# THE THIRTIETH LEGISLATURE APPLICATION FOR GRANTS

# **CHAPTER 42F, HAWAII REVISED STATUTES**

Type of Grant Request:							
Operating Capital							
Legal Name of Requesting Organization or Individual: FIVE MOUNTAINS HAWAII, INC	Dba: KIPUKA O KE OLA						
Amount of State Funds Reque	ested: \$_1,521,943						
Brief Description of Request (Please attach word document	to back of page if extra space	e is needed):					
Amount of Other Funds Available:  State: \$\frac{0}{2}\$  Federal: \$\frac{0}{2}\$	Total amount of State Gr Fiscal Years: \$_585,717.59	ants Receiv	ed in the Past 5				
County: \$_0	Unrestricted Assets:						
Private/Other: \$ 20,000	\$_1,146,148.85						
New Service (Presently Does Not Exist):	Existing Service (Pre	esently in O	peration):				
Type of Business Entity:	Mailing Address:						
501(C)(3) Non Profit Corporation	PO BOX 818						
Other Non Profit	City:	State:	Zip:				
Other	KAMUELA	HI	96743				
Contact Person for Matters Involving this Applicati	on						
Name: CLAREN KEALOHA-BEAUDET	Title: CHIEF EXECUTIVE O	FFICER					
Email: CLARENK@AOL.COM	Phone: 808-937-7171						
Federal Tax ID#:	State Tax ID#						

Janen Kealok-Gennal Pogge AREN KEALOHA-BEAUDET, CEC

01-19-2024

Authorized Signature

Name and Title

Date Signed

## **Brief description of request:**

In 2011, The Waimea Hawaiian Homesteaders Association conducted a community needs assessment. This assessment identified and prioritized the need for a Health Clinic to address the health disparities of the medically underserved 9000 Native Hawaiians living in North Hawai'i on Moku o Keawe (Big Island). The results of this assessment led to the development and launch of Five Mountains Hawaii, dba. Kipuka o ke Ola (KOKO). A Native Hawaiian Focused Rural Health Clinic

The humble beginnings of Five Mountain's Hawaii dba Kipuka o ke Ola started in 2013, in a 600 square foot office space, in the KTA Shopping Complex in Waimea, Hawaii. Within a year of operations KOKO rented an additional 800 square feet next door to the original 600. By 2016 there was no more expansion space available at the KTA complex, so KOKO made the decision to relocate the facility to our current location in Uilani Plaza. After three expansions in our current office space and build out of that office space (now 5,950 sq ft) to be suitable for medical services, KOKO's intention is to continue to grow along with the community. In other words, as the need for medical services expands and evolves, so will KOKO's services.

It is Kipuka o ke Ola's intention to build an 11,900 square ft. Medical Clinic on Department of Hawaiian Homestead Land. A seven-acre parcel of land has already been secured for this building. This was accomplished by KOKO's partnership with DHHL and the Waimea Hawaiian Homesteaders Association. Architectural plans have been completed and we are currently in the costing and licensing process. Five Mountains Hawaii, dba Kipuka o ke Ola is asking for the State of Hawaii to consider supporting this Grant In Aid to help KOKO build a facility that will in turn support the entire County of Hawaii.

# **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) Hawaii Compliance Express Certificate (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



- b) Personnel salaries and wages (Link)
- c) Equipment and motor vehicles (Link) N/A
- d) Capital project details (Link)
- e) Government contracts, grants, and grants in aid (Link) N/A



7) Experience and Capability



8) Personnel: Project Organization and Staffing

Claren Kenloh-Beaudit
AUTHORIZED SIGNATURE

CLAREN KEALOHA-BEAUDET, CHIEF

EXECUTIVE OFFICER

PRINT NAME AND TITLE

01-18-2024

(1975年) - 1985年 - 198

**)** 



#### STATE OF HAWAII STATE PROCUREMENT OFFICE

#### CERTIFICATE OF VENDOR COMPLIANCE

This document presents the compliance status of the vendor identified below on the issue date with respect to certificates required from the Hawaii Department of Taxation (DOTAX), the Internal Revenue Service, the Hawaii Department of Labor and Industrial Relations (DLIR), and the Hawaii Department of Commerce and Consumer Affairs (DCCA).

