

July 7, 2021

Honorable Therese M. Terlaje
Chairperson, Committee on Health
36th Guam Legislature, 173 Aspinall Avenue, Suite 207, Hagatna, Guam 96910
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Hafa Adai Speaker Terlaje and members of the 36th Guam Legislature,

I am writing in opposition of Bill 112-36 as it is not the answer to the limitations of Guam's healthcare system. I want to be clear from the start, my concern with this bill passing is not because I am worried about being sued, but I am worried that as a result of this bill, I will not have the resources or specialists I will need as a physician to offer safe and appropriate care for my patients.

My name is Mariana Leon Guerrero Cook-Huynh and I am a daughter of Guam born at Guam Memorial Hospital and class of 2001 Valedictorian of St. John's School. I completed medical school at Mayo Clinic in Rochester, MN and residency at United Hospital in St. Paul, MN. I am a Family Medicine Physician working at Marianas Physicians Group specializing in women's health and high-risk obstetrics. I relocated to Guam in 2016 immediately after completing my medical training, as my principle goal was always to come back to the community that raised me and help improve the island's healthcare system. While a handful of local graduates pursuing medicine plan to return to the island, very few do. I am honored to have some colleagues from my generation who have returned to the island with a similar goal as mine to serve our community and advance Guam's healthcare system, which is medically underserved and significantly lagging behind US standards.

The proposal of Bill 112-36 has created a great amount of tension between healthcare providers and our legislators in a time where we should be working together to improve our healthcare system. Our senators have called physicians "bullies", "threatening", and "selfish", which is both inaccurate and offensive. We dedicate years of education, training and financial loss to serve patients. We often miss out on our own family events, holidays, birthdays to serve our patients. Out of residency I had the opportunity to work in a state-of-the art medical system with easy access to specialists and subspecialists. I had numerous offers to practice less hours for almost double the salary I was promised here on Guam, but I chose to return home. If the senators have taken the time to really listen to the providers, as stated in multiple different letters, they would know that the providers are most fearful about how this bill will negatively impact Guam's fragile healthcare system and all of Guam's patients not just the most vulnerable or "poor" populations.

In my opinion, the legislators are missing the big picture and the real problem. There are so many other obstacles and injustices in our local healthcare system that I believe the senators need to focus their efforts on rather than creating reactive legislation and getting completely rid of mandatory arbitration. We need to focus on being proactive vs reactive. We need more emphasis on prevention and trusting healthcare providers so patients take care of their chronic conditions, patients are held accountable for participating in their own healthcare, and patients are not coming in when they are so sick they cannot be saved. I understand there are bad, tragic, unfortunate outcomes that happen in medicine but I also know that bad outcomes do not always mean malpractice or medical negligence. Even the best medicine in the best facilities can fail to save lives. Providers need to be able to safely talk to our patients when bad outcomes happen so they can understand what happened, ask questions and get closure if possible. When the door is open to an easy, affordable way for patients to take providers to trial, providers become hesitant to speak with their patients.

There needs to be a system and resources dedicated to allow doctors to have a safe and private way to do peer review when complaints arise before going through the court system where judges and even expert witnesses have no idea how the practice of medicine is on Guam. Our physicians struggle daily with low resources, outdated equipment and facilities, and lack of access to specialists. Local providers often have to work outside of their scope of expertise for the sake of the

patient because we are lacking so many specialists on island. We take that risk because it is what our patients need and they often cannot afford to go off island for specialty care. There are visiting specialists like Dr. Greigh Hirata (Maternal Fetal Medicine) who has already written a statement that he will no longer see patients on Guam if Bill 112-36 passes. As a provider who manages high-risk OB including 50% of the uninsured and limited insurance patients on island, this is very concerning. This population would not be able to seek off island care if they had a high risk condition requiring Maternal Fetal Medicine consult. These mothers and/or their babies will be harmed and not even the legal system will be able to give them recourse. In fact, in cases like this, Bill 112-36 could be creating bad outcomes by worsening our most vulnerable patients' access to care.

In primary care and pediatrics, providers often network with colleagues off island for assistance on management and treatment in specialties not available locally such as rheumatology, cardiothoracic surgery, gastroenterology, and any pediatric specialty other than neurology. The passing of this bill could even impact off island specialists from doing telemedicine as their local malpractice insurance may not cover them on Guam and why would they take that risk? If the legislators want to make a difference they would focus on how to get more access to healthcare insurance for all, work with local insurance companies to decrease the cost of healthcare, and put more resources into recruiting physicians, especially specialists.

Even the best, most educated, most compassionate and thorough providers can have bad outcomes and a single complaint that goes to trial can ruin their reputation, their career and their lives. Every complaint filed against a provider has to be submitted to a national databank and be explained for the rest of that provider's career. This includes complaints proven to be standard of care or good medicine. The vast majority of providers think about patients first, but when they feel threatened for their own safety, like any other human being they are going to make choices to protect themselves. Our island legislators and the people of Guam have to protect and advocate for our providers because we have far too few providers already willing to practice on this island and an even smaller group of physicians with roots to this island. If providers choose not to practice here or limit their services, then who will take care of the island's people? The island will be left with few doctors, even more limited access to specialists and the burden will be left on the already struggling Public Health and GMH. The people of Guam will have worse healthcare. We will then see that only the rich who can access off island care will be saved and those more unfortunate will be left to suffer.

I personally do believe that there needs to be improvements in our current system to allow those who feel they have been mistreated by a healthcare professional to gain recourse, but Bill 112-36 is not the solution. Doctors, lawyers, and legislators need to come together and determine a better alternative. Whether it is simply decreasing the cost of arbitration or coming up with more resources to improve our healthcare system, the conversation needs to continue.

Thank you for the opportunity to write on this matter. I hope the senators can now understand why Bill 112-36 is not a good solution for our unique island after listening to those who understand and choose to live in our island's healthcare system daily.

Sincerely,
Mariana Leon Guerrero Cook-Huynh
Family Medicine Obstetrics