



Commonwealth of the Northern Marianas Islands
Office of the Governor
CNMI Medical Referral Services

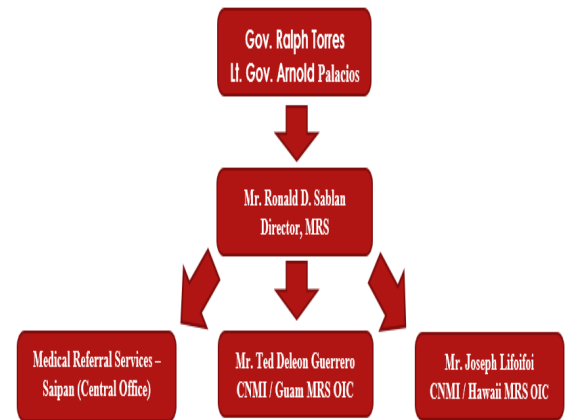


CITIZEN-CENTRIC REPORTING FY 2021

OCTOBER 2021

WHO WE ARE

The **Medical Referral Program** aka **Medical Referral Services (MRS)** under the Office of the Governor, was established to provide residents of the CNMI the means of receiving medical care and treatment not available in the Commonwealth for conditions which are life threatening, constitute a debilitating illness or an acute neurological problem, or may lead to a permanent loss of vision or other function. By sending patients approved for Medical Referral to an established referral health care facilities they may obtain extended and/or advanced medical care, specialties and procedures attainable to enhance the patients' health. Our Medical Referral Program is the only CNMI Government Office operating with satellite offices outside the CNMI in Guam and Hawaii with contracted medical facilities in the Continental U.S., Philippines, Korea and Taiwan.



OBJECTIVE

It is therefore the objective of the Medical Referral Program to contain the cost of medical referral by excluding unnecessary referrals, minimizing inappropriate lengths of stay at health care facilities, and establishing cost-sharing mechanism with patients.

HISTORY

History of Medical Referral Program was established on August 23, 1994 through Executive Order 94-3-3 Section 105 and 106. Rules and Regulations under the Department of Public Health was adopted on April 15, 1996. PL 16-51 transferred the Medical Referral Program from the Department of Public Health to the Commonwealth Health Corporation. See PL 16-51, § 3 (3CMC § 2804(v)). 35 Com. Reg. 33542. Section 1.1 of the 2013 amended regulation (codified at Section 75-50-005) specified that these new regulations were to be codified at subchapter 140-10.7. Because this office is now under the supervision of the Governor, the Commission has moved these regulations to Chapter 75-50. Effective May 02, 2013, Executive Order No. 2013-0913 transferred the Medical Referral Program from the Commonwealth Health Corporation to the Office of the Governor since it is unnecessary and inefficient for CHC to run a program when it is not fiscally responsible for the operation of the Off-Island Medical Referral Program. Further, it is fiscally prudent and more efficient for Medical Referral to operate outside CHC due to its precarious financial and administrative state.



Enhance Accountability



- MRS Travel for Treatment (T4T)-Aetna, is contracted by the CNMI Government as a Health Provider to assist the Medical Referral patient in expediting the Letter of Authorization, reducing the waiting period between appointments or procedures, paying for medical expenses with a savings to the CNMI Government of 52%-60% and monitor cases with their own Utilization Review Case Managers.
- Medical Referral Services implements weekly video conferences with our US Mainland Providers-Sharp Memorial Hospital and Rady’s Children Hospital, San Diego, CA. These include weekly patient updates, monitoring of patient’s treatment and progress.
- Medical Referral Services is dedicated in ensuring that all patients are provided by all means of support, and care throughout the duration of their medical treatment.

