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DEPARTMENTAL ORDER  
ADOPTED REGULATIONS  
PUBLIC NOTICE

# territorial register

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territorial register

## DEPARTMENTAL ORDER

WHEREAS, the Director of the Department of Health Services has previously published proposed regulations pursuant to Title 63 of the Trust Territory Code which said proposed regulations propose the establishment of a uniform medical fee schedule throughout the Trust Territory; and

WHEREAS, the proposed regulations were published in accordance with the provisions of Title 17 of the Trust Territory Code in the Territorial Register with a publication date of December 4, 1976; and

WHEREAS, a certain petition requesting a delay in the implementation of the proposed regulations was filed with the Director of Health Services which said petition was supported by signatories of the Marshall Islands; and

WHEREAS, pursuant to the provisions of Title 17 of the Trust Territory Code a public hearing was granted by the Director of Health Services to consider the petition; and

WHEREAS, proper notice of the public hearing was transmitted to the Marshalls District on February 9, 1977, which said notice set the public hearing for 1:00 p.m. Friday, March 11, 1977 in Majuro at the high school; and

WHEREAS, the Director of Health Services properly conducted a public hearing in Majuro, Marshall Islands at 1:00 p.m. on Friday, March 11, 1977 relative to the above referenced petition.

NOW THEREFORE, the Director of Health Services, pursuant to his statutory authority, makes the following findings as a result of the public hearing.

FIRST, that reasonable notice of the public hearing was transmitted to the Marshall Islands and that said written notice of public hearing was properly displayed in public places, the District Center, and broadcast on the radio; and

SECOND, that a public hearing was conducted by the Department of Health Services at the time and place indicated; and

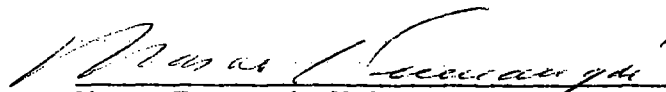
THIRD, that the evidence adduced at said public hearing was that proposed medical fee schedule is reasonable, that there exists a sound basis upon which it is proposed, and that the medical fee schedule should be implemented; and

FOURTH, that no facts have been presented to justify delaying the implementation of the proposed regulations.

IT IS THEREFORE the administrative order of the Director of Health Services that the petition previously filed relative to the proposed fee schedule is overruled and that said regulations shall be published in the Territorial Register as final regulations.

IT IS SO ORDERED.

March 31, 1977

  
Masao Kumagai, M.O.  
Director of Health Services

# ADOPTED REGULATIONS

## DEPARTMENT OF HEALTH SERVICES

### Title 63

### Chapter 3

### Fees for Health Services

#### Authority.

Trust Territory Code, Title 63, Chapter 3, Section 155, Fees for Health Services, provides that the Director of Health Services has the responsibility to develop a Trust Territory Fee Schedule and Regulations, and approved by the High Commissioner, for implementation throughout the Trust Territory hospitals.

#### Purpose.

Because of the continuous decrease in health budgets, and the price of medicines and medical supplies continue to rise in the nations' market, an alternative means of generating revenues in order to maintain the current level of health in Micronesia must be developed.

The establishment of a regulated Medical Fee Schedule uniform throughout the Trust Territory is one of the major steps this administration is taking on the road to eventually becoming self-sufficient through its self-generated revenues.

It is the intent of this Regulation that all fees collected by each District Department of Health Services be deposited in the respective District Medical Supply Account to use in buying needed medicines, medical sundries, and other medical necessities in order to continue the delivery of an effective and optimal standard health care service in Micronesia.

T.T. Medical Services Fees Schedule

Outpatient Services

Initial Doctor's visit -----	\$ 1.00
School Children -----	Free
<u>Prescription (categories of medication prescribed)*</u>	
<u>Category A</u> -----	\$ 1.00
<u>Example:</u> Aspirin (See Exhibit I)	
Category B -----	\$ 2.00
<u>Example:</u> Ampicillin (See Exhibit II)	
Category C -----	\$ 3.00
<u>Example:</u> Prolixin (See Exhibit III)	
Revisits to OPD for: dressing and/or injections -----	\$ 0.50
prescription for refill (A,B, and C)	
Second office visit (same condition) -----	\$ 0.75

Special Services

Ambulance Service -----	\$ 5.00
House call (normal working hours during week days) -----	\$ 8.00
House call (weekends holiday & after 4:30) -----	\$10.00
Emergency call (Boat Ambulance) charge 25¢ per mile -----	\$
Home Delivery -----	\$16.00

Physical Examination

Complete physical examination -----	\$ 8.00
P.E. (Partial) -----	\$ 5.00

X-Ray Services

X-ray PA of chest -----	\$ 1,50
Lower or Upper G.I. Series -----	\$ 8.00
Gall Bladder series -----	\$ 8.00
X-ray of Extremities -----	\$ 5.50
Cranial (any type) -----	\$ 8.00
Abdominal (any type) -----	\$ 3.50
Spinal (any type) -----	\$ 5.00

\*Cost of medicine and other medical supplies may change from time to time as the Director deems appropriate to be in line with market prices.

