Guam Memorial Hospital Authority
Aturidåt Espetåt Mimuriåt Guåhan

850 GOV. CARLOS CAMACHO ROAD
OKA, TAMUNING, GUAM 96911
TEL: 647-2444 or 647-2330
FAX: (671) 649-0145

February 7, 2018

(GL#) 34-18-1510
Speaker Benjamin J.F. Cruz

FEB 0 8 2018
Time: 9:07 [1 AM [ ] PM File No. 34-1499
Received By:

VIA HAND DELIVERY
Honorable Benjamin J. F. Cruz
Speaker of I Minatrentai Kuattro Na Liheslaturan Guåhan
163 Chalan Santo Papa
Hagåtña, GU 96910

RE: Reporting Requirements for Boards and Commissions

Dear Speaker Cruz:

Hafa Adai! In accordance with Ch. 8 of Title 5 GCA, Section 38, §8113.1, Reporting Requirements for Boards and Commissions, enclosed is a compact disc containing electronic copies of all materials presented and discussed at the GMHA Board of Trustees meeting held on December 13, 2017 at 6:00 p.m. in the Daniel L. Webb Conference Room.

Please contact Mr. Theo Pangelinan from our Board Office at 647-2104 if you have any questions.

Regards,

PeterJohn D. Camacho, M.P.H.
Hospital Administrator/CEO

2018 FEB -8 AM 9:06

1510

Guam Memorial Hospital Authority
Aturidåt Espetåt Mimuriåt Guåhan

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OKA, TAMUNING, GUAM 96911
TEL: 647-2444 or 647-2330
FAX: (671) 649-0145

BOARD OF TRUSTEES
Official Resolution No. 2018-07

"RELATIVE TO APPROVING TWENTY-SIX (26) NEW FEES"

WHEREAS, Public Law 26-66, places the rate making authority of the Guam Memorial Hospital Authority under the GMHA Board of Trustees; and

WHEREAS, the GMHA Board of Trustees has reviewed the Public Law 26-66; and

WHEREAS, a Public Hearing was held on September 27, 2017 and oral comments and written testimony have been solicited for the twenty-six (26) new fees comprised of the following Hospital departments: Pediatrics, Radiology and Pharmacy; and

WHEREAS, the GMHA Board of Trustees has reviewed the list of new fees and found the same to be in order; now, therefore be it

RESOLVED, that the GMHA Board of Trustees directs the Hospital Administrator/CEO to continue to proceed with the adjudication process of these 26 new fee items; and, be it further

RESOLVED, that the Chairperson certifies and the Secretary attests to the adoption of this resolution.

DULY AND REGULARLY ADOPTED ON THIS 13th DAY OF DECEMBER, 2017

Certified By:

Eloy S. Lizama
Chairman, Board of Trustees

Attested By:

Melissa Waibel
Secretary, Board of Trustees

GUAM MEMORIAL HOSPITAL AUTHORITY
SUMMARY OF NEW FEE ITEMS/SERVICES
for Submission to the 34th Guam Legislature
Public Hearing on September 27, 2017

