

**HAWAI'I PREPAID HEALTH CARE ADVISORY COUNCIL**

Disability Compensation Division  
Department of Labor and Industrial Relations  
State of Hawai'i

**MINUTES OF MEETING**

Date: April 16, 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/24967076529162?p=MBERCaOdkz5d13aJY2>

Present: Bonnie Pang, Chairperson  
John McDonnell, M.D., Council Member  
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: Leocadia Conlon, Council Member

In-Person Guests: none

Teams Guests: Selina Perdido  
Alyson Estrella  
Chad Hertzog  
Kara Marlowe  
Katherine Linster  
Aimee Achenbach  
Mark Mendoza  
Austin Bunag  
Lois Matsumoto  
Stratford Goto  
Tamberlynn Sorenson  
Chris Rapozo  
Kevin Lau  
May Goya  
Pomaika'i Canady  
Terry O'Connell  
Theresa Young  
Charina Masatsugu  
Denise Dias  
Tammy Vitolo  
Paul Kaiser

Eleu Kane

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 1:30 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 March 3, 2026, Open Session Minutes: The April 10, 2026 meeting agenda had included approval of the minutes of the March 3, 2026 open session meeting but the April 10, 2026 meeting had been cancelled due to inclement weather. Mr. Hogan motioned to amend the agenda to include the approval of the minutes of the March 3, 2026 open session meeting. Mr. Graves seconded the motion, and it was unanimously carried.

Dr. McDonnell motioned to approve the meeting minutes of the March 3, 2026 open session meeting as circulated. The motion was seconded by Mr. Graves, and unanimously carried.

Review of Plans: A. University Health Alliance (UHA)

i. UHA 600

UHA informed the Department of changes made to the plan and requested continued approval under Section 393-7(a). Changes would be effective January 1, 2027. UHA was represented by Ms. Alyson Estrella. She stated the same changes were made to each plan.

Ms. Estrella stated the following revisions were submitted for Council review.

1. Language added to clarify air ambulance services outside the US were not covered.
2. Clarification that prior authorization was required for PET scans for brain imaging and myocardial imaging.
3. Added "general nursing services & regular and special diets" to the hospital room and board benefit description.
4. Revised references to midwives to align with Hawai'i law.
5. Added language that cardiac rehabilitation included intensive cardiac rehabilitation and added a definition to the glossary.
6. The language was revised to remove the specific dollar amount of the maximum benefit for orthodontic treatment for orofacial anomalies and was replaced with a link to UHA's website where the information would be available. In response to staff review, the link to the location of the information would be added in the member's guide.
7. Added language clarifying that concierge care membership fees were not covered.
8. Removed "developmental delay" plan exclusion.
9. In response to staff review of physical and occupational therapies, references to short-term and long-term care would be removed.
10. In response to staff review, maternity would be covered at 100%.

11. In response to staff review, the copayment chapter would indicate coverage for urgent care.

Chair Pang asked if there were any questions. There were none.

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

1. References to “short-term” and “long-term” for physical and occupational therapy are removed;
2. Maternity Care is covered at 100% in-network;
3. Urgent care visits are listed as a benefit; and
4. The online location of the maximum benefit for orthodontic treatment for orofacial anomalies is specified.

ii. UHA 600-S

UHA informed the Department of changes made to the plan and requested continued approval under Section 393-7(a). Changes would be effective January 1, 2027.

Ms. Estrella described the plan as an ACA offering that paired UHA 600 with drug coverage. She stated the following revisions were submitted for Council review.

1. Language added to clarify air ambulance services outside the US were not covered.
2. Clarification that prior authorization was required for PET scans for brain imaging and myocardial imaging.
3. Added “general nursing services & regular and special diets” to the hospital room and board benefit description.
4. Revised references to midwives to align with Hawai'i law.
5. Added language that cardiac rehabilitation included intensive cardiac rehabilitation and added a definition to the glossary.
6. The language was revised to remove the specific dollar amount of the maximum benefit for orthodontic treatment for orofacial anomalies and was replaced with a link to UHA's website where the information would be available. In response to staff review, the link to the location of the information would be added in the member's guide.
7. Added language clarifying that concierge care membership fees were not covered.
8. Removed “developmental delay” plan exclusion.
9. In response to staff review of physical and occupational therapies, references to short-term and long-term care would be removed.
10. In response to staff review, maternity would be covered at 100%.
11. In response to staff review, the copayment chapter would indicate coverage for urgent care.

Chair Pang asked if there were any questions. There were none.

