

COMMONWEALTH HEALTHCARE CORPORATION

FY 2025 CITIZEN CENTRIC REPORT



SAIPAN - TINIAN - ROTA

Vision: The Commonwealth Healthcare Corporation provides sustainable, innovative, equitable, and comprehensive culturally responsive services to achieve accessible, high-quality, patient-centered wellness outcomes for all people in the CNMI.

Mission: Provide quality comprehensive health services and promote healthy environments for a resilient community.

Values: CHCC is committed to exceeding standards by providing a culture of compassionate, effective, quality care, honoring the dignity of its stakeholders and community, and promoting equity and transparency as well as continued accountability and growth throughout the corporation.



Juan N. Babauta
Chairman
Board of Trustees



Esther L. Muña, PhD, MHA, FACHE
Chief Executive Officer

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2025 CHCC Strategic Planning & Leadership Initiatives

1. Digital Transformation & AI Integration

- Leadership Focus: To improve patient care across the CHCC health system by keeping patient safety and empowerment at the center of the care experience
- Metrics - Monitor implementation milestones; Track efficiency gains and percentage of processes digitized, diagnostic accuracy improvements, and staff productivity; Return on investment (ROI) achievements
- Innovation - AI-powered patient flow optimization and clinical decision support to reduce wait times, improve early detection, and standardize the quality of care; Apply predictive, enhanced analytics for resource allocation and measurement of public health programs' efficacies

2. Workforce Development & Resilience

- Leadership Focus: To develop CHCC as a top-choice healthcare employer and comprehensive health system in the Pacific region with built local healthcare capacity
- Metrics - Track staff turnover, transfer, and advancement rates, certification achievements, and other standard Human Resources key performance indicators (KPIs); Increased employee satisfaction scores
- Innovation - Establish a multidisciplinary Staff Development Committee for core workforce priorities related to Orientation, annual required trainings, and continuous education opportunities for all healthcare professionals; Comprehensive retention program targeting workforce supports and employee-empowered policy developments

3. Community Health Access & Equity Initiative

- Leadership Focus: Eliminate healthcare disparities and improve population health metrics across the CNMI
- Metrics - Track health outcome equity and access measures across demographic groups against comparative data released in 2023 Non-Communicable Disease (NCD) & Risk Factor Adult Hybrid Survey report; Monitor outpatient clinic services uptakes and primary care patient engagement for increased preventive care compliance; Reduced emergency department utilization for non-emergency care
- Innovation - Mobile health unit services and community health worker program expansions; Targeted community collaborations for NCD-specific interventions

4. Financial Health & Sustainability

- Leadership Focus: Achieve long-term financial health while maintaining community access
- Metrics - Monitor cost per patient trends to reduce cost per adjusted patient day; Federal grants secured with targeted applications maintained in pipeline; Optimization of CNMI Medicaid State Plan Amendments opportunities for increased federal Medicaid funding; Increased federal reimbursement rates with Federally Qualified Health Center (FQHC) and Rural Health designations for island health centers/clinics; Reduce dependency on grants targeted for federal elimination and reduction
- Innovation - Develop telemedicine revenue streams; Leverage donor supports to maximize return on investments (ROI); Expand specialized services that align with patient care goals



OUR PROGRESS

RHC Visits	Primary Care/Appointments	Walk-In / Urgent Care	Nurse Visits	Telehealth	Emergency Room	Total
Patient Visits	1,569	2,070	611	10	690	4,950

LCVAHC Visits	Primary Care/Appointments	Walk-In / Urgent Care	Nurse Visits	Telehealth	Emergency Room	Total
Patient Visits	2,025	1,513	1,543	0	968	6,049