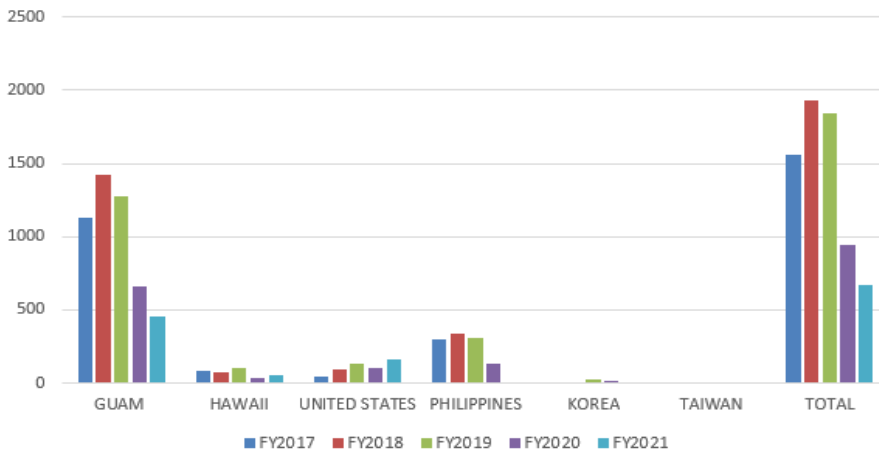
Misconception

Off-Island referrals are reviewed and approved by the Medical Referral Committee, not by the Management of the Medical Referral Office.

The Committee is composed of six (6) voting members who are all physicians licensed by the CNMI Professional Licensing Board and appointed by the CEO of the Commonwealth Healthcare Corporation (CHCC). The Committee meets every Wednesday to review every referral request submitted for the week and those incomplete from prior meetings.

Patients are sent off-island for their medical care, approved to Guam, Hawaii, Continental US, Philippines, Korea and Taiwan, based on each diagnoses. Also, depending on their insurance coverage.

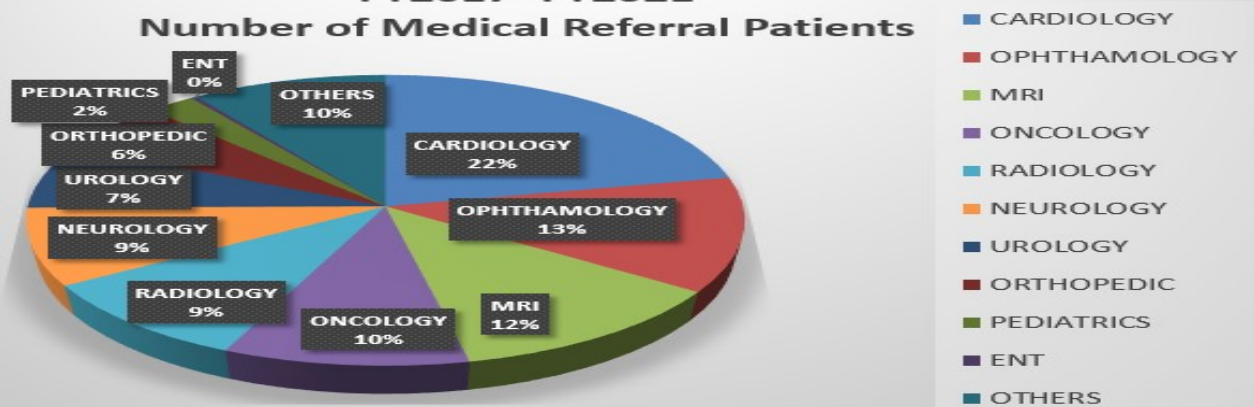
Number of Medical Referral Patients by Location FY-2017- FY2021



Number of Medical Referral patients by Area/Location from FY2017-FY2021. Table shows a decrease in the number of Medical Referral Patients sent off-island for medical treatment not readily available within the Commonwealth.

FY2021 Top 10 Primary reason for Medical Referral off-Island base on patient diagnose by Health Category FY2017 -FY2021

