IA-0000000576

Individual Application

Application ID	IA-0000000576	**Account**	
Application Status	Submitted	**Contact**	Amy Feeley-Austin

ACT 310 - Application for Grants

Legal Name of Requesting Org/Individual	West Hawaii Region Hospital Foundation	**DBA**	West Hawaii Region, HHSC (Kona and Kohala Hospitals)
Type of Business Entity	501 (C)(3) Non-Profit Corporation	**Existing Service(Presently in Operation)**	Yes
Mailing Address	79-1019 Haukapila St Kailua-Kona Kealakekua, Hawaii 96750 United States	**Amount of State Funds Requested**	$469,300.00
Island	Hawaii (Big Island)		

Program Overview

Program 1 Overview	
Program 2 Overview	
Program 3 Overview	
Department Notes	

Agency Eligbility

Recipient of Terminated Federal Funding	Unsure	**Able to Provide Documentation Evidence**	Yes
Serves Negatively Impacted Populations	Yes	**Narrative**	Federal reductions to Medicaid (Med-QUEST) funding will have severe and immediate consequences for the 70,000+ patients and communities served by Kona Community Hospital (KCH) and Kohala Hospital (KOH)—two of Hawai‘i’s most essential rural health facilities. Together, they provide 24/7 emergency and inpatient care for residents across West Hawai‘i, including trauma, stroke, cardiac, obstetric, oncology, and specialty services not otherwise available in the region. The Kona Service Area currently contains 63,339 residents and is projected to grow by 7% over the next five years. The 65+ age cohort, which represents +/- 24% of the current population and are typically the highest utilizers of healthcare services, is

projected to grow by 19% over the next five years. Because a significant portion of our patients ~49% rely on Medicare and/or Medicaid, a reduction in federal funding directly translates into lost operating revenue for both hospitals. Starting in 2026, WHR expects to see the 6.2% of uninsured patients we see increase dramatically, with most seeking care in KCH and KOH emergency rooms- facilities that already operate at close to or exceeding 100% capacity. As proposed cuts to Medicaid are implemented, KCH and Kohala Hospital stand to lose millions in reimbursements for these essential services. These losses will make it increasingly difficult to sustain critical programs, retain specialized staff, and maintain access to lifesaving care.

The resulting financial strain will be particularly devastating for Kohala Hospital, a CAH located in the remote rural town of Kapa‘au, where access to alternative providers is limited or non-existent. Reduced Medicaid reimbursement will force both facilities to absorb even higher levels of uncompensated and charity care, threatening their ability to operate at full capacity. Patients who lose coverage will delay or forgo preventive and chronic care, leading to higher rates of emergency visits, avoidable hospitalizations, and worsening health outcomes. WHR hospitals will then need to support patients coming through their doors with advanced stages of disease that are more costly and difficult to treat, regardless of the patient’s ability to pay. Administrative efforts to support financial counselling, reenrollment efforts and other efforts will rise.

As the main community hospitals on the West side of Hawai‘i Island, KCH (a sole community hospital) and Kohala Hospital form the safety net for a rapidly growing, aging, and income-constrained population. Federal funding reductions will not only jeopardize the financial viability of these hospitals, but also leave entire communities without timely access to emergency or specialty care—placing lives at risk and widening the health equity gap across rural Hawai‘i.

Importantly, WHR currently provides 15-17m in subsidy to Ali’i Health center- a 501c3 specialty clinic providing most of the specialty care access to the West Side of Hawaii Island. This facility, an affiliate of HHSC, is required (like WHR hospitals to provide care regardless of the patient’ s ability to pay. The organizations are interdependent, with AHC providing the majority of specialty hospital care including services that allow it to operate fully functioning

emergency services, and to operate as a level 3 trauma center.

Alii and WHR hospitals are in a Healthcare Professional Shortage Area (HPSA,) and have recently assessed shortages in nearly every specialty area. WHR and Ali'i have partnered to work on strategically aligning the organizations to increase provider capacity, which avoids costly and inconvenient interisland travel for specialty care like oncology, urology and cardiac care. Decreases to reimbursement at both WHR and Alii will doubly impact the ability of both organizations to keep specialty lines of business open on the West Side, as well as retaining fully functioning emergency services.

