Commonwealth of the Northern Mariana Islands

15.0979° N, 145.6739° E



	144	147	
-21	Farallon de Pajaros		21-
	MAUG ISL	ANDS . Asuncion Island	
-18	Philippine Sea	unnamed Agrihan elevation Pagan "Alamagan "Guguan "Sarigan	NORTH PACIFIC
		Anatahan Farallon de Medinilla	OCEAN
-15		SAIPAN Saipan	15-
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Capital: Siapan

Population: 51,473

Demonym: Northern Mariana Islander

Predominant Language: CHamoru, English, Carolinian

Time Zone: CHamoru Standard (EST +15, EDT +14—CNMI does not observe daylight saving time)

Member Agency: Commonwealth Healthcare Corporation

The Commonwealth of the Northern Mariana Islands (CNMI) is a U.S. territory in the western Pacific that lies on the other side of the international date line from the continental U.S. It has a close relationship with neighboring Guam, the southernmost island in the Mariana Islands archipelago. Beyond the cultural and historic ties between the two U.S. territories, Guam and CNMI also share infrastructure, such as the Atisa and Mariana-Guam submarine cables.

Government

The U.S. president is considered head of state, while the commonwealth's governor is the head of government.

Legally, CNMI is a commonwealth rather than a territory, which is a slightly different relationship with the United States than many of the other island areas. One example of the uniqueness of the relationship is repercussions for program eligibility—CNMI residents are eligible for supplemental security income, while residents of the other territories are not.

Healthcare and Facilities

In 2009 the CNMI government re-formed its Department of Public Health into an autonomous government corporation, the Commonwealth Healthcare Corporation (CHCC). CHCC handles both public health services and acute care (hospital and clinic administration).

There is one hospital in CNMI, the Commonwealth Healthcare Corporation Hospital, an 86-bed, Medicare-certified hospital that is co-located with the health department. CHCC has satellite health centers on the islands of Tinian, Rota, and Kagman. Patients requiring specialty services are often referred off-island for care to either Honolulu or the Philippines.

CNMI operates a Medicaid program to support care for low-income residents. Territorial Medicaid programs are underfunded relative to the states. Unlike state Medicaid programs, territorial Medicaid programs have (1) a cap on total federal contributions and (2) a federal funding match set by law rather than based on per-capita incomes. Learn more about the need for equitable Medicaid funding for the territories via ASTHO's Permanent, Sustainable Medicaid Funding for U.S. Territories Policy Statement.

Key Priorities

- The development of a reorganization plan with clear lines of reporting and authority.
- A recruitment and retention plan for public health workers.
- A service plan code of ethics.
- A facility plan.
- Full implementation of electronic health records.

Disease Burden

Like the rest of the Pacific, CNMI faces a noncommunicable diseases crisis and a significant communicable disease burden. The top causes of death in 2019 were:

- Ischemic heart disease
- Stroke
- Diabetes
- Chronic kidney disease
- Lung cancer