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

1. References to “short-term” and “long-term” for physical and occupational therapy are removed;
2. Maternity Care is covered at 100% in-network;
3. Urgent care visits are listed as a benefit; and
4. The online location of the maximum benefit for orthodontic treatment for orofacial anomalies is specified.

iii. UHA 600-T

UHA informed the Department of changes made to the plan and requested continued approval under Section 393-7(a). Changes would be effective January 1, 2027.

Ms. Estrella stated the following revisions were submitted for Council review.

1. Language added to clarify air ambulance services outside the US were not covered.
2. Clarification that prior authorization was required for PET scans for brain imaging and myocardial imaging.
3. Added “general nursing services & regular and special diets” to the hospital room and board benefit description.
4. Revised references to midwives to align with Hawai‘i law.
5. Added language that cardiac rehabilitation included intensive cardiac rehabilitation and added a definition to the glossary.
6. The language was revised to remove the specific dollar amount of the maximum benefit for orthodontic treatment for orofacial anomalies and was replaced with a link to UHA’s website where the information would be available. In response to staff review, the link to the location of the information would be added in the member’s guide.
7. Added language clarifying that concierge care membership fees were not covered.
8. Removed “developmental delay” plan exclusion.
9. In response to staff review of physical and occupational therapies, references to short-term and long-term care would be removed.
10. In response to staff review, maternity would be covered at 100%.
11. In response to staff review, the copayment chapter would indicate coverage for urgent care.

Chair Pang asked if there were any questions. There were none.

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

1. References to “short-term” and “long-term” for physical and occupational therapy are removed;
2. Maternity Care is covered at 100% in-network;
3. Urgent care visits are listed as a benefit; and
4. The online location of the maximum benefit for orthodontic treatment for orofacial anomalies is specified.

B. Hawai‘i Medical Service Association (“HMSA”)

i. Preferred Provider Plan 2010

HMSA informed the Department of changes made to the plan and requested continued approval under Section 393-7(a). Changes would be effective January 1, 2027. HMSA was represented by Ms. Kara Marlowe.

Ms. Marlowe stated the following changes were submitted for Council review.

1. Annual preventive health evaluation replaced the annual physical exam benefit.
2. Removed the one postpartum visit limitation.
3. Added the newborn circumcision benefit.
4. Consolidated cutting and non-cutting benefit into one surgery benefit at the lower cost share of the two.
5. Urgent care listed as a separate line item and increased cost share to \$17.
6. Changed language for physical and occupational therapy to remove references to short-term and long-term from the benefit description.
7. Updated definition of immunizations.
8. Updated language for well-child immunizations.
9. Corrected spelling of physician assistant.

Ms. Marlowe stated the \$17 copayment for urgent care is equal to better than the 10% coinsurance on the prevalent plan.

Chair Pang asked if there were any questions. There were none.

Chair Pang called for a motion. 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).

Mr. Hogan thanked HMSA for comparing the urgent care copayment to the coinsurance on the prevalent plan.

ii. Preferred Provider Plan – A

HMSA informed the Department of changes made to the plan and requested continued approval under Section 393-7(a). Changes would be effective January 1, 2027.

Ms. Marlowe stated the following changes were submitted for Council review.

1. Annual preventive health evaluation replaced the annual physical exam benefit.
2. Removed the one postpartum visit limitation.
3. Increased urgent care cost share to \$17.
4. Consolidated cutting and non-cutting benefit into one surgery benefit at the lower cost share of the two.
5. Clarified language for physical and occupational therapy.
6. Updated language for well-child immunizations.
7. Updated definition of immunizations.
8. Corrected spelling of physician assistant.

The urgent care copay of \$17 is equal to or better than the 10%

coinsurance on the prevalent plan.

Chair Pang asked if there were any questions. There were none.

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

iii. Health Plan Hawai'i Plus (HPH Plus)

HMSA informed the Department of changes made to the plan and requested continued approval under Section 393-7(a). Changes would be effective January 1, 2027.

Ms. Marlowe stated HMSA had received a copy of the prevalent plan and would make changes to the non-emergency medical transportation benefit. The changes were not captured in HMSA's submittal but would be made.

Ms. Marlowe stated the following changes were submitted for Council review.

1. Annual preventive health evaluation replaced the annual physical exam benefit.
2. Removed the maternity benefit member cost share.
3. Clarified language for physical and occupational therapy.
4. Updated language for well-child immunizations.
5. Updated definition of immunizations.
6. Corrected spelling of physician assistant.

Chair Pang asked if there were any questions. There were none.

Chair Pang called for a motion. 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 non-emergency medical transportation was covered at 100%.

iv. Health Plan Hawai'i – A

HMSA informed the Department of changes made to the plan and requested continued approval under Section 393-7(a). Changes would be effective January 1, 2027.

