

**MARSHALL ISLANDS HEALTH FUND**  
**(A GOVERNMENTAL FUND OF THE**  
**REPUBLIC OF THE MARSHALL ISLANDS)**

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**FINANCIAL STATEMENTS**  
**AND**  
**INDEPENDENT AUDITORS' REPORT**

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**YEARS ENDED SEPTEMBER 30, 2010 AND 2009**

# MARSHALL ISLANDS HEALTH FUND

Years Ended September 30, 2010 and 2009  
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## **INDEPENDENT AUDITORS' REPORT**

Honorable Amenta Matthew  
Minister of Health  
Republic of the Marshall Islands:

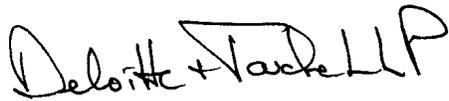
We have audited the accompanying balance sheets of the Marshall Islands Health Fund (the Fund), a governmental fund of the Republic of the Marshall Islands (RepMar), as of September 30, 2010 and 2009 and the related statements of revenues, expenditures, and changes in fund balance for the years then ended. These financial statements are the responsibility of the Fund's management. Our responsibility is to express an opinion on these financial statements based on our audits.

We conducted our audits in accordance with auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement. An audit includes consideration of internal control over financial reporting as a basis for designing audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Fund's internal control over financial reporting. Accordingly, we express no such opinion. An audit also includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements, assessing the accounting principles used and significant estimates made by management, as well as evaluating the overall financial statement presentation. We believe that our audits provide a reasonable basis for our opinion.

As discussed in Note 1 to the financial statements, the financial statements referred to above present only the Marshall Islands Health Fund and are not intended to present fairly the financial position and results of operations of the Republic of the Marshall Islands in conformity with accounting principles generally accepted in the United States of America.

In our opinion, the financial statements referred to in the first paragraph present fairly, in all material respects, the financial position of the Marshall Islands Health Fund, a governmental fund of the Republic of the Marshall Islands, as of September 30, 2010 and 2009, and the results of that fund's operations for the years then ended in conformity with accounting principles generally accepted in the United States of America.

In accordance with *Government Auditing Standards*, we have also issued our report dated June 23, 2011, on our consideration of the Fund's internal control over financial reporting and on our tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements and other matters. The purpose of that report is to describe the scope of our testing of internal control over financial reporting and compliance and the results of that testing, and not to provide an opinion on internal control over financial reporting or on compliance. That report is an integral part of an audit performed in accordance with *Government Auditing Standards* and should be considered in assessing the results of our audit.

A handwritten signature in black ink that reads "Deloitte + Touche LLP". The signature is written in a cursive, stylized font.

June 23, 2011

## MARSHALL ISLANDS HEALTH FUND

Balance Sheets  
September 30, 2010 and 2009

	<u>ASSETS</u>	<u>2010</u>	<u>2009</u>
Cash		\$ 523,996	\$ 545,175
Receivables:			
Contributions		1,226,992	1,211,185
Affiliate		1,622,847	1,073,283
Employees		2,442	3,142
		<u>2,852,281</u>	<u>2,287,610</u>
Prepayments		44,750	-
		<u>\$ 3,421,027</u>	<u>\$ 2,832,785</u>
 <u>LIABILITIES AND FUND BALANCE</u> 			
Liabilities:			
Accounts payable		\$ 439,835	\$ 346,661
Payable to affiliates		935,954	896,519
		<u>1,375,789</u>	<u>1,243,180</u>
Total liabilities		1,375,789	1,243,180
Fund balance		<u>2,045,238</u>	<u>1,589,605</u>
Total liabilities and fund balance		<u>\$ 3,421,027</u>	<u>\$ 2,832,785</u>

See accompanying notes to financial statements.

## MARSHALL ISLANDS HEALTH FUND

### Statements of Revenues, Expenditures, and Changes in Fund Balance Years Ended September 30, 2010 and 2009

	2010	2009
Revenues:		
Basic Health Fund collections	\$ 6,482,344	\$ 6,107,842
Supplemental Health Fund collections	663,402	625,793
RepMar subsidy	-	140,000
Other	28,760	23,217
Total revenues	7,174,506	6,896,852
Expenditures:		
Off-island care	1,516,085	2,368,503
Off-island travel	456,469	559,105
Professional and consulting fees	134,250	202,500
Other medical charges	203,995	194,506
Administrative:		
Salaries and wages	310,951	308,150
Collection fees	200,000	140,000
Travel	42,244	31,125
Utilities	38,397	26,068
Professional fees	20,000	20,000
Communications	15,532	15,165
Insurance	14,711	695
Repairs and maintenance	12,861	-
Other administrative charges	38,003	38,153
Total expenditures	3,003,498	3,903,970
Excess of revenues over expenditures	4,171,008	2,992,882
Other financing uses:		
Contributions to RepMar's Health Care Revenue Fund	(3,715,375)	(2,674,563)
Net change in fund balance	455,633	318,319
Fund balance at beginning of year	1,589,605	1,271,286
Fund balance at end of year	\$ 2,045,238	\$ 1,589,605

See accompanying notes to financial statements.