WHR has already experienced direct and indirect impacts of the government shutdown, and/or by the federal administration's rule changes and reductions in funding in a number of ways that will cause short- and long-term impacts. Some examples are as follows:
• Multiple staff members who act as key leaders in emergency management situations were dependent on FEMA disaster training in October and November of 2025 to increase the hospital's capacity for disaster and emergency management. These trainings have been cancelled/placed on hold at this time, with no communication as to next steps. This leaves WHR in a challenging situation despite it's role as one of the region's most critical assets in a disaster scenario.
• WHR grant submissions to federal programs have been abandoned without status updates, including one that has been pending since early 2025. Total funds that are potentially in jeopardy exceed 12m in 2025.
• WHR's community partners- including a considerable network of social service organizations, FQHCs and educational institutions- have reduced their programming or withdrawn from prior plans to advance collaborative partnerships that would benefit the region's hospitals and their patients, due to reductions in federal funding or worries about future reductions in funding.
o For example, Healthy Mothers Healthy Babies Coalition of Hawaii has lost funding for it's "Back to Sleep" Programming- a longstanding program that reduces Sudden Infant Death Syndrome, and has cut back its operations due to general uncertainty around federal funding. Our hospital expects to see increased instances of SIDS and worsening maternal and infant outcomes in our ED and OB areas starting in 2026, as the impact of reduced programming effect our

communities.
o We expect University of Hawaii (UH) cuts to negatively impact the number of new graduates from health careers programs, which will negatively impact our efforts to partner on workforce initiatives, and which will make our Healthcare Workforce more expensive and increase our dependence on travel staff.
• Quality measures, (including programs such as Hawaii Medicaid P4P and Medicare programs that have financial downside for WHR) continue to penalize WHR hospitals for ED bounce backs, Readmissions, and/or poor outcomes that are linked to a lack of community resources despite declining federal and state funds for those supporting programs. For example, the Hawaii Med-Quest 2025 program requires facilities to develop an unfunded, complex multi-year Health Equity Plan with deliverables and metrics. This plan will be linked to “earn-back” dollars- withheld Medicaid reimbursement that MQD dies to quality. Any funds WHR might have sought to address SDOH and health equity from the federal government have either been eliminated or are unavailable for health equity purposes per the current federal administration.
• Worries about constantly evolving, unfavorable federal rule changes make it difficult for the region to strategize toward more fiscally sustainable models of care that simultaneously provide improved access to care. These include;
o changes to 340b regulations that would reduce revenue for WHR
o movement to site-neutral payments that would reduce revenue for WHR
o changes to telehealth reimbursements that would reduce revenue for WHR and decrease access to care that is not available on island
o Changes to the Medicaid DSH program that would negatively impact WHR
• DSH percentage is critical for preserving access to the 340B Drug Pricing Program. The most common method for a hospital to qualify for DSH adjustments is through a formula called the DSH patient percentage. This percentage reflects the hospital’s inpatient Medicaid population and Medicare patients who also receive Supplemental Security Income (SSI).
• Maintaining that DSH percentage is becoming increasingly difficult. Ongoing and proposed Medicaid cuts at both the state and federal levels threaten to lower the metrics hospitals rely on to qualify for DSH funding.

Date Funding Stopped 1/1/2026

Amount of Other Funds Available

State Fund Total Amount	$0.00	**County Fund Total Amount**	$0.00
Federal Fund Total Amount	$0.00	**Private/Other Fund Total Amount**	$100,000.00
Total Amount of State Grants	$0.00	**Unrestricted Assets**	$0.00

Contact Person for Matters Involving this Application

Applicant Name	amy feeley-austin	**Applicant Title**	President
Applicant Phone	(508) 246-8167	**Applicant Email**	afeeleyaustin@hhsc.org

State of Hawaii Eligibility

Organization is Licensed or Accredited	Yes	**Nonprofit is a 501c3**	Yes
Complies with Anti-Discrimination Laws	Yes	**Nonprofit has Governing Board**	Yes
Will not Use State Funds for Lobbying	Yes	**Is Incorporated Under Laws of State**	Yes
Will Allow Access to Audit Records	Yes	**Has Bylaws and Policies**	Yes

Account Information

Organization Name	West Hawaii Region Hospital Foundation	**Organization DBA**	Kona Community Hospital, Kohala Hospital, West Hawaii Region
EIN	[redacted]	**Street**	79-1019 Haukapila Street
Account Email	afeeleyaustin@hhsc.org	**City**	Kealakekua
Account Phone	(508) 246-8167	**State**	HI
Website	https://whrhospitalfoundation.org/	**Zip**	96750
Mission Statement	The West Hawaii Region Hospital Foundation advances healthcare excellence by funding programs, services, and improvements that enhance patient care, promote wellness, and ensure access for all. The West Hawai'i Region (WHR) of HHSC, which includes Kona Community Hospital and Kohala Hospital, provides healthcare for over 70,000 residents on the West Side of Hawai'i Island. WHR provides a variety of services, including emergency care, oncology, imaging, labor and delivery, surgery, and more. For over 100 years, WHR has been committed to serving the community with high-quality care and impactful healthcare initiatives.		

