

HAWAI'I PREPAID HEALTH CARE ADVISORY COUNCIL
Disability Compensation Division
Department of Labor and Industrial Relations
State of Hawai'i

MINUTES OF MEETING

Date: March 3, 2026

Time: 1:30 p.m.

In-Person Meeting Location: Princess Ruth Ke'elikōlani Building
830 Punchbowl Street, Room 209
Honolulu, Hawai'i 96813

Virtual Participation: Virtual Videoconference Meeting – Teams Meeting
<https://teams.microsoft.com/meet/26628347655154?p=WJzrFxZre6RqIrhq3r>

Present: Bonnie Pang, Chairperson
Wayne Graves, Council Member
Mike Hogan, Council Member
Lauren Yee, Council Member
Ami Aiona, Staff
Chelsea Fukunaga, Staff
Misty Sumida, Staff
Jung Yun (Kelly) Ha, Deputy Attorney General

Excused: John McDonnell, M.D., Council Member
Leocadia Conlon, Council Member

In-Person Guests: Kehau Giles
Kara Marlowe

Teams Guests: Gabby Ehrlich
Alyson Estrella
May Goya
Chad Herzog
Katherine Linster
Mark Mendoza
Terri O'Connell
Caller
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Agenda: The agenda for this meeting was posted to the State electronic calendar as required by Hawai'i Revised Statutes ("HRS") section 92-7(b).

Call to Order: The meeting was called to order at 1:54 p.m., at which time quorum was established.

Chair Pang welcomed everyone to the meeting and proceeded with a roll call of the Council members. All Council members confirmed that they were present and those attending virtually confirmed they were alone.

Approval of the August 7, 2025 and September 16, 2025 Open Session Minutes: Chair Pang requested a motion to approve the meeting minutes for the August 7, 2025 and September 16, 2025, meeting. It was moved by Mr. Graves, seconded by Ms. Yee and unanimously carried to approve the August 7, 2025 and September 16, 2025, open session minutes.

Review of Plans:

A. Hawai'i Medical Service Association ("HMSA")

i. Preferred Provider Plan (Informational Only)

Ms. Marlowe informed the Department of changes made to the prevalent plan. Changes would be effective January 1, 2027.

Ms. Marlowe stated the following revisions were submitted for Council review:

1. The replacement of the Annual Preventive Health Evaluation with the Annual Physical Exam benefit;
 - a. The benefit will now include an Annual Physical Exam, a Comprehensive Metabolic Panel, and Complete Blood Count.
2. Removal of the one Postpartum visit limitation from the PPP plan to align with HMSA's Health Maintenance Organization ("HMO") plans;
3. Addition of Newborn Circumcision benefit;
4. Removal of the Maternity benefit member cost share. The benefit will be covered at 100% for Maternity Services which will include: Routine Delivery, Prenatal, and Postpartum visits;

5. Consolidation of the Cutting Surgery and Non-Cutting Surgery benefits into one surgery benefit; aligning with the legacy Cutting Surgery benefit which is the lower cost share of the two;
6. Separation of Urgent Care Visits from Physician Visits;
7. Clarified benefit language for Physical And Occupational Therapy, removing references to “short-term and long-term”;
8. Updated definition of “Immunizations”. The new definition will also apply to the “Well-Child Immunizations”; and
9. Correction of “Physician’s Assistant” to “Physician Assistant”.

Chair Pang asked if there were any questions.

Ms. Fukunaga asked whether HMSA was able to provide a follow-up on their definition change for “Immediate Family Members”.

Ms. Giles responded that it is an exclusion that aligns with professional standards of care. She explained that professional and ethical guidelines discourage professional clinicians from treating family members. She added that providers treating their family members is an inherent conflict of interest that could potentially impact clinical decisions and payment process.

Ms. Giles stated that the exclusion is a standard in the industry and across the nation; adding that both Medicare and Medicaid programs are subject to federal law and must comply with the Stark Law.

Chair Pang thanked Ms. Giles for her clarification.

Chair Pang asked if there were any further questions.

There were none.

B. Kaiser Foundation Health Plan, Inc. (“KFHP”) and Kaiser Permanente Insurance Company (“KPIC”)

i. Kaiser Permanente Group Added Choice 80/20 Plan

KFHP and KPIC informed the Department of benefit and language changes made to the plan and requested continued approval under Section 393-7(a). Changes would be effective upon the employer groups’ contract renewal dates beginning January 1, 2027.