Vendor Name:

FIVE MOUNTAINS HAWAI'I, INC.\*

DBA/Trade Name:

Kipuka o ke Ola

Issue Date:

01/11/2024

Status:

Compliant

Hawaii Tax#:

New Hawaii Tax#:

FEIN/SSN#:

XX-XXX0168

UI#:

No record

DCCA FILE#:

104938

Status of Compliance for this Vendor on issue date:

Form	Department(s)	Status	
A-6	Hawaii Department of Taxation	Compliant	
8821	Internal Revenue Service	Compliant	
COGS	Hawaii Department of Commerce & Consumer Affairs	Exempt	
LIR27	Hawaii Department of Labor & Industrial Relations	Compliant	

#### Status Legend:

Status	Description
Exempt	The entity is exempt from this requirement
Compliant	The entity is compliant with this requirement or the entity is in agreement with agency and actively working towards compliance
Pending	A status determination has not yet been made
Submitted	The entity has applied for the certificate but it is awaiting approval
Not Compliant	The entity is not in compliance with the requirement and should contact the issuing agency for more information

#### 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; and
- 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.
- 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, 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

the applicant's know	_						
Five MMH	mins	Hawaii, Inc	laba	KipuKa	0	ke ola	_
(Typed Name of In	dividual	or Organization)		_			
(Signature)	Ken	lohe-Bear	edit	Penl)	•	01-19-	2004
(Signature)		• • •		(Date)			- /
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(Typed Name)			,	(Title)			

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# **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. Hawaii Compliance Express Certificate (If the Applicant is an Organization)

If the applicant is an organization, the applicant shall submit one (1) copy of a Hawaii Compliance Express Certificate from the Comptroller of the Department of Accounting and General Services that is dated no earlier than December 1, 2023.

#### 2. Declaration Statement

The applicant shall submit a declaration statement affirming its compliance with <u>Section</u> 42F-103, Hawaii Revised Statutes.

# 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.

# 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:

A brief description of the applicant's background;

Kipuka o ke Ola was established in 2011 when the Waimea Hawaiian Homesteaders' Association conducted a community needs survey of the association's members. At that time, the homestead beneficiaries identified the need for a Health Clinic that was culturally competent and truly dedicated to addressing the dire Native Hawaiian health issues that plague their community. In 2012, the Waimea Nui Project became one of 21 DHHL regional plans - with a health clinic to be a critical part of that initiative.

In 2013, Five Mountains Hawai'i Inc dba Kipuka o ke Ola (KOKO) was established and soon thereafter, in early 2014, became a 501c3 non-profit organization located in Waimea, Moku o Keawe.

In 2017, KOKO became Hawai'i's only Independent Native Hawaiian Rural Health Clinic. This status came via federal accreditation by the Center for Medicare and

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Medicaid Services (CMS). KOKO is currently deemed an Exemplary Provider by the CMS designated Compliance Team. As a Independent Native Hawaiian Rural Health Clinic, KOKO provides direct services to its North Hawai'i residents with a special emphasis on addressing Native Hawaiian health disparities in a culturally competent manner. KOKO's direct services offer an array of health modalities including primary care, psychiatric care, and psychological care. KOKO's patient panel has grown to 2,750 patients with over 10,000 health visits annually. Importantly, 42% of KOKO's patients are of Native Hawaiian ancestry - by far the highest percentage of Native Hawaiian patients that any health facility on the Big Island serves! The vision of a place of healing for the homestead beneficiaries in North Hawai'i has become a reality in KOKO.

#### 2. The goals and objectives related to the request;

The goal of this request for funding is to aid in the plan, design, and build of a new 11,960 square foot building. This building will be the primary location for Kipuka o ke Ola, a Native Hawaiian Focused Rural Health Clinic.