Point of Contact

Point of Contact First Name	Amy	**Point of Contact Last Name**	Feeley-Austin
Point of Contact Title	President	**Point of Contact Email**	afeeleyaustin@hhsc.org
Point of Contact Phone	(508) 246-8167		

Leadership

Leadership First Name	Jane	**Leadership Last Name**	Clement
Leadership Title	Secretary	**Leadership Email**	jclement@hhsc.org
Leadership Phone	(808) 756-3103		

Background and Summary

Applicant Background

The Foundation is the official 501(c)(3) organization supporting The West Hawaii Region of Hawaii Health Systems Corporation.

Hawaii Health Systems Corporation serves as the “Safety Net” for Neighbor Island Acute Care in the State of Hawaii. Our facilities provide services to all, regardless of whether an individual has health insurance or the ability to pay.

Within the West Hawaii Region, HHSC operates two key facilities: Kona Community and Kohala Hospitals.

Kona Community Hospital "KCH" is a Level III trauma, 94-bed full-service acute care hospital with 24-hour emergency services, proudly serving the West Hawaii community and has undergone several iterations of hospital facilities at the current site in Kealakekua (South Kona) since 1914. KCH’s most recent facility was constructed in 1974; the hospital is currently initiating significant capital improvement projects to bring up to date, safeguard, and expand upon services for the region.

Kohala Hospital, a Critical Access Hospital located in the rural town of Kapaau (North Kohala), opened its doors to patients on April 1, 1917. It complements KCH by providing emergency services and long-term care to the Kohala area, enhancing the region's healthcare resilience. Given the rural and isolated nature of the island, these two facilities are interdependent, often relying on each other for resources and support to ensure comprehensive care for the region’s residents.

Launched in 2024, the West Hawaii Region Hospital Foundation supports the mission and priorities of both storied hospitals, which have served as a cornerstone of healthcare delivery in West Hawaii for over 100 years. As the region continues to serve a growing and diverse population, the Foundation was formed to expand access to philanthropic and grant funding, enabling the hospital to meet the evolving health needs of the West Hawaii community.

The Foundation’s sole mission is to advance public health by supporting programs, operations, and capital projects at West Hawaii Region that align with the hospital’s long-standing commitment to high-quality, patient-centered care. While the Foundation is a newly formed entity, it draws on the deep expertise and leadership of the region's senior management and governing board to ensure strategic alignment, operational integrity, and community trust.

Funding Request Purpose

To replace anticipated funds lost in 2026 related to uncompensated care, due to reductions in state and federal funds/rollbacks to Medicare and Medicaid and other factors. The Hospitals of WHR struggle to keep adequate care close to home- both through its provision of hospital care and specialty care on Hawaii Island. Already budgeted at a loss, any additional losses in operational funds will further reduce the dollars WHR has to re-invest in regular costs such as replacement of equipment, maintenance of facilities and more. WHRHF was stood up to support both Kona and Kohala Hospitals in meeting ongoing needs, even during challenging times. WHRHF anticipates these funds would be used for the purchase of equipment that needs to be replaced in 2026, which it will not be able to afford due to increase use of Emergency Services and decreased reimbursement.

Geographic Coverage Served

The West Side of Hawaii Island; From Naalehu to the South, to Kohala in the North. Attachments provided reflect service area.

Public Purpose or Need Served

As the main community hospitals on the West side of Hawai‘i Island, KCH (a sole community hospital) and Kohala Hospital form the safety net for a rapidly growing, aging, and income-constrained population. Federal funding reductions will not only jeopardize the financial viability of these hospitals but also leave entire communities without timely access to emergency or specialty care—placing lives at risk and widening the health equity gap across rural Hawai‘i.

Importantly, WHR currently provides 15-17m in subsidy to Ali'i Health center- a 501c3 specialty clinic providing most of the specialty care access to the West Side of Hawaii Island. This facility, an affiliate of HHSC, is required (like WHR hospitals to provide care regardless of the patient' s ability to pay. The organizations are interdependent, with AHC providing the majority of specialty hospital care including services that allow it to operate fully functioning emergency services, and to operate as a level 3 trauma center.

