HB 669 HD1 – RELATING TO MEDICAL MALPRACTICE

Chairs Takumi and Lee, Vice Chairs Ichiyama and San Buenaventura, and members of the committees:

Thank you for the opportunity to provide testimony in support of HB 669 HD1 which would limit medical malpractice liability for medical residents and fellows. Residents and Fellows are medical school graduates who have been accepted into and are now participating in accredited residency and fellowship programs that provide them with the training needed to become fully licensed physicians and specialists in one of medicine’s many areas of specialization. While training in an accredited program, residents and fellows act under the supervision of a licensed physician. Residents are granted a limited and temporary license under Hawaii Revised Statutes Section 453-3 which is only valid while the resident is in training.

At the University of Hawai‘i John A. Burns, School Of Medicine (JABSOM) we strive to teach and train high-quality physicians, biomedical scientists, and allied health workers for Hawai‘i and the Pacific by providing an opportunity for medical education, biomedical education, and allied health education that were previously unavailable to residents of Hawai‘i and other Pacific nations. JABSOM’s mission for its medical education program is to train the next generation of physicians in Hawai‘i for Hawai‘i. One of JABSOM’s fundamental goals is to increase the supply of highly qualified physicians to serve the people of Hawai‘i. Achieving this goal requires: 1) attracting highly qualified recent medical school graduates to JABSOM’s residency and fellowship programs; and 2) expanding the number of positions in JABSOM’s residencies and fellowships, which is
in turn dependent on Medicare funding (capped by law since 1997), and hospital funding (which is limited by the financial status of our partner hospitals).

JABSOM residents and fellows are mandated by our accreditation organizations to be trained under the supervision of an appropriately qualified licensed physician for all program related activities. Supervision, as defined by the Accreditation Council for Graduate Medical Education includes direct, indirect and oversight supervision. The type of supervision varies based on resident’s or fellow’s level of training and ability, as well as patient complexity, acuity and type of procedure, as appropriate to the clinical situation. In recent years, the number of instances in which medical residents/ fellows have been named in law suits has increased significantly. As a result, malpractice defense costs have increased dramatically because of the need to substantively defend the residents/fellows who are in training.

Consequences from the increase in residents/fellows being named in malpractice lawsuits include: 1) potentially fewer applicants to JABSOM’s residencies and fellowships; 2) fewer highly qualified applicants accepting positions in JABSOM’s residencies and fellowships; 3) fewer residents and fellows deciding to establish a medical practice in Hawai‘i after completing their residency or fellowship program; and 4) increases in malpractice defense cost which discourages JABSOM’s teaching hospital partners from increasing the funding needed to expand the number of residency or fellowship positions that would assist in closing the physician shortage gap in Hawai‘i. The funds directed toward defending the residents/fellows in malpractice lawsuits by the Hawai‘i consortium of teaching hospitals are funds that could be otherwise applied to strengthening and increasing the graduate medical education residency and fellowship opportunities in the state.

Mahalo for the opportunity to testify on this matter.