The objective of completing the new building on DHHL land is to increase the square footage of our clinic facilities, which would then increase KOKO's capacity to serve the community of North Hawaii. Upon completion of the new building KOKO will be able to add health care services that include Women's Health, Diabetes Education, Nutrition, Native Hawaiian Healing services and much needed care coordination and social services, with an emphasis on our Kupuna.

# 3. The public purpose and need to be served;

Purpose: Kipuka o ke Ola is a Federally Qualified Rural Health Clinic. The clinic's health care services currently include Primary Care, Pediatrics, Psychiatry, Psychology and Transcranial Magnetic Stimulation. The current patient panel is approximately 3,000 patients with 12,000 patient visits projected to be completed this year.

Need: KOKO would like to expand services to better serve the needs of the community. In order to do this, KOKO has partnered with Department of Hawaiian Homelands and signed a 50-year lease on seven acres of DHHL land where KOKO will build a brandnew facility. This new facility would be better able to accommodate the growth that is needed to provide the community with comprehensive health care.

The humble beginnings of Five Mountain's Hawaii dba Kipuka o ke Ola started in 2013, in a 600 square foot office space, in the KTA Shopping Complex in Waimea, Hawaii. Within a year of operations KOKO rented an additional 800 square feet of clinic space next door to the original 600. By 2016 there was no more expansion space available at

the KTA complex, so KOKO made the decision to relocate the facility to our current location in Uilani Plaza. Once again, our services are at capacity with no additional office space to rent, and there is a continuing need to increase healthcare services. The timeline below will provide a visual explanation of our need for expansion. The table also tells the story of KOKO providing comprehensive health care services to a severely underserved population. KOKO's intention is to continue to grow along with the community, in other words, as the need for services expands and evolves so will KOKO's services. KOKO is asking for the capital to create a space where our health care services can be delivered and expanded upon in the very near future.

#### Steady growth...

#### **SERVICES:**

2013: Behavioral Health

2024: Behavioral Health, Primary Care, Psychiatry & TMS (Transcranial

Magnetic Stimulation.

#### STAFF:

Past To Present

2013: 2 psychologists

**2024:** 20 staff with 8 providers (Internist, Family Physician, Family Nurse Practitioner, Physician Assistant, Psychiatrist, 2 Psychologists, and a Transcranial Magnetic Stimulation Machine (TMS).

#### **PATIENT ENCOUNTERS:**

Total patient encounters in 2013 = 800

Total patient encounters in 2023 = 12,000+

## 4. Describe the target population to be served; and

Vision: KOKO is a Department of Hawaiian Homes Land beneficiary led organization that is committed to serve Native Hawaiians living in North Hawai'i with the highest quality comprehensive healthcare from prenatal to the end of life.

Mission: KOKO provides cultural, spiritual, medical, and psychological services to all residents of North Hawai'i with a special emphasis for the Kānaka Maoli. This mission is our Kuleana.

KOKO provides culturally informed direct services, actively collaborates with Hawaiian agencies and associations to meet their member's needs and is led by the community it serves.

5. Describe the geographic coverage.

The geographic coverage of Kipuka o ke Ola is the entire Big Island or county of Hawaii. As a result of the current health care/provider shortage/crisis on the Big Island - KOKO provides services Island wide. Although KOKO provides Primary Care and Pediatric Services, mostly in the geographic area of North Hawaii, the service that has been consistently most requested is for Mental Health services. KOKO currently employs two Psychiatrists, two Psychologists, and 1 Physician Assistant to aid in meeting the demand for mental health services. Because the need for mental health services is so great KOKO participates in the CMS allowable telehealth services. Telehealth allows us to reach the entire County of Hawaii except for those areas with poor WIFI coverage.

# 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.

Scope of Work: KOKO is asking that the funding for this Grant in Aid cover the costs of the site work required to begin the building process for the new Kipuka o ke Ola health care clinic.

Tasks: RFP for site work, vet and contract company to complete the site work for the construction project.