NO	CHARGE CODE	DESCRIPTION	FEE MODEL RATE	DEPARTMENT
1	1707400	SET CATH RADIAL ART 30FR 20GA	$ 109.10	PEDIATRICS
2	1707431	TRAY CATH C-V 2-LUMEN 5FR 8CM	$ 625.13	PEDIATRICS
3	1707432	SET CATH FEMORAL ART 4FR 18CM	$ 216.16	PEDIATRICS
4	1707438	SET CATH DRAIN PL/PP 8.5F 15CM	$ 634.16	PEDIATRICS
5	1790743	TRAY CATH C-V 2-LUMEN 4FR 5CM	$ 624.18	PEDIATRICS
6	2110290	DILATOR AQ HYDROPHILIC 9-38-20	$ 62.79	RADIOLOGY
7	2123644	GW THSF-35-180-AUS-ST G23644	$ 176.71	RADIOLOGY
8	2130823	BALLOON PTA4-18-170-2-20 G30823	$ 833.50	RADIOLOGY
9	2130832	BALLOON PTA4-18-170-3-20 G30832	$ 833.50	RADIOLOGY
10	2150326	BALLOON PTA4-14-170-2.5-20 G50	$ 958.56	RADIOLOGY
11	2150333	BALLOON PTA4-14-170-3-20 G50333	$ 958.56	RADIOLOGY
12	2152260	BALLOON PTA5-35-135-5-8 G52260	$ 666.75	RADIOLOGY
13	2152266	BALLOON PTA5-35-135-6-6 G52266	$ 666.75	RADIOLOGY
14	2152267	BALLOON PTA5-35-135-6-8 G52267	$ 666.75	RADIOLOGY
15	2152268	BALLOON PTA5-35-135-6-8 G52267	$ 666.75	RADIOLOGY
16	2152286	BALLOON PTA5-35-135-5-8 G52260	$ 666.75	RADIOLOGY
17	2152334	BALLOON PTA5-35-80-4-10 G52334	$ 666.75	RADIOLOGY
18	2152338	BALLOON PTA5-35-80-5-4 G52338	$ 666.75	RADIOLOGY
19	2152371	BALLOON PTA5-35-80-9-14 G52371	$ 666.75	RADIOLOGY
20	2152379	BALLOON PTA5-35-80-12-4 G52379	$ 666.75	RADIOLOGY
21	2160530	GLIDEWIRE STIF 35X180CM GS3506	$ 313.36	RADIOLOGY
22	4213780	ENOXAPARIN 120MG/0.8ML SRN	$ 29.16	PHARMACY
23	4213781	ENOXAPARIN 150MG/1ML SRN	$ 33.44	PHARMACY
24	4233165	NIVOLUMAB 100MG/10ML	$ 4,001.60	PHARMACY
25	4233166	NIVOLUMAB 40MG/4ML	$ 1,720.63	PHARMACY
26	4236071	PROBIOTIC PEDIATRICS	$ 2.06	PHARMACY

********** LAST ITEM **********

I certify that this listing of items comprises all fees required by law for submission at this time to be complete as presented here.

Frumen A. Patacsil
Hospital Quality Improvement Specialist

9/18/17
Date

1st Endorsement of Concurrence:
I concur and further certify that this listing of items are exempted under Section 9301(i) to Article 3, Chapter 9, Division 1 of Title 5 of the Guam Code Annotated and in compliance with Title10 GCA Part 2 Division 4 Chapter 80 §80109

9/19/17

Benita A. Manglona
Chief Financial Officer

9/19/17
Date

Guam Memorial Hospital Authority
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850 GOV. CARLOS CAMACHO ROAD
OKA, TAMUNING, GUAM 96911
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FAX: (671) 649-0145

BOARD OF TRUSTEES
Official Resolution No. 2018-06

"RELATIVE TO APPROVING SEVENTY-THREE (73) NEW FEES"

WHEREAS, Public Law 26-66, places the rate making authority of the Guam Memorial Hospital Authority under the GMHA Board of Trustees; and

WHEREAS, the GMHA Board of Trustees has reviewed the Public Law 26-66; and

WHEREAS, a Public Hearing was held on June 22, 2017 and oral comments and written testimony have been solicited for the seventy-three (73) new fees comprised of the following Hospital departments: Pediatrics, Central Supply Room, Radiology, Pharmacy, Rehabilitative Services, Respiratory and Laboratory; and

WHEREAS, the GMHA Board of Trustees has reviewed the list of new fees and found the same to be in order; now therefore be it,

RESOLVED, that the GMHA Board of Trustees directs the Hospital Administrator/CEO to continue to proceed with the adjudication process of these 73 new fee items, and be it further

RESOLVED, that the Chairperson certifies and the Secretary attests to the adoption of this resolution.