Alii and WHR hospitals are in a Healthcare Professional Shortage Area (HPSA,) and have recently assessed shortages in nearly every specialty area. WHR and Ali'i have partnered to work on strategically aligning the organizations to increase provider capacity, which avoids costly and inconvenient interisland travel for specialty care like oncology, urology and cardiac care. Decreases to reimbursement at both WHR and Alii will doubly impact the ability of both organizations to keep specialty lines of business open on the West Side, as well as retaining fully functioning emergency services.

Target Population Served

The Kona Service Area currently contains 63,339 residents and is projected to grow by 7% over the next five years. The 65+ age cohort, which represents +/- 24% of the current population and are typically the highest utilizers of healthcare services, is projected to grow by 19% over the next five years. Because a significant portion of our patients ~49% rely on Medicare and/or Medicaid, a reduction in federal funding directly translates into lost operating revenue for both hospitals.
Starting in 2026, WHR expects to see the 6.2% of uninsured patients we see increase dramatically, with most seeking care in KCH and KOH emergency rooms- facilities that already operate at close to or exceeding 100% capacity. As proposed cuts to Medicaid are implemented, KCH and Kohala Hospital stand to lose millions in reimbursements for these essential services. These losses will make it increasingly difficult to sustain critical programs, retain specialized staff, and maintain access to lifesaving care.

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Summary and Outcomes

Measure(s) of Effectiveness

https://data.cms.gov/provider-data/topics/hospitals/overall-hospital-quality-star-rating/
See link &/or attachment.

Projected Annual Timeline

We would anticipate the purchase of replacement equipment including gurneys/monitors, lighting and other essential equipment by ~6mo. from the time of award.

Quality Assurance and Evaluation Plans

Currently, KCH collects data on ED utilization, throughput, patient experience, ED bouncebacks, CAUTI, CLABSI, Falls, etc. These generally are standard, benchmarked measures that allow the hospitals to compare their performance with State and National Averages. Information about specific measures is found here: https://data.cms.gov/provider-data/topics/hospitals/overall-hospital-quality-star-rating/
KCH and KOH employ a small but dedicated team of QI specialists to collect, monitor and assess this data. The hospitals have extensive procedures and programming that address quality improvement for unsatisfactory performance, which meet or exceed the requirements of Hawaii DOH, MedQuest, CMS and the Joint Commission.

Scope of Work

This specific request is for equipment for Kona and Kohala's Emergency departments. Kona and Kohala Hospitals shall provide-unrestricted- essential emergency care to any individual passing through its doors. This would entail the provision of 50-110+ Emergency Visits daily at KCH and approximately 100 visits a month at Kohala. As a Level 3 Trauma Center, KCH would continue to provide transfer to ~60 Patients a month to the level 1 trauma center in Oahu via our ED/helipad. WHRHF would be able to provide evidence to the funder of:
*Daily and Monthly Visits
*Revenues and data on insurance coverage or non-coverage including increases to uncompensated care
*STARS ratings and related hospital data including readmissions; ED bounce backs and HCHAPS Scores

Financial Information

Q1 Requested Amount	$0.00	**Q3 Requested Amount**	$0.00
Q2 Requested Amount	$469,300.00	**Q4 Requested Amount**	$0.00
Sources of Funding	Please note, WHRHF operates in support of Kona and Kohala Hospitals as a 509(a)3 supporting organization under the 501(c)(3) tax code. Established in 2024, and given 501c status in July 2025, it has not yet raised significant funds but is attaching it's annual budget, which is estimated as a y1 budget. Importantly, the majority of funds (state, federal and operating) leveraged by Kona and Kohala Hospitals are found in their regional annual budget. With the region's permission, WHRHF is attaching this document. As a state agency, WHR and its hospitals are considered a "Public benefit corporation of the State of Hawaii" and not a 501(c) 3- thus, the WHR is unable to apply as are Kona and Kohala Hospitals.	**State and Federal Tax Credits**	0
State and Federal Contracts and Grants	0	**Prior FY Balance of Unrestricted Assets**	0

Experience, Capability, and Personnel

Skills and Experience

WHRHF is a new foundation recognized under the 501(c)3 tax code as a 509(a)(3) supporting organization of one or more “other public charities.” In this case, WHRHF was developed to support the West Hawaii Region of Hawaii Health Systems Corporation, and it’s hospitals and affiliates, which are “public benefit corporation of the state of Hawaii. While the foundation itself does not have a long history, it’s “supporting” framework means that the board is controlled by leadership of WHR, who are responsible for the governance and leadership of the region and its hospitals.