Responsibilities: KOKO CEO, contracted Architect, and Civil Engineer to provide decisions regarding the hiring and contracting of the site work construction.

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

Construction Start Date: November of 2024 Site Work Completion Date: March of 2025 3. Describe its quality assurance and evaluation plans for the request. Specify how the applicant plans to monitor, evaluate, and improve their results;

Working with licensed professional contractors and consultants to ensure that the scope of work is completed within the parameters in which it was designed and legally agreed to.

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, the measure(s) of effectiveness will need to be updated and transmitted to the expending agency.

Progress and completion of site work to be completed prior to the building of the Medical Facility. The Civil Engineer will confirm that the scope of work has been duly completed.

# 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 ( $\underline{\text{Link}}\text{)}$
  - 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 2025.

Quarter 1	Quarter 2	Quarter 3	Quarter 4	Total Grant
375,000	375,000	375,000	375,000	1,500,000

3. The applicant shall provide a listing of all other sources of funding that they are seeking for fiscal year 2025.

# Funding Secured:

• \$4,000,000.00 Loan from USDA Rural Development

# Working with:

- \$2,000,000.00 Weinberg Foundation (requested)
- \$2,000,000.00 Bridgespan Group (requested)

- \$2,000,000.00 Department of Hawaiian Homelands (requested)
- \$1,000,000.00 Office of Hawaiian Affairs (requested)
- \$1,500,000.00 State of Hawaii Grant in Aid (requested)
- \$1,000,000.00 Bakken Foundation (requested)
- \$3,000,000.00 To continue fundraising to reach goal of \$16,852,500.00.
- 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 2025 for program funding.

<u>Federal Funding</u> ANA SEDS Grant HHS Stimulus Payment Papa Ola Lokahi	<b>2021</b> \$63,074.15 \$118,122.00 \$150,000.00	<b>2022</b> \$393,058.55	<b>2023</b> \$395,964.59
Papa Ola Lokahi Papa Ola Lokahi	,	\$100,000.00	\$75,000.00
County of Hawaii	#C 007 50		
County of HI-General Fund County of HI-Case Management	\$6,937.50 \$4,062.50		
County of HI-Preventative Services	• •		
County of Hawaii-Psychologist on- boarding	40,200.00	\$25,000.00	\$25,000.00
Community First- Kuleana Grant	\$70,000.00		
Community First- Kuleana Grant		\$80,000.00	
State of Hawaii			
State of Hawaii Department of Hawa Regional Plan Project	aiian homes Land	\$100,000.00	
Office of Hawaiian Affairs		\$222,684.81	

6. The applicant shall provide the balance of its unrestricted current assets as of December 31, 2023.

Unrestricted current assets as of December 31,2023: \$1,146,148.85

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# 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.

Over the past ten years KOKO has had to complete many construction projects. As stated in our previous answers KOKO has had to locate, fix existing problems with, increase capacity, build-out, and operationalize several clinic expansion projects. Expertise with these projects was for the most part contracted out to professional companies that completed the projects. The skills and abilities to find these professionals was mostly completed by the CEO and Board President of KOKO. This leadership team along with community partners like Waimea Hawaiian Homesteaders Association and Nanea Studios (Architect Services), provide the experience and expertise to ensure the planning and execution to completion needed for the new KOKO Clinic expansion on Hawaiian Homestead Land.

Last Three Years of completed projects:

- February 2021 renovation of 800 square feet of office space for clinic expansion. Negotiated and signed lease agreement, completed architectural design, hired construction team, completed addition of four clinic patient rooms.
- October of 2021 renovation of 1200 square feet of office space for clinic expansion. Negotiated and signed lease agreement, completed architectural design, hired construction team, completed addition of four administrative office spaces, 1 patient room, and staff lunchroom.
- May of 2022 received funding from the Department of Hawaiian Homelands to complete the following tasks: Survey of seven acres of community lands, Environmental Assessment, Architectural design, and construction plan of new 11,900 sq. ft. medical clinic.