# MARSHALL ISLANDS HEALTH FUND

Notes to Financial Statements  
September 30, 2010 and 2009

## (1) Reporting Entity

The Marshall Islands Health Fund (the Fund), a governmental fund of the Republic of the Marshall Islands (RepMar), was established pursuant to the Marshall Islands Health Fund Act of 2002. The Fund was established to provide, pay, or reimburse all or a determined portion of the cost of basic health care obtained at a local health care facility, or as an approved off-island medical referral, or as emergency off-island medical care.

The accompanying financial statements relate solely to those accounting records maintained by the Fund, and do not incorporate any accounts related to RepMar's Ministry of Health or any other departments or agencies of RepMar that may be accounted for by RepMar's Treasury. The Fund is considered to be a blended component unit (governmental fund type - special revenue fund) of RepMar and is governed by a seven-member Board.

## (2) Summary of Significant Accounting Policies

The financial statements of the Fund have been prepared in accordance with accounting principles generally accepted in the United States of America (GAAP) as applied to governmental units. The Governmental Accounting Standards Board (GASB) is the recognized standard-setting body for establishing governmental accounting and financial reporting principles. The more significant of the Fund's accounting policies are described below.

### Measurement Focus and Basis of Accounting

The Fund reports its financial position and the results of its operations in one governmental fund. A fund is a separate accounting entity with a self-balancing set of accounts. They are concerned only with the measurement of financial position and are not involved with measurement of results of operations. Fund accounting is designed to demonstrate legal compliance and to aid financial management by segregating transactions related to certain Fund functions or activities.

Governmental funds are used to account for all or most of a government's general activities, including the collection and disbursement of earmarked monies (special revenue funds).

### Basis of Presentation

The accounting and financial reporting treatment applied to a fund is determined by its measurement focus. All governmental funds are accounted for using a current financial resources measurement focus. With this measurement focus, only current assets and current liabilities generally are included on the balance sheet. Operating statements of these funds present increases (i.e., revenues and other financing sources) and decreases (i.e., expenditures and other financing uses) in fund balance.

The modified accrual basis of accounting is used by all governmental fund types. Under the modified accrual basis of accounting, revenues are recognized when susceptible to accrual (i.e. when they become both measurable and available). "Measurable" means the amount of the transaction can be determined and "available" means collectible within the current period or soon enough thereafter to be used to pay liabilities of the current period. For this purpose, the Fund considers revenues to be available if they are collected within 90 days of the end of the current fiscal period. Expenditures are recorded when the related fund liability is incurred.

## MARSHALL ISLANDS HEALTH FUND

Notes to Financial Statements  
September 30, 2010 and 2009

### (2) Summary of Significant Accounting Policies, Continued

#### Basis of Presentation, Continued

Significant revenues susceptible to accrual include quarterly contributions from employers and employees as well as premiums for health benefit plans associated with the Fund.

#### Budgetary Information

An annual appropriated budget has not been formally adopted on a legal basis or a basis consistent with GAAP. Accordingly, a budget to actual presentation is not required or presented.

#### Cash

Custodial risk is the risk that in the event of a bank failure, the Fund's deposits may not be returned to it. Such deposits are not covered by depository insurance and are either uncollateralized or collateralized with securities held by the pledging financial institution or held by the pledging financial institution but not in the depositor-government's name. The Fund does not have a deposit policy for custodial credit risk.

For the purpose of the balance sheets, cash is defined as cash in checking and savings accounts. As of September 30, 2010 and 2009, the carrying amounts of the Fund's total cash was \$523,996 and \$545,175, respectively, and the corresponding bank balances were \$614,594 and \$568,215, respectively, of which \$560,996 and \$494,688, respectively, were maintained in a financial institution subject to Federal Deposit Insurance Corporation (FDIC) insurance. As of September 30, 2010 and 2009, bank deposits in the amount of \$250,000 were FDIC insured. The Fund does not require collateralization of its cash deposits; therefore, deposit levels in excess of FDIC insurance coverage are uncollateralized. Accordingly, these deposits are exposed to custodial credit risk.

