

MAR 27 1981

Mr. Billy Lee Hart
Territorial and International Affairs
U.S. Department of the Interior
Washington, D.C. 20240

BEST COPY AVAILABLE

Dear Mr. Hart:

It is necessary for me to bring to your attention a matter of mutual concern which is becoming increasingly significant, namely, medical costs associated with non-radiation related medical conditions among the Rongelap and Utirik people. This has been the subject of several discussions between our Departments, including a meeting on November 23, 1980, attended by the former Department of Energy Assistant Secretary for Environment and the former Department of the Interior Acting Assistant Secretary for International and Territorial Affairs.

It is my understanding that the Department of the Interior (DOI), through the Government of the Trust Territory of the Pacific Islands (TTPI), is responsible for the general health care of the peoples of these islands, and that such health care is provided to them directly or indirectly through various governmental authorities. With regard to this matter, Congressman Phillip Burton, in commenting upon Public Law 96-205, stated, "At the present time general health care is provided in Micronesia through the Department of the Interior."

Supplemental to the above responsibilities, the Department of the Interior, together with the High Commissioner of the Trust Territory of the Pacific Islands and the people of Bikini, signed an agreement on August 16, 1978, in which the Department of the Interior stated that the medical needs of the people removed from Bikini Island during that month would be met, and that the Department of the Interior would call upon the Department of Energy for assistance. With regard to this specific matter, your office has authorized the High Commissioner to provide for medical expenses associated with diseases or illnesses among the Bikini people which might be detected by Department of Energy contractor physicians.

Similar identification of resources by your office for non-radiation related illnesses and diseases among the peoples of Rongelap and Utirik has not been made, however. This is becoming a significant issue with increasing frequency for several reasons.

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1. Whereas the Brookhaven National Laboratory and contractor physicians heretofore referred Rongelap and Utirik people suffering from non-radiation related diseases to the health authorities of the Trust Territory of the Pacific Islands, the provisions for medical care at Majuro and at Ebeye are such that the physicians question the propriety of using these resources, and therefore feel that, where necessary, proper medical care requires referral of such patients to Honolulu, or, possibly, Guam.

2. Emergency cases from Rongelap and Utirik already referred to Hawaii this fiscal year include a person requiring open heart surgery (\$43,000 in medical expenses and associated costs) and a pregnant diabetic woman (about \$13,000 in medical expenses and associated costs). The need for referral of other persons with non-radiation related medical needs is anticipated, including cases that are pending. Additional cases may be identified during future visits of physicians to Rongelap and Utirik Atolls.

As you know, the Department of Energy (DOE) is required by Public Law 95-134 to assume the costs for the care and treatment of radiation related injury or illness occurring in the Rongelap and Utirik people resulting from the March 1, 1954, atmospheric weapons test conducted at Bikini Atoll. Except for Public Law 95-134 no statute identifies the Department of Energy as being responsible at this time, i.e., prior to the adoption of a health care plan pursuant to Public Law 96-205, for any health care in the Marshall Islands. Public Law 96-205 and its legislative history provide no clear guidance on this point. In any event, funds have not been appropriated to the Department of Energy for the care and treatment of non-radiation related diseases among these people.

Since the Department of Energy has no funds appropriated to address the above issues, since the expenses associated with persons afflicted with non-radiation related illnesses have depleted the present fiscal year funds remaining for the care and treatment of persons with radiation related diseases, and since it appears that the Department of the Interior has legislative and fiscal responsibility for general health care in the Marshall Islands, it would be most helpful if you would provide guidance as to the position which the Department of Energy contract physicians should take with regard to the above. In addition, it may be appropriate that the Department of the Interior make funds available for the non-radiation related illnesses and needs identified above through its legislative authority and resources. Unless assistance is forthcoming in the very near future the Department of Energy will be forced to direct its contract physicians to refrain from referring persons with non-radiation related diseases to Honolulu or elsewhere. Pending resolution of this matter, we have already requested, on an interim basis, a sharp curtailment of these referrals.

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Thank you very much for your immediate consideration of this matter. I look forward to your early response so that we might resolve the issue to the benefit and satisfaction of all concerned.

Sincerely,

Boston House
for
Alex G. Fremling
Acting Assistant Secretary for
Environmental Protection,
Safety, and Emergency Preparedness

Noted
by file
3/25/81
Ag.

Note: Revised per Mr. Bagley's request. See attached for previous concurrences.

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