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# A BILL FOR AN ACT

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RELATING TO AIR MEDICAL SERVICES.

**BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF HAWAII:**

1       SECTION 1. The legislature finds that air medical services  
2   are an essential component of Hawaii's emergency medical systems  
3   of care, healthcare infrastructure, and all-hazards disaster  
4   preparedness. Hawaii's geographic isolation, multi-island  
5   structure, rural communities, and limited access to specialty  
6   and tertiary care on neighbor islands make timely air medical  
7   transport critical to providing equitable access to lifesaving  
8   care.

9       The legislature further finds that demand for emergency  
10   aeromedical and interfacility air medical transport services has  
11   increased substantially over the past decade, with annual flight  
12   volumes exceeding pre-2020 levels by more than one thousand  
13   transports. However, statutory authority, governance  
14   structures, and department of health staffing dedicated to air  
15   medical services have not kept pace, resulting in fragmented  
16   coordination, prolonged transport times, and inefficient  
17   systems.



1       The legislature recognizes that the emergency medical  
2 services and injury prevention systems branch of the department  
3 of health lacks permanent, dedicated air medical staffing to  
4 support statewide coordination, regulatory oversight, quality  
5 improvement, data governance, and disaster readiness.

6       The legislature further finds that statewide air medical  
7 performance data demonstrate persistent delays that exceed  
8 nationally recognized benchmarks for rural and remote emergency  
9 care, reflecting structural gaps in coordination and governance  
10 rather than performance issues with isolated providers.

11       The legislature acknowledges that nationally recognized  
12 best practices emphasize centralized governance, clinically  
13 driven coordination, continuous quality improvement, and  
14 integration with trauma, stroke, cardiac, acute care, emergency  
15 medical systems, and disaster response. In an island state, air  
16 medical services are a core public health, public safety, and  
17 emergency preparedness function.

18       Accordingly, the purpose of this Act is to:

- 19       (1) Establish permanent, dedicated air medical staffing  
20             within the emergency medical services and injury  
21             prevention systems branch of the department of health;



- 1           (2) Strengthen statewide governance, coordination, and  
2           oversight of emergency aeromedical and interfacility  
3           air medical services;
- 4           (3) Support data-driven quality improvement,  
5           accountability, and performance monitoring;
- 6           (4) Enhance disaster preparedness and multi-island  
7           response through clearly defined authority and  
8           coordinated air medical operations; and
- 9           (5) Promote health equity by improving timely access to  
10          emergency medical care for rural and neighbor island  
11          communities.

12          SECTION 2. Chapter 321, Hawaii Revised Statutes, is  
13          amended by adding a new section to part XVIII to be  
14          appropriately designated and to read as follows:

15          "§321-        Statewide air medical services program; staffing  
16          and authority.   (a) There is established within the  
17          department's emergency medical services and injury prevention  
18          system branch, a statewide air medical services program to  
19          provide governance, coordination, oversight, quality  
20          improvement, and disaster readiness for the State's emergency  
21          aeromedical and interfacility air medical transport services.



1        (b) The department shall establish and maintain permanent  
2 positions to administer the program, including:

3        (1) A state air medical director, who shall be a physician  
4 licensed in the State and having experience in  
5 emergency medicine, trauma care, or critical care  
6 transport, who shall provide statewide clinical and  
7 medical oversight of air medical services;

8        (2) A state air medical program manager, who shall be  
9 responsible for program administration; policy  
10 development; system planning; interagency  
11 coordination; and integration of air medical services  
12 with emergency medical services, trauma systems, and  
13 healthcare facilities; and

14        (3) An air medical coordinator, who shall support  
15 operational coordination, data oversight, compliance  
16 monitoring, performance improvement activities, and  
17 coordination with licensed air medical providers,  
18 county emergency medical services agencies, hospitals,  
19 and emergency management partners.

20        (c) The positions established pursuant to subsection (b)  
21 shall be permanent and recurring and shall not be contingent



1 upon temporary programs, pilot projects, or time-limited  
2 funding.

