United States Department of the Interior

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OFFICE OF THE SECRETARY
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FEB 11 1981

Dr. Bruce Wachholz
Office of Health and
Environmental Research
Office of Environment
Department of Energy
Mail Station E-201
Washington, D.C. 20545

Dear Dr. Wachholz:

Enclosed for your information is a set of the Summary Notes of the December 10, 1980, meeting on the Marshall Islands Health Plan.

You will recall that at the start of the meeting I indicated that there would not be any official minutes and that participants should keep their own record. We produced these summary notes for our own working purposes and I am sharing them with the other interested agencies. The Notes are not in polished form nor do they attempt to be a verbatim record but you may find them useful for the record.

Sincerely,

Ruth G. Van Cleve

Mrs. Ruth G. Van Cleve
Deputy Assistant Secretary - Policy
Territorial and International Affairs

Enclosure

Summary Notes on December 10, 1980
Meeting on Marshalls Health Plan
P.L. 96-205, 10:00 a.m.
Secretary's Conference Room

Roster: See Attachment

Some 75 individuals representing various government agencies, the people of the affected atolls, their legal advisors and consultants, Government of the Marshall Islands officials, etc., attended the meeting. The Government of the Marshalls was represented by Secretary of Foreign Affairs Tony DeBrum, Cabinet Minister Tom Kijener, Senator John Anjain, five additional members of the Nitijela, Dr. Jack Helkena representing the Ministry of Health, and various other government officials. Each of the four named atolls had two official representatives plus legal counsel and other advisors present.

Deputy Assistant Secretary for Policy Ruth Van Cleve (TIA) opened the meeting by requesting each delegation or agency head to identify members of the respective groups. She, then, outlined procedure to be followed, i.e., 15-20 minute presentatiions of each of the three aspects of the overall plan called for in P.L. 96-205 with appropriate discussion periods to follow each presentation. She announced that written comments would be accepted up to 5:00 p.m. on December 17, 1980.

Assistant Secretary Ruth Clusen of DOE spoke briefly on the two plans prepared for DOI by DOE, i.e., the Education and Information Proposal and the Environmental Monitoring Proposal. She then introduced Dr. Bair of Pacific Northwest Laboratory, Battelle Memorial Institute, who briefly outlined the way in which the Radiation Education and Information Program plan had been developed. Dr. Carl M. Unrah then explained the plan using charts and slides.

The plan contemplates a program to enable the people of Bikini, Enewetak, Rongelap, and Utirik, and the people of other atolls or islands found to be or have been exposed to radiation from the nuclear tests, to better understand nuclear radiation and its effect. The basic elements of the plan are direct, face-to-face communication with the people of the four affected atolls and others that may be affected. There would be close communication with officials of the Government of the Marshalls as well. Local Marshallese individuals would be trained to carry out the education and information program through training courses both in the Marshalls and the United States. Pretaped radio programs, presented in both Marshallese and English,

would provide broadcast information about nuclear radiation and its possible effects. There would be systematic evaluation of the effectiveness of the communication process and modifications of the program as necessary. The program would be a continuing one, to reinforce, review and update the information.

The estimated cost of the Education and Information Program for the first full year would be $950,000. Details of the plan and continuing costs were outlined in the official document, "Marshall Islands Radiation Education and Information Program Plan" that was distributed to all participants.

Discussion on Radiation Education and Information Proposal

Mr. Ron Cogswell, TIA, Interior OMB Examiner, asked whether continuing program costs were included. These continuing costs are outlined on pages 23 and 45 of the Education and Information Document. First year costs would be $950,000, 2nd year costs would be $840,000 then dropping to $410,000 for the fifth year. Starting with the 9th year the costs would jump again to $970,000 largely due to the starting again of training teams in the United States and development of special programs.

Ms. Elaine Falender, (Covington & Burling, Legal Advisors for the Government of the Marshalls) inquired what the costs would be if the education and information programs were to be extended beyond the four named atolls. Dr. Unrah noted that expansion of the program to cover all of the Marshalls would probably mean a cost that would be approximately 3 times as high, i.e., first year costs in the range of $2.3 million. Ms. Falender wondered why the cost should go that high since so many of the items appeared to be fixed costs. Assistant Secretary Clusen stated that additional information on costs for a program to cover all of the Marshalls would be provided later.