• Amy Feeley-Austin, Chair, President, and Director of WHRHF, is also the Chief Operations Officer of KCH.
• Dawnell Buell, Vice President, Treasurer, and Director is also the Chief Financial Officer of KCH.
• Jane Clemens, Secretary and Director, serves as Regional Director of Marketing & Legislative Strategy for KCH.
• Clayton McGhan, Director, is the Chief Executive Officer of KCH.
• Gino Amar, Director, is the Executive Director of Kohala Critical Access Hospital, which operates under KCH.
• Dan Rick, Director, is the Board President of the KCH Board of Directors.
• Sarah Hathaway, Director, is the Board Vice President of the KCH Board of Directors.

In alignment with this 509(a)(3) designation, certain members of the Board of Directors of West Hawaii Region Hospital Foundation also serve in leadership or governance roles within Kona Community Hospital. This dual role structure ensures:
• Alignment of Mission and Oversight: Board members representing both entities provide continuity in strategic direction and fiduciary oversight.
• Efficiency and Compliance: Shared leadership facilitates compliance with IRS requirements for supporting organizations, confirming that West Hawaii Region Hospital Foundation operates solely to further the charitable purposes of KCH.
• Strengthened Accountability: Dual representation strengthens transparency, accountability, and stewardship of resources between the hospital and the foundation.

WHR’s affiliated Hospitals (Kona and Kohala) have served the community for over 100 years, and are respectively a sole community hospital and a critical access hospital, as designated by CMS. Both facilities have deemed status with CMS under Hawaii Department of Health. Kona Community Hospital is Joint Commission accredited- a program that guarantees a high degree of competency in running medical institutions; Accreditation includes regular site visits that rigorously inspect every facet of hospital operations including facilities, staff training and competency, HR, quality programming, purchasing programming, emergency readiness, and more. WHR’s hospitals include CLIA certified labs. Their pharmacies (which are 340b designated) meet State and federal requirements including compliance with the DEA for controlled substances. KCH is also a level 3 trauma center- the certification of which includes rigorous requirements related to the care of patients with all kinds of trauma, usually through the emergency department.

Because the hospitals are state hospitals, both follow rigorous purchasing and contracting guidelines as

required and are staffed by contracting and procurement experts familiar with state and federal regulations. Annual revenues related to the purchasing of equipment and supplies for the emergency room are in the millions, and the hospitals have ample experience complaint procuring million dollar equipment. Recent examples will include:
-purchase of monitors using money from a donation ~1,280,000.00
-purchase of CT ~1,4000,000

Facilities

Within the West Hawaii Region, HHSC operates two key facilities: Kona Community and Kohala Hospitals. Kona Community Hospital "KCH" is a Level III trauma, 94-bed full-service acute care hospital with 24-hour emergency services, proudly serving the West Hawaii community and has undergone several iterations of hospital facilities at the current site in Kealakekua (South Kona) since 1914. KCH's most recent facility was constructed in 1974; the hospital is currently initiating significant capital improvement projects to bring up to date, safeguard, and expand upon services for the region. It is joint commission accredited.
Kohala Hospital, a Critical Access Hospital located in the rural town of Kapaau (North Kohala), opened its doors to patients on April 1, 1917. It complements KCH by providing emergency services and long-term care to the Kohala area, enhancing the region's healthcare resilience. Given the rural and isolated nature of the island, these two facilities are interdependent, often relying on each other for resources and support to ensure comprehensive care for the region's residents.

Proposed Staffing and Service Capacity

WHR's affiliated Hospitals (Kona and Kohala) have served the community for over 100 years, employ over 700 professionals across the region. Both facilities have deemed status with CMS under Hawaii Department of Health. Kona Community Hospital is Joint Commission accredited- a program that guarantees a high degree of competency in running medical institutions; Accreditation includes regular site visits that rigorously inspect every facet of hospital operation including staffing adequacy, staff training and competency, quality programming, checks on licensure and compliance with state and federal regulations and more. WHR's hospitals include CLIA certified labs. Their pharmacies (which are 340b designated) meet State and federal requirements including compliance with the DEA for controlled substances. All provider groups servicing WHR are regularly audited to ensure their providers are licensed to practice in the state of Hawaii, and hold active DEA licenses. Our rigorous credentialling processes which meet joint commission standards include peer review of all new and renewing providers. Human resources follows each licensed RN, social worker and other licensed professionals to ensure licenses are active and unrestricted. Because the hospitals are state hospitals, both follow rigorous purchasing and contracting guidelines as required and are staffed by contracting and procurement experts familiar with state and federal regulations. WHR's leadership team is of seasoned healthcare professionals, and is overseen by a capable, experienced board of directors.