#### Receivables

Contributions receivable are due from the Marshall Islands Social Security Administration (MISSA), which collects contributions from employers located within the Republic of the Marshall Islands for the benefit of the Fund for a fixed fee of \$200,000 per year effective from October 1, 2009. Previously, the fee was 3.5% of all Fund contributions or a maximum of \$140,000 per year. These receivables are not collateralized and are non-interest bearing.

#### Compensated Absences

The Fund recognizes expenditures for annual leave and sick leave when leave is actually taken. Accordingly, unused annual leave and sick leave are not included as an obligation within the balance sheet unless such leave is expected to be liquidated with expendable available financial resources, at which time expenditures and related fund liabilities would be recognized.

#### Taxes

The Government of RepMar imposes gross receipts tax of 3% on revenues. The Fund is specifically exempt from this tax.

## MARSHALL ISLANDS HEALTH FUND

Notes to Financial Statements  
September 30, 2010 and 2009

### (2) Summary of Significant Accounting Policies, Continued

#### Estimates

The preparation of financial statements in conformity with GAAP requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenues and expenditures during the reporting period. Actual results could differ from those estimates.

#### New Accounting Standards

During fiscal year 2010, the Fund implemented the following pronouncements:

- GASB Statement No. 51, *Accounting and Financial Reporting for Intangible Assets*, which addresses whether and when intangible assets should be considered capital assets for financial reporting purposes.
- GASB Statement No. 53, *Accounting and Financial Reporting for Derivative Instruments*, which is intended to improve how state and local governments report information about derivative instruments - financial arrangements used by governments to manage specific risks or make investments - in their financial statements.
- GASB Technical Bulletin No. 2008-1, *Determining the Annual Required Contribution Adjustment for Postemployment Benefits*, which clarifies the requirements of GASB Statement No. 27, *Accounting for Pensions by State and Local Governmental Employers*, and Statement No. 45, *Accounting and Financial Reporting by Employers for Postemployment Benefits Other Than Pensions*, for calculating the annual required contribution (ARC) adjustment.
- GASB Statement No. 58, *Accounting and Financial Reporting for Chapter 9 Bankruptcies*, which provides guidance for governments that have petitioned for protection from creditors by filing for bankruptcy under Chapter 9 of the United States Bankruptcy Code, and establishes requirements for recognizing and measuring the effects of the bankruptcy process on assets and liabilities, and for classifying changes in those items and related costs.

The implementation of these pronouncements did not have a material effect on the accompanying financial statements.

In March 2009, GASB issued Statement No. 54, *Fund Balance Reporting and Governmental Fund Type Definitions*, which enhances the usefulness of fund balance information by providing clearer fund balance classifications that can be more consistently applied and by clarifying the existing governmental fund type definitions. The provisions of this statement are effective for periods beginning after June 15, 2010. Management has not evaluated the effect that the implementation of this statement will have on the financial statements of the Fund.

# MARSHALL ISLANDS HEALTH FUND

Notes to Financial Statements  
September 30, 2010 and 2009

## (2) Summary of Significant Accounting Policies, Continued

### New Accounting Standards, Continued

In December 2009, GASB issued Statement No. 57, *OPEB Measurements by Agent Employers and Agent Multiple-Employer Plans*, which amends Statement No. 43, *Financial Reporting for Postemployment Benefit Plans Other Than Pension Plans*, and Statement No. 45, *Accounting and Financial Reporting by Employers for Postemployment Benefits Other Than Pensions*, and addresses issues related to measurement of OPEB obligations by certain employers participating in agent multiple-employer OPEB plans. The provisions of Statement 57 related to the use and reporting of the alternative measurement method are effective immediately. The provisions related to the frequency and timing of measurements are effective for actuarial valuations first used to report funded status information in OPEB plan financial statements for periods beginning after June 15, 2011. Management does not believe that the implementation of this statement will have a material effect on the financial statements of the Fund.

In June 2010, GASB issued Statement No. 59, *Financial Instruments Omnibus*, which updates and improves existing standards regarding financial reporting of certain financial instruments and external investment pools. The provisions of this statement are effective for periods beginning after June 15, 2010. Management has not evaluated the effect that the implementation of this statement will have on the financial statements of the Fund.

## (3) Risk Management

The Fund is exposed to various risks of loss related to torts; theft of, damage to, and destruction of assets; errors and omissions; injuries to employees; and natural disasters. The Fund has elected to purchase commercial insurance from independent third parties for the risks of loss to which it is exposed. Settled claims resulting from these risks have not exceeded commercial insurance coverage in any of the past three fiscal years.