DULY AND REGULARLY ADOPTED ON THIS 13th DAY OF DECEMBER, 2017

Certified By:

Eloy S. Lizama
Chairman, Board of Trustees

Attested By:

Melissa Waibel
Secretary, Board of Trustees

GUAM MEMORIAL HOSPITAL AUTHORITY
SUMMARY OF NEW FEE ITEMS/SERVICES
for Submission to the 34th Guam Legislature
Public Hearing on June 22, 2017

NO	CHARGE CODE	DESCRIPTION	FEE MODEL RATE	DEPARTMENT
1	1704831	CANNULA NASAL JR PEDS	$ 366.75	PEDIATRICS
2	1704832	CIRCUIT AIRVO 2 OPTIFLOW	$ 514.28	PEDIATRICS
3	1713261	GLOVES SURGEON NEOPRENE SZ-6	$ 7.19	CENTRAL SUPPLY ROOM
4	1790483	CANNULA NASAL JR INFANT	$ 366.75	PEDIATRICS
5	2002364	NEEDLE TRANSSEPTAL TSNC-18-71.0	$ 370.01	RADIOLOGY
6	2002365	NEEDLE TRANSSEPTAL TSNC-19-56.0	$ 665.31	RADIOLOGY
7	2006987	NEEDLE BX CHIBA DCHN-21-65.5-U	$ 276.61	RADIOLOGY
8	2007600	INTRODUCER PERF RCFW-10.0-38	$ 225.80	RADIOLOGY
9	2007762	INTRODUCER PERF RCFW-9.0-38	$ 185.43	RADIOLOGY
10	2068920	NEEDLE BX CHIBA DCHN-20-20.0-U	$ 85.30	RADIOLOGY
11	2104800	SET MICROPNCTRE 5F 10CM G48008	$ 296.95	RADIOLOGY
12	2105839	SET G-J 2-LUMEN C-A-COONS	$ 980.92	RADIOLOGY
13	2110208	DILATOR 7-38-20 AQ HDRPHL COAT	$ 62.79	RADIOLOGY
14	2110289	DILATOR 8-38-20 AQ HDRPHL COAT	$ 62.79	RADIOLOGY
15	2110446	CATH G-J ULT MC COAXIAL	$ 379.84	RADIOLOGY
16	2110448	SET G-J COAXIAL SYTEM	$ 998.10	RADIOLOGY
17	2114300	STENT USE-14-300A	$ 620.75	RADIOLOGY
18	2118300	STENT USE-18-300A	$ 620.75	RADIOLOGY
19	2123162	CATH CXI-2.3-14-135-269	$ 780.31	RADIOLOGY
20	2123523	COIL NESTER MWCE-35-7-3	$ 638.00	RADIOLOGY
21	2126993	COIL NESTER MWCE-35-14-4	$ 621.16	RADIOLOGY
22	2127047	SET G-J 2-LUMEN ULT C-A-COONS	$ 627.24	RADIOLOGY
23	2131027	INFLATION DEVICE G31027	$ 665.31	RADIOLOGY
24	2136901	CATH DIALYSIS CIRCUIT/ANG/IMG	$ 684.13	RADIOLOGY
25	2136902	DIALYSIS CIRCUIT W/ANGIOPLASTY	$ 4,825.20	RADIOLOGY
26	2136903	DIALYSIS CIRCUIT W/STENT/IMG	$ 9,752.43	RADIOLOGY
27	2136904	PERQ TRANLMN THRBECTMY D-C IMG	$ 4,825.20	RADIOLOGY
28	2136905	PERQ THRBECTMY D-C ANGIOPL/IMG	$ 9,752.43	RADIOLOGY
29	2150002	CATH ANG CXI-2.6-18-90-P-NS	$ 757.80	RADIOLOGY
30	2150003	CATH ANG CXI-2.6-18-150-P-NS	$ 757.80	RADIOLOGY
31	2150791	BALLOON PTA5-35-80-7-4.0	$ 720.28	RADIOLOGY
32	2151501	CATHETER 5FR .035X65 451-501V5	$ 765.65	RADIOLOGY
33	2152265	BALLOON PTA5-35-135-6-4.0	$ 666.75	RADIOLOGY
34	2152348	BALLOON PTA5-35-80-6-10.0	$ 666.75	RADIOLOGY
35	2152352	BALLOON PTA5-35-80-7-4.0	$ 666.75	RADIOLOGY
36	2152546	CATH CXI-4.0-35-90-P-NS-0	$ 757.80	RADIOLOGY
37	2152547	CATH CXI-4.0-35-90-P-NS-DAV	$ 757.80	RADIOLOGY
38	2152737	COIL NESTER MWCE-18-7-4	$ 617.47	RADIOLOGY
39	2152739	COIL NESTER MWCE-18-7-8	$ 617.47	RADIOLOGY
40	2152742	COIL NESTER MWCE-35-7-4	$ 617.47	RADIOLOGY