Ms. Marlowe stated HMSA had received a copy of the prevalent plan and would make changes to the non-emergency medical transportation benefit. The changes were not captured in HMSA's submittal but would be made.

Ms. Marlowe stated the following changes were submitted for Council review.

1. Annual preventive health evaluation replaced the annual physical exam benefit.
2. Removed the maternity benefit member cost share.
3. Clarified language for physical and occupational therapy.
4. Updated language for well-child immunizations.
5. Updated definition of immunizations.

6. Corrected spelling of physician assistant.

Chair Pang asked if there were any questions. There were none.

Chair Pang called for a motion. 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 non-emergency medical transportation was covered at 100%.

v. CompMED

HMSA informed the Department of changes made to the plan and requested continued approval under Section 393-7(a). Changes would be effective January 1, 2027.

Ms. Marlowe stated the following changes were submitted for Council review.

1. Annual preventive health evaluation replaced the annual physical exam benefit.
2. Removed the one postpartum visit limitation.
3. Removed the maternity benefit member cost share.
4. Increased urgent care cost share to \$19 which was equal to or better than the prevalent plan.
5. Consolidated cutting and non-cutting benefit into one surgery benefit at the lower cost share of the two.
6. Clarified language for physical and occupational therapy.
7. Updated language for well-child immunizations.
8. Updated definition of immunizations.
9. Corrected spelling of physician assistant

Chair Pang asked if there were any questions. There were none.

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

vi. CompMED Choice

HMSA informed the Department of changes made to the plan and requested continued approval under Section 393-7(a). Changes would be effective January 1, 2027.

Ms. Marlowe stated the following changes were submitted for Council review.

1. Annual preventive health evaluation replaced the annual physical exam benefit.
2. Removed the one postpartum visit limitation.
3. Increased urgent care cost share to \$17 which was equal to or better than the prevalent plan.
4. Consolidated cutting and non-cutting benefit into one surgery benefit at the lower cost share of the two.
5. Clarified language for physical and occupational therapy.
6. Updated language for well-child immunizations.
7. Updated definition of immunizations.

8. Corrected spelling of physician assistant.

Ms. Aiona inquired about the \$19 urgent care versus the \$17 urgent care copay on other plans. Ms. Marlowe said that the copay was increased to \$19 on this plan instead of \$17 as on other plans because HMSA's assessment was based on the current office visit cost share of each plan. The urgent care copay was set at \$5 more than the office visit copay on each plan.

Mr. Graves asked if it was necessary for HMSA to confirm the urgent care copay was equal to or better than the prevalent plan's copay. Ms. Fukunaga confirmed HMSA had attested to that.

Chair Pang asked if there were other questions. There were none.

Chair Pang called for a motion. 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).

vii. Preferred Provider Plan – B

HMSA informed the Department of changes made to the plan and requested continued approval under Section 393-7(b). Changes would be effective January 1, 2027.

Ms. Marlowe stated the following changes were submitted for Council review.

1. Annual preventive health evaluation replaced the annual physical exam benefit.
2. Removed the one postpartum visit limitation.
3. Increased urgent care cost share to \$20.
4. Consolidated cutting and non-cutting benefit into one surgery benefit at the lower cost share of the two.
5. Clarified language for physical and occupational therapy.
6. Updated language for well-child immunizations.
7. Updated definition of immunizations.
8. Corrected spelling of physician assistant.

Chair Pang asked about the cost of urgent care compared to the prevalent plan. Ms. Marlowe stated the plan was a 7(b) plan so the cost share for urgent care did not need to match the prevalent plan. However, the copay was equal to or better than 10% coinsurance.

Chair Pang asked if there were other questions. There were none.

Chair Pang called for a motion. It was moved by Mr. Graves, seconded by Dr. McDonnell, and unanimously carried to recommend continued approval of the plan under Section 393-7(b).

C. University Health Alliance (UHA)

- i. UHA 3000

UHA informed the Department of changes made to the plan and requested continued approval under Section 393-7(a). Changes would be effective January 1, 2027. UHA was represented by Ms. Estrella.

Ms. Estrella stated the following revisions were submitted for Council review.

