



Speaker Therese M. Terlaje &lt;senatorterlajeguam@gmail.com&gt;

**Request to present oral testimony regarding Bill 112-36 on 7/7/2021, from M. Elizabeth Hernandez, MD**

1 message

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To: senatorterlajeguam@gmail.com

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July 6, 2021

Honorable Therese M. Terlaje  
Chairperson, Committee on Health  
36th Guam Legislature  
Hagatna, Guam 96910

Re: Opposition to Bill 112-36

Dear Speaker Terlaje and member of the 36th Legislature of Guam:

I would like to respectfully request to present my oral testimony about Bill 112-36 in person at the public hearing on Wednesday, 7/7/2021. I am doing outreach clinic serving the Pediatric population, preventive care and acute care (sick visits) at South DPHSS Regional clinic until 5:30 PM thus I will be arriving around 6:30 PM. Hopefully I will be able to give my oral testimony. We are in the middle of a Pandemic, "frontliners" trying to provide healthcare to the community, and we need to have our voices heard too.

In your statement published in June 30, 2021 at [postguam.com](http://postguam.com), that you are committed to "consider all input and that you have researched to find a good compromise to grant access to justice for all members of the community".

I also worked as a Pediatric Hospitalist at GMH from mid 2009 until March 2019. GMH as a community hospital is so isolated, with limited resources for neonatal and pediatric care. We try our best to stabilize patients who seek care late in the spectrum of their illness either because they have no insurance, had no transportation to clinic for preventive care or early evaluation and management of illness for many other social reasons. We even have to take care of critically ill newborns /extreme premature babies whose Moms, considered high risk for having complicated babies, never sought prenatal care. We work with patients as a team. We advise parents of young patients and adolescents how to help themselves improve their health via educational interventions and behavioral interventions (e.g. treatment of diabetes with use of insulin injections recommended by Endocrinologist, or compliant use of antiseizure medications; diet modifications if they have obesity to prevent cardiovascular, metabolic consequences). Compliance with prescribed medications and treatment plays a big role in health outcomes, including regular follow up for health supervision. We encounter complications with non adherence to prescribed treatment (e.g. diabetic ketoacidosis or chronic renal failure from uncontrolled diabetes later becoming dependent on dialysis; uncontrolled seizures with low oxygen to the brain if medications are given irregularly or unable to fill in prescription on time). Thus it is a collective effort from Physicians and patient to achieve optimal health and prevent complications.

Guam is an underserved region, with limited healthcare resources (GRMC has closed their Pediatric and Neonatal units), very isolated that Standard of care cannot be always compared to mainland US where critically ill patients (e.g. babies born with congenital heart disease or babies born with exposed intestines (omphalocele), or neonatal seizures) are cared for in a Children's Hospital Staffed with Pediatric subspecialist, and if born in a community hospital MedEvac by Helicopter to the Children's hospital. In Guam, Parents have to wait for funding to afford TransPacific Off island care which may take weeks. Likewise, other "standard of care" medications (e.g. for seizure control), and life saving gas (Nitric oxide) are NOT AVAILABLE in Guam. If we try our best to care for patients, and they have an unfavorable outcome due to lack of lifesaving medications and equipment, with Bill 112-36, Physicians can be easy targets of malpractice lawsuits even if we work in dire situations where there is shortage of physicians to care for critically pediatric and newborn patients. If Bill 112-36 would repeal the GUam Mandatory Malpractice arbitration act (the Arbitration Law") this will be harmful to the Medical Community AND the community we serve. Lawsuits will take precious time away from caring for patient in an otherwise underserved island, especially if the case is eventually found to be not valid, and healthcare was performed within acceptable island-specific standard of care. Without prescreening cases, physicians can be presented with lawsuits that may not always be valid, but that will have LIFETIME, long term consequences detrimental to the physicians needing to renew license to practice in another jurisdiction other than GUam. This will negatively affect young

physicians and other subspecialists who plan to serve the underserved community here in Guam or current subspecialist in Guam who will be limiting their scope of serving due to more exposure to litigations. Bill 112 -36 will create litigious environment that can potentially disrupt provision of improved health care in Guam. With shortage of physicians and subspecialist in Guam, many complex patients ( e.g. pediatric diabetic patients, or patients with kidney failure requiring dialysis, children needing Immunomodulators to stabilize their auto-immune disorder), may need to seek care to higher level Children's hospital in US mainland, thus, time away from school, and time away from immediate families.

If the Arbitration Law is too expensive, is it possible to lower the fees, or have special funds so those who cannot afford justice will be given a chance to voice out their concerns?

We will be losing the only Neonatologist at GMH in August 2021. Who will now take care of these critically newborns? Thus Standard of care cannot be comparable to that of mainland US wherein community hospitals can easily transport critically ill patients to quaternary care hospitals via helicopter, and Guam is too isolated to meet that standard of care.

I hope I will be given a chance to provide my oral testimony on 7/7/2021 . Please HELP US so we can continue to provide care and lifelong commitment to improve our care for our patients. We urge you to reconsider, not to repeal the arbitration law, and instead make it more affordable to those who cannot afford it.

Sincerely,

M. Elizabeth Hernandez, MD  
Board Certified, Gen. Pediatrics and Pediatric Pulmonology ( outreach care)  
Sleep Medicine ( Multidisciplinary)