Clinical Laboratory

Stool -----	\$ 0.50
Urinalysis (all types) -----	\$ 0.50
Hematology (all types) -----	\$ 0.50
Blood Serology -----	\$ 1.50
Spinal Fluid -----	\$ 1.50
Bacteriology (all types) -----	\$ 1.00
Chemistry (all types) -----	\$ 1.00

Special Procedures

Catheterization -----	\$ 2.50
Minor abrasing and contusion -----	\$ 1.50
Surgical dressing (Post-OP at OPD) -----	\$ 1.50
Gastric Lavage -----	\$ 3.50
Insertion of retention catheters -----	\$ 4.00
Closed reduction of dislocation -----	\$ 3.00
I.V. fluids infusions (\$2.00 per 250cc; \$4/500cc; \$7.00/1000cc)-----	\$
Lumbar puncture -----	\$ 4.00
Eye refraction -----	\$ 1.50
Elastic bandage -----	\$ 1.00
Open reduction of compound fracture -----	\$ 8.00
Arm cast (young and adult) -----	\$ 3.50
Boot below knee -----	\$ 3.50
Jacket-Plaster -----	\$ 5.50
Embalming -----	\$10.00
Electrocardiogram -----	\$ 4.00

Inpatient

Hospital daily rate (open ward) room	
and board, routine medication/dressing -----	\$ 4.00
Pediatrics -----	\$ 2.00
Semi-private room -----	\$ 5.50
Private room -----	\$ 8.00
School Children -----	Free

\* Blood transfusion (whatever paid to donor is an additional charge  
to patient -----) \$ 4.00

Types of Surgical Procedures

The following established surgical fees are to be applied in all instances at all T.T. Hospitals. Any surgical procedure which may be performed but does not appear in this schedule should be charged on a comparative basis with the already established list. These rates are subject to change at the discretion of the Director of Health Services:

Abdominal:

Abscess Liver Operation -----	\$ 30.00
Appendectomy -----	\$ 45.00
Cholecystostomy -----	\$ 45.00
Cholecystectomy -----	\$ 55.00
Choledochostomy -----	\$ 55.00
Colectomy -----	\$ 80.00
Fiscal Fistula -----	\$ 45.00
Gastrectomy Partial -----	\$ 80.00
Gastrectomy Total -----	\$ 80.00
Gastrectomy Radical -----	\$ 80.00
Gastroenterostomy -----	\$ 50.00
Gastroscoy -----	\$ 25.00
Gastrostomy -----	\$ 40.00
Laparatomy Explor. -----	\$ 40.00
Pancreatectomy (subt/total) -----	\$ 80.00
Paracentesis Abdominal -----	\$ 15.00
Splenectomy -----	\$ 50.00
Herniorrhaphy (inguinal) -----	\$ 35.00
Herniorrhaphy (diaphragmic) -----	\$ 80.00

Biopsy:

Bone Marrow -----	\$ 25.00
DP Structure -----	\$ 30.00
Skin Subcut -----	\$ 15.00
Prostate Biopsy -----	\$ 15.00

Burns: 2nd degree

1st category 15% or < (BSA) -----	\$ 5.00
2nd category > 15% but < 25% (BSA) -----	\$ 10.00
3rd category > 25% but < 50% (BSA) -----	\$ 20.00
Skin Graft -----	\$ 35.00

Cardiovascular:

Arteriotomy Extrem. -----	\$ 30.00
Phlebotomy -----	\$ 30.00
Varicose Vein Inc. 1 LG -----	\$ 30.00
Varicose Veins 2 LGS. -----	\$ 45.00



Genitourinary:

Bartholin's GLD Exc. -----	\$ 30.00
Bartholin's GLD Inc. -----	\$ 15.00
Biopsy Blad. Tumor -----	\$ 35.00
Cervical polyp removal -----	\$ 15.00
Cervix cauterization -----	\$ 15.00
Cervix conization -----	\$ 20.00
Circum Adult -----	\$ 15.00
Circum Child -----	\$ 10.00
Cystocele Repair -----	\$ 35.00
Vasectomy -----	\$ 10.00
Tubal Ligation -----	\$ 45.00
Cystoscopy -----	\$ 25.00
Cystoscopy operative (trans urethral or removal of cyst from bladder) -----	\$ 35.00
Cystostomy -----	\$ 25.00
Cystolithotomy -----	\$ 45.00
Cervix Rep. Tear -----	\$ 30.00
Diverticulectomy -----	\$ 50.00
Epididymectomy -----	\$ 25.00
Fistula Rectovaginal -----	\$ 50.00
Hydrocele Aspiration -----	\$ 15.00
Hysterectomy -----	\$ 50.00
I & D -----	\$ 10.00
Nephrectomy -----	\$ 80.00
Nephrolithotomy -----	\$ 50.00
Nephrostomy -----	\$ 35.00
Orchidectomy -----	\$ 50.00
Orchidopexy -----	\$ 45.00
Prostatectomy -----	\$ 45.00