1. Language added to clarify air ambulance services outside the US were not covered.
2. Clarification that prior authorization was required for PET scans for brain imaging and myocardial imaging.
3. Added “general nursing services & regular and special diets” to the hospital room and board benefit description.
4. Revised references to midwives to align with Hawai'i law.
5. Added language that cardiac rehabilitation included intensive cardiac rehabilitation and added a definition to the glossary.
6. The language was revised to remove the specific dollar amount of the maximum benefit for orthodontic treatment for orofacial anomalies and was replaced with a link to UHA's website where the information would be available. In response to staff review, the link to the location of the information would be added in the member's guide.
7. Added language clarifying that concierge care membership fees were not covered.
8. Removed “developmental delay” plan exclusion.
9. In response to staff review of physical and occupational therapies, references to short-term and long-term care would be removed.
10. In response to staff review, the copayment chapter would indicate coverage for urgent care.

Chair Pang asked if there were any questions. There were none.

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

1. References to “short-term” and “long-term” for physical and occupational therapy are removed;
2. Urgent care visits are listed as a benefit; and
3. The online location of the maximum benefit for orthodontic treatment for orofacial anomalies is specified.

ii. UHA 3000-S

UHA informed the Department of changes made to the plan and requested continued approval under Section 393-7(a). Changes would be effective January 1, 2027.

Ms. Estrella stated the following revisions were submitted for Council review.

1. Language added to clarify air ambulance services outside the US were not covered.
2. Clarification that prior authorization was required for PET scans for brain imaging and myocardial imaging.

3. Added “general nursing services & regular and special diets” to the hospital room and board benefit description.
4. Revised references to midwives to align with Hawai'i law.
5. Added language that cardiac rehabilitation included intensive cardiac rehabilitation and added a definition to the glossary.
6. The language was revised to remove the specific dollar amount of the maximum benefit for orthodontic treatment for orofacial anomalies and was replaced with a link to UHA's website where the information would be available. In response to staff review, the link to the location of the information would be added in the member's guide.
7. Added language clarifying that concierge care membership fees were not covered.
8. Removed “developmental delay” plan exclusion.
9. In response to staff review of physical and occupational therapies, references to short-term and long-term care would be removed.
10. In response to staff review, the copayment chapter would indicate coverage for urgent care.

Dr. McDonnell asked if air ambulance benefit was limited to the continental US or if it included Hawai'i, Alaska, and the territories. Ms. Estrella stated Hawai'i and Alaska were included but was unsure about territories and could find out and provide the information to the staff.

Chair Pang asked if there were other questions. There were none.

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

1. References to “short-term” and “long-term” for physical and occupational therapy are removed;
2. Urgent care visits are listed as a benefit; and
3. The online location of the maximum benefit for orthodontic treatment for orofacial anomalies is specified.

Chair Pang asked UHA to provide the information about the inclusion of territories in the air ambulance benefit on all plans.

iii. UHA 3000-T

UHA informed the Department of changes made to the plan and requested continued approval under Section 393-7(a). Changes would be effective January 1, 2027.

Ms. Estrella stated the following revisions were submitted for Council review.

1. Language added to clarify air ambulance services outside the US were not covered.
2. Clarification that prior authorization was required for PET scans for brain imaging and myocardial imaging.
3. Added “general nursing services & regular and special diets” to the hospital room and board benefit description.
4. Revised references to midwives to align with Hawai'i law.

5. Added language that cardiac rehabilitation included intensive cardiac rehabilitation and added a definition to the glossary.
6. The language was revised to remove the specific dollar amount of the maximum benefit for orthodontic treatment for orofacial anomalies and was replaced with a link to UHA's website where the information would be available. In response to staff review, the link to the location of the information would be added in the member's guide.
7. Added language clarifying that concierge care membership fees were not covered.
8. Removed "developmental delay" plan exclusion.
9. In response to staff review of physical and occupational therapies, references to short-term and long-term care would be removed.
10. In response to staff review, the copayment chapter would indicate coverage for urgent care.

Chair Pang asked if there were any questions. There were none.

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

1. References to "short-term" and "long-term" for physical and occupational therapy are removed;
2. Urgent care visits are listed as a benefit; and
3. The online location of the maximum benefit for orthodontic treatment for orofacial anomalies is specified.

iv. One Plan

UHA informed the Department of changes made to the plan and requested continued approval under Section 393-7(a). Changes would be effective January 1, 2027.

Ms. Estrella stated the following revisions were submitted for Council review.

1. Language added to clarification air ambulance services outside the US were not covered.
2. Clarification that prior authorization was required for PET scans for brain imaging and myocardial imaging.
3. Added "general nursing services & regular and special diets" to the hospital room and board benefit description.
4. Revised references to midwives to align with Hawai'i law.
5. Added language that cardiac rehabilitation included intensive cardiac rehabilitation and added a definition to the glossary.
6. The language was revised to remove the specific dollar amount of the maximum benefit for orthodontic treatment for orofacial anomalies and was replaced with a link to UHA's website where the information would be available. In response to staff review, the link to the location of the information would be added to the member's guide.
7. Added language clarifying that concierge care membership fees were not covered.
8. Removed developmental delay plan exclusion.