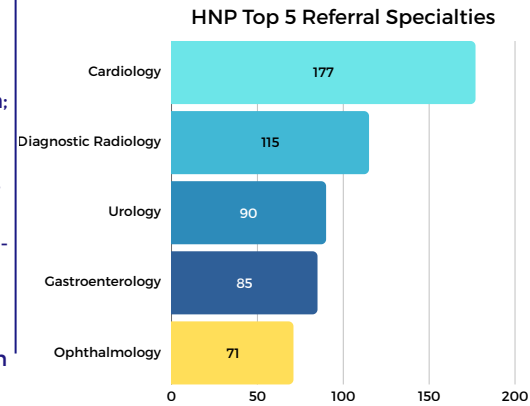
- Digital Transformation & AI Integration
 - Implementation phase launched in April of the comprehensive MEDITECH Expanse electronic health record (EHR) system across all facilities.
- Workforce Development & Resilience
 - Direct employment sustained for 1,000+ jobs in the CNMI; Implementation of the MUNIS Human Resources component to digitize personnel records, recruitment and retention processes, and performance management actions; Expanded insights of the 2024 Employee Engagement & Satisfaction Survey into actionable, retention strategies targeted to improve employee morale, motivation and wellbeing, Leadership visibility and transparency in administrative processes, and recruitment and retention efforts through professional development curricula policy and program reforms; Increased local healthcare professionals for shorter wait times and culturally competent care.
- Community Health Access & Equity Initiative
 - Building upon 2024 successes, continued provisions of strong community programs to ensure the implementation of comprehensive social determinants of health screenings and interventions.
- Financial Health & Sustainability
 - Optimized 2024 strengths of strong operational foundation reflected in patient revenue ratios; Policy outreach and advocacy of federal funding opportunities allowable under Medicare and Medicaid programs; Continued investments in facility enhancements and medical equipment upgrades.
- Behavioral Health Services
 - A Training-of-Trainers program for Peer Support Specialists took place to provide knowledge, skills, and technical assistance for peers in recovery, and CHCC CGC leadership and workforce to guide in the development of the CHCC CGC Peer Support Program.
 - Matrix Model training for Teens & Young Adults: The training equips facilitators to provide outpatient substance use disorder treatment services for youth and young adults and supervisors with supervisor-level knowledge, skills, and standards to supervise training facilitation.
 - A first cohort of CHCC Population Health leaders and managers participated in a three-day Middle Management Academy (MMA). This MMA training was the first to be conducted on-island and was facilitated by Jeanne Supin, a consultant and leader for the Middle Management Academy through the National Council for Mental Wellbeing.

- Non-Communicable Disease Programs
 - 200 individuals referred to the Diabetes Self-Management Education (DSME) program; 61 (31%) completed successfully. - 111 referrals to Nicotine Cessation Program; 22 (20%) completed the full program. - 607 mammograms and 576 cervical screenings provided to the uninsured or underinsured - 22 participants enrolled in the Wise Women cardiovascular health program.
- Maternal, Infant, Child, and Adolescent Health
 - 1,366 individuals received Family Planning Services (2,390 visits total). - 201 families served through the Home Visiting Program; 3,475 home visits completed. - 2,700 families supported through WIC, distributing \$3.29 million in food benefits. - 10 youth trained as Peer Educators; 90 teens reached through PATCH workshops. - 385 participants during Parent Learning sessions. - 50 transportation vouchers issued for children/families in accessing healthcare & related services. - 202 children provided care coordination for accessing Shriner's Hospital services. - 266 high school students completed diabetes and hypertension screenings during outreach.
- Communicable Disease Programs
 - 10,996 individuals vaccinated by the Immunization Clinic; 35,997 total doses administered and reported to the IIS/WebIz. - \$2.1 million in vaccines distributed to vaccine providers/clinic partners in the CNMI to expand vaccine coverage and prevent the introduction and spread of vaccine preventable diseases - 71.9% of children aged 0-4 and 87.4% of school-aged children up-to-date on vaccines. - 218 STI cases investigated; 29 TB cases managed with 13 latent TB infections treated among contacts.
- Environmental Health & Disease Prevention
 - 1,445 food establishments and 330 non-food facilities inspected. - 4,274 food handlers trained in food safety practices. - 64 disease investigations conducted. - \$450,613 in fees collected; - FDA Model Food Code adopted November 2024.
- Expanded Services for Specialty Clinics
 - Interventional Pain Management Clinic
 - Lumbar Epidural Steroid Injections
 - Lumbar Radiofrequency Nerve Ablation
 - Sacroiliac Joint Injections
 - Occipital Nerve Injections
 - Trigger Point Injections
 - Cardiology Clinic
 - Telemedicine Platform capabilities to serve Rota and Tinian
 - Moved to a larger clinic space within CHCC

