

# Community Health Center Approaching Reality in West Hawaii

John Buckstead  
Chair, Board of Directors  
West Hawaii Community Health Center

West Hawaii may be a place of great tropical beauty and explosive economic growth, but more than a quarter of its population does not have adequate access to health services. Their health status confirms this worsening situation. West Hawaii has a well documented scarcity of primary care physicians and specialists willing to serve the needs of the uninsured, and the planned closure of the Salvation Army's Kona Community Clinic will make the situation a crisis unless immediate action is taken.

The West Hawaii Community Health Center (WHCHC) has stepped forward to help address this problem. For many years, individuals and organizations like the Salvation Army have tried to create a Community Health Center, and their intense efforts over the past year, supplemented with a planning grant from AlohaCare, seem to be paying off.

Beginning in 2003, a steering committee composed of community leaders conducted the initial planning and community development work, and obtained a 501(c)(3) status for the Center. In February of this year, a 15-member governing board was seated and given the challenge to prepare a 330e proposal for submission to the U.S. Department of Health and Human Services to become a federally qualified community health center. The service area comprises nearly 50,000 persons, and each year the Center plans to serve 15% to 20% of the population. Its patients will be primarily, but not exclusively, individuals at or below 100% of federal poverty level.

With the assistance and cooperation of the Salvation Army and community volunteers, the pieces are coming together to make the WHCHC a reality. WHCHC has identified and negotiated the acquisition of a physical site and has entered into an agreement with the Salvation Army's Kona Community Clinic to assume that operation. The 330e proposal to become a federally qualified community health center has been submitted, a three year business plan developed, and advertising and recruitment for a CEO is underway.

## *Working Together on Kauai Means More Services for More People*

By David Peters  
Executive Director, Ho'ola Lahui Hawai'i

This story of collaboration began in January 2000, as Ho'ola Lahui Hawai'i (HLH) and the Hawaii Health Systems Corporation (HHSC) recognized that increasing numbers of uninsured individuals, or those with limited health benefits, were placing an undue burden on community providers. An alliance was formed that is the only such model of its kind in the state of Hawai'i, and demonstrates that creative solutions can be found when a community works together.

In September 2001, HLH was designated as a federally qualified health center and needed space for its clinical services. The Kaua'i Veterans Memorial Hospital (KVMH), a critical access hospital in Waimea and HHSC facility, was chosen as the location for HLH services due to its fair market rents and array of available health services. The agreement provided HLH clients with access to a continuum of services, from routine mammography and cervical exams to laboratory, radiology, and pharmacy services.

An unintended benefit of this new partnership was the increased collaboration among HLH, KVMH, and community physicians. The hospital's ability to provide specialty care enhanced the primary care of the center's patients. It became possible for providers to have access to needed services otherwise unavailable locally to patients. This emphasis on collaboration led to a "one-stop-shop" for HLH patients, and underscored the ideal that patient choice and access is always the number one concern.

Based on their track record of success, in October 2003, HLH and HHSC created yet another alliance when HLH opened a second clinic on the campus of Samuel Mahelona Memorial Hospital in Kapaa. HLH and HHSC created an arrangement similar to the one with KVMH, but offered a slightly different mix of services.

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HLH is a unique organization; in addition to being a federally qualified health center, it is the Native Hawaiian Health Care System for Kaua'i County. In addition to medical care, HLH offers many preventive health programs focused on Native Hawaiian families. The alliance between HLH & HHSC has been especially important to this population, and its impact is clear – decreased emergency room visits, more primary care services in an underserved community, and increased utilization of hospital services.

As safety net providers, HHSC and HLH cannot turn away anyone in need of services. This mutually beneficial relationship ensures greater access for the uninsured population and allows care to be more effectively managed for improved patient outcomes.

## MISSION

To ensure health coverage access to all who need it.

Working in partnership with researchers and the community, the project is an educational resource to support policy-makers as they develop workable plans that will cover the uninsured. The project also aims to raise awareness and improve understanding of the problem's magnitude and the consequences of a large uninsured population.

The Hawai'i Uninsured Project is a program of the Hawaii Institute for Public Affairs, which is Hawaii's only independent, nonpartisan and nonprofit organization dedicated to elevating Hawaii's public decision-making process through sound public policy analysis, fact-based research, and community collaboration.

This newsletter is supported in part by funding from The Robert Wood Johnson Foundation, awarded to the State of Hawaii's Department of Health.

The issues of health coverage access can only be solved by a coordinated effort of all segments of our community. Our ohana represents a strong, broad and growing alliance.