9. In response to staff review of physical and occupational therapies, references to short-term and long-term care would be removed.
10. In response to staff review, the copayment chapter would indicate coverage for urgent care.

Chair Pang asked if there were any questions. There were none.

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

1. References to “short-term” and “long-term” for physical and occupational therapy are removed;
2. Urgent care visits are listed as a benefit; and
3. The online location of the maximum benefit for orthodontic treatment for orofacial anomalies is specified.

iii. One Plan -T

UHA informed the Department of changes made to the plan and requested continued approval under Section 393-7(a). Changes would be effective January 1, 2027.

Ms. Estrella stated the following revisions were submitted for Council review.

1. Language added to clarification air ambulance services outside the US were not covered.
2. Clarification that prior authorization was required for PET scans for brain imaging and myocardial imaging.
3. Added “general nursing services & regular and special diets” to the hospital room and board benefit description.
4. Revised references to midwives to align with Hawai'i law.
5. Added language that cardiac rehabilitation included intensive cardiac rehabilitation and added a definition to the glossary.
6. The language was revised to remove the specific dollar amount of the maximum benefit for orthodontic treatment for orofacial anomalies and was replaced with a link to UHA's website where the information would be available. In response to staff review, the link to the location of the information would be added to the member's guide.
7. Added language clarifying that concierge care membership fees were not covered.
8. Removed developmental delay plan exclusion.
9. In response to staff review of physical and occupational therapies, references to short-term and long-term care would be removed.
10. In response to staff review, the copayment chapter would indicate coverage for urgent care.

Chair Pang asked if there were any questions. There were none.

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

1. References to “short-term” and “long-term” for physical and occupational therapy are removed;
2. Urgent care visits are listed as a benefit; and
3. The online location of the maximum benefit for orthodontic treatment for orofacial anomalies is specified.

B. Hawai'i Medical Assurance Association (HMAA)

i. Comprehensive Plus

Hawai'i Western Management Group Inc (HWMG) informed the Department of changes made to HMAA's plan and requested continued approval under Section 393-7(a). Changes would be effective January 1, 2027. HMAA was represented by Tammy Vitolo.

Ms. Vitolo stated the following revisions were submitted for Council review.

1. Updated plan year.
2. Added reference to existing travel program.
3. Revised section title to “Medical Drugs” to be consistent with the prevalent plan.
4. Increased breast pump benefit non-par to 100% so in- and out-of-network coverage would be 100% without a deductible.
5. Changed language emergency services for clarification and federal NSA compliance.
6. Added the Emergencies outside of Hawai'i section for clarification and consistency with the prevalent plan.
7. Changed language for the physician visit in emergency room for clarification and federal NSA compliance.
8. Added the section for physician visits – emergency room; emergencies outside of Hawai'i for clarification and consistency with the prevalent plan.
9. Added language to durable medical equipment and supplies for clarification purposes.
10. Revised the section title to medical drugs and revised the language for consistency with the prevalent plan.
11. For orthodontic treatment for orofacial anomalies, language changed to refer to website for maximum consistent with the prevalent plan. HMAA would also add a direct link to the plan.
12. Preventive health section was renamed and revised for clarification and consistency with the prevalent plan.
13. Well child care immunization language was added for clarification purposes.
14. The breast pump benefit description was changed to say, “Breast pumps are covered when purchased from a non-participating provider.”
15. Added an “Other (exclusion)” to services not covered – drugs to state, consistent with the prevalent plan, that products not approved by the FDA are excluded.
16. Added an exclusion stating air ambulances outside the United States are not covered.

17. Under Services not covered, provider type the definition of an immediate family member was revised for clarification purposes.
18. Changed language for coordination of benefits and third-party liability. Verbiage was added for clarification purposes.
19. In the glossary the definition of emergency was revised.
20. In the glossary, the definition of immediate family member was revised.
21. In addition to the submitted changes, HMAA would remove the postpartum visit limitation.
22. In addition to the submitted changes, HMAA would remove the deductible from the newborn circumcision benefit.
23. In addition to the submitted changes, HMAA would remove references to short-term and long-term physical and occupational therapy.
24. In addition to the submitted changes, HMAA would include a direct link to the information about the maximum for orthodontic treatment of orofacial anomalies.
25. In addition to the submitted changes, the definition family member was inadvertently revised but would be corrected.

Chair Pang asked if air ambulance benefit included territories. Ms. Denise Diaz responded that it did not.