## (4) Related Party Transactions

The Fund is a governmental fund of RepMar and is therefore affiliated with all RepMar-owned and affiliated entities, including all governmental funds of RepMar. Receivables from and payables to affiliates as of September 30, 2010 and 2009, are as follows:

	<u>2010</u>	
	<u>Receivables</u>	<u>Payables</u>
RepMar:		
General Fund	\$ 3,606	\$ 2,230
Health Care Revenue Fund	-	918,083
MISSA	<u>1,619,241</u>	<u>15,641</u>
	<u>\$ 1,622,847</u>	<u>\$ 935,954</u>

**MARSHALL ISLANDS HEALTH FUND**

Notes to Financial Statements  
September 30, 2010 and 2009

(4) Related Party Transactions, Continued

	<u>2009</u>	
	<u>Receivables</u>	<u>Payables</u>
RepMar:		
General Fund	\$ 3,606	\$ 8,818
Health Care Revenue Fund	42,409	862,877
MISSA	<u>1,027,268</u>	<u>24,824</u>
	<u>\$ 1,073,283</u>	<u>\$ 896,519</u>

Receivable from MISSA represents contributions collected by MISSA unremitted to the Fund at September 30, 2010 and 2009.

Contributions to RepMar's Health Care Revenue Fund during the years ended September 30, 2010 and 2009 were \$3,715,375 and \$2,674,563, respectively, representing 55% of collections of the Basic Health Benefits Plan. Payables to RepMar's Health Care Revenue Fund represent unremitted contributions at September 30, 2010 and 2009.

During the year ended September 30, 2009, the Cabinet of RepMar through C.M. 137(2009) authorized a General Fund appropriation in the amount of \$140,000 to assist in the funding of a subsidy for off-island medical referrals.

**INDEPENDENT AUDITORS' REPORT ON INTERNAL CONTROL OVER FINANCIAL REPORTING AND ON COMPLIANCE AND OTHER MATTERS BASED ON AN AUDIT OF FINANCIAL STATEMENTS PERFORMED IN ACCORDANCE WITH GOVERNMENT AUDITING STANDARDS**

Honorable Amenta Matthew  
Minister of Health  
Republic of the Marshall Islands:

We have audited the financial statements of the Marshall Islands Health Fund (the Fund), a governmental fund of the Republic of the Marshall Islands (RepMar), as of and for the year ended September 30, 2010, and have issued our report thereon dated June 23, 2011. Our report includes an explanatory paragraph that the financial statements of the Fund are not intended to present the financial position and results of operations of RepMar. We conducted our audit in accordance with auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States.

**Internal Control Over Financial Reporting**

In planning and performing our audit, we considered the Fund's internal control over financial reporting as a basis for designing our auditing procedures for the purpose of expressing our opinion on the financial statements, but not for the purpose of expressing an opinion on the effectiveness of the Fund's internal control over financial reporting. Accordingly, we do not express an opinion on the effectiveness of the Fund's internal control over financial reporting.

A *deficiency in internal control* exists when the design or operation of a control does not allow management or employees, in the normal course of performing their assigned functions, to prevent, or detect and correct misstatements on a timely basis. A *material weakness* is a deficiency, or combination of deficiencies, in internal control, such that there is a reasonable possibility that a material misstatement of the entity's financial statements will not be prevented, or detected and corrected on a timely basis.

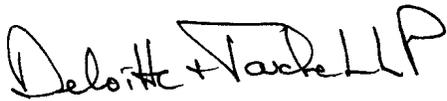
Our consideration of internal control over financial reporting was for the limited purpose described in the first paragraph of this section and was not designed to identify all deficiencies in internal control over financial reporting that might be deficiencies, significant deficiencies or material weaknesses. We did not identify any deficiencies in internal control over financial reporting that we consider to be material weaknesses, as defined above.

## Compliance and Other Matters

As part of obtaining reasonable assurance about whether the Fund's financial statements are free of material misstatement, we performed tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements, noncompliance with which could have a direct and material effect on the determination of financial statement amounts. However, providing an opinion on compliance with those provisions was not an objective of our audit and, accordingly, we do not express such an opinion. The results of our tests disclosed no instances of noncompliance or other matters that are required to be reported under *Government Auditing Standards*.

We noted certain matters that we reported to management of the Fund in a separate letter dated June 23, 2011.

This report is intended solely for the information and use of the Ministry of Health and RepMar management and is not intended to be and should not be used by anyone other than these specified parties.

A handwritten signature in black ink that reads "Deloitte + Stach LLP". The signature is written in a cursive, stylized font.

June 23, 2011

**MARSHALL ISLANDS HEALTH FUND**

Unresolved Prior Year Findings  
Year Ended September 30, 2010

There are no unresolved prior year findings from prior year audits of the Fund.