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Speaker Therese M. Terlaje, Chairperson Committee on Health

Honorable Chairperson and Members of the Committee on Health:

My name is Dr. Gregory Miller. I am a chiropractor soon to start my 40th year of practice, 36 of those years practicing on Guam. My clinic has cared for over 35,000 patients. I remember well when then Senator Shimizu, Dr. W. Chris Perez and Dr. Stadler worked together to compose the current mandatory arbitration act.

I am opposed to Bill 112 for several reasons....

•The cost of arbitration is the issue at hand. I agree that people that cannot afford arbitration are not able to proceed with legal action.

Refocusing on finding a way to reduce legal costs will level the field for all involved. Bill 112, if passed into law, will create a frenzied atmosphere of new lawsuits that will most likely be on a no out of pocket contingency fee where the attorney may get 1/3 of the settlement. This will create a "sue big" attitude in the legal community. 1/3 of 11 million is too much to pass up even if the suit is questionable.

· Malpractice insurance is very expensive and difficult to find. Most small practices cannot get coverage. In these cases, the providers will be sued personally. Their homes, savings & property are all under threat.

If Bill 112 were to become law, many practices including mine may have to close.... It's simply not worth the risk.

- Frivolous suits still must be defended. Under the rules of the GBAHE, all malpractice suits must be reported to the board. The board, then depending on the outcome reports the provider to the National Practitioners Data Bank. This can permanently affect future credentialing, becoming a provider for insurances. Online trolls can download the information to harass the provider All this from a frivolous suit .
- Other fears that arise especially in the allied health fields is that if we refer to a specialist and that specialist gets sued, the allied health provider will most likely get sued also. Even if they did no harm, they still must defend themselves for somebody else's mistake.

In closing, I'd like to recommend starting over with legislation focused on making arbitration more affordable and attracting malpractice carriers to Guam with some type of tax incentive. The ideal situation is to give the public access and the providers the coverage they need also.

If you have any questions or concerns, kindly let me know.

eggry J. Miller, D.C.