Mr. Richard F. Gerry (Marshalls Islands Atomic Testing Litigation Project) inquired whether a determination had been made as to what were the "other affected atolls". (Note: The MIALP represents the people of Rongelap, Utirik, groups and individuals of various other islands and atolls in the Northern Marshalls.

Mrs. Van Cleve, TIA, noted that the contractor was not asked to define "an affected atoll" and that the question would be addressed later at a more appropriate time. It was not the contractor's responsibility.

Mr. T. Mitchell, (Micronesian Legal Services, Legal Advisor for the people of Enewetak) stated that in his opinion, in general, the Education and Information plan was a good one. There was attention to practical realities. He thought though that there should be provision built into any plan for continuous participation by the people of the named atolls. He also wondered how the Education and Information program would be coordinated with the medical and environmental monitoring program. Such coordination was essential in his opinion.

Dr. Unrah agreed that coordination was essential and that there would be continuous contact with the Government of the Marshall Islands. Mr. Mitchell stressed that he was concerned with "participation of the people of the four named atolls" not with MIG. Possibly local "Advisory Committees" or Community Boards of Education could be established. He also asked how transportation would be provided for the program.

Dr. Unrah indicated that there were a variety of transportation aspects, all of which might be utilized, i.e., regular field trip service, charter of local shipping, seaplane chartering, use of regular MIG air service.

Mr. Mitchell queried whether the current Brookhaven Medical program was able to operate using Marshalls public transportation. Dr. Vic Bond, Brookhaven Laboratory, stated that Brookhaven has a chartered vessel that is also shared by the environmental monitoring groups at times. It has not been able to rely on local public transportation. Dr. Bair stated that local transportation would be a key to any successful program and any contractor would have to put provision of adequate transportation at top of the list. Mr. Jeff Jefferson of MIATLP asked whether the program would cover all aspects of radiation, i.e., controversial issues as well as ordinary issues? He wanted to know also who would select the trainees?

Dr. Unrah stated that it was anticipated that the program would cover all aspects of radiation problems and that the local magistrates or island councils would assist in selecting the trainees working with the designated contractor.

Mr. Richard Gerry of MIATLP asked whether DOE would be in charge of implementing the proposal. Assistant Secretary Ruth Clusen pointed out that under the current law, P.L. 96-205, the Department of Interior is in charge of the implementation.

Mr. J. Weisgall, Legal Advisor for the people of Bikini, asked whether the two booklets prepared for the Enewetak and Bikini Dose and Risk Assessment meetings had been reviewed with the respective groups of people, i.e., Enewetakese and Bikinians as their usefullness. Dr. Unrah stated that this had not been done as yet but certainly would be part of any evaluation program. Mr. Weisgall stated that in his opinion it would

make sense to have such an evaluation done at the start of the program. Follow-up meetings with the people of Bikini and Enewetak might provide direct feedback useful to a new program.

Mr. Richard Gerry, MIATLP, noted that in the Health Plan the medical aspects of radiation are minimized, yet the Education and Information Program was developed around premise of danger from radiation.

Mrs. Van Cleve, TIA, stated that eventually the three proposals would be integrated but that there had not been time to do prior to the December 10 meeting.

Mr. Gerry, MIATLP, queried as to whether there would be training provided to residents and provision of "education and information" programs to residents who have moved away from their home atolls.

Mr. T. Mitchell, MLSC, stated that education of the Marshall Islands Government and its officials on radiation effects is equally important. He cited an endless stream of horror stories that emanate from the Government of the Marshalls with respect to radiation effects in the Marshalls as a result of the testing program.

Former Secretary Anton DeBrum thanked Mr. Mitchell for his belief that the Government of Marshalls officials are capable of being educated. He had no other comments on Mr. Mitchell's assertion of horror stories emanating from the Government of the Marshalls. Mr. DeBrum criticized DOE and its Education and Information contractor for not consulting initially with designated MIG officials. The DOE and Contractor team visit had come at a time when certain key MIG officials were at the Kona Status talks. MIG had requested a postponement of visit until the key officials were back in the Marshalls but DOE and contract team had ignored that request and had gone ahead and met with other MIG officials.