Nose and Throat:

Esophagogastrostomy -----	\$ 80.00
Esophagoscopy -----	\$ 20.00
Esophagus Resection -----	\$ 80.00
Gastroscopy -----	\$ 25.00
Laryngectomy -----	\$ 55.00
Laryngofissure repair -----	\$ 45.00
Nasal Polypus Removal -----	\$ 15.00
Tonsillectomy -----	\$ 25.00
Tracheotomy -----	\$ 20.00

Ophthalmological:

Canthotomy -----	\$ 20.00
Cataract Oper. -----	\$ 55.00
Corneal transplant -----	\$ 60.00
Foreign body removal -----	\$ 10.00
Glaucoma Oper. -----	\$ 50.00
Lacry. Sac Excision -----	\$ 35.00
Orbit Reconst. -----	\$ 40.00
Pterygium -----	\$ 20.00

Lip Unil. Incom. Cleft -----	\$ 35.00
Lip double cleft -----	\$ 45.00
Palate incom. cleft -----	\$ 40.00
Pal. Unil cleft -----	\$ 40.00
Pal. double cleft -----	\$ 45.00
Corr. deviated nose -----	\$ 40.00
Reconst. surgery nose -----	\$ 45.00

Reconst. Surgery/Repair:

Canthoplasty -----	\$ 30.00
Epicanthal fold -----	\$ 30.00
Excess skin -----	\$ 40.00
Ptosis adiposa -----	\$ 50.00
Dermal graft -----	\$ 35.00
Excis. skin graft -----	\$ 35.00

Otological:

Mastoidectomy -----	\$ 55.00
Tympanoplasty -----	\$ 30.00

Obstetrical:

D & C -----	\$ 20.00
Caesarean Sec. -----	\$ 45.00
Ectopic Pregnancy -----	\$ 45.00

Rectum:

Anal Fissure Oper. -----	\$ 25.00
Fistula-in-Ano oper. -----	\$ 35.00
Hemorrhoidectomy -----	\$ 35.00

Thoracic:

Breast Resection (simple mastectomy) -----	\$ 35.00
Breast Tumor Exc. -----	\$ 20.00
Bronchoscopy w/Biop. -----	\$ 35.00
For body Rem. Lungs -----	\$ 50.00
Lobectomy -----	\$ 80.00
Mastectomy Rad. Unil. -----	\$ 80.00
Paracentesis Perica. -----	\$ 25.00
Phrenic Nerve Oper. -----	\$ 35.00
Pneumothorax Refill -----	\$ 15.00
Thoracentesis -----	\$ 15.00
Thoracostomy -----	\$ 30.00

Tumors, Cysts, Abscess:

Abscess -----	\$ 35.00
Cyst Sebaceous -----	\$ 15.00
Cyst Thyroglossal -----	\$ 30.00
Cyst Tumor -----	\$ 15.00
Papilloma external -----	\$ 10.00
Tumor Abd. wall -----	\$ 35.00

Unclassified:

Carbuncle -----	\$ 10.00
Cellulitis -----	\$ 10.00
Ingrown toenail -----	\$ 5.00
Thyroidectomy -----	\$ 55.00
Foreign body removal -----	\$ 20.00

Wound

Simple -----	\$ 5.00
Moderate -----	\$ 10.00
Extensive -----	\$ 15.00

Delivery Room Charges

Normal Delivery ----- \$ 8.00  
Complicated Delivery (such as breach or forceps deliver) etc. ----- \$12.00

Nursery

Newborn daily rate after discharge of mother ----- \$ 2.50  
Premature Newborn ----- \$ 4.00

\* In the case of inpatient routine medication, dressing, injection, I.V. are all included in the daily room and board cost. Special Laboratory work, x-ray including surgeries are additional charges based on established rates contained in this schedule.

Other Charges

Eyeglasses ----- 100% of total cost payable in advance  
Artificial limbs ----- 100% of total cost payable in advance  
or deposit \$10.00 if full price not  
known. (May be required to pay only  
90% of total cost)  
Crutches: purchase ----- Full cost in advance  
rental ----- \$1.00/week  
Hot water bag ----- \$3.00 to be deposited in advance and be  
reimbursed upon return in good condition.  
(rental will not exceed 2 weeks).  
Wheelchair ----- Patients may buy at 90% of full cost or  
rent at \$1.50/wk in advance and required  
to pay full cost if damaged due to  
negligence.

Special Note:

All collections made from rental and/or purchase of medical and surgical supplies including equipment must be deposited directly to the district Medical Supply Account.