## THE LEADERSHIP GROUP STEERING COMMITTEE

### Hawaii State Department of Health Project Leader

Aloha United Way  
Benefit Plan Consultants  
Chamber of Commerce of Hawaii  
Hawaii Community Foundation  
Hawaii Pacific Health  
Hawaii Covering Kids  
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HMSA  
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Hawaii State Department of Labor & Industrial Relations  
Healthcare Association of Hawaii  
Ho'ola Lahui Hawaii  
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Milestones  
TO COVERAGE



The Hawai'i Uninsured Project  
Hawaii Institute for Public Affairs  
1001 Bishop Street  
American Savings Bank Tower - Suite 1132  
Honolulu, Hawaii 96813

Tel: 808.585.7931  
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## Health Insurance is a Critical Factor in Prenatal Care



Interview with Loretta Deliana Fuddy,  
Chief, Family Health Services Division  
Department of Health

*What are the benefits of prenatal care?*

Prenatal care, beginning early in and continuing throughout pregnancy, offers an opportunity to identify and reduce risks in pregnancy, to treat medical conditions, and to educate a pregnant woman about her health and that of her future child. Women who enter prenatal care late in pregnancy (after the first 12 weeks) or who don't receive any prenatal care are at greater risk of developing undetected complications of pregnancy that may result in poor birth outcomes, including preterm delivery and low birth weight.

*What factors influence a pregnant woman's choice to receive prenatal care?*

A study of entry into prenatal care in 13 states found that the most commonly reported reasons for not beginning care early were not being aware of the pregnancy and not having the money or insurance to pay for care. A study by the Hawaii Department of Health reported similar findings.

*How has the lack of health insurance affected a pregnant woman's ability to access prenatal care?*

The Department of Health (DOH) investigated this issue through our Pregnancy Risk Assessment Monitoring System (PRAMS). The DOH found that the uninsured rate for pregnant women was 11.6%, slightly higher than the statewide rate of 10% for the state of Hawaii. Women who were under 20 years old, had less than 12 years of education, had incomes below \$30,000, or

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## Don't Miss It! 2004 Health Policy Forum

The Costs and Benefits of  
Health Care Coverage in the

# 21<sup>ST</sup> CENTURY

Presented by **HAWAII**  
Institute for Public Affairs  
and  
the **HAWAII**  
Uninsured Project

Wednesday, October 13, 2004  
8:00 am – 1:30 pm  
Hilton Hawaiian Village  
Coral Ballroom  
Honolulu, Hawaii



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were unmarried were more likely to be without insurance prior to pregnancy. Hawaiian or part-Hawaiian women were also more likely to be uninsured. Uninsured women were more likely to receive no prenatal care or to enter prenatal care late (44.5%) than insured women (17.3%). Women without health insurance entered care three weeks later than those with coverage.

*How has the State of Hawaii addressed this issue?*

The results of the PRAMS indicate a strong need for outreach programs to educate women about pregnancy planning, prenatal care, and access to insurance coverage. The DOH provides funding to the community health centers for prenatal support. Many of the women uninsured upon entry into care are helped to apply for Medicaid; by the time of delivery the uninsured rate is reduced to 5%. Since January 2004, the Department of Human Services has reduced some of the barriers for enrollment in Medicaid programs by streamlining the application form and allowing self-declaration of pregnancy. Further, through the efforts of community advocates such as the Hawaii Primary Care Association, the Medicaid program will now offer coverage to pregnant immigrant women, even though federal matching funds are not available to assist with this effort.

## 2004 Health Policy Forum

*Registration Deadline: Friday, October 1, 2004*  
*\$95 per person*

\_\_\_\_\_  
Name

\_\_\_\_\_  
Affiliation/Company Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
City

\_\_\_\_\_  
Zip

\_\_\_\_\_  
Phone Number

\_\_\_\_\_  
E-mail or fax (*for confirmation*)

\_\_\_\_\_  
Vegetarian meal, please.

**Wednesday, October 13, 2004**

**8:00 am – 1:30 pm**

**Hilton Hawaiian Village, Coral Ballroom**

**Honolulu, Hawaii**

Please make check payable to

**Hawaii Institute for Public Affairs** and send

with completed registration form to:

**HIPA**

**American Savings Bank Tower, Suite 1132**

**1001 Bishop Street**

**Honolulu, HI 96813**

If you find that you must cancel your registration, please call 585-7931, ext. 101 by Wednesday, October 6 for a full refund. No refunds will be issued after that date.

For more information, please call

Carol Taniguchi at 585-7931, x101.

## 2004 Health Policy Forum

Wednesday, October 13, 2004

8:00 am – 1:30 pm

Hilton Hawaiian Village

Coral Ballroom

Honolulu, Hawaii

## The Costs and Benefits of Health Care Coverage in the 21st Century

An Invitation to leaders in business, labor, health care, social services, government, and advocacy and community organizations

Access to quality, affordable health care promises to be one of the most important national and local policy issues in 2005. On October 13, join a panel of national and local experts as we explore:

- » The impact of Hawaii's Prepaid Health Care Act on employers and employees
- » Cost drivers of health care and health insurance
- » Challenges and opportunities for reducing health care costs
- » Correlation between a healthy workforce and productivity
- » Implications of an increasing uninsured population

On October 13, join a panel of national and local experts as we explore current health care issues that affect us all.