Mr. Debrum also stated that the presentation again provided a sense of deju vu. The Northern Marshalls Radiological Survey results were still awaited. Two years had gone by and Doe still had not released the results. He pointed out that the Government of the Marshalls does not beleive that radiation effects are restricted to the four named atolls. MIG believes that radiation is elsewhere in the Marshalls. The government cannot understand why DOE keeps stalling with respect to releasing results of the Northern Marshalls Raidological Survey.

With respect to one aspect of the Education and Information Plan, he noted that the College of Micronesia was slated to play an essential role. He wished to state that, to date, the Government of the Marshalls has not taken a firm position on the role of the College of Micronesia in the Marshalls and therefore, he could not say that this aspect would be supported or could be followed.

He commented on the difficulties of transportation in an area as widespread as the Marshalls and noted that the Government of the Marshalls has tried to give Bikini and Enewetak transportation requests priority.

Presentation of Environmental Monitoring, Research and Dose Assessment Program Plan for P.L. 96-205

This plan was prepared by the Lawrence Livermore Laboratory of University of California for DOE on behalf of DOI. A brief outline of the plan was presented to the group by Dr. Noshkin of LLL. All participants were provided with copies of the plan. The proposal contemplates for each of the four named atolls the carrying out of comprehensive surveys and analyses of the radiological status of the atolls at appropriate intervals, no less frequently than once every five years; the development of an updated radiation dose assessment; and an estimate of risk associated with predicted human exposure. The Environmental Monitoring, Research, and Dose Assessment Program Plan would utilize results of past and current DOE research programs in the Marshalls, but would also require new and direct monitoring of samples of locally-produced foods, soil sample collection, groundwater and cistern water sample collection, dietary and consumption habits, and Gamma measurements. Additionally, research would need to be conducted over a wide variety of areas, such as radionuclide products, and radiological dose assessment and risk analysis.

The estimated cost of the additional program for the full year would be $1,140,000 if it were carried out in conjunction with the on-going DOE Marshall Islands program. The cost would increase to an estimated $4,170,000 for the first year if the program were conducted by individuals or organizations that functioned independently of the current DOE Marshall Island programs. Cost estimates are given on pages 51 and 52 of the plan document.

Discussion on Environmental Monitoring, etc., Proposal

Mr. Gerry, MIALP, again asked about the relationship to "other affected atolls" in the Marshalls. How is it intended to find out if the scope of the program can be extended? Does the proposal have any plans to go beyond the 4 atolls.

Mr. Mitchell asked what groups the MIALP group represented. Mr. Gerry stated his group represented the people of Rongelap, Utirik, Wotje, Ailuk, Likiep, people in other parts of the Marshalls including some of the people of Enewetak.

Dr. Noshkin, then, explained that the plan as presented was built around the four named atolls.

Mr. Jefferson, MIALP, asked whether DOE would run the monitoring program. Dr. Noshkin stated that the law gave DOI the implementation responsibility. He could not comment on what DOI might do in the future to carry out this aspect.

Mr. Jefferson, MIALP, commented that his group had strong feelings about possible contractors for any future monitoring work and would like to have a later opportunity to state them.

Mrs. Van Cleve, TIA, indicated that DOI is prepared to receive comments on this aspect.

Mr. Jonathan Weisgall, Legal Advisor for the people of Bikini, asked whether written comments presented by the various groups to DOI could be shared by all.

Mr. Gerry, MIALP, said that his group would be willing to provide copies of comments to any group present.

Mrs. Van Cleve, TIA, commented that if the originator could do this that would be fine and would they indicate distribution on the original sent to DOI. DOI, though, would be prepared to provide copies if needed.

Mr. T. Mitchell, Enewetak Counsel, asked whether any Federal Agency comments would also be circulated. Mrs. Van Cleve stated that if any agency comments were received within the week, they could be made available.

Mr. T. Mitchell, Enewetak, stated that he liked the Environmental Plan. He believes it goes the full distance, it covers the four named atolls, and provides for future research. He had two observations. The first involved the development of standards for Dose Assessment comparison. How are the standards going to be developed? If question of standards are to be part of the plan and would be developed by contractor, then Mitchell would want to be involved.