All medications and/or medical supplies must be issued in the exact amount prescribed by the physician.

All charges are due and payable at the time the particular medical services is rendered. Failure to make payment within thirty days after billing will result in an additional delinquent charge of ten percent (10%) on all amounts payable and overdue.

All non-emergency cases in nature seen after normal clinic hours will be charged \$2.00

All Public Health Clinics including well-baby, V.D., T.B., Leprosy, Immunization, etc. will remain free of charge

Dispensary

House Call -----	\$ 0.50
Out-patient visit (All types) -----	\$ 0.10
In-patient -----	\$ 0.50

A Medical Referral Fee Assessment Committee shall be created in each district to review each prospective medical referral patient to determine the individual's ability to pay, if and when he or she is referred for medical care outside of home district. Such Committee shall be composed of the District Finance Officer, one Consumer Representative, DDHS and Hospital Administrator. The Consumer representative shall be appointed by the District Administrator.

It shall be required that all medical referral patients referred outside of the Trust Territory as well as intra-districts pay the standard Trust Territory inpatient and/or outpatient charges, plus all other costs applicable within the established T.T. fee schedule normally charged at each district hospital, except for such services which are recommended by the assessment Committee to the High Commissioner through the Director of Health Services, and as the High Commissioner determines shall be free in order to best serve the public interest; PROVIDED, that no one in need of medical care shall be denied such care because of inability to pay all or any part of fees incurred as a result of medical evaluation/treatment.

All patients referred under the Crippled Children's Services (CCS) are exempted from the above provisions. Other federal services programs such as the Cervical Cancer Screening and Family Planning are equally exempted from charges.

This fees schedule, which shall be referred to as the Trust Territory Medical Fees Schedule, supersedes any and all other schedules pertaining to health care costs in the Trust Territory when the same are covered herein. This schedule shall become effective upon publication in the Territorial Register, in the absence of a determination by the Director of Health Services that the same shall be delayed in any district, which decision shall be evidenced by a notice published in the Territorial Register.

ACETAMINOPHEN TABS.  
ACETAMINOPHEN DROPS  
ACETAZOLAMIDE TABS.  
ACETAZOLAMIDE TABS  
ALUMINUM HYDROXIDE GEL SUSPENSION  
ALUMINUM HYDROXIDE GEL TABS.  
AMINOSALICYLIC ACID TABS.  
ASPIRIN TABS.  
ASPIRIN SUPPOSITORIES  
BARIUM SULFATE  
BELLADONNA TINCTURE  
BELLADONNA WITH PHENOBARBITAL TABS.  
BELLADONNA WITH PHENOBARBITAL ELIXIR  
BENZOIC AND SALICYLIC ACID OINTMENT  
BUSULFAN TABS.  
BUTAZOLIDINE ALKA CAPS.  
BUTYN METAPHEN  
CAFFEINE AND SODIUM BENZOATE  
CLINITEST TAB.  
ENEMA-READY TO USE SQUEEZE BOTTLE-AQUIOUS  
ENEMA-READY TO USE SQUEEZE BOTTLE-OIL RETENTION  
GLYCERIN SUPPOSITORIES, ADULT  
GLYCERIN SUPPOSITORIES, INFANT  
GLECERYL GUAIACOLATE SYRUP  
HEPARIN SODIUM INJ.

CATEGORY A

EXHIBIT - I

HEXAVITAMIN TAB.

MULTIVITAMIN WITH FLUORIDE,

MAGNESIUM SULFATE CRYSTALS

SUCCHARIN SODIUM.

AMINOPHYLLIN TABS.  
AMINOPHYLLIN WITH PHENOBARBITAL TAB.  
AMINOPHYLLIN SUPPOSITORIES  
AMINIPHYLLIN INJECTION  
AMINOPHYLLIN EPHEDRINE AMOBARBITAL TABS.  
ATARAX TABLET/SYRUP  
ATROPINE SULFATE OPHTHALMIC OINTMENT  
ATROPINE SULFATE INJECTABLE  
ATROPINE SULFATE OPHTHALMIC SOLUTION  
BACITRACIN-POLYMYXIN-NEOMYCIN W/HYDROCORTISONE TROPICAL OINTMENT  
BACITRACIN, NEOMYCIN, POLYMYXIN B WITH HYDROCORTISONE EYE OINTMENT  
BACITRACIN, NEOMYCIN, POLYMYSIN B EYE OINTMENT  
BETHANECHOL CHLORIDE INJECTABLE  
BETHANECHOL CHLORIDE TABLETS  
BISACODYL TABLETS  
BISACODYL SUPPOSITORIES  
CALCIUM DISODIUM ACETATE INJECTABLE  
CALCIUM DISODIUM ACETATE TABLETS  
CALCIUM GLUCONATE INJECTABLE  
CALCIUM LACTATE POWDER  
CALCIUM LACTATE TABLETS  
CARBASONNE TABLETS  
CEPHALEXIN MONOHYDRATE CAPS.  
CEPHALEXIN MONOHYDRATE SUSP.  
CEPHALOTHIN SODIUM INJECTION  
CLOXACILLIN SODIUM CAPSULES



CATEGORY B

CLOXACILLIN SODIUM SOLUTION ORAL

COD LIVER OIL

COLCHICINE TAB

COGENTIN MESYLATE BENZTROPINE

CORTICOTROPIN GEL.