### Luncheon Keynote Speaker

**Ted Halstead**  
President & CEO New America Foundation



Ted Halstead is the founding President and CEO of the New America Foundation, an independent, nonpartisan, nonprofit public policy institute in Washington, D.C. He is a frequent public speaker and media commentator, having appeared as a guest on Nightline, ABC's World News Tonight, CNN, CNBC, C-SPAN, and PBS. He has published broadly, including numerous articles in The New York Times, The Washington Post, The Atlantic Monthly, and Los Angeles Times. Mr. Halstead graduated Phi Beta Kappa from Dartmouth College, and received his Master's degree from Harvard's Kennedy School of Government, where he was a Montgomery Fellow. He was selected as a Global Leader for Tomorrow by the World Economic Forum in Davos, Switzerland.

### Featured National Experts



Alice Burton is the director of the State Health Group at AcademyHealth, where she leads The Robert Wood Johnson Foundation's State Coverage Initiatives (SCI) program. Ms. Burton is a graduate of the University of Maryland, College Park, and holds a master's degree in health policy from the Johns Hopkins University Bloomberg School of Public Health.



Deborah J. Chollet is a senior fellow at Mathematica Policy Research Inc., one of the nation's leading independent research firms based in Princeton, N.J., where she conducts and manages research on private health insurance coverage markets and regulation. Ms. Chollet received her Ph.D. in economics from the Maxwell School of Citizenship and Public Affairs at Syracuse University.



Vickie Gates is the Executive Director of the Oregon Health Care Quality Corporation and sits on the Oregon Health Policy Commission and the Governor's Oregon Health Plan Futures Committee. Ms. Gates is a graduate of the University of North Carolina with graduate work both there and the University of Pittsburgh.



Alan Weil is the executive director of the National Academy for State Health Policy, a non-profit, non-partisan public policy organization dedicated to excellence in state health policy and practice. Mr. Weil is a graduate of the University of California, Berkeley; the John F. Kennedy School of Government at Harvard University; and Harvard Law School.

### Opening Remarks

**The Honorable Linda Lingle**  
Governor, State of Hawaii (invited)



### Hawaii Panelists

**Howard Dicus**  
Web and Broadcast Editor  
Pacific Business News  
(Panel Moderator)

**Cliff Cisco**  
Senior Vice President  
HMSA

**Guy Fujimura**  
Secretary-Treasurer  
ILWU, Local 142

**Wanda Kakugawa**  
Small Business Council  
Chamber of Commerce of Hawaii

**Christopher Pablo**  
Director of Government Affairs  
Kaiser Foundation Health Plan

**Virginia Pressler, MD, MBA, FACS**  
Vice President  
Service Line Development  
Hawaii Pacific Health

**Early Registration is strongly recommended. Limited seating available.**

For more information and to download a registration form, please visit [www.healthcoveragehawaii.org](http://www.healthcoveragehawaii.org) or call Carol Taniguchi at 585-7931, x101.



# Milestones

TO COVERAGE

More Options. Better Access. Hawaii needs it now.

## Community Health Centers: Hawaii's Largest Healthcare Safety Net

Community health centers around the state are a critically important, if sometimes overlooked, part of Hawaii's health care system. They are allowed to exist only in federally recognized areas where residents are most likely to have barriers to health care access. Hawaii has eleven community health centers on five islands that care for 75,200 people.

These centers play a large role in caring for the state's uninsured. In 2003, more than 26,500 uninsured individuals were treated at Hawaii's community health centers, representing about 36% of the total number of center users.

Uninsured people have a variety of health needs, including medical, dental, and mental health. Frequently, patients have neglected needed health care for some time, so clinical visits are more intense than routine visits and need to address a variety of ailments. These patients often need assistance with a host of other issues, including housing, financial assistance, referral to other programs, health education, language assistance, and transportation. Outreach and follow-up are essential to ensure that people get the care they need and understand clinicians' instructions.

## Hawaii's eleven community health centers:

- Oahu:*
  - Kalihi-Palama Health Center serving urban Honolulu
  - Kokua Kalihi Valley serving Kalihi Valley
  - Waianae Coast Comprehensive Health Center serving rural leeward Oahu
  - Waikiki Health Center serving urban Honolulu and the homeless around Oahu
  - Waimanalo Health Center serving rural windward Oahu

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- Maui:*
  - Community Clinic of Maui serving entire island except Hana area
  - Hana Community Health Center serving Hana area

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- Hawaii:*
  - Bay Clinic serving Hilo, Pahoa, Kau, and Keaau areas
  - Hamakua Health Center serving the Hamakua district in northeast Hawaii

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- Kauai:*
  - Kauai Community Health Center serving the island of Kauai

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- Molokai:*
  - Molokai Community Health Center serving the island of Molokai

Koolauloa (east/north Oahu) and Kona (west Hawaii) are planning centers to open in 2004. See a related article on the West Hawaii Community Health Center in this newsletter.

## Hawaii Community Health Center Patient Profile (2003)

33% are Native Hawaiian    25% are Caucasian

21% are Asian    38% have Medicaid or QUEST coverage

15% are Pacific Islanders (*other than Native Hawaiian*)

19% need interpreters    36% are uninsured

76% are below poverty

52,000 are rural and 23,000 are urban

Source: Hawaii's Primary Care Association