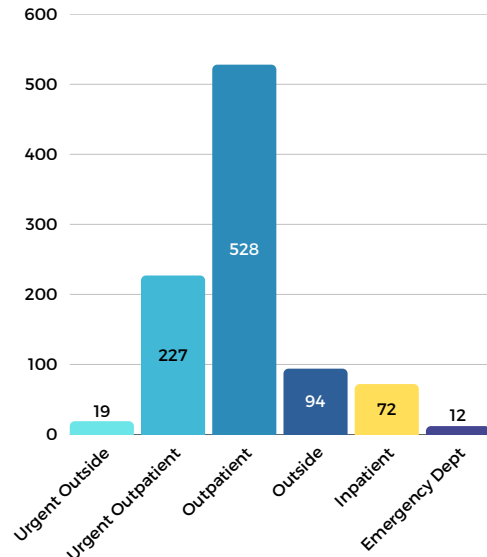
Inter Island Medical Referral (IIMR)

	IIMR	IIMR Emergency
RHC (Rota)	562	59
LCVAHC (Tinian)	357	108

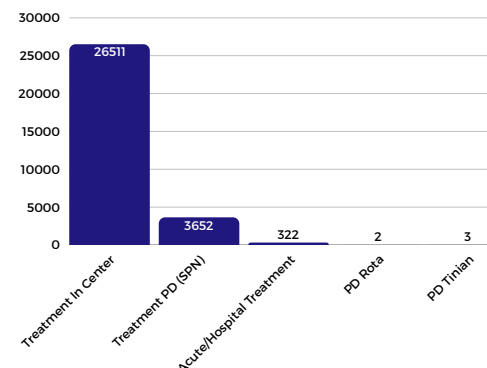
Health Network Program (HNP)



HNP Source of Referrals Rcvd



Hemodialysis Treatments



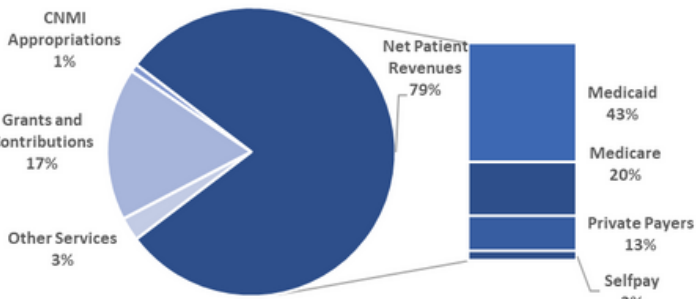
OUR FINANCES

Net patient revenues accounted for 79%, 75%, 71%, 58%, 75% and 69% of total gross revenues for the years ended Sept 30, 2025, 2024, 2023, 2022 and 2021, respectively.

Medicaid continues to be CHCC major payor as a significant number of our population are covered by Medicaid.