#### 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.

- KOKO is currently located in U'ilani Plaza in the town of Waimea on the Big Island of Hawaii. We currently occupy approximately 5700 sq. ft. with no additional office space available to increase service capacity.
- To address the need for increased capacity KOKO has signed a 50-year lease agreement for seven acres of DHHL land located in Waimea, Hawaii Island.
- The funds requested are to complete the sitework required to begin the vertical building.

# 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.

- CEO to develop RFP for construction site work.
- Hire and contract site work construction company.
- KOKO to use a contracted attorney to review all contracts before signature.
- KOKO CEO, contracted Architect, contracted civil engineer, to provide supervision and oversite of site work quality and completion of contract.
- All contract personnel will have appropriate and current state & professional licenses.

# 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.

Organizational chart attached.

#### 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, <u>not employee name.</u>

- MD/Psychiatrist \$180,000 \$240,000
- Chief Executive Officer- \$135,000- \$175,000
- Chief Operations Officer- \$125,000-\$150,000

# 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.

None

#### 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.

- Federally Qualified Rural Health Clinic
- 501c3 Federal/State Status

#### 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 <u>Article X, Section 1, of the State Constitution</u> for the relevance of this question.

Does not apply to us

# 4. Future Sustainability Plan

The applicant shall provide a plan for sustaining after fiscal year 2024-25 the activity funded by the grant if the grant of this application is:

- (a) Received by the applicant for fiscal year 2024-25, but
- (b) Not received by the applicant thereafter.

Continued fund raising via targeted philanthropic donations and targeted grants (private, State, and Federal)

# **BUDGET REQUEST BY SOURCE OF FUNDS**

Period: July 1, 2024 to June 30, 2025

Applicant: FIVE MOUNTAINS HAWAII, INC

	UDGET ATEGORIES	Total State Funds Requested (a)	Total Federal Funds Requested (b)	Total County Funds Requested	Total Private/Other Funds Requested (d)
A.	PERSONNEL COST  1. Salaries	151,250	0	0	20,000
ı	2. Payroll Taxes & Assessments	17,250			
ı	3. Fringe Benefits	3,443			
	TOTAL PERSONNEL COST	171,943			20,000
B.	OTHER CURRENT EXPENSES				
l	1. Airfare, Inter-Island	0			
ı	2. Insurance	0			
1	3. Lease/Rental of Equipment	0			
ı	Lease/Rental of Space				
ı	5. Staff Training	0			
ı	6. Supplies	0			
ı	7. Telecommunication	0			
ı	8. Utilities	0			
1	9 10				
1	11				
	12				
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l	19				
ŧ.	20				
	TOTAL OTHER CURRENT EXPENSES	0			
C.	EQUIPMENT PURCHASES	0			
D.	MOTOR VEHICLE PURCHASES	0			
E.	CAPITAL	1,350,000			
то	TAL (A+B+C+D+E)	1,521,943			20,000
			Budget Prepared	Ву:	
so	URCES OF FUNDING				
1	(a) Total State Funds Requested	1,521,943	WENDY CYPRIANO, E	BUSINESS MANAGER	808-657-0756
ı	(b) Total Federal Funds Requested	0	Name (Please type or p	print)	Phone
l	(c) Total County Funds Requested	0	Maren Kent	Ich- Beaud	1-16-24
I	(d) Total Private/Other Funds Requested		Signature of Authorized		Date
(d) Total Filivates Other Fulles Requested			•	EAUDET, CHIEF EXEC	UTIE OFFICER
то	TAL BUDGET	1,541,943	Name and Title (Please		
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# **BUDGET JUSTIFICATION - PERSONNEL SALARIES AND WAGES**