Dr. Noshkin commented that the reference to standards in the proposal was meant to refer to acceptable U.S. Federal standards. Mr. Mitchell, then stressed that he sees a need for the involvement of the local people (the four atolls) in the monitoring program. The research, the visits, the sampling, etc., should be explained carefully. Dr. Noshkin agreed that this was an important aspect and anticipated that prior to the start of every monitoring visit, a preliminary briefing session would be held with the local people.

Mr. Mitchell, Enewetak, raised the question of transportation and communication support for the monitoring program. How would this be handled?

Dr. Noshkin pointed out that a special vessel would be needed. The current DOE program has a chartered vessel.

Mr. Mitchell asked if there were a dedicated vessel, would there be any unused times available?

Dr. Noshkin commented that the new program would call for 5 months use. Possibly the Education program might use 2 months. This could leave up to 5 months free, but this was a guess at this stage.

Dr. Bruce Wachholz of DOE stated that it was premature to try to predict vessel use for various components at this time. Actual needs of each aspects are not really known now.

Mr. Gerry, MIALP, asked when would the reports mentioned be available from LLL? Also could raw data be made available to MIALP? Dr. Noshkin indicated that some reports would be forthcoming within the next 5-6 months.

Mr. Gerry asked again about raw data. Dr. Noshkin indicated that he believes the raw data without analysis would not be very useful.

Mr. R. Cogswell, OMB, referred to page 51 and asked for clarification of the two sets of figures. This was explained as being due to the possibility of a new contractor coming in and then mobilization costs, etc., would rise sharply.

Secretary for Foreign Affairs Anton Debrum also asked when reports on the Northern Marshalls Radiological Survey would be made available. He also queried about the availability of raw material. Dr. Noshkin again explained that it was his opinion that the raw data would not be very meaningful. Mr. DeBrum stated that the Government of the Marshall Islands would like to have a chance to assess the raw data but DOE and LLL keep evading this matter.

Dr. Noshkin explained the many thousands of analyses that had to be carried out on the samples. He reiterated that the analysis is very difficult, complicated and very time consuming.

Assistant Secretary Clusen, at this point, noted that DOE and LLL, at the request of the Congressional committees, had given priority to the "Bikini Atoll data" and this portion had been done.

Mr. Gerry, MIALP, stressed that his group had clients living on Rongelap and Utirik who were asking their legal advisors whether they should continue to live on these atolls that had received radiation fallout. Possibly, clients' lives might be in danger. It was essential that MIALP had access to original survey material and have it analyzed by its own experts and to have the final LLL reports in order to have them appraised also.

Presentation of Loma Linda Health Proposal

Dr. Richard Hart, Chairman, School of Public Health, Loma Linda University, presented an outline of the proposal prepared under contract to DOI. He discussed each issue presented on page 106-108 relating to the Four Atoll proposal and then discussed the items in the Executive Summary on page 4. He also outlined the reason why provisions for improvement of primary and secondary care all over the Marshalls was set forth in the alternate plan. All participants had been supplied copies of the Loma Linda

Proposal. Mr. Donn Gaeda then discussed the budget aspects set forth on pages 104 and 110 of the document. The budget proposal for the four atolls plan includes costs for a special charter ship making at least eight visits a year to the named four atolls.

Discussion on the Loma Linda Proposal

Mr. Safford, State, asked if there would be sizeable reduction of costs in the four atoll plan if the special ship could be eliminated. Dr. Hart indicated that, in time if airfields were built on all of the atolls (i.e., Rongelap and Utirik, Kili Island) air transportation could be used, but there would still be certain primary care services that could not be met by using air service.

Mr. Cogswell, OMB, referred to P.L. 96-205 and asked what is the responsibility of the Government of the Marshall Islands for providing basic health care to its citizens. It was noted that the budget proposals for the four atoll proposal, as well as a health care proposal for all of the Marshalls, included a first year contribution of $3.5 million from Marshall Islands Government funding, and MIG funds also would be available in continuing years. In answer to a question on cost escalation, Dr. Hart explained that an approximate 20% inflationary factor had been built into the proposal after year one, i.e., 1980. Also population growth had been taken into account.

Mr. Gerry, MIALP, stated the proposal was a fine health plan but he denied the fact that radiation problems are not "minimal" as stated in the proposal. In fact, he believes they are "great" in the Marshalls. Up and beyond the actual radiation aspects, there are mental health effects that also are very significant. Special health care for all aspects of radiation related aspects should be provided to the "affected peoples" by the United States Government.