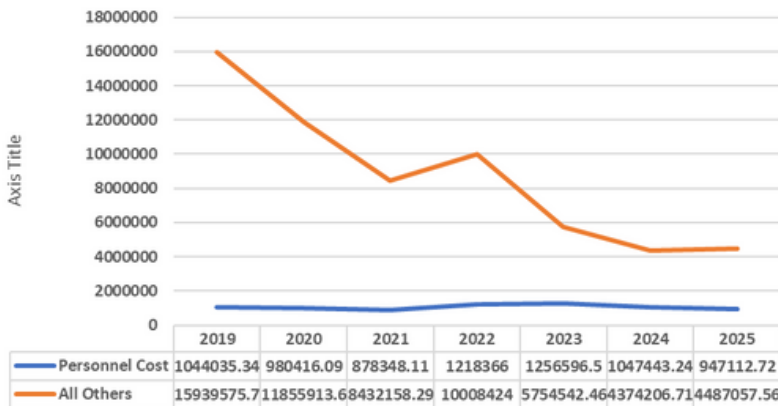
CNMI Appropriation amounting to \$1,253,865 were for the Health Network Program. Actual expenditures for this program amounted to \$5,434,170 (Personnel Costs of \$947,112 and Other Operating Costs of \$4,487,058). Since the transfer of Medical Referral Program now known as Health Networks Program, to CHCC, \$4,443,557 has been advanced from CHCC General Funds to the Program.

REVENUES

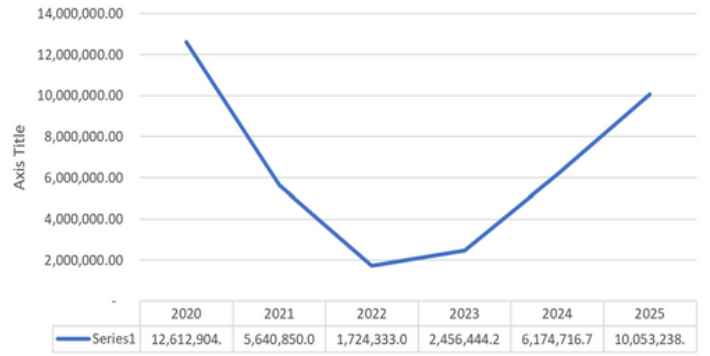


Revenues	2025	2024	2023	2022	2021	2020
Medicaid	61,448,992	54,129,046	42,504,873	44,866,921	44,486,763	30,461,563
Private Payers	17,946,803	18,872,817	22,117,160	11,324,659	17,283,985	16,374,759
Medicare	28,428,592	29,452,281	16,171,976	13,638,431	12,853,585	11,383,814
Selfpay	4,895,736	3,967,082	1,959,487	1,051,896	1,319,550	1,107,909
Net Patient Revenues	112,720,123	106,421,226	82,753,496	70,881,907	75,943,883	59,328,045
Grants and Contributions	24,278,567	30,219,625	116,005,710	35,128,773	1,117,560	22,879,600
CNMI Appropriations	1,253,865	2,233,968	5,479,678	11,685,655	1,930,561	2,976,861
Other Services	3,797,865	3,419,057	5,223,963	3,882,267	1,773,390	832,045
Gross Revenues	142,050,421	142,293,876	116,005,710	121,578,602	100,765,394	86,016,551

HNP Comparative Expenditures



Uncompensated Care (Lost Revenue)



CHCC management of the Medical Referral Program, through Health Network Programs was able to reduce cost from \$15.9 Million in 2019 under the Office of the Governor, to \$5 million and under since the inception of HNP through PL 22-23.

2025	Lost Revenue	Proportionate Cost
Uncompensated	10,053,238.39	9,305,545.39

Expenditures	General Fund	Federal and other Grants	Total 2025	General Fund	Federal and other Grants	Total 2024*	Total 2023	Total 2022	Total 2021
Personnel	66,938,100	7,817,293	<u>74,755,393</u>	65,026,660	8,173,340	71,805,130	70,864,969	74,439,986	57,105,269
Operations	43,319,203	14,931,576	<u>58,250,779</u>	46,531,527	14,096,375	76,713,541	53,048,494	66,537,051	45,772,437
Total Expenditure	110,257,303	22,748,869	<u>133,006,172</u>	124,739,236	23,779,434	148,518,671	123,913,463	140,977,037	102,877,706