Period: July 1, 2024 to June 30, 2025

Applicant:FIVE MOUNTAINS HAWAII, INC						
POSITION TITLE	FULL TIME EQUIVALENT	ANNUAL SALARY A	% OF TIME ALLOCATED TO GRANT REQUEST B	TOTAL STATE FUNDS REQUESTED (A x B)		
CLAREN KEALOHA-BEAUDET, CHIEF EXECUTIVE OFFICER	1 FTE_	\$175,000.00	69.29%	\$ 121,250.01		
WENDY CYPRIANO, BUSINESS DEVELOPMENT MANAGER	1 FTE	\$80,000.00	37.50%	\$ 30,000.00		
				\$ -		
				\$ -		
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				\$ -		
				\$ -		
				\$ -		
				\$ -		
				\$ -		
				\$ -		
TOTAL:				151,250.01		
JUSTIFICATION/COMMENTS:						

# **BUDGET JUSTIFICATION - CAPITAL PROJECT DETAILS**

Period: July 1, 2024 to June 30, 2025

	FUND	ING AMOUNT	REQUESTED			
TOTAL PROJECT COST	ALL SOURCE RECEIVED IN		STATE FUNDS REQUESTED	OTHER SOURCES OF FUNDS REQUESTED	l e	EQUIRED IN
	FY: 2022-2023	FY: 2023-2024	FY:2024-2025	FY:2024-2025	FY:2025-2026	FY:2026-2027
PLANS	\$ 100,000.00					
LAND ACQUISITION						
DESIGN						
CONSTRUCTION			\$ 1,350,000.00			
EQUIPMENT						
TOTAL:	\$ 100,000.00	\$ -	\$ 1,350,000.00	\$ -		

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		BUDGET INFORMATION	i - C	onstruction Programs		OMB Approval No. 4040-0008 Expiration Date 06/30/2014
NO	TE: Certain Federal assistance programs require additional c	omputations to arrive at the Federal share	∍ of p	roject costs eligible for participation.	If s	uch is the case, you will be notified.
	COST CLASSIFICATION	a. Total Cost		b. Costs Not Allowable for Participation		c. Total Allowable Costs (Columns a-b)
1.	Administrative and legal expenses	\$ [115,000.00	\$		\$[	115,000.00
2.	Land, structures, rights-of-way, appraisals, etc.	\$ 2,500.00	\$		\$	2,500.00
3.	Relocation expenses and payments	\$ 0.00	\$		\$	0.00
4.	Architectural and engineering fees	\$ 1,275,000.00	\$		\$	1,275,000.00
5.	Other architectural and engineering fees	\$ 25,000.00	\$		\$	25,000.00
6.	Project inspection fees	\$ 35,000.00	\$		\$	35,000.00
7.	Site work	\$ [1,350,000.00	\$		\$	1,350,000.00
8.	Demolition and removal	\$ 0.00	\$	,	\$	0.00
9.	Construction	\$ 12,750,000.00	\$		\$	12,750,000.00
10.	Equipment	\$ 1,000,000.00	\$		\$	1,000,000.00
11.	Miscellaneous	\$ 150,000.00	\$		\$	150,000.00
12.	SUBTOTAL (sum of lines 1- 11)	\$ 16,702,500.00	\$	0.00	\$	16,702,500.00
13.	Contingencies	\$ [150,000.00	\$		\$	150,000.00
14.	SUBTOTAL	\$ 16,852,500.00	\$[	0.00	\$	16,852,500.00
15.	Project (program) income	\$ 0.00	\$		\$	0.00
16.	TOTAL PROJECT COSTS (subtract #15 from #14)	\$ 16,852,500.00	\$[	0.00	\$	16,852,500.00
		FEDERAL FUNDI	NG			
17.	Federal assistance requested, calculate as follows: (Consult Federal agency for Federal percentage share Enter the resulting Federal share.	e.) Enter eligible costs from line	∍ 16c	: Multiply X %	\$[	

**Board of Directors** 

# KOKO Organizational Chart (Rev 1/2/24)

Medical Director/Internist (RHC Medical Director) Dr. Ken Riff, MD Chief Executive Officer/Clinical Psychologist
(RHC Clinic Manager)
Dr. Claren Kealoha-Beaudet, PsyD

Chief Operations Officer/Clinical Psychologist
(RHC Compliance Officer & Safety Officer)
Dr. Franco Acquaro, PhD

Family Physician
Dr. Bryant McNeill, MD

Family Nurse Practitioner
Kamomi Pagaduan, FNP-C

Physician Assistant Robin Char, P.A.