For the KFHP tier, Ms. Goya stated the following revisions were submitted for Council review:

1. Increased the cost share from 10% to 20% of applicable charges for Maternity Care Delivery and Maternity and Newborn Inpatient Stay benefits;
2. Increased the cost share from \$10 to \$20 per day for the Basic laboratory and General Imaging benefits;
3. Increased the cost share from 10% to 20% of applicable charges for Covered Mastectomy;
4. Increased cost share from 10% to 20% of applicable charges for: Inpatient Hospital Services, Outpatient Surgery and Procedures in a Hospital-based Setting or Ambulatory Surgery Center, Observation, and Skilled Nursing Facility;
5. New benefit for Non-Emergency Medical Transportation added and will be covered at no cost sharing to the member;
6. Removed references to the terms, "In Network" and "Out of Network" throughout the plan;
7. Clarified definitions of "Prior Authorization" and "Post-Stabilization Services" in accord with the federal law, No Surprises Act;
8. Clarified the care that is covered while visiting in another Kaiser Permanente service area;
9. Clarified that Intrauterine Insemination procedure is a type of Artificial Insemination;
10. Clarified the Emergency Services benefit to comply with federal laws, such as the No Surprises Act;
11. Updated language to reflect the current practice of the mail order program;
12. Clarified the "Unusual Circumstances Where Care May Be Delayed" provision;
13. Clarified the eligibility requirements for "Subscribers" and "Family Dependents";
14. Clarified requirements to be a "Senior Advantage Member";
15. Added language to reflect the Medicare Late Enrollment Penalties;
16. Clarified language using consistent terms for: "Family Dependent Child" and "Service";

17. Clarified the definition of, “Ancillary Services” in accord with the federal law, No Surprises Act; and

18. Corrected grammatical error on page 32.

Chair Pang thanked Ms. Goya for presenting KFHP’s requested changes and asked if there any questions.

There were none.

For the KPIC tier, Ms. Ehrlich stated the following revisions were submitted for Council review:

1. Updated the address for the “Claims and Appeals Procedures” and “Precertification Through the Medical Review Program” sections;
2. Added definitions for “Contract Provider” and “Participating Provider” for clarity and consistency. Definitions are interchangeable;
3. Added definitions for “Non-Contractor Provider” and “Non-Participating Provider” for clarity and to align with the health plans language. Definitions are interchangeable;
4. Added a definitions for: “Prior Authorization”, “Healthcare Professionals”, and “Utilization Review Entity” to comply with the 2025 amendments to HRS Chapter 323D;
5. Added a new benefit for “Emergency Ambulance” and Non-Emergency Medical Transportation”; and
6. Updated form numbers.

Chair Pang thanked Ms. Ehrlich for presenting KPIC’s requested changes. She asked whether KPIC could address the following comments from staff:

1. The Orthodontic Services for Treatment of Orofacial Anomalies maximum benefit per treatment phase is consistent with the prevalent plan;
2. Where General Nursing is listed as a hospital benefit;
3. Physical and Occupational Therapy limits are clarified; and
4. Language for Eligibility, Contributions Waiting Period, Continuation of Coverage, Emergency Services, Definitions of Other Healthcare

Providers, and General Limitations and Exclusions is consistent with the KFHP tier.

Ms. Ehrlich responded that KPIC will be amending their tier to add a reference to the Department of Commerce and Consumer Affairs website to direct subscribers to the updated benefit amount for Orthodontic Services for Treatment of Orofacial Anomalies. She added that KPIC will also add a separate heading in the plan for General Nursing to ensure it is not buried within the document. Ms. Ehrlich stated that KPIC will also remove the 30-day limit for the Physical and Occupational Therapy benefits.

Ms. Ehrlich clarified that KPIC does not intend for the language in their plan to match KFHP's benefits exactly as there is a difference in contracted language. She added that KFHP delivers care while KPIC covers expenses for care. KFHP serves as a care delivery system and KPIC is an insurance company.

Chair Pang thanked Ms. Ehrlich for her clarifications asked if there were any further questions.

There were none.

Chair Pang asked for a motion to recommend continued approval of the plan with conditions. It was moved by Mr. Graves, seconded by Ms. Yee, and unanimously carried to recommend continued approval of the plan under Section 393-7(a) provided:

1. Within the KPIC tier, the Orthodontic Services for Treatment of Orofacial Anomalies maximum benefit per treatment phase is consistent with the prevalent plan;
2. Within the KPIC tier, where General Nursing is listed as a hospital benefit;
3. Within the KPIC tier, Physical and Occupational Therapy limits are clarified; and
4. Within the KFHP tier, the grammatical error on page 32 is corrected.

C. Kaiser Foundation Health Plan, Inc.

i. Kaiser Permanente Group Plan (Informational Only)

Ms. Goya informed the Department of changes made to the prevalent plan. Changes would be effective upon the employer groups' contract renewal dates beginning January 1, 2027.

