A RESOLUTION

APIL Resolution No. 33-GA-09

“Relative to expressing support for the funding of a Guam Community College-led Actuarial Study for the feasibility of a sustainable Regional Health Care Network for the people of the Federated States of Micronesia and the Republic of the Marshall Islands.”

WHEREAS, the jurisdictions that constitute the membership and union of the Association of Pacific Island Legislatures (APIL), although spread across more than 2.5 million nautical miles, have differing political relationships with the United States Government yet function as essentially one shared economy; and

WHEREAS, recognizing the Pacific region’s vast expanse of ocean that binds and unites the member states of the APIL, its members affirm this union as part of the “Blue Continent;” and

WHEREAS, every island, village, and family throughout the Blue Continent knows the pain and suffering from the untimely death of a neighbor, family member, or loved one due to complications or illnesses arising from a non-communicable disease (NCD); and

WHEREAS, the non-communicable disease crisis is a drain on the economic progress and the financial resources of governments, businesses, and families; and

WHEREAS, in May 2008, the 193 Member States of the World Health Organization (WHO) approved a six-year plan to address non-communicable diseases, especially the rapidly increasing burden in low- and middle-income countries; and

WHEREAS, during the 64th session of the United Nations General Assembly in 2010, a resolution was passed to call for a high-level meeting of the General Assembly on the prevention and treatment of NCDs with the participation of heads of state and government; and

WHEREAS, the resolution also encouraged United Nations Member States to address the issue of NCDs at the 2010 Review Summit for the Millennium Development Goals; and

WHEREAS, the Pacific Island Health Officers Association (PIHOA) passed resolution 48-01 in May 2010 which was entitled, “Declaring a Regional State of Health Emergency to the Epidemic of Non-Communicable Diseases in the United States-Affiliated Pacific Islands;” and
WHEREAS, at the 5th Micronesian Traditional Leaders Conference held in November 2010 in the Republic of Palau, the members declared an NCD Emergency in Micronesia; and
WHEREAS, the APIL declared an NCD crisis at its meeting in December 2010; and
WHEREAS, the WHO 2011 Country report on the NCD crisis provides that sixty to seventy percent of all deaths in Micronesia are caused by NCD’s, with only five percent caused by injury; and
WHEREAS, the seriousness of this issue alone has prompted the focus of the APIL and utilization of its resources toward addressing the scope and depth of this crisis; and
WHEREAS, the lack of access to affordable health care and services in the region has led, in part, to anomalously high mortality rates over the past decade with stagnant or declining quality of life for patients suffering from the effects of NCDs; and
WHEREAS, the APIL recognizes that, amongst its member jurisdictions, concerted efforts are needed to usher in a period of action that focuses on providing access to affordable health care, constructing adequate medical facilities and clinics, institutionalizing programs to develop local medical professional capacities, and supporting community-based efforts to achieve greater comprehension of the benefits of a healthy lifestyle at all age levels; and
WHEREAS, such endeavors will be concrete steps toward raising the health and well-being of the island communities, providing optimum environments for longer and healthier lifestyles, and investing the future generations of those who make the islands their homes; and
WHEREAS, these actions will also work toward incorporating the perpetuation of holistic medicinal practices and sacred knowledge from elders, both of which are values which are part of Pacific island traditions and customs; and
WHEREAS, the APIL believes that to address the current crisis, efforts by all stakeholders including those from the government, individual and federal sources, the private sector, non-governmental organizations, and the community must be coalesced if progress is to be made to bridge the gap caused by the lack of affordable health care, inadequate access to facilities and professionals, and insufficient programs to educate future generations about healthy lifestyle decisions; and
WHEREAS, the APIL expresses its faith that Pacific Island communities will benefit and embrace a multidimensional approach that respects island culture, with candor and openness, using the tools of consensus and collaboration; through multi-sectoral partnerships involving supportive corporate partners, nonprofit organizations, governments, health care providers, health insurance providers, community based, regional, and international foundations and organizations; and
WHEREAS, the Chief Executives and public policy makers of the Blue Continent have long called for the establishment of a Regional Health Care Network to function as a model for progressive multi-sectoral partnerships, that incorporate advanced medical care with holistic and indigenous systems of care; and

WHEREAS, the members of the Blue Continent, through the APIL, appreciates President Barack Obama’s efforts to “re-pivot” the U.S. Government’s attention in the Pacific, an announcement the President made in 2011 during the Asian Pacific Economic Cooperation (APEC) forum; and

