohala by ensuring access to healthcare for children and adults, regardless of insurance or ability to pay for services. The new Center will enable Hamakua-Kohala Health to continue providing access to quality healthcare in Kohala to over 2,800 low-to-

moderate income patients each year, as well as facilitate the expansion of programs and services.

Once established, the new Kohala Health and Wellness Center will be the only health center within a 60-minute drive one way that provides access to quality healthcare for low-to-moderate income individuals, regardless of ability to pay whether uninsured or insured by Medicare, Medicaid or Med-QUEST. The expanded programs and services of the new Center are anticipated to result in a 10% - 20% increase in the number of low-to-moderate income patients served each year. In the future, the new Center will become part of a plan for a Rural Healthcare Delivery Hub in partnership with the John A. Burns School of Medicine to develop culturally sensitive rural healthcare tools and programs that will be validated with research and address access to care to improve healthcare for rural communities.

4. Describe the target population to be served; and

Hamakua-Kohala Health is committed to providing comprehensive, culturally competent, quality primary healthcare to medically underserved communities and vulnerable populations. Home to individuals who face barriers due to poverty, language or cultural differences, these medically underserved communities have insufficient health professionals or resources to adequately serve the population. Healthcare utilization rates are low among our target population, with nearly 1 in 5 residents without a primary care doctor and over 1 in 10 delaying healthcare because they believed the cost and/or copay to be unaffordable. Chronic disease indicators for North Hawaii Island exceed statewide rates, with a high prevalence of diabetes, obesity, childhood asthma, respiratory conditions, cancer, high blood pressure and heart disease. As a FQHC, we promote access to healthcare and help our target population overcome these barriers by offering supportive services, such as health education, translation services and transportation.

5. Describe the geographic coverage.

We serve residents at four locations on Hawaii Island, including Honoka'a on the Hamakua Coast, Laupahoehoe, Waimea and Kapa'au and are the only provider of primary care services in three of the county districts served.

### **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;

In January 2021, we purchased the former Kohala Club Hotel, which will become the permanent home for our new clinic in Kapa'au. The property encompasses 5.68 acres

of land in a beautiful outdoor space well-suited for wellness programs. As part of this project, we will construct a new clinic structure on the land, as well as purchase and install new furnishings, fixtures and equipment (FF&E). Success of the capital project will be evidenced by receipt of the Certificate of Occupancy upon completion of construction.

HKH Business Development Director Sharon Cariaga-Alfonso serves as the Project Manager.

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

Applications for the various permits needed have been submitted. Construction is scheduled to begin in early 2024 and be completed within 6-9 months. Hamakua-Kohala Health anticipates moving operations from the current location to the new Center by summer-fall 2024.

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

The Project Manager will work alongside the contractor, vendors and management team to ensure Hamakua-Kohala Health is receiving the best value for services it is contracted to receive. The Executive Director will report progress to the Capital Campaign Committee, who will provide oversight to ensure that the project is completed on time and within budget. The Executive Director will have overall responsibility for operations planning, pre-opening and start-up of the Kohala Health and Wellness Center.

Effectiveness of the capital project will be tracked through general milestones established throughout the renovation process that accompany contractor payment requests to ensure the capital campaign is completed on time and remains within budget.

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.

Hamakua-Kohala Health will report the status of performance measures on a quarterly basis to the State.

## **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)

See attached Budget Forms.

2. The applicant shall provide its anticipated quarterly funding requests for the fiscal year 2024.

| Quarter 1 | Quarter 2 | Quarter 3 | Quarter 4 | Total Grant |
|-----------|-----------|-----------|-----------|-------------|
| \$250,000 | \$250,000 | \$250,000 | \$250,000 | \$1,000,000 |

3. The applicant shall provide a listing of all other sources of funding that they are seeking for fiscal year 2024.

Hamakua-Kohala Health will be submitting grants to various local and mainland foundations to complete fundraising efforts for the project.

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 2024 for program funding.

Not Applicable.

6. The applicant shall provide the balance of its unrestricted current assets as of December 31, 2022.

Hamakua-Kohala Health's balance of unrestricted current assets is \$2,979,690.00.



## **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.

Hamakua-Kohala Health continues to adhere to rigorous performance and accountability standards, including administrative, clinical and financial operations. In 2018, Hamakua-Kohala Health received National Recognition as a Patient-Centered Medical Home by the National Committee for Quality Assurance for placing patients at the center of the healthcare system. In response to COVID-19 in 2020, we implemented rigorous infection control measures to ensure our facilities remain safe places for individuals and families to confidently receive care. Throughout the pandemic, we pivoted to Telehealth care depending on healthcare needs while continuing to provide in-person visits and scheduled procedures as safely and conveniently as possible.