* Corrected, changes due to reporting errors from the Munis System

OUTLOOK & CHALLENGES



WORKFORCE DEVELOPMENT AND RETENTION

- As CHCC continues to strengthen its workforce to meet the growing healthcare needs of the CNMI community, recruitment and retention remain significant priorities and ongoing challenges. Staffing shortages in key specialty areas such as nursing, ancillary services, and provider positions continue to impact operations, with recruitment timelines often extending two to four years due to market competition, visa processing delays, and federal program limitations.
- Provider turnover, coupled with the impending expiration of the CW-1 and H-1B cap exemption programs in 2029, adds complexity to long-term workforce planning. Rising visa fees, evolving federal requirements, and limited compensation competitiveness compared to mainland U.S. benchmarks further affect retention efforts.
- CHCC is committed to addressing these challenges through improved data-driven decision-making, stronger supervisor training, and continuous review of recruitment, evaluation, and retention strategies. While the healthcare environment remains demanding, CHCC continues to prioritize its people—ensuring that a stable, skilled, and supported workforce is at the heart of delivering quality care to our community.



ONGOING FACILITIES PROJECTS

- Emergency Department Improvement & Enhancement project
- CHC Generators Project
- CHCC Patient Room Isolation Exhaust & Filter System project
- Tinian Peritoneal Dialysis
- Tinian Generator Project
- CHCC Parking Space Expansion
- CHCC Solar Photovoltaic Phase III
- CHCC Health Information System Upgrade
- CHCC Patient Room Flooring Replacement, Wall Paneling
- MRI & Hyperbaric Chamber Facility
- Medical Supplies Office Warehouse Project

Emerging Leadership Visions for 2026 and 2027

Looking beyond 2025, we envision CHCC as a regional leader—pioneering climate-resilient healthcare systems, serving as a premier healthcare hub for Micronesia, and leveraging data-driven population health management to proactively address the unique health challenges facing Pacific island communities.

1. Climate-Resilient Healthcare System

- Strategic Vision:** Become the first climate-resilient healthcare system in Micronesia
- 2026 - 2027 Focus:** Complete renewable energy conversion projects; Implement climate adaptation protocols; Harden facilities system wide for uninterrupted services during and post typhoons/natural disasters
- Leadership Opportunity:** Leverage available resources and federal supports; Share expertise with other island healthcare systems and networks

2. Regional Healthcare Hub Development

- Strategic Vision:** Position CHCC as the premier healthcare destination for Micronesia in both patient care and professional development
- 2026 - 2027 Focus:** Expand specialized services networks; Maximize CHCC investments for economic multiplier effect in local economic activities; Explore funding mechanisms for Pacific island jurisdictions; Develop medical education partnerships and explore healthcare academy initiatives to create Pacific healthcare training consortiums for continuous professional development of healthcare professionals within island healthcare ecosystems
- Leadership Opportunity:** Create formal partnerships with regional governments, health systems, and post-secondary educational institutions

3. Data-Driven Population Health Management

- Strategic Vision:** Reduce chronic disease burden by expanding beyond current program metrics to predictive analytics and modeling
- 2026 - 2027 Focus:** Strengthen, streamline, and integrate digital community health dashboards and early warning systems
- Leadership Opportunity:** Leverage EHR and population health data to proactively address health trends and resource needs

The success of these initiatives depends on the collective commitment of our entire CHCC family—from clinical staff to administrative teams, from community partners and policymakers to our leadership. Through transparent execution and measurable outcomes, we are working to build a financially strong, nationally recognized healthcare system that belongs to all CNMI residents. As we continue this transformative journey, we remain accountable to our mission and to the communities we proudly serve. These initiatives represent our promise: accessible, quality healthcare for every resident of the CNMI, delivered through a healthcare system that drives economic growth and regional leadership. We invite you to partner with us in building a healthier future for our islands.