CORTISONE ACETATE TABS.

DIIDOHYDROXYQUIN VAGINAL SUPPOSITORIES

DEHYDROCHOLIC ACID TABS.

DEHYDROCHOLATE SODIUM INJ.

DELPHEN CONTRACEPTIVE CREAM KIT REG WITH APPLICATOR

DEXAMETHOSONE ELIXIR, PEDIATRIC

DEXAMETHOSONE CREAM

DEXAMETHASONE SODIUM PHOSPHATE INJ.

DEXAMETHASONE TABS.

DEXTRAN 6% IN NORMAL SALINE

ALCOHOL 5% DEXTROSE 5% IN WATER

DEXTROSETIX

DEXTROSE

DEXTROSE 2 1/2% IN NORMAL SALINE

DEXTROSE 5% IN 0.2% SODIUM CHLORIDE

DEXTROSE 5% IN 0.2% SODIUM CHLORIDE

DEXTROSE 2.5% IN 0.45% SODIUM CHLORIDE

DEXTROSE 2.5% IN 0.45% SODIUM CHLORIDE

DEXTROSE 5% IN 0.45% SODIUM CHLORIDE

DEXTROSE 5% IN HALF NORMAL SALINE

DEXTROSE 5% IN HALF NORMAL SALINE

DEXTROSE 2 1/2% IN HALF STRENGTH LACTATED RINGERS  
DEXTROSE 2 1/2% IN HALF STRENGTH LACTATED RINGERS  
DEXTROSE 2 1/2% IN HALF STRENGTH RINGERS SOLUTION  
DEXTROSE 5% IN LACTATED RINGERS  
DEXTROSE 5% IN RINGERS  
DEXTROSE 2 1/2% IN WATER  
DEXTROSE 2 1/2% IN WATER  
DEXTROSE 5% IN WATER  
DEXTROSE 5% IN WATER  
DEXTROSE 5% IN WATER  
DEXTROSE 5% IN WATER  
DEXTROSE 10% IN WATER  
HALF NORMAL SALINE  
HALF NORMAL SALINE  
LACTATED RINGERS SOLUTION  
NORMAL SALINE  
NORMAL SALINE  
RINGER SOLUTION  
DIAMINODIPHENYL SULFONE TABS.  
DIAMUNODIPHENYL SULFONE TABS.  
DIATRIZOATE SODIUM INJ.  
DIENOESTROL VIGINAL CREAM  
DIETHYLSTILBESTROL TABS.  
DIETHYLCARBAMAZINE CITRATE TABS.  
DIGITOXIN TABS.  
DIGITOXIN TABS.  
DIGITOXIN INJ.

CATEGORY B

EXHIBIT - II

DIGOXIN TABS.

DIGOXIN INJ.

DIGOXIN ELIXIR

DIIDOXYQUIN VAGINAL SUPPOSITORIES

DIIDOXYQUIN TABS.

DIMENHYDRINATE TABS.

DIMENHYDRINATE INJ.

DIMENHYDRINATE ELIXIR

DIMERCAPROL INJ.

DIMERCAPROL INJ.

DIPHENHYDRAMINE HCL CAPS.

DIPHENHYDRAMINE HCL ELIXIR

DIPHENHYDRAMINE HCL INJ.

DIPHENYLHYDANTOIN ORAL SUSPENSION

DIPHENYLHYDANTOIN TABS.

DIPHENYLHYDANTOIN CAPS.

DIPHENYLHYDANTOIN INJ.

DISODIUM EDTATE INJECTABLE

DOMEBORO TABS.

DOPAR LEYODOPA ANTI PACKINSON CAPS.

DYMELOR ACETOHEXAMIDE TABS.

EDROPHONIUM HCL INJ.

ELAVIL TABS.

EMETINE HCL INJ.

GLYCERYL TRINITRATE SUBLINQUAL TABS.

EPHEDRINE SULFATE TABS.

EPHEDRINE SULFATE CAPS.