He commented that in his estimation, the plan by denying or downgrading the radiation factors has made it politically impossible for the U.S. Congress to accept it. Congress scarcely would underwrite health care for all the people of the Marshalls unless it were shown that the underlying cause was care needed because of results of the U.S.atomic testing program.

Additionally, the report was contradictory on the "radiation aspects". The overall plan stressed "minimal effects of radiation" yet the report in places also stressed the "thyroid abnormalities" of the Rongelapese and Utirikese and other related radiation effects on the exposed people". He also found the statistics cited unexplained. Table 4 on page 27 showed cancer to be the leading cause of death in the Marshalls. Would you not expect in an "undeveloped area" to have other causes more important? Was it not possible that radiation exposure might be reflected in the cancer statistics? Had any studies been done on children? What about the documented reports of birth abnormalities, etc.? Why were these aspects ignored?

In brief, then, he believed the only prod available to procure essential medical care for the "affected peoples", i.e., that of results of radiation effects from the U.S. testing program, had been taken away.

Dr. Hector J. Blejer, M.D., took issue with some of the basic tenets of the Loma Linda plan. He maintained that radiation related diseases could be distinguished contrary to the statement made in the plan. Epidemiologic studies have demonstrated this. Genetic considerations were overlooked, etc.

Mr. T. Mitchell, Enewetak Counsel, stated that he has long been aware that the U.S. Government is paralyzed as to understanding the meaning of the section of P.L. 96-205 that relates to the health care proposal. In his estimation, the statute clearly calls for a plan for the four named atolls. He does not find any such plan in the Loma Linda proposal. He noted that Loma Linda's estimates for its so-called Four Atoll Plan and the Health Care Plan for all of the Marshalls come out very close together. How did the contractor arrive at these figures? Did the contractor estimate the cost of providing primary care only on the four named atolls with secondary and tertiary care to be provided at Kwajalein or in Honolulu? Would such a proposal cost $10 million a year? He doubts that very much. We are talking about providing special care for perhaps 2,000 people at the most, not 30,000 people.

Dr. Hart noted that the statute calls for care for people of the named atolls and many of these (except for the people of Enewetak) no longer are resident on their home atolls.

Mr. Mitchell stated that in his estimation the proposal indicts the Deparment of the Interior for 30 years of failure to provide adequate primary and secondary health care in the Marshalls.

Was the contractor aware that while its team was working out an overall health care proposal for all of the Marshalls, the Government of the Marshalls was negotiating with the U.S. Government in its status talks for financial support of from $25-26 Million annually? This Loma Linda proposal would provide health care at U.S. expense to everyone in the Marshalls up and beyond that financial subsidy.

The plan should be able to state how many people would have to be sent out of the Marshalls for secondary and tertiary care. To him, the Loma Linda proposal plan proposes to take a health care program that is in a shambles and upgrade it. Is he not correct that it would cost appreciably less to provide primary care for the people of the four named atolls with secondary and tertiary treatment outside the Marshalls? The Department of the Interior could never make up its mind with respect to P.L. 96-205 but he had hoped that the contractor would have made a better interpretation and produced a plan for health care for the people of the four named atolls.

Foreign Secretary Anton DeBrum asked for the floor and said he wished to congratulate the Department of the Interior and the Loma Linda contractor for coming up with a realistic health care plan. There were areas in the proposal with which the Government of the Marshalls takes exception and these will be pointed out in MIG's written comments and recommendations. In general, MIG is pleased that the contractor, given the constraints of time under which he operated, was able to produce such an outstanding job.

Mr. Jonathan Weisgall, Legal Advisor for the people of Bikini, stated that he would provide comments in writing. He believed that the plans as presented, have shown the problems of the legislation (P.L. 96-205). He noted, though, that it was the people of Bikini and Enewetak who were moved from their home atolls and the peoples of Rongelap and Utirik who were exposed to fallout. These groups deserve special treatment.

He commented also on Section 177 of the Compact of Free Association which contemplates that the U.S. Government will have a continuing responsibility for nuclear problems in the Marshalls. There will still be an obligation on part of the U.S. after the termination.