Staff Position(s) and Compensation

There are no paid employees of WHRHF

Other Information

Pending Litigation

n/a

Special Licensure or Accreditations

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Private Educational Institutions

n/a

Confirmations

Documentation of Federal Impacts ✓

Hawaii Compliance Express Certificate ☐

IRS Determination Letter ✓

Records Retention Policy ✓

Authorized Representative Certification ✓

Active Status with the Hawaii AG ✓

Certificate of Good Standing by the DCCA ✓

By-laws or Corporate Resolutions ✓

Signee Title President

System Information

Application Type	Act 310 Nonprofit Grant Application	**Applied Date**	10/23/2025, 9:24 AM
Owner Name	Grants Management	**Category**	Grant Application
Created By	Amy Feeley-Austin, 10/20/2025, 5:20 PM	**Created Date**	10/20/2025, 5:20 PM
Last Modified By	Amy Feeley-Austin, 10/23/2025, 9:24 AM	**Last Modified Date**	10/23/2025, 9:24 AM

Files

irs letter
Last Modified **10/23/2025, 9:23 AM**
Created By **Amy Feeley-Austin**

cert of good standing
Last Modified **10/23/2025, 9:08 AM**
Created By **Amy Feeley-Austin**

West Hawaii Region Hospital Foundation - BYLAWS
Last Modified **10/23/2025, 9:02 AM**
Created By **Amy Feeley-Austin**

Sustainability Plan
Last Modified **10/22/2025, 5:09 PM**
Created By **Amy Feeley-Austin**

org chart
Last Modified **10/22/2025, 4:49 PM**
Created By **Amy Feeley-Austin**

BUDGET JUSTIFICATION - EQUIPMENT AND MOTOR VEHICLES (1)
Last Modified **10/22/2025, 4:46 PM**
Created By **Amy Feeley-Austin**

BUDGET JUSTIFICATION - PERSONNEL SALARIES AND WAGES
Last Modified **10/22/2025, 4:46 PM**
Created By **Amy Feeley-Austin**

(Att X) HHSC CEO Report to Regional Boards Open Session (7-7-25)
Last Modified **10/22/2025, 4:36 PM**
Created By **Amy Feeley-Austin**

(Att 2) Rural-Hospitals-at-Risk-Cuts-to-Medicaid-Would-Further-Threaten-Access
Last Modified **10/22/2025, 4:36 PM**
Created By **Amy Feeley-Austin**

WHRHF BOD List
Last Modified **10/21/2025, 8:30 AM**
Created By **Amy Feeley-Austin**

EIN [redacted] 2024aHIRegistration
Last Modified **10/23/2025, 9:16 AM**
Created By **Amy Feeley-Austin**

rec ret policy
Last Modified **10/23/2025, 9:02 AM**
Created By **Amy Feeley-Austin**

Sustainability Plan
Last Modified **10/23/2025, 9:00 AM**
Created By **Amy Feeley-Austin**

Sustainability Plan
Last Modified **10/22/2025, 5:07 PM**
Created By **Amy Feeley-Austin**

FY25_26 WHRHF Operating Budget v7
Last Modified **10/22/2025, 4:47 PM**
Created By **Amy Feeley-Austin**

26 Operating Budgets
Last Modified **10/22/2025, 4:46 PM**
Created By **Amy Feeley-Austin**

proof of 990
Last Modified **10/22/2025, 4:43 PM**
Created By **Amy Feeley-Austin**

(Att 1) Legislative-Advisory-AHA-Summary-of-One-Big-Beautiful-Bill-Acts-Provisions-Impacting-Hospitals-and-Health-Systems
Last Modified **10/22/2025, 4:36 PM**
Created By **Amy Feeley-Austin**

(Att 3) Legislative-Advisory-Key-Highlights-of-the-Final-One-Big-Beautiful-Bill-Act
Last Modified **10/22/2025, 4:36 PM**
Created By **Amy Feeley-Austin**

FY25_26 WHRHF Operating Budget v7
Last Modified **10/20/2025, 6:07 PM**
Created By **Amy Feeley-Austin**

Budget Request By Source of Funds

Last Modified	**10/20/2025, 6:02 PM**
Created By	**Amy Feeley-Austin**