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

1. The limit on postpartum visits is removed;
2. Newborn circumcision is covered without a deductible;
3. References to "short-term" and "long-term" for physical and occupational therapy are removed;
4. The online location of the maximum benefit for orthodontic treatment for orofacial anomalies is specified; and
5. The change to the definition of family member is removed.

ii. Option Plus One

Hawai'i Western Management Group Inc (HWMG) informed the Department of changes made to HMAA's plan and requested continued approval under Section 393-7(a). Changes would be effective January 1, 2027.

Ms. Vitolo stated the following revisions were submitted for Council review.

1. Updated plan year.
2. Added reference to existing travel program.
3. Revised section title to "Medical Drugs" to be consistent with the prevalent plan.
4. Increased breast pump benefit non-par to 100% so in- and out-of-network coverage would be 100% without a deductible.
5. Changed language emergency services for clarification and federal NSA compliance.
6. Added the Emergencies outside of Hawai'i section for clarification and consistency with the prevalent plan.

7. Changed language for the physician visit in emergency room for clarification and federal NSA compliance.
8. Added the section for physician visits – emergency room; emergencies outside of Hawai'i for clarification and consistency with the prevalent plan.
9. Added language to durable medical equipment and supplies for clarification purposes.
10. Revised the section title to medical drugs and revised the language for consistency with the prevalent plan.
11. For orthodontic treatment for orofacial anomalies, language changed to refer to website for maximum consistent with the prevalent plan. HMAA would also add a direct link to the plan.
12. Preventive health section was renamed and revised for clarification and consistency with the prevalent plan.
13. Well-child care immunization language was added for clarification purposes.
14. The breast pump benefit description was changed to say, "Breast pumps are covered when purchased from a non-participating provider."
15. Added an "Other (exclusion)" to services not covered – drugs to state, consistent with the prevalent plan, that products not approved by the FDA are excluded.
16. Added an exclusion stating air ambulances outside the United States are not covered.
17. Under Services not covered, provider type the definition of an immediate family member was revised for clarification purposes.
18. Changed language for coordination of benefits and third-party liability. Verbiage was added for clarification purposes.
19. In the glossary the definition of emergency was revised.
20. In the glossary, the definition of immediate family member was revised.
21. In addition to the submitted changes, HMAA would cover maternity at 100% in-network.
22. In addition to the submitted changes, HMAA would remove the postpartum visit limitation.
23. In addition to the submitted changes, HMAA would remove the deductible from the newborn circumcision benefit.
24. In addition to the submitted changes, HMAA would remove references to short-term and long-term physical and occupational therapy.
25. In addition to the submitted changes, HMAA would include a direct link to the information about the maximum for orthodontic treatment of orofacial anomalies.

Chair Pang asked if there were any questions. There were none.

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

1. Maternity care is covered at 100% in-network;
2. The limit on postpartum visits is removed;
3. Newborn circumcision is covered without a deductible;

4. References to “short-term” and “long-term” for physical and occupational therapy are removed; and
5. The online location of the maximum benefit for orthodontic treatment for orofacial anomalies is specified.

iii. Option Plus Two

Hawai'i Western Management Group Inc (HWMG) informed the Department of changes made to HMAA's plan and requested continued approval under Section 393-7(a). Changes would be effective January 1, 2027.

Ms. Vitolo stated the following revisions were submitted for Council review.

1. Updated plan year.
2. Added reference to existing travel program.
3. Revised section title to “Medical Drugs” to be consistent with the prevalent plan.
4. Increased breast pump benefit non-par to 100% so in- and out-of-network coverage would be 100% without a deductible.
5. Changed language emergency services for clarification and federal NSA compliance.
6. Added the Emergencies outside of Hawai'i section for clarification and consistency with the prevalent plan.
7. Changed language for the physician visit in emergency room for clarification and federal NSA compliance.
8. Added the section for physician visits – emergency room; emergencies outside of Hawai'i for clarification and consistency with the prevalent plan.
9. Added language to durable medical equipment and supplies for clarification purposes.
10. Revised the section title to medical drugs and revised the language for consistency with the prevalent plan.
11. For orthodontic treatment for orofacial anomalies, language changed to refer to website for maximum consistent with the prevalent plan. HMAA would also add a direct link to the plan.
12. Preventive health section was renamed and revised for clarification and consistency with the prevalent plan.
13. Well-child care immunization language was added for clarification purposes.
14. The breast pump benefit description was changed to say, “Breast pumps are covered when purchased from a non-participating provider.”
15. Added an “Other (exclusion)” to services not covered – drugs to state, consistent with the prevalent plan, that products not approved by the FDA are excluded.
16. Added an exclusion stating air ambulances outside the United States are not covered.
17. Under Services not covered, provider type the definition of an immediate family member was revised for clarification purposes.