He noted also that if you provided direct care to the "affected peoples" you would have to go beyond the "affected atolls" since many people have moved. He wondered what would be the costs if different levels of assistance were provided, i.e., direct care, and secondary and tertiary care, for the peoples who are <u>on</u> the affected atolls (or as in the case of Bikinians on Kili and Ejit since they can't, as yet go back to Bikini) but not providing special primary care if former residents or kin have settled, by their own volition, in places such as Majuro, Ebeye, Ailuk, etc., or other parts of the Marshalls. While this would provide differing types of health care on various islands and to special groups, costs might not be as great as set forth in the Loma Linda Four Atoll proposal.

Mr. Mitchell (Enewetak) reiterated that he would like to see a budget based specifically on special care for the people of the four atolls only. He objected to the figure of $7-$8 Million in the Four Atoll Plan to upgrade the hospitals at Ebeye and Majuro. The "affected peoples" should be provided secondary and tertiary care at Kwajalein or in Honolulu not in hospitals operated by the Marshall Islands Government.

Mr. Gerry (MIATLP) took issue with Mr. Mitchell. He pointed out that the statute "refers to the people <u>of</u> the affected atolls and people <u>of</u> the four named atolls. Many of these people now are scattered throughout the Marshalls and by the statute they are entitled to special care. He referred again to the lack of reports on the Northern Marshalls Radiological Survey

and noted that without these reports and analyses a medical program for the Northern Marshalls cannot be planned. He does not fault the contractor since DOE, as yet, has not produced this material on the Northern Marshalls.

Dr. Blejer (with MIATLP) felt that there was a lack of integration in the three documents. He also asked if the representative of HHS had any comments on possible role of USPHS or would there be later amplification from the U.S. Public Health Service on this aspect.

Mr. Mitchell (Enewetak) did not find any consumer involvement in the health planning documents. He held that there should be input from the people involved. A local advisory board or council would be useful and could provide feedback.

Dr. Hart, Loma Linda, pointed out that the contract teams had visited Enewetak Atoll, Rongelap, Utirik, etc., and had met with local representatives. Weather and transportation difficulties had prevented a visit to Kili Island but Bikinians elsewhere had been consulted.

Mr. Mitchell (Enewetak) was critical of the chapter in the appendix relating to the socio-cultural perspective and did not feel it was accurate or adequate. He also questioned whether there was as much "scattering" of "affected peoples" as the contractor and others believed. He conceded that there had been some scattering but did not believe the enormous budget of the four atoll proposal was justified. He again stressed, that in his opinion, all that is required is to provide primary health care on the four named atolls and secondary and tertiary care at Kwajalein or in Honolulu.

Mr. Weisgall offered a suggestion that perhaps an additional outline of a plan was needed, i.e., a plan that would provide special primary care on the "affected atolls" and secondary and tertiary care for these residents at the most feasible locations but not to provide "special primary care" for representatives of the affected peoples all over the Marshalls. In brief, there would be designated areas where this special care would be available to the "affected people". He also urged the Federal agencies concerned to address the pending problem of "other affected atolls" in any preliminary report to Congress. This aspect must be addressed since any special health care program designed for the peoples of the four atolls might later have to be expanded to "other affected atolls".

Ms. Falender (Rep., Government of Marshall Islands) would like to see in advance any report that would be sent to Congress. Is this feasible?

Mrs. Van Cleve (TIA) pointed out that in view of the time constraints, anything that would be submitted to Congress obviously would be preliminary in nature. She noted also that

a new administration would be coming in and this aspect also must be considered. The preliminary report to Congress would signal that something more definitive would be submitted at a later date. She stated that as soon as OMB clearance could be obtained on any proposed preliminary report that would go to Congress, copies would be provided to participants. She reminded representatives that DOI is not the controlling factor in releasing this type of report.

Mr. Mitchell (Enewetak) in closing, brought up the matter of "other affected atolls" again and wondered why DOI had not moved as yet on setting up a method of criteria.

Meeting closed at approximately 1:15 p.m. with reminder that DOI would receive written comments up to close of business on Wednesday, December 17, 1980.

PARTICIPANTS

DECEMBER 10, 1980, MEETING ON THE PROPOSED MARSHALLS HEALTH PLAN

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DECEMBER 10, 1980, MEETING ON THE PROPOSED MARSHALLS HEALTH PLAN

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