3 (d) The statewide air medical services program, under the  
4 direction of the director of health, may:

5 (1) Provide statewide clinical governance and medical  
6 direction for emergency aeromedical and interfacility  
7 air medical services;

8 (2) Develop, adopt, and implement statewide air medical  
9 policies, procedures, and clinical protocols  
10 consistent with nationally recognized standards;

11 (3) Coordinate emergency aeromedical and interfacility air  
12 medical transport services across counties to improve  
13 timeliness, health equity, and access to care;

14 (4) Oversee the participation of licensed air medical  
15 providers in data-based quality improvement programs;

16 (5) Support statewide disaster preparedness, response, and  
17 recovery activities involving air medical transport,  
18 including multi-island and mass-casualty incidents;  
19 and

20 (6) Coordinate with county emergency medical services  
21 agencies, hospitals, trauma centers, stroke centers,



1           acute care facilities, emergency management agencies,  
2           and other public and private partners.

3           (e) The department may adopt rules pursuant to chapter 91  
4           necessary to implement this section.

5           (f) As a condition of licensure, all air medical providers  
6           operating within the State shall cooperate with and participate  
7           in statewide air medical coordination, data reporting, and  
8           quality improvement activities as required by the department.

9           (g) The statewide air medical services program shall  
10          coordinate with the state emergency medical services advisory  
11          committee and may establish advisory or quality improvement  
12          committees as necessary to fulfill its statutory  
13          responsibilities.

14          (h) The department shall establish and assess annual air  
15          medical ambulance licensure and accreditation fees for all air  
16          medical providers operating within the State.

17          The fees shall be reasonable, non-refundable, and  
18          sufficient to fully cover the costs associated with:

19          (1) Administration and oversight of the statewide air  
20          medical services program;



1        (2) Licensure, accreditation verification, compliance  
2        monitoring, and enforcement activities;

3        (3) Statewide air medical coordination and quality  
4        improvement initiatives;

5        (4) Data collection, analysis, and reporting requirements;  
6        and

7        (5) Coordination and integration with state and county  
8        emergency management, emergency medical services, and  
9        disaster preparedness partners.

10       The fees collected pursuant to this subsection shall be  
11       deposited into the emergency medical services special fund  
12       established pursuant to section 321-234 and shall be used solely  
13       for the purposes of administering and supporting the statewide  
14       air medical services program and staff, and its emergency  
15       management coordination functions."

16       SECTION 3. Section 321-234, Hawaii Revised Statutes, is  
17       amended by amending subsection (b) to read as follows:

18       "(b) The moneys in the special fund shall be distributed  
19       as follows:

20       (1) Beginning with fiscal year 2021-2022, \$3,500,000 shall  
21       be distributed each fiscal year to a county operating



1 a county emergency medical services system pursuant to  
2 part XI of chapter 46 for the operation of that  
3 system; [and]

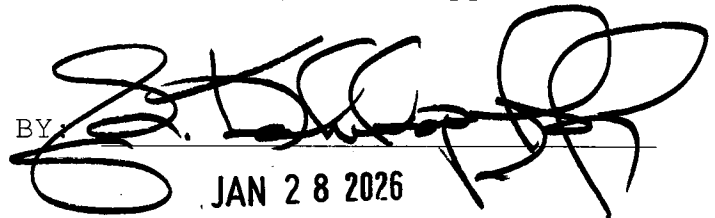
4 (2) Fees remitted pursuant to section 321- shall be  
5 used solely for the purposes of administering and  
6 supporting the statewide air medical services program  
7 and staff, and its emergency management coordination  
8 functions; and

9 ~~[-(2)-]~~ (3) The remainder shall be distributed to the  
10 department for operating the system established  
11 pursuant to this chapter, including enhanced and  
12 expanded services, and shall not be used to supplant  
13 funding for emergency medical services authorized  
14 prior to July 1, 2004."

15 SECTION 4. Statutory material to be repealed is bracketed  
16 and stricken. New statutory material is underscored.

17 SECTION 5. This Act shall take effect upon its approval.

18 INTRODUCED BY:

  
JAN 28 2026





# H.B. NO. 2508

**Report Title:**

DOH; State Emergency Medical Services System; Statewide Air Medical Services Program; Emergency Medical Services Special Fund

**Description:**

Establishes the Statewide Air Medical Services Program within the Department of Health, Emergency Medical Services and Injury Prevention Systems Branch to coordinate and strengthen air medical services. Provides for an air medical director, an air medical program manager, and an air medical coordinator. Provides for annual licensure and accreditation fees to be deposited into the Emergency Medical Services Special Fund for costs of the program.

*The summary description of legislation appearing on this page is for informational purposes only and is not legislation or evidence of legislative intent.*