18. Changed language for coordination of benefits and third-party liability. Verbiage was added for clarification purposes.
19. In the glossary the definition of emergency was revised.
20. In the glossary, the definition of immediate family member was revised.
21. In addition to the submitted changes, HMAA would cover maternity at 100% in-network.
22. In addition to the submitted changes, HMAA would remove the postpartum visit limitation.
23. In addition to the submitted changes, HMAA would remove the deductible from the newborn circumcision benefit.
24. In addition to the submitted changes, HMAA would remove references to short-term and long-term physical and occupational therapy.
25. In addition to the submitted changes, HMAA would include a direct link to the information about the maximum for orthodontic treatment of orofacial anomalies.

Chair Pang asked if there were any questions. There were none.

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

1. Maternity care is covered at 100% in-network;
2. The limit on postpartum visits is removed;
3. Newborn circumcision is covered without a deductible;
4. References to "short-term" and "long-term" for physical and occupational therapy are removed; and
5. The online location of the maximum benefit for orthodontic treatment for orofacial anomalies is specified.

iv. 90/10 PPO

Hawai'i Western Management Group Inc (HWMG) informed the Department of changes made to HMAA's plan and requested continued approval under Section 393-7(a). Changes would be effective January 1, 2027.

Ms. Vitolo stated the following revisions were submitted for Council review.

1. Updated plan year.
2. Added reference to existing travel program.
3. Revised section title to "Medical Drugs" to be consistent with the prevalent plan.
4. Increased breast pump benefit non-par to 100% so in- and out-of-network coverage would be 100% without a deductible.
5. Changed language emergency services for clarification and federal NSA compliance.
6. Added the Emergencies outside of Hawai'i section for clarification and consistency with the prevalent plan.
7. Changed language for the physician visit in emergency room for clarification and federal NSA compliance.

8. Added the section for physician visits – emergency room; emergencies outside of Hawai'i for clarification and consistency with the prevalent plan.
9. Added language to durable medical equipment and supplies for clarification purposes.
10. Revised the section title to medical drugs and revised the language for consistency with the prevalent plan.
11. For orthodontic treatment for orofacial anomalies, language changed to refer to website for maximum consistent with the prevalent plan. HMAA would also add a direct link to the plan.
12. Preventive health section was renamed and revised for clarification and consistency with the prevalent plan.
13. Well-child care immunization language was added for clarification purposes.
14. The breast pump benefit description was changed to say, "Breast pumps are covered when purchased from a non-participating provider."
15. Added an "Other (exclusion)" to services not covered – drugs to state, consistent with the prevalent plan, that products not approved by the FDA are excluded.
16. Added an exclusion stating air ambulances outside the United States are not covered.
17. Under Services not covered, provider type the definition of an immediate family member was revised for clarification purposes.
18. Changed language for coordination of benefits and third-party liability. Verbiage was added for clarification purposes.
19. In the glossary the definition of emergency was revised.
20. In the glossary, the definition of immediate family member was revised.
21. In addition to the submitted changes, HMAA would cover maternity at 100% in-network.
22. In addition to the submitted changes, HMAA would remove the postpartum visit limitation.
23. In addition to the submitted changes, HMAA would remove the deductible from the newborn circumcision benefit.
24. In addition to the submitted changes, HMAA would remove references to short-term and long-term physical and occupational therapy.
25. In addition to the submitted changes, HMAA would include a direct link to the information about the maximum for orthodontic treatment of orofacial anomalies.

Chair Pang asked if there were any questions. There were none.

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

1. Maternity care is covered at 100% in-network;
2. The limit on postpartum visits is removed;
3. Newborn circumcision is covered without a deductible;
4. References to "short-term" and "long-term" for physical and occupational therapy are removed; and

5. The online location of the maximum benefit for orthodontic treatment for orofacial anomalies is specified.

v. Executive Plan Option (“EPO”)

Hawai'i Western Management Group Inc (HWMG) informed the Department of changes made to HMAA's plan and requested continued approval under Section 393-7(b). Changes would be effective January 1, 2027.

Ms. Vitolo stated the following revisions were submitted for Council review.