Hamakua-Kohala Health was one of only 18 healthcare groups nationwide to be named a Hypertension Control Champion by Million Hearts and the Centers for Disease Control and Prevention in 2015 for our outstanding healthcare teams who work together toward the goal of preventing a million heart attacks and strokes within a 5-year period. In 2016, two of our providers received recognition for their exemplary service to the healthcare profession: Outstanding Service Provider awarded through Hawaii Public Health Institute and the Coalition for a Tobacco-Free Hawaii (Coalition) and Hawaii Healthcare Hero awarded by Healthcare Association of Hawaii.

Our healthcare model focuses on four components: direct healthcare services, leadership, outreach and community education and ongoing professional education. A vital component of our services include our Care Coordination Team and the Patient Education Program, which offers private counseling sessions and support groups to patients to learn how to “heal the whole person” and improve their quality of life by reducing chronic disease risk factors.

The Kohala Health and Wellness Center capital campaign committee is chaired by Christine Richardson, who brings a wealth of fundraising and project development experience to the capital project as Executive Director of the North Kohala Community Resource Center. Capital campaign co-chairs have extensive experience representing both public and private sectors, including county government, healthcare, social work, education and information management through the United Nations.

## **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.

Hamakua-Kohala Health owns the buildings and site on which the new Kohala Health and Wellness Center will be established. The new Center will be ADA compliant.

## **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.

With over 25 years of experience in health and human services, 11 of which were as founder and Board member of Ko o lau loa Community Health and Wellness Center, CEO Irene Carpenter leads 13 full-time equivalent employees, including clinical staff. Irene serves as president of AHARO Hawaii, a virtual accountable healthcare organization that consists of 5 rural Community Health Centers committed to developing best practices to respond to rural health challenges in Hawaii. Irene also serves on the board of Hawaii Primary Care Association that advocates for health-related issues, such as addressing the social determinants of health or ensuring that patients have necessary information to access local services, regardless of health insurance status. Recognizing that medical insurance can be a large determinant of quality healthcare, Irene also serves on the board of AlohaCare, major providers of Medicaid and Medicare health care across the state.

In tandem with the Project Manager, Executive Director Irene Carpenter works with the Project Manager who oversees the contractor, vendors and management team. The Executive Director reports construction/renovation progress to the Capital Campaign Committee, who has oversight of the capital project, with the Executive Director tasked with overseeing operations planning, pre-opening and start-up of the Kohala Health and Wellness Center.

### **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 attached Organization Chart.

### **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.

|                        |              |
|------------------------|--------------|
| Chief Medical Officer: | \$220,761.40 |
| Physician 1:           | \$201,554.95 |
| Physician 2:           | \$196,368.96 |

## **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.

Hamakua-Kohala Health is a Federally Qualified Health Center (FQHC) and receives funds from the US Federal Government Bureau of Primary Health Care. With this funding comes a commitment to provide comprehensive, culturally competent, quality primary health care to medically under-served communities and vulnerable populations. This includes all people who face barriers in accessing services because of poverty, language or cultural differences, or an insufficient number of health professionals or resources in the area.

Hamakua-Kohala Health is also a Nationally Recognized Patient-Centered Medical Home (PCMH) by The National Committee for Quality Assurance. PCMH is a model of care that emphasizes care coordination and communication to transform primary care into "What patients want it to be."

### **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 2023-24 the activity funded by the grant if the grant of this application is:

- (a) Received by the applicant for fiscal year 2023-24, but
- (b) Not received by the applicant thereafter.

Other foundations, corporations and trusts will be approached in 2023 to complete funding for this capital project. Hamakua-Kohala Health recently secured a bridge loan from a local financial institution to secure the property and enable fundraising to continue for the next 12-18 months to open the new Center debt-free. Once construction is completed, no operating funds will be needed for this project.

**DECLARATION STATEMENT OF  
APPLICANTS FOR GRANTS PURSUANT TO  
CHAPTER 42F, HAWAII 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, Hawaii 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, Hawaii 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; and
- 3) If the applicant is a non-profit organization, it meets the following requirements pursuant to Section 42F-103, Hawaii 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.
- 4) The use of grant-in-aid funding complies with all provisions of the Constitution of the State of Hawaii (for example, pursuant to Article X, section 1, of the Constitution, the State cannot provide "... public funds ... for the support or benefit of any sectarian or nonsectarian private educational institution...").