CATEGORY B

EXHIBIT - II

EPHEDRINE SULFATE TABS.  
EPHEDRINE SULFATE CAPS.  
EPHEDRINE SULFATE INJ.  
EPINEPHRINE INJ.  
EPINEPHRINE INHALER  
EPINEPHRINE SOLUTION, TROPICAL  
EPINEPHRINE IN OIL SUSPENSION  
ERGONOVINE MALEATE INJ.  
ERGONOVINE MALEATE TAB.  
ERGOTAMINE TARTRATE TABS.  
ERGOTAMINE TARTRATE INJ.  
ERGOTAMINE TARTRATE WITH CAFFEINE SUPPOSITORIES  
ERGOTAMINE TARTRATE WITH CAFFEINE TAB.  
ERYTHROMYCIN SUSPENSION  
ERYTHROMYCIN CAPS.  
ESTROGENIC SUBSTANCES, CONJUGATED  
ETHOTONIN TAB.  
ETHIONAMINE TAB.  
ETHOSUXIMIDE CAP.  
FERROUS SULFATE TAB.  
FERROUS SULFATE SOLUTION  
FERROUS SULFATE ELIXIR  
FIBRINOLYSIN AND DESOXYRIBONUCLEASE OINTMENT  
FLUOROURACIL SODIUM STRIPS, OPHTHALMIC  
FLUOROURACIL INJ.  
FUROSEMIDE TABS.  
FUROSEMIDE INJ.

CATEGORY B

EXHIBIT - II

GENTAMYCIN SULFATE INJ.  
GENTIAN VIOLET  
GENTIAN VIOLET VAGINAL APPLICATORS  
GRISEOFULVIN TAB.  
HEMORRHOIDAL SUPPOSITORIES  
HEMORRHOIDAL SUPPOSITORIES WITH HYDROCORTISONE  
HOMATROPINE OPHTHALMIC SOLUTION  
HYALURONIDASE INJ.  
HYDRALAZINE INJ.  
HYDRALAZINE TAB.  
HYDROCHLORTHIAXIDE  
HYDROCORTISINE OINTMENT  
HYDROCORTISONE TABS.  
HYDROCORTISONE CREAM  
HYDROCORTISONE SODIUM SUCCINATE  
ISOPROTERENOL HCL INHALANT  
ISOPROTERENOL HCL TABS.  
ISOPROTERENOL INJ.  
ISOSORBIDE DINITRATE SUBLINGUAL TAB.  
ICHTHAMMOL OINTMENT  
IDOXURIDINE OPHTHALMIC OINTMENT  
INSULIN. ZINC CRYSTALLINE INJ.  
INSULIN. ISOPHANE INJ.  
INSULIN ZINC CRYSTALLINE INJ.  
INSULINE. ISOPHANE INJ.  
IODIZED OIL INJ.

CATEGORY B

EXHIBIT - II

IDOCHLORHYDRAXYQUIN CREAM  
IOPANOIC ACID TABS.  
IRON-DEXTRAN COMPLEX INJ.  
ISONIAZID INJ.  
ISONIAZID TAB.  
ISONIAZID SYRUP  
KAFPCIN (CEPHALAGICIN DIHYDRATE)  
KANAMYCIN CAPSULES  
KANAMYCIN PEDIATRIC INJ.  
KANAMYCIN INJ.  
KAOLIN  
KAOLIN WITH PECTIN ORAL SUSPENSION  
KAOLIN WITH NEOMYCIN ORAL SUSPENSION  
LEVALLORPHAN TARTRATE INJ.  
LEVARTERENOL BITARTRATE INJ.  
LIDOCAINE INJ.  
LIDOCAINE VISCOUS  
LIDOCAINE OINTMENT  
LIPO LUTIN IN OIL  
LIVER INJ.  
MAGNESIUM SULFATE INJ.  
MANNITOL INJ.  
MEDROXYROGESTERONE ACETATE TAB.  
MEDROXYROGESTERONE ACETATE INJ.  
MENTHOL COMPOUND OINTMENT  
MEPROBAMATE TAB.  
MERCAPTOPURINE TAB.

METARAMINOL BITARTRATE INJ.  
METHANOL  
METHENAMINE MANDELATE TAB.  
METHENAMINE MANDELATE SUSPENSION  
METHOTREXATE TAB.  
METHOTREXATE INJ.  
METHYLERGONOVINE MALEATE INJ.  
METHYLERGONOVINE MALEATE TAB.  
METHYLPREDNISOLONE ACETATE INJ.  
METHYL SALICYLATE, PLAIN  
METHYLTESTOSTERONE TAB.  
METRONIDAZOLE TAB.  
METRONIDAZOLE VAGINAL SUPPOSITORIES  
MINERAL OIL  
NATA TABS.  
NEMA WORM CAPS.  
NEOMYCIN TABS.  
NEOSTIGMINE METHYLSULPHATE INJ.  
NEOSTIGMINE METHYSULPHATE IN.  
NEOSTIGMINE BROMIDE TABS.  
NITROFURANTOIN TABS.  
NITROFURANTOIN SUSPENSION  
NITROFURANZONE OINTMENT  
NYSTATIN ORAL TABLETS.  
NYSTATIN CREAM