1. Updated plan year.
2. Added reference to existing travel program.
3. Revised section title to “Medical Drugs” to be consistent with the prevalent plan.
4. Increased breast pump benefit non-par to 100% so in- and out-of-network coverage would be 100% without a deductible.
5. Changed language emergency services for clarification and federal NSA compliance.
6. Added the Emergencies outside of Hawai'i section for clarification and consistency with the prevalent plan.
7. Changed language for the physician visit in emergency room for clarification and federal NSA compliance.
8. Added the section for physician visits – emergency room; emergencies outside of Hawai'i for clarification and consistency with the prevalent plan.
9. Added language to durable medical equipment and supplies for clarification purposes.
10. Revised the section title to medical drugs and revised the language for consistency with the prevalent plan.
11. For orthodontic treatment for orofacial anomalies, language changed to refer to website for maximum consistent with the prevalent plan. HMAA would also add a direct link to the plan.
12. Preventive health section was renamed and revised for clarification and consistency with the prevalent plan.
13. Well-child care immunization language was added for clarification purposes.
14. The breast pump benefit description was changed to say, “Breast pumps are covered when purchased from a non-participating provider.”
15. Added an “Other (exclusion)” to services not covered – drugs to state, consistent with the prevalent plan, that products not approved by the FDA are excluded.
16. Added an exclusion stating air ambulances outside the United States are not covered.
17. Under Services not covered, provider type the definition of an immediate family member was revised for clarification purposes.
18. Changed language for coordination of benefits and third-party liability. Verbiage was added for clarification purposes.
19. In the glossary the definition of emergency was revised.

20. In the glossary, the definition of immediate family member was revised.
21. In addition to the submitted changes, HMAA would remove the postpartum visit limitation.
22. In addition to the submitted changes, HMAA would remove references to short-term and long-term physical and occupational therapy.
23. In addition to the submitted changes, HMAA would include a direct link to the information about the maximum for orthodontic treatment of orofacial anomalies.

Chair Pang asked if there were any questions. There were none.

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

1. The limit on postpartum visits is removed;
2. References to “short-term” and “long-term” for physical and occupational therapy are removed; and
3. The online location of the maximum benefit for orthodontic treatment for orofacial anomalies is specified.

vi. PPO Plan

Hawai'i Western Management Group Inc (HWMG) informed the Department of changes made to HMAA's plan and requested continued approval under Section 393-7(b). Changes would be effective January 1, 2027.

Ms. Vitolo stated the following revisions were submitted for Council review.

1. Updated plan year.
2. Added reference to existing travel program.
3. Revised section title to “Medical Drugs” to be consistent with the prevalent plan.
4. Increased breast pump benefit non-par to 100% so in- and out-of-network coverage would be 100% without a deductible.
5. Changed language emergency services for clarification and federal NSA compliance.
6. Added the Emergencies outside of Hawai'i section for clarification and consistency with the prevalent plan.
7. Changed language for the physician visit in emergency room for clarification and federal NSA compliance.
8. Added the section for physician visits – emergency room; emergencies outside of Hawai'i for clarification and consistency with the prevalent plan.
9. Added language to durable medical equipment and supplies for clarification purposes.
10. Revised the section title to medical drugs and revised the language for consistency with the prevalent plan.
11. For orthodontic treatment for orofacial anomalies, language changed to refer to website for maximum consistent with the prevalent plan. HMAA would also add a direct link to the plan.

12. Preventive health section was renamed and revised for clarification and consistency with the prevalent plan.
13. Well-child care immunization language was added for clarification purposes.
14. The breast pump benefit description was changed to say, "Breast pumps are covered when purchased from a non-participating provider."
15. Added an "Other (exclusion)" to services not covered – drugs to state, consistent with the prevalent plan, that products not approved by the FDA are excluded.
16. Added an exclusion stating air ambulances outside the United States are not covered.
17. Under Services not covered, provider type the definition of an immediate family member was revised for clarification purposes.
18. Changed language for coordination of benefits and third-party liability. Verbiage was added for clarification purposes.
19. In the glossary the definition of emergency was revised.
20. In the glossary, the definition of immediate family member was revised.
21. In addition to the submitted changes, HMAA would remove the postpartum visit limitation.
22. In addition to the submitted changes, HMAA would remove references to short-term and long-term physical and occupational therapy.
23. In addition to the submitted changes, HMAA would include a direct link to the information about the maximum for orthodontic treatment of orofacial anomalies.

Chair Pang asked if there were any questions. There were none.

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

1. The limit on postpartum visits is removed;
2. References to "short-term" and "long-term" for physical and occupational therapy are removed; and
3. The online location of the maximum benefit for orthodontic treatment for orofacial anomalies is specified.

Next Meeting:

To Be Determined

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

Virtual Videoconference Meeting – Teams Meeting

Adjournment:

The meeting was adjourned at 2:46 p.m.

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Minutes approved as is.  
Minutes approved with changes.