Ms. Goya stated the following revisions were submitted for Council review:

1. New benefit for Non-Emergency Medical Transportation added and will be covered at no cost sharing to the member;
2. Clarified definitions of “Prior Authorization” and “Post-Stabilization Services” in accord with the federal law, No Surprises Act;
3. Clarified the care that is covered while visiting in another Kaiser Permanente service area;
4. Clarified that Intrauterine Insemination Procedure is a type of Artificial Insemination;
5. Clarified the Emergency Services benefit to comply with federal laws, such as the No Surprises Act;
6. Updated language to reflect the current practice of the mail order program;
7. Clarified the “Unusual Circumstances Where Care May Be Delayed” provision;
8. Clarified the eligibility requirements for “Subscribers” and “Family Dependents”;
9. Clarified eligibility requirements to be a “Senior Advantage Member”;
10. Added language to reflect the Medicare Late Enrollment Penalties;
11. Clarified language using consistent terms for: “Family Dependent Child” and “Service”;
12. Clarified the definition of, “Ancillary Services” in accord with the federal law, No Surprises Act; and
13. Corrected grammatical error on page 32.

Chair Pang asked if there were any questions.

There were none.

ii. Kaiser Permanented Group \$20/20%/\$300 Plan

Ms. Goya informed the Department of changes made to the plan and requested continued approval under Section 393-7(a). Changes would be effective upon the employer groups' contract renewal dates beginning January 1, 2027.

Ms. Goya stated the following revisions were submitted for Council review:

1. New benefit for Non-Emergency Medical Transportation added and will be covered at no cost sharing to the member;
2. Clarified definitions of "Prior Authorization" and "Post-Stabilization Services" in accord with the federal law, No Surprises Act;
3. Clarified the care that is covered while visiting in another Kaiser Permanente service area;
4. Clarified that Intrauterine Insemination Procedure is a type of Artificial Insemination;
5. Clarified the Emergency Services benefit to comply with federal laws, such as the No Surprises Act;
6. Updated language to reflect the current practice of the mail order program;
7. Clarified the "Unusual Circumstances Where Care May Be Delayed" provision;
8. Clarified the eligibility requirements for "Subscribers" and "Family Dependents";
9. Clarified eligibility requirements to be a "Senior Advantage Member";
10. Added language to reflect the Medicare Late Enrollment Penalties;
11. Clarified language using consistent terms for: "Family Dependent Child" and "Service";
12. Clarified the definition of, "Ancillary Services" in accord with the federal law, No Surprises Act; and
13. Corrected grammatical error on page 32.

Chair Pang asked if there were any further questions.

There were none.

Chair Pang asked for a motion to recommend continued approval of the plan. It was moved by Mr. Graves, seconded by Ms. Yee, and unanimously carried to recommend continued approval of the plan under Section 393-7(a) provided:

1. The grammatical error on page 32 is corrected.

iii. Kaiser Permanente Group \$25/\$150 (20% Lab, Imaging, and Testing) Plan

Ms. Goya informed the Department of changes made to the plan and requested continued approval under Section 393-7(a). Changes would be effective upon the employer groups' contract renewal dates beginning January 1, 2027.

Ms. Goya stated the following revisions were submitted for Council review:

1. New benefit for Non-Emergency Medical Transportation added and will be covered at no cost sharing to the member;
2. Clarified definitions of "Prior Authorization" and "Post-Stabilization Services" in accord with the federal law, No Surprises Act;
3. Clarified the care that is covered while visiting in another Kaiser Permanente service area;
4. Clarified that Intrauterine Insemination Procedure is a type of Artificial Insemination;
5. Clarified the Emergency Services benefit to comply with federal laws, such as the No Surprises Act;
6. Updated language to reflect the current practice of the mail order program;
7. Clarified the "Unusual Circumstances Where Care May Be Delayed" provision;
8. Clarified the eligibility requirements for "Subscribers" and "Family Dependents";
9. Clarified eligibility requirements to be a "Senior Advantage Member";
10. Added language to reflect the Medicare Late Enrollment Penalties;
11. Clarified language using consistent terms for: "Family Dependent Child" and "Service";

12. Clarified the definition of, “Ancillary Services” in accord with the federal law, No Surprises Act; and

13. Corrected grammatical error on page 32.

Chair Pang thanked Ms. Goya for presenting Kaiser’s requested changes. asked if there were any further questions.

There were none.

Chair Pang asked for a motion to recommend continued approval of the plan. It was moved by Mr. Graves, seconded by Mr. Hogan, and unanimously carried to recommend continued approval of the plan under Section 393-7(a) provided:

1. The grammatical error on page 32 is corrected.

Next Meeting:

To Be Determined

In-Person Meeting Location: Princess Ruth Ke’elikōlani Building
830 Punchbowl Street, Room 209
Honolulu, Hawai’i 96813

Virtual Videoconference Meeting – Teams Meeting

Adjournment:

The meeting was adjourned at 2:27 p.m.

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Minutes approved as is.
Minutes approved with changes.