> Medical Assistant Kacie DeCoito

Medical Assistant Shione Mochizuki **Psychiatrist** 

Dr. Michael Farnsworth, MD

Psychiatrist

Dr. Andrea Nelson, MD

TMS Technician Eva Maikui Business Manager Wendy Cypriano

> Biller Kevi Andrade

**ULP Project Manager** 

Audra Gill

ULP Assistant Kawehi Tyau

ULP Health
Exercise Coaches
Ariel Lindsey-Emeliano
Carolyn Hess

Clinic Operations Manager
Candice Camacho

Patient Care Coordinator
Crystal O'Reilly

Medical Records Clerk Alita-Ray Cookman

Administrative Assistant #1 Sandra Kaniho

Administrative Assistant #2
Apo Kapu-Balai

Lead Medical Assistant Kahlia Takushi



P.O. Box 160 905 Sheble Lane, Suite 102, Spring House, PA 19477 [215] 654-9110 | TheComplianceTeam.org

April 4, 2023
IMPORTANT NOTICE – PLEASE READ CAREFULLY

Rural Health Clinic Accreditation Program Type of Survey: Re-Accreditation

Dr. Claren Kealoha-Beaudet Five Mountains Hawaii Inc Kipuka o ke Ola 64-1035 Mamalahoa Hwy Suite F Kamuela, HI 96743 CCN: 123803

Dear Dr. Claren,

A Medicare re-accreditation survey was conducted at your facility by The Compliance Team, Inc. (TCT) on March 10, 2023, to determine if your facility was in compliance with the Medicare Conditions for Certification and the Exemplary Provider® RHC quality standards participating in the Medicare/Medicaid programs.

This survey found that your clinic was not in compliance with the Conditions for Certification in the Medicare Program and/or the Exemplary Provider® RHC quality standards at a Standard level. As instructed, you submitted a plan of correction (PoC) on March 27, 2023. This plan was reviewed and found acceptable March 27, 2023.

As a result of your submission of an acceptable PoC, TCT is awarding Five Mountains Hawaii Inc dba Kipuka o ke Ola another three-year term of accreditation. The effective date of your accreditation is March 28, 2023. The accreditation expiration date is March 28, 2026.

The Compliance Team is recommending Five Mountains Hawaii Inc dba Kipuka o ke Ola for continued Medicare deemed status. If you have any questions or concerns, you may contact management at (215) 654-9110.

To ensure continuous compliance with the Exemplary Provider® RHC Quality Standards and the Medicare Conditions for Certification, TCT will provide Five Mountains Hawaii Inc dba Kipuka o ke Ola a mid-term self-assessment tool.

In the meantime, our entire team congratulates you on achieving your Exemplary Provider® status and wishes your organization continued success.

Sincerely,

Sandra C. Canally, RN Founder and CEO

The Compliance Team, Inc. Attachment: Certificate

Copies: CMS CO and CMS RO #9

# Certificate of Accreditation

# Exemplary Provider® Award

Granted To

Five Mountains Hawaii Inc Kipuka o ke Ola 64-1035 Mamalahoa Hwy Suite F Kamuela, HI 96743

for demonstrating
Outstanding Healthcare Delivery Practices
and
Compliance to

Safety • Honesty • Caring®
Accreditation Quality Standards
RURAL HEALTH CLINIC

**EXPIRATION DATE: MARCH 28, 2026** 

March 28, 2023

DMEPOS
PHARMACY
RURAL HEALTH

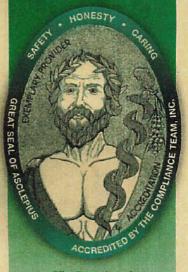
PATIENT-CENTERED MEDICAL HOME

CLINIC

PHYSICIAN

**INFUSION** 

OCULARIST



The Promise of HEALTHCARE EXCELLENCE