Pursuant to Section 42F-103, Hawaii 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. dba Hamakua-Kohala Health  
(Typed Name of Individual or Organization)

 January 10, 2023  
(Signature) (Date)

Irene Carpenter Chief Executive Officer  
(Typed Name) (Title)

## BUDGET REQUEST BY SOURCE OF FUNDS

Period: July 1, 2023 to June 30, 2024

Applicant: Hamakua Health Center, Inc. dba Hamakua-Kohala Health

| BUDGET CATEGORIES   | Total State Funds Requested<br>(a) | Total Federal Funds Requested<br>(b)  | Total County Funds Requested<br>(c) | Total Private/Other Funds Requested<br>(d) |
|---|------------------------------------|---|-------------------------------------|--|
| A. PERSONNEL COST   |                                    |   |                                     |  |
| 1. Salaries   | \$0                                | \$0   | \$0                                 | \$0  |
| 2. Payroll Taxes & Assessments  | \$0                                | \$0   | \$0                                 | \$0  |
| 3. Fringe Benefits  | \$0                                | \$0   | \$0                                 | \$0  |
| TOTAL PERSONNEL COST  | \$0                                | \$0   | \$0                                 | \$0  |
| B. OTHER CURRENT EXPENSES   |                                    |   |                                     |  |
| 1. Airfare, Inter-Island  | \$0                                | \$0   | \$0                                 | \$0  |
| 2. Insurance  | \$0                                | \$0   | \$0                                 | \$0  |
| 3. Lease/Rental of Equipment  | \$0                                | \$0   | \$0                                 | \$0  |
| 4. Lease/Rental of Space  | \$0                                | \$0   | \$0                                 | \$0  |
| 5. Staff Training   | \$0                                | \$0   | \$0                                 | \$0  |
| 6. Supplies   | \$0                                | \$0   | \$0                                 | \$0  |
| 7. Telecommunication  | \$0                                | \$0   | \$0                                 | \$0  |
| 8. Utilities  | \$0                                | \$0   | \$0                                 | \$0  |
| 9   |                                    |   |                                     |  |
| 10  |                                    |   |                                     |  |
| 11  |                                    |   |                                     |  |
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| 18  |                                    |   |                                     |  |
| 19  |                                    |   |                                     |  |
| 20  |                                    |   |                                     |  |
| TOTAL OTHER CURRENT EXPENSES  | \$0                                | \$0   | \$0                                 | \$0  |
| C. EQUIPMENT PURCHASES  | \$0                                | \$0   | \$0                                 | \$0  |
| D. MOTOR VEHICLE PURCHASES  | \$0                                | \$0   | \$0                                 | \$0  |
| E. CAPITAL  | \$1,000,000                        | \$0   | \$0                                 | \$577,625                                  |
| <b>TOTAL (A+B+C+D+E)</b>  | <b>\$1,000,000</b>                 | <b>\$0</b>  | <b>\$0</b>                          | <b>\$577,625</b>                           |
| <b>SOURCES OF FUNDING</b>   |                                    | Budget Prepared By:   |                                     |  |
| (a) Total State Funds Requested   | 1,000,000                          | Irene Carpenter 808-930-2745  |                                     |  |
| (b) Total Federal Funds Requested   | 0                                  | Name (Please type or print) Phone   |                                     |  |
| (c) Total County Funds Requested  | 0                                  | <i>Irene Carpenter</i> 1/10/2023  |                                     |  |
| (d) Total Private/Other Funds Requested   | 577,625                            | Signature of Authorized Official Date   |                                     |  |
| <b>TOTAL BUDGET</b>   | <b>1,577,625</b>                   | Irene Carpenter, Chief Executive Officer<br>Name and Title (Please type or print) |                                     |  |
| Note: A total of \$1,647,550 has been committed to the \$3.2M capital cost to date. |                                    |   |                                     |  |