41	2152743	COIL NESTER MWCE-35-7-6	$ 617.47	RADIOLOGY
42	2152939	CATHETER HMW-14-300-ST	$ 730.98	RADIOLOGY
43	2319000	PUNC ASP BRST W/O IMG	$ 539.11	RADIOLOGY
44	4200436	DOXYCYCLINE 100MG INJ	$ 119.00	PHARMACY
45	4200472	INSULIN REGULAR-PER ML	$ 5.38	PHARMACY
46	4204384	DEXTROSE 25% 10ML INJ	$ 29.60	PHARMACY
47	4205450	INSULIN GLARGINE-PER ML	$ 29.36	PHARMACY
48	4213496	DUONEB 0.5MG/0.3MG 3ML INHAL	$ 0.98	PHARMACY
49	4215668	INSULIN NPH-PER ML	$ 5.07	PHARMACY
50	4220004	BARIUM EZ HD 750 96% W-W	$ 15.66	PHARMACY
51	4220008	BARIUM EZ HD 764 98% W-W	$ 24.85	PHARMACY
52	4233255	FACTOR VII A	$ 2,000.00	PHARMACY
53	4233265	RASBURICASE 1.5MG VIAL	$ 1,516.75	PHARMACY
54	4233270	ZEGERID ORAL SUSP 20MG PACKET	$ 128.22	PHARMACY
55	4236070	PROBIOTICS ADULT	$ 7.42	PHARMACY
56	4236075	CYCLOSERINE 250MG CAP	$ 124.79	PHARMACY
57	4236080	PASER 4GM GRANULES	$ 30.77	PHARMACY
58	4237583	OXYCODONE 5MG TAB	$ 0.98	PHARMACY
59	4257400	INSULIN 70/30-PER ML	$ 5.07	PHARMACY
60	5297165	OT EVAL-LOW COMPLEX 30 MIN	$ 99.66	REHABILITATIVE SVCS.
61	5297166	OT EVAL-MOD COMPLEX 45 MIN	$ 107.97	REHABILITATIVE SVCS.
62	5297167	OT EVAL-HIGH COMPLEX 60 MIN	$ 116.27	REHABILITATIVE SVCS.
63	5297168	OT RE-EVAL EST PLAN CARE	$ 66.26	REHABILITATIVE SVCS.
64	5300610	KIT NEBULIZER CONTINUOUS	$ 107.03	RESPIRATORY
65	5304953	MASK CPAP/BIPAP-PEDS	$ 688.34	RESPIRATORY
66	5497161	PT EVAL-LOW COMPLEX 20 MIN	$ 103.14	REHABILITATIVE SVCS.
67	5497162	PT EVAL-MOD COMPLEX 30 MIN	$ 111.74	REHABILITATIVE SVCS.
68	5497163	PT EVAL-HIGH COMPLEX 45 MIN	$ 120.33	REHABILITATIVE SVCS.
69	5497164	PT RE-EVAL EST PLAN CARE	$ 70.50	REHABILITATIVE SVCS.
70	6887449	CLOSTRIDIUM DIFFICILE, QUALI	$ 32.88	LABORATORY
71	6887807	RESP SYNCYTIAL VIRUS, QUALI	$ 32.88	LABORATORY
72	7888361	TUMOR IMMUNOHISTOCHE, COMPUTER	$ 262.00	LABORATORY
73	7888366	FISH PROBE, EACH STAIN	$ 208.00	LABORATORY

**********LAST ITEM**********

I certify that this listing of items comprises all fees required by law for submission at this time to be complete as presented here.

Frumen A. Patacsil
Hospital Quality Improvement Specialist

6/9/17
Date

1st Endorsement of Concurrence:
I concur and further certify that this listing of items are exempted under Section 9301(i) to Article 3, Chapter 9, Division 1 of Title 5 of the Guam Code Annotated and in compliance with Title10 GCA Part 2 Division 4 Chapter 80 §80109.