NYSTATIN ORAL SUSPENSION  
POLYMYXIN B SULFATE INJ.  
POLYMYXIN B OTIC DROPS  
POLYMYXIN B NEOMYCIN HYDROCORTISONE OTIC DROPS  
PENICILLIN G POT, INJ.  
PENICILLIN G PROCAINE INJ.  
PHENOBARBITAL ELIXIR  
PHENYLAZODIAMINO PYRIDINE HCL TAB.  
PHENYLEPHRINE CHL INJ.  
PHENYLEPHRINE HCL JELLY  
PHENYLEPHRINE HCL NASAL SOLUTION  
PILOCARPINE EYE OINTMENT  
PILOCARPINE EYE SOLUTION  
PIPERAZINE CITRATE TAB.  
POPERAZINE CITRATE SYRUP  
POPERAZINE CITRATE SYRUP  
POTASSIUM PHENOXYMETHYL PENICILLIN TABS.  
POTASSIUM PHENOXYMETHYL PENICILLIN SUSPENSION  
POTASSIUMCHLORIDE INJ.  
PREDNISOLONE EYE OINTMENT  
PREDNISONONE TABS.  
PRIMIDONE SUSPENSION  
PRIMIDONE TABS.  
PROBENECID TABS.  
PROBENECID TABS.



PROCAINAMIDE CAPS.

CATEGORY B

EXHIBIT - II

PROCAINAMIDE INJ.

PROGESTERONE ETHISTERONE TABS.

PROPANTHELINE BROMIDE TABS.

PROPOXYPHENE HCL CAPS.

PROPOXYPHENE NAPSYLATE

PROPRANOLOL HCL TABS.

PROPYLTHIOURACIL TAB.

PROTAMINE SULFATE INJ.

PROMETHAZINE HCL. INJ.

PROMETHAZINE HCL SYRUP

PROMETHAZINE EXPECTORANT

PROMETHAZINE HCL TABS.

PYRIBENZAMINE TABS.

PYRIBENZAMINE ELIXIR

PYRIDOSTIGMINE BROMIDE TAB.

PYRIDOXINE HCL INJ.

PYRVINIUM PAMOATE ORAL SUSP.

PYRVINIUM POMOATE TABS.

QUINAGLUTE DURA TABS.

QUINIDINE SULFATE INJ.

QUINIDINE SULFATE TABS.

QUININE SULFATE CAPS.

REGITINE PHENOTOLAMINE

RESERPINE INJ.

RESERPINE TABS.

RESORCINOL

CATEGORY B

EXHIBIT - II

RIFADIN  
RITALIN HCL TABS.  
SILVER NITRATE WAX AMPS.  
SILVER NITRATE STICKS  
SODIUM LACTATE INJ.  
SODIUM SALICYLATE TAB.  
SODIUM SULFACETAMINE EYE OINTMENT  
SODIUM SULFACETAMIDE EYE SOLUTION  
SODIUM TRIIODOTHYRONINE TABS.  
SPIRONOLACTONE TABS.  
STONE FISH ANTIVENE  
STREPTOMYCIN INJ.  
SUCCINYLMCHOLINE CHLORIDE INJ.  
SUDAFED TABS.  
SULFISOXAZOLE TABS.  
SULFISOXAZOLE SUSPENSION  
SULFISOXAZOLE INJ.  
SULFISOXAZOLE VAGINAL CREAM  
SULFOBROMOPHTHALEIN SODIUM INJ.  
TESTOSTERONE INJ.  
TETRACAINE OPHTHALMIC DROPS  
TETRACHLORETHYLENE CAPS.  
TETRACYCLINE HCL CAPS.  
TETRACYCLINE SUSPENSION SYRUP  
TETRACYCLINE HCL PEDIATRIC DROPS  
TETRACYCLINE INJ.  
TETRACYCLINE INJ.

THEOPHYLLINE ORAL SOLUTION

CATEGORY B

EXHIBIT - II

THEOPHYLLINE EPHEDRINE PHENOBARBITAL SUSPENSION

THIABENDAZOLE SUSPENSION

THIABENDAZOLE CHEWABLE TABS.

THIAMINE HCL TABS.

THIOTEPA

THYROID TABS.

TINVER LOTION

TOFRANIL HCL

TOLBUTAMIDE TABS.

TOLNAFTATE SOLUTION, TOPICAL

TRIFLUOPERAZINE INJ.

TRIFLUOPERAZINE TABS.

TRIHXYPHENIDYL HCL TABS.

TRIMETHADIONE CAPS.

TRIPLE SULFA TABS.

TRIPROLIDINE WITH PSEUDOEPHEDRINE HCL TABS.

TRIPROLIDINE WITH PSEUDOEPHEDRINE HCL SYRUP

UNDECYLINIC ACID OINTMENT

VALMID ENTHINAMATE TAB.

VASOPRESSIN INJ.

VASOPRESSIN IN OIL INJ.

VELBAN INJ.

CIOMYCIN

VITAMIN B WITH C INJ.