Number of Medical Referral Patients



FY2021 CHALLENGES

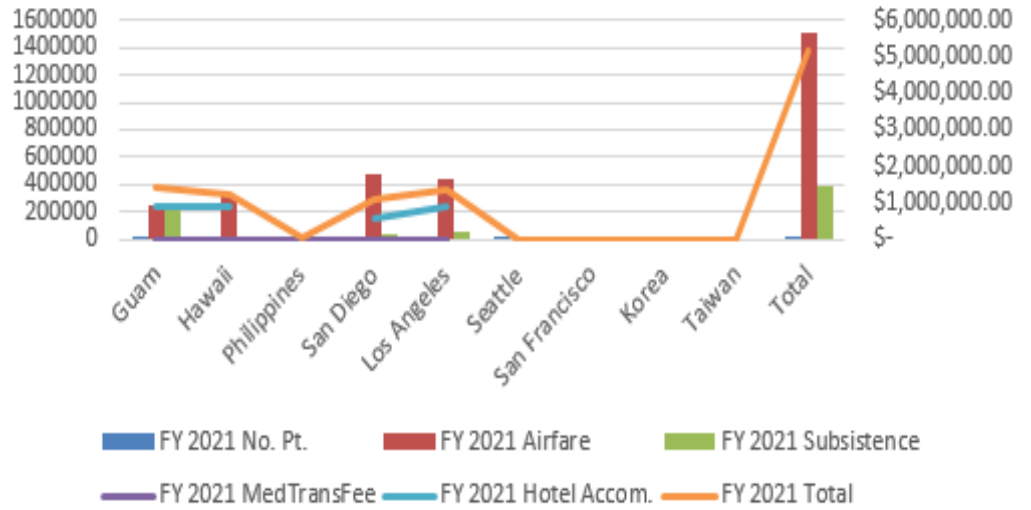
- The COVID-19 PANDEMIC**

Developing and newly implemented protocols set by COVID-19 Task Force in the CNMI, as well as various locations where health care providers accept our CNMI patients for their medical care treatment.

Budget

Historically, the government has failed to appropriate adequate funding to Medical Referral Program year-after-year. This is a major concern forcing the program whose main purpose is to assist patients with medical conditions generally at its worse stage to operate under unfunded liability creating operational uncertainties.

FY2021 Medical Referral Services Breakdown by Count & Expenses Statistics



As shown in Table 1.3: MRS FY 2017- 2021 Breakdown by Count and Expenses Statistics, reflects a decrease in expense of Medical Referral cost sent off-island due to the unforeseen COVID-19 Pandemic.

Personnel:

FTE funding requirement must be addressed including Utilization Review and MOU from Mayors offices and other political hires must stop. At times, Guam or Hawaii Officer-in-Charge would not follow protocols or submit required reports to our central office because they would only answer to the one who hired them creating a dysfunctional operation affecting the level of service patients deserved. Due to the sensitivity and confidential nature of our operation and to be in compliant with HIPPA requirements, Medical Referral Program recruitment must be scrutinized based on operation requirement and applicants' Qualification, Attitude with people to people personality, Ability to deal with difficult and stressful environment and the willingness to multi task. In all fairness, Civil Service Pay Scale must be follow depending of qualification or morale becomes a problem.

SUMMARY

There are always room for improvement but difficult if its structure can easily be overpowered. Medical Referral Program has a long history of the top political subject on every election year unfortunately, its personnel and operation requirements were never fully supported or funded appropriately to meet its mandated responsibilities. Medical referral must be depoliticized and adequately budgeted to run smoothly following its owned Rules and Regulation focusing on patients care. It's very frustrating and misleading whenever news articles or personal interviews of key government officials emphasized on Medical Referral DEFICIT status when in reality, the government has failed year after year to appropriate adequate funding to meet its mandate. For Medical Referral Program to run smoothly is to be allowed to hire its own personnel, adequately funded and be officially organized by statute.

Contact Information

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MOVING FORWARD....

- ⇒ Exploring on new facilities with better treatment and rates to save funds.
- ⇒ Through the recommendation of the Attorney General's Office, " that the Commonwealth Healthcare Corporation resume the medical referral service function as permitted by Public Law 16-51".
- ⇒ Work closely with the Governor, Legislature, and Secretary of Finance regarding timely payments towards the medical facilities to avoid door closing.
- ⇒ Work closely with Commonwealth Healthcare Corporation and it's CEO, to enhance better medical care and treatment options for CNMI patients, with cost-efficient rates.



Referring Patients to Guam, Hawaii, Continental US, Philippines, Korea and Taiwan.