Benita A. Manglona
Chief Financial Officer

6/9/17
Date

6/9/17

Guam Memorial Hospital Authority
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BOARD OF TRUSTEES
Official Resolution No. 2018-05

"RELATIVE TO THE REAPPOINTMENT OF ALLIED HEALTH PROFESSIONAL STAFF PRIVILEGES"

Practitioner	Department	Specialty	Expiration Date
Tina Heinrich, PA-C	Ob/Gyn	Physician Assistant	October 31, 2019
Sangwook, Kang, CRN.	Anesthesia	Cert. RN Anesthetist	October 31, 2019

WHEREAS, the above listed practitioners met the basic requirements for Allied Health Professional Staff Membership as determined by the appropriate Medical Staff Departments and Committees pursuant to the GMHA Medical Staff Bylaws, Article VII, Section 7.2; and

WHEREAS, the Medical Executive Committee on October 25, 2017 and the Joint Conference and Professional Affairs Committee on November 16, 2017, recommended approval of Provisional Medical Staff Membership appointment for the above listed practitioners; and

WHEREAS, all appointments to Allied Health Professional Staff Membership require Board approval; now, therefore be it

RESOLVED, that the Board of Trustees approves this recommendation to appoint the above named practitioners to Allied Health Professional Staff as recommended; and, be it further

RESOLVED, that the Board of Trustees directs the Hospital Administrator to duly notify the practitioners listed above and all Hospital and Medical Departments of these appointments; and be it further

RESOLVED, that the Board of Trustees Chairperson certifies and the Board of Trustees Secretary attests to the adoption of this Resolution.

DULY AND REGULARLY ADOPTED ON THIS 13th DAY OF DECEMBER, 2017

Certified by:

Eloy S. Lizama
Chairperson, Board of Trustees

Attested by:

Melissa Waibel
Secretary, Board of Trustees

Guam Memorial Hospital Authority
Aturidåt Espetåt Mimuriåt Guåhan

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BOARD OF TRUSTEES
Official Resolution No. 2018-04

"RELATIVE TO THE APPOINTMENT OF PROVISIONAL MEDICAL STAFF PRIVILEGES"

Practitioner	Department	Specialty	Expiration Date
Lauren Sturtevant, DO	Medicine	Internal Medicine	October 31, 2018
Adrian Cora-Morges, MD	Medicine	Internal Medicine	October 31, 2018
Stephen Pomeranz, MD	Radiology (Telemed)	Radiology	October 31, 2018

WHEREAS, the above listed practitioners met the basic requirements for Provisional Medical Staff Membership as determined by the appropriate Medical Staff Departments and Committees pursuant to the GMHA Medical Staff Bylaws, Article IV, Section 4.3; and

WHEREAS, the Medical Executive Committee on October 25, 2017 and the Joint Conference and Professional Affairs Committee on November 16, 2017, recommended approval of Provisional Medical Staff Membership appointment for the above listed practitioners; and

WHEREAS, all appointments to Provisional Medical Staff Membership require Board approval; now, therefore be it

RESOLVED, that the Board of Trustees approves this recommendation to appoint the above named practitioners to Provisional Medical Staff as recommended; and, be it further

RESOLVED, that the Board of Trustees directs the Hospital Administrator to duly notify the practitioners listed above and all Hospital and Medical Departments of these appointments; and be it further

RESOLVED, that the Board of Trustees Chairperson certifies and the Board of Trustees Secretary attests to the adoption of this Resolution.

DULY AND REGULARLY ADOPTED ON THIS 13th DAY OF DECEMBER, 2017

Certified by:

Eloy S. Lizama
Chairperson, Board of Trustees

Attested by:

Melissa Waibel
Secretary, Board of Trustees

Guam Memorial Hospital Authority
Aturidåt Espetåt Mimuriåt Guåhan

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BOARD OF TRUSTEES
Official Resolution No. 2018-03

"RELATIVE TO THE REAPPOINTMENT OF ACTIVE MEDICAL STAFF PRIVILEGES"