WHEREAS, the APIL believes that the critical nature of our Pacific issues requires a serious and sustained effort in Washington DC, to supplement the work of our elected representatives to the U.S. House of Representatives and our appointed representatives serving in the diplomatic corps; and

WHEREAS, the APIL considers that a sustained effort will further develop our relationships with U.S. decision-makers in the executive and legislative branches of government, as the APIL pursues to advance solutions to address critical needs in the Pacific; and

WHEREAS, the Government Accountability Office reported more than $1 billion in Compact migrant health and education costs between 2004 through 2010, with preventable, non-communicable diseases accounting for 60 to 70 percent of deaths in Micronesia; both the exorbitant costs and the preventable loss of lives could be better managed and avoided if we, as a region, were all covered under the same health plan; and

WHEREAS, the remoteness of our islands and the needs of our people make the efforts outlined in this resolution an absolute necessity; preventable deaths and diseases are sadly beholden to high costs for specialized medical care and travel, mostly to Hawaii and Guam; a regional health care plan for Micronesia will make equitable care a reality and will finally allow our people better access to this basic need; and

WHEREAS, since the exclusion of the Freely Associated States from Medicaid in 1996, the governments in the areas where our uninsured receive medical care have shouldered the costs, namely Guam and Hawaii; and
WHEREAS, a 9th U. S. Circuit Court ruling in April 2014, stating that Hawaii is not constitutionally obligated to cover the health costs of migrants from FSM, which may lead to an increase in migrants traveling to Guam for health coverage; and

WHEREAS, the regional health care system outlined in the APIL resolution is a much needed plan which will result in eventual savings for our Pacific people, our hosts and the United States; and

WHEREAS, the President of the APIL will lead an effort to search for professional and technical assistance to represent the interests of APIL, to collaborate with our members on our critical issues, and to assist the APIL in developing a comprehensive strategy to effectuate positive change amongst APIL members; and

WHEREAS, the Guam Community College, in collaboration with the APIL President and members, has applied for a grant from the Department of the Interior’s Office of Insular Affairs to conduct a sustainable healthcare financing study for the people of the Federated States of Micronesia (FSM) and the Republic of the Marshall Islands (RMI); now, therefore,

BE IT RESOLVED that the Association of Pacific Island Legislatures hereby expresses support for the establishment of a Regional Health Care Network to function as a model for progressive partnerships, one that will incorporate advanced medical care with holistic and indigenous systems of care for jurisdictions within the Blue Continent, collect data, research best practices, identify and pursue partnership opportunities at the local and regional levels, establish and design programs to leverage partnerships, and consider developing and implementing pilot programs; and

BE IT FURTHER RESOLVED that the APIL hereby endorses the concept of greater regional cooperation and coordination among the island governments represented in the APIL for the provision of affordable and accessible quality health care to their respective constituents, based on the following principles: broad-based membership, utilizing a preferred provider network with strong local presence, rational utilization management, shared administrative costs, with emphasis on preventative care, individual accountability and with incentives for better cost management and quality outcomes of care; and

BE IT FURTHER RESOLVED that, having been called upon by the General Assembly to communicate with the United States Department of the Interior to seek out technical assistance and financial support for a federal study to develop a sustainable Regional Health Care Plan, the Leadership of the APIL and the APIL’s Secretariat hereby expresses its support for the funding of a Guam Community College-led Actuarial Study for the feasibility of a sustainable Regional Health
Care Network for the people of the Federated States of Micronesia and the Republic of the Marshall Islands; and

BE IT FURTHER RESOLVED by the Association of Pacific Island Legislatures, 33rd General Assembly, July 15-17, 2014 in Majuro, Republic of Marshal Islands, that the APIL expresses support for the funding of a Guam Community College-led Actuarial Study for the feasibility of a sustainable Regional Health Care Network for the people of the Federated States of Micronesia and the Republic of the Marshall Islands

BE IT FURTHER RESOLVED that the APIL President shall certify, and the APIL Secretary shall attest to the adoption hereof and that copies of the same shall be thereafter transmitted to the U.S Department of the Interior (DOI) –Office of Insular Affairs; to the President of the Guam Community College and to the chief executives and presiding officers of the legislative bodies of each APIL member entity.

DULY AND REGULARLY ADOPTED ON THE 17th DAY OF JULY, 2014.

JUDITH T. WON PAT, ED.D.
PRESIDENT

CHANG WILLIAM
SECRETARY