## BUDGET JUSTIFICATION - PERSONNEL SALARIES AND WAGES

Period: July 1, 2023 to June 30, 2024

Applicant: Hamakua Health Center, Inc. dba Hamakua-Kohala Health

| POSITION TITLE                 | FULL TIME EQUIVALENT | ANNUAL SALARY<br>A | % OF TIME ALLOCATED TO GRANT REQUEST<br>B | TOTAL STATE FUNDS REQUESTED<br>(A x B) |
|--------------------------------|----------------------|--------------------|---|--|
| Not Applicable                 |                      |                    |   | \$ -                                   |
|                                |                      |                    |   | \$ -                                   |
|                                |                      |                    |   | \$ -                                   |
|                                |                      |                    |   | \$ -                                   |
|                                |                      |                    |   | \$ -                                   |
|                                |                      |                    |   | \$ -                                   |
|                                |                      |                    |   | \$ -                                   |
|                                |                      |                    |   | \$ -                                   |
|                                |                      |                    |   | \$ -                                   |
|                                |                      |                    |   | \$ -                                   |
|                                |                      |                    |   | \$ -                                   |
|                                |                      |                    |   | \$ -                                   |
|                                |                      |                    |   | \$ -                                   |
|                                |                      |                    |   | \$ -                                   |
|                                |                      |                    |   | \$ -                                   |
|                                |                      |                    |   | \$ -                                   |
| <b>TOTAL:</b>                  |                      |                    |   |  |
| <b>JUSTIFICATION/COMMENTS:</b> |                      |                    |   |  |

## BUDGET JUSTIFICATION - EQUIPMENT AND MOTOR VEHICLES

Period: July 1, 2023 to June 30, 2024

Applicant: Hamakua Health Center, Inc. dba  
Hamakua-Kohala Health

| DESCRIPTION<br>EQUIPMENT | NO. OF<br>ITEMS | COST PER<br>ITEM | TOTAL<br>COST | TOTAL<br>BUDGETED |
|--------------------------|-----------------|------------------|---------------|-------------------|
| Not Applicable           |                 |                  | \$ -          |                   |
|                          |                 |                  | \$ -          |                   |
|                          |                 |                  | \$ -          |                   |
|                          |                 |                  | \$ -          |                   |
|                          |                 |                  | \$ -          |                   |
| TOTAL:                   |                 |                  |               |                   |
| JUSTIFICATION/COMMENTS:  |                 |                  |               |                   |

| DESCRIPTION<br>OF MOTOR VEHICLE | NO. OF<br>VEHICLES | COST PER<br>VEHICLE | TOTAL<br>COST | TOTAL<br>BUDGETED |
|---------------------------------|--------------------|---------------------|---------------|-------------------|
| Not Applicable                  |                    |                     | \$ -          |                   |
|                                 |                    |                     | \$ -          |                   |
|                                 |                    |                     | \$ -          |                   |
|                                 |                    |                     | \$ -          |                   |
|                                 |                    |                     | \$ -          |                   |
| TOTAL:                          |                    |                     |               |                   |
| JUSTIFICATION/COMMENTS:         |                    |                     |               |                   |



## BUDGET JUSTIFICATION - CAPITAL PROJECT DETAILS

Period: July 1, 2023 to June 30, 2024

Applicant: Hamakua Health Center, Inc. dba Hamakua-Kohala Health

| 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: 2021-2022                                | FY: 2022-2023      | FY:2023-2024          | FY:2023-2024                     | FY:2024-2025                         | FY:2025-2026 |
| PLANS   |  |                    |                       |                                  |                                      |              |
| LAND ACQUISITION  |  |                    |                       |                                  |                                      |              |
| DESIGN  |  |                    |                       |                                  |                                      |              |
| CONSTRUCTION  |  | \$1,647,550        | \$1,000,000           | \$577,625                        |                                      |              |
| EQUIPMENT   |  |                    |                       |                                  |                                      |              |
| <b>TOTAL:</b>   |  | <b>\$1,647,550</b> | <b>\$1,000,000</b>    | <b>\$577,625</b>                 |                                      |              |
| <b>JUSTIFICATION/COMMENTS:</b> If awarded State Grant-in-Aid, funds would be used toward construction and all related costs of a Facility at the new Kohala Health and Wellness Center. |  |                    |                       |                                  |                                      |              |

**GOVERNMENT CONTRACTS, GRANTS, AND / OR GRANTS IN AID**

Applicant: Hamakua Health Center, Inc. dba Hamakua-Kohala Health

Contracts Total: \$0

|    | <b>CONTRACT DESCRIPTION</b> | <b>EFFECTIVE DATES</b> | <b>AGENCY</b> | <b>GOVERNMENT ENTITY<br/>(U.S./State/Hawaii/<br/>Honolulu/ Kauai/<br/>Maui County)</b> | <b>CONTRACT VALUE</b> |
|----|-----------------------------|------------------------|---------------|--|-----------------------|
| 1  | Not Applicable              |                        |               |  |                       |
| 2  |                             |                        |               |  |                       |
| 3  |                             |                        |               |  |                       |
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