Practitioner	Department	Specialty	Expiration Date
Frank Reda III, MD	Radiology	Radiology	October 31, 2019
Tuan Nguyen, MD	Radiology	Radiology	October 31, 2019
Mohammed Aladdin, MD	Radiology	Radiology	October 31, 2019
Russel Aubin, DO	Anesthesia	Anesthesia	October 31, 2019
Gilbert Lopez, MD	Anesthesia	Anesthesia	October 31, 2019
Yolanda Carrera, MD	Pediatrics	Pediatrics	October 31, 2019
John Garrido, MD	Pediatrics	Pediatrics	October 31, 2019
Elizabeth Hernandez, MD	Pediatrics	Pediatrics	October 31, 2019
Robert Leon Guerrero, MD	Pediatrics	Pediatrics	October 31, 2 019
Annie Bordallo, MD	Ob/Gyn	Ob/Gyn	October 31, 2019
William Freeman, MD.	Ob/Gyn	Ob/Gyn	October 31, 2019
Jeffrey Gabel, DO.	Ob/Gyn	Ob/Gyn	October 31, 2019
William Vercio, MD.	Ob/Gyn	Ob/Gyn	October 31, 2019
Steven Hayashida, MD.	Surgery	Neurosurgery	October 31, 2019
Jerone Landstrom, MD.	Surgery	Hand Surgery	October 31, 2019
Ronald Kobayashi, MD.	Surgery	Gen. Surgery	October 31, 2019
Faraz Ouhadi, MD.	Medicine	Internal Med.	October 31, 2019
Pichet Iampornpipopchai, MD	Medicine	Nephrology	October 31, 2019

WHEREAS, the above listed practitioners met the basic requirements for Active Medical Staff Membership as determined by the appropriate Medical Staff Departments and Committees pursuant to the GMHA Medical Staff Bylaws, Article IV, Section 4.2; and

WHEREAS, the Medical Executive Committee on October 25, 2017 and the Joint Conference and Professional Affairs Committee on November 16, 2017 recommended approval of Active Medical Staff Membership reappointment for the above listed practitioners; and

WHEREAS, all reappointments to Active Medical Staff Membership require Board approval; now, therefore be it

RESOLVED, that the Board of Trustees approves this recommendation to reappoint the above named practitioners to Active Medical Staff as recommended; and, be it further

RESOLVED, that the Board of Trustees directs the Hospital Administrator to duly notify the practitioners listed above and all Hospital and Medical Departments of these reappointments; and be it further

RESOLVED, that the Board of Trustees Chairperson certifies and the Board of Trustees Secretary attests to the adoption of this Resolution.

DULY AND REGULARLY ADOPTED ON THIS 13th DAY OF DECEMBER, 2017

Certified by:

Eloy S. Lizama
Chairperson, Board of Trustees

Attested by:

Melissa Waibel
Secretary, Board of Trustees

Theo Pangelinan

From: Theo Pangelinan <theo.pangelinan@gmha.org>
Sent: Wednesday, December 06, 2017 9:42 AM
To: 'dcrisost@guampdn.com'; 'editor@mvguam.com'; 'gabe@spbguam.com'; 'gdumat-ol@guam.gannett.com'; 'Janice Castro'; 'jtyquiengco@spbguam.com'; 'life@guampdn.com'; 'managingeditor@glimpsesofguam.com'; 'mcalvo@kuam.com'; 'Masako Watanabe'; 'news@k57.com'; 'PBS Guam Loraine Hernandez'; 'perezksto@gmail.com'; 'publisher@glimpsesofguam.com'; 'Gerry Partido'; 'rgibson@k57.com'; 'cimiculka@guampdn.com'; 'jpsablan@guampdn.com'; 'news@guampdn.com'; 'editor@mvguam.com'; 'marvic@mvguam.com'; 'Gerry Partido'; 'louella@mvguam.com'; 'sabrina@kuam.com'; 'mindy@kuam.com'; 'krystal@kuam.com'; 'jolene@kuam.com'; 'jason@kuam.com'; 'kenq@kuam.com'; 'Jasmine Stole'; 'newsdirector@kuam.com'; 'hottips@kuam.com'; 'editor@mvguam.com'; 'gerry@mvguam.com'; 'pcharfauros@spbguam.com'; 'betsy@spbguam.com'; 'publisher@glimpsesofguam.com'; 'managingeditorglimpses@gmail.com'; 'assist_editor@glimpsesofguam.com'; 'reporter1@glimpsesofguam.com'; 'reporter4 @glimpsesofguam.com'; 'slimtiaco@guam.gannett.com'; 'perezksto@gmail.com'; 'kstokish@gmail.com'; 'admin@mvguam.com'; 'slimtiaco@guam.gannett.com'; 'slimtiaco@guampdn.com'; 'Janna Fernandez'; 'Phillip Leon Guerrero'; 'Brian San Nicolas'; 'Franklin Arriola'; 'Ray Tenorio'; 'governor@guam.gov'; 'Senator Dennis Rodriguez'; 'rfteehan@yahoo.com'; 'Janice Sablan'; 'nbuoffice@guamlegislature.org'; gmhinfo@gmha.org; 'harold.guam@yahoo.com'
Subject: PRESS RELEASE: GMHA Board of Trustees Meeting - Dec. 13, 2017
Attachments: PRESS RELEASE_GMHA BOT Meeting - Dec. 13, 2017.pdf

