



Lost The Problem Health Aid For TT Faces Cutback

Trust Territory health services department officials have been dismayed to learn the Naval Hospital on Guam has more than doubled the rate it is charging for TT patients being referred here for treatment of health serious problems.

The rate charged to the TT for inpatient services at the Naval Hospital and at Tripler Army Hospital in Hawaii—where other TT patients are sometimes transferred—has gone from \$42 a day to \$126 a day, according to a story issued on Saipan by the Micronesia News Service.

TT officials said the increase comes at a time when the medical referral program is already operating in the red—and says the TT will have to cut the number of its patient referrals drastically to compensate.

Said hospital administration specialist Greg Calvo: "This leaves us with nothing but dire emergencies."

Health Services Director Dr. Masao Kumangai said last year the TT spent \$740,000 for medical referrals at the \$42 per day rate, when the budget was \$600,000. This year they are still budgeted for \$600,000.

Calvo explained that the referral program pays both transportation and inpatient

A Navy spokesman here had no comment on the subject.

Under the referral program last year, some 600 patients were sent outside the TT for services which could not be provided by Micronesia's medical facilities. About one-fourth of these went to Hawaii—to Tripler but also to some civilian facilities—and the remainder went to Guam, almost all of them to Guam's Naval Hospital. Dr. Kumangai pointed out that the number of patient visits to TT facilities during the year exceeded 329,000, so by comparison the number of referrals is not very high. "But the cost is great," he added.

"The Trust Territory is now reasonably self-sufficient in medical care," Kumangai said. "It's only when you come to certain specialties, or such

things as radiological therapy or severe cardiac involvement, that we must seek outside help. We just cannot afford to have every specialist in Micronesia."

The doctor emphasized cutting back referrals will not be easy. "Doctors will have to identify cases where treatment can be delayed and set priorities. Most types of elective surgery will have to be delayed until we get the money. We will just have to become even more self-sufficient," he added.

He agreed that asking doctors to place budget considerations uppermost in their minds is not an ideal situation from a medical point of view. But he added that in "life-or-death" situations the welfare of the patient will always come first, regardless of cost.

Dr. Kumangai and his staff are also working on a revised schedule of medical fees charged to patients within Micronesia, which they plan to present next week to the regular meeting of the TT Health Planning Council on Saipan. An increase of two to three times the present rates is tentatively planned, as well as instituting the new rates TT-wide. At present various districts set their own rates, and charges range from nothing up to around fifty cents per visit for Micronesians and \$2 or \$3 a visit for expatriates.

Officials hope by both increasing and standardizing these fees they can help to offset the anticipated deficit in the medical referral program. (Continued on page 10)

(Continued from page 1)

well as an equally serious deficit in the budget for medicines and drugs.

Other possibilities for raising more money for health care in Micronesia, including increased taxes, are also being considered.

Dr. Kumangai said the TT has also taken steps to reduce the need for one type of medical referral, patients suffering from kidney failure. By the middle of next year, the government hopes to have a kidney dialysis center established, probably in the Marshall Islands, so that patients needing this type of treatment will not need to be sent to Honolulu.

In summing up the current, serious situation, Dr. Kumangai, the first Micronesian doctor ever to head the Trust Territory's

doctors within the territory does not always reduce referral costs.

"We once thought that getting more specialists would reduce the referrals," he said. "Just the opposite has been the case. Through improved diagnostic techniques, with better doctors, we have had better identification of serious cases and, in effect, more referrals."