VITAMIN B COMPLEX WITH VITAMIN C INJ.

VITAMIN B6 TABS.

CATEGORY B

EXHIBIT - II

VITAMIN B12 INJ.

VITAMIN C TABS.

VITAMIN D CAPS.

VITAMIN K TABS.

VITAMIN K INJ.

VITAMIN K INJ.

VITAMIN K INJ.

WARFARIN SODIUM INJ.

WARFARIN SODIUM TABS.

CATEGORY C

ALDOMET TABS.  
ALLOPURINOL TABS  
AMBENONIUM CHLORIDE TABS  
AMPICILLIN INJ  
AMPICILLIN CAPS  
AMPICILLIN ORAL SUSPENSION  
AMPICILLIN SUSPENSION  
AMPICILLIN SUSPENSION  
AMPICILLIN SODIUM INJECTION  
AMPICILLIN SODIUM INJECTION  
ANTABUSE TABLETS  
ANTABUSE TABLETS  
ATROPINE SULFATE TABS  
CHLORAMBUCIL TABLETS  
CHLORAMINE  
CHLORAMPHENICOL CAPSULES  
CHLORAMPHENICOL SUCCINATE  
CHLORAMPHENICOL SUSPENSION  
CHLORDIAZEPHOXIDE CAPSULES  
CHLOROQUIN PHOSPHATE TABLETS  
CHLORPHENIRAMINE MALEATE TABLETS  
CHLORPROMAZINE  
CHLORPROMAZINE HCL TABLETS  
CHLORPROMAZINE HCL TABLETS

CHLORPROMAZINE HCL INJ  
CHLORPROMAZINE HCL SYRUP  
CHLORPROPAMIDE TABLETS  
CHLORPROPAMIDE TAB.  
CHLORTRIMETON MALEATE INJ  
CHLORTRIMETON MALEATE INJ  
CYCLAININE HEXYCAINE HCL  
CYCLEX DIURETIC TRANQUILIZER  
CYCLOPHOSPHAMIDE TABS  
CYCLOPHOSPHAMIDE INJ  
CYCLOPHOSPHAMIDE INJ  
CYCLOSERINE CAPS  
CYPROHEPTADINE HCL TABS  
CYTOMEL  
DALMANE CAPS  
DALMANE CAPS  
GUANETHIDINE SULFATE TAB  
KENALOG CREAM  
KETAJECT KETAMINE HYDROCHLORIDE  
KETAJECT (KETAMINE) HYDROCHLORIDE  
MELLARIL TABS  
MELLARIL TABS  
MELLARIL TABS  
MELPHALAN TAB  
MEPHENTERMINE SULFATE INJ  
MYAMBUTOL TABS

MYAMBUTOL TABS

NAFCULLIN INJ

NALARPHINE HCL INJ

NALARPHINE HCL INJ

NARACAN INJ

OXYTOCIN INJ

PERCORTEN DESOXYCORTICOSTERONE ACETATE

PANCRELIPASE CAPSULES

PARLAZ CAP

PERSANTIN TABS

PHENFORMIN CAPS., LONG ACTING

PROCHLORPERAZINE TABS

PROCHLORPERAZINE SYRUP

PROCHLORPERZAIN IN.

PROLIXIN TABS.

PROLIXIN DECANOATE INJ

RIFAMPIN

SINEQUAN CAPS

SINEQUAN CAPS

TELDRIN CAPS

VINCREISTINE SULFATE INJ

# PUBLIC NOTICE

## TRUST TERRITORY MEDICAL FEE SCHEDULE IN KOSRAE TITLE 63 CHAPTER 3

The Director of the Department of Health Services has adopted regulations for Title 63, Trust Territory Code, Chapter 3, in accordance with the provisions of Title 17 of the Trust Territory Code.

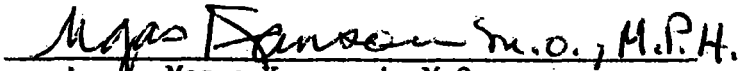
The adopted regulations were first published as proposed regulations in the Territorial Register, Volume II, No. 1 dated December 4, 1976. Said notice indicated that the fee schedule would not be implemented in Kosrae until further notice had been given.

The Director of the Department of Health Services herewith gives said further notice that the uniform Medical Fee Schedule previously adopted for use throughout the Trust Territory shall be adopted and implemented in Kosrae commencing June 1, 1977.

The Department of Health Services is soliciting views, opinions, facts and data for or against implementation of the uniform Medical Fee Schedule in Kosrae from the general public.

Anyone interested in commenting on the implementation of the regulations may do so by submitting written comments to the Director of Health Services, Department of Health Services, Headquarters, Saipan, Mariana Islands, within 30 days from the date this Notice is published in the Territorial Register.

Date 4/1/77

  
Masao Kumagai, M.O., M.P.H.  
Director of Health Services