Importance: High

Guam Memorial Hospital Authority
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TEL: 647-2444 or 647-2330
FAX: (671) 649-0145

Guam Memorial Hospital Authority (GMHA)
Board of Trustees Meeting

MEDIA ADVISORY: **FOR IMMEDIATE RELEASE**
DATE: December 6, 2017
CONTACT: Theo M. Pangelinan
Administrative Assistant
(P) 647-2104

In accordance with Public Law 24-109, relative to notice of meetings, and in addition to the notices to be published on Wednesday, December 6, 2017 and Monday, December 11, 2017 in The Guam Daily Post, this serves as public notice for the regular meeting of

Regards,

Theo M. Pangelinan | Administrative Assistant, Admin/Board Office | Tel: (671) 647-2104 | Fax: (671) 649-0145 | email: theo.pangelinan@gmha.org
Guam Memorial Hospital Authority | 850 Governor Carlos G. Camacho Road Tamuning, GU 96913-3128

This communication may contain CONFIDENTIAL and PRIVILEDGED information for the sole use of the intended recipient(s). If you are not the intended recipient (or authorized to receive for the recipient), please contact the sender by e-mail or telephone (671) 647-2555 and delete all copies of this message. (GMHA Policy 6100-29)

Guam Memorial Hospital Authority
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Guam Memorial Hospital Authority (GMHA)
Board of Trustees Meeting

MEDIA ADVISORY: **FOR IMMEDIATE RELEASE**
DATE: December 6, 2017
CONTACT: Theo M. Pangelinan
Administrative Assistant
(P) 647-2104

In accordance with Public Law 24-109, relative to notice of meetings, and in addition to the notices to be published on Wednesday, December 6, 2017 and Monday, December 11, 2017 in The Guam Daily Post, this serves as public notice for the regular meeting of the GMHA Board of Trustees.

Date: **Wednesday, December 13, 2017**
Time: **6:00 p.m.**
Place: **1st Floor, Daniel L. Webb Conference Room**

You may contact Toni Tenorio at 647-2218 for special accommodations, auxiliary aids, or other services.

###

Minutes of the Special Meeting of the Guam Memorial Hospital Authority Board of Trustees

July 10, 2017 | 6:00 p.m.
Daniel L. Webb Conference Room

ATTENDANCE

Board Members:
Eloy Lizama
Lillian Posadas
Melissa Waibel
Sharon Davis
Dr. Ricardo Terlaje

Executive Management:
PeterJohn Camacho
Benita Manglona
Edward Birn
Zennia Pecina
Dr. Vincent Duenas
Dr. Kozue Shimabukuro (Off-island)
Dr. Friedrich Bieling (Absent)

All Other(s):
Carlos Pangelinan
Vince Quichocho
June Perez

ISSUE/TOPIC/DISCUSSIONS	DECISION(S)/ACTION(S)	RESPONSIBLE PARTY	REPORTING TIMEFRAME	STATUS
I. CALL MEETING TO ORDER AND DETERMINATION OF QUORUM				
	After notices were duly and timely issued pursuant to *Title 5 Guam Code Annotated, Chapter 8 Open Government Law, Section 8107(a)* and with a quorum present, Trustee Lizama called to order the special meeting of the GMHA Board of Trustees at 6:29 p.m. on Monday, July 10, 2017 in the Daniel L. Webb Conference Room of the GMHA located in Tamuning, Guam.	Trustee Lizama	None	Informational
II. NEW BