

HAWAI'I PREPAID HEALTH CARE ADVISORY COUNCIL

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

AGENDA

Date: September 24, 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 (Link below)

<https://teams.microsoft.com/meet/263764848691165?p=wGH1kEeRepOE2yAu3g>

Meeting ID: 263 764 848 691 165

Passcode: FL7tJ73o

Phone (Audio Only): +1 808-829-4853

Phone Conference ID: 342 042 988#

Agenda: The agenda was posted to the State electronic calendars as required by §92-7(b), Hawai'i Revised Statutes ("HRS").

If you wish to submit written testimony on any agenda item, please email your testimony to DLIR.DCD.PLANS@HAWAII.GOV or by hard copy mail to: Attn: Hawai'i Prepaid Health Care Advisory Council, 830 Punchbowl Street, Room 209, Honolulu, HI 96813. We request submission of testimony at least 24 hours prior to the meeting to ensure that it can be distributed to the Council members.

INTERNET ACCESS:

To view the meeting and provide live oral testimony, please use the link at the top of the agenda. You will be asked to enter your name. The Council requests that you enter your full name, but you may use a pseudonym or other identifier if you wish to remain anonymous. You will also be asked for an email address. You may fill in this field with any entry in an email format, e.g., *****@***mail.com.

Your microphone will be automatically muted, and video will be turned off. When the Chairperson asks for public testimony, you may click the Raise Hand button found on your Teams screen to indicate that you wish to testify about an agenda item. You will individually be enabled to unmute your microphone, turn on your video if you choose to, and testify. When recognized by the Chairperson, please unmute your microphone and turn on your video if you choose to before speaking and mute your microphone and turn off your video after you finish speaking.

PHONE ACCESS:

If you cannot get internet access, you may get audio-only access by calling the Teams Phone Number listed at the top on the agenda. Upon dialing the number, you will be prompted to enter the Phone Conference ID which is also listed at the top of the agenda. After entering the Phone Conference ID, you will be asked to wait to be admitted into the meeting.

When the Chairperson asks for public testimony, you may indicate you want to testify by entering "*" and then "5" on your phone's keypad. After entering "*" and then "5", a voice prompt will let you know that the host of the meeting has been notified. When recognized by the Chairperson, you may unmute yourself by pressing "*" and then "6" on your phone. A voice prompt will let you know that you are unmuted. Once you are finished speaking, please enter "*" and then "6" again to mute yourself.

For both internet and phone access, when testifying, you will be asked to identify yourself and the organization, if any, that you represent. Each testifier will be limited to five minutes of testimony per agenda item. Pursuant to §92-3.7(e), HRS, the Council may remove or block any person who willfully disrupts or compromise the conduct of the meeting.

If connection to the meeting is lost for more than 30 minutes, the meeting will be continued on a specified date and time. This information will be provided on the Council's website at <https://labor.hawaii.gov/dcd/home/events/>.

Instructions to attend State of Hawaii virtual council meetings may be found online at: <https://labor.hawaii.gov/dcd/files/2021/04/TeamsInstructions.pdf>.

I. Call Meeting to Order

II. Approval of the Minutes

- A. April 16, 2026, Open Session Meeting Minutes

III. Review of Plans

- A. Kaiser Foundation Health Plan, Inc.
 - i. KP HI Platinum 0/15
 - ii. KP HI Platinum 0/20
 - iii. KP HI Platinum 0/20 Rx Ded
 - iv. KP Platinum Added Choice
 - v. Kaiser Permanente Group Added Choice Preferred
 - vi. KP HI Gold 300/20 - B
- B. Kaiser Permanente Insurance Company ("KPIC")
 - i. KP Platinum Added Choice
 - ii. KP Added Choice Preferred

C. United Health Care

- i. United HealthCare Options PPO
- ii. United HealthCare Options PPO – SB

D. Charter Communications

- i. Hawaii Employees Charter Communications, Inc. Health Benefit Program

IV. Next Meeting: TBD
Virtual Videoconference Meeting – Teams Meeting

and

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

V. Adjournment

Auxiliary aid/services and reasonable accommodations for people with disabilities are available upon request. For Teletypewriters (TTY) and Telecommunications Devices for the Deaf (TDD), dial 711 then ask for (808) 586-9188. Requests for accommodations should be submitted via email to DLIR.DCD.PLANS@HAWAII.GOV or by calling the Plans Branch at (808) 586-9188 (voice) as soon as possible. Such requests should include a detailed description of the accommodation needed. In addition, please include a way for the Plans Branch to contact the requester if more information is needed to fulfill the request. Last minute requests will be accepted but may not be possible to accommodate. Upon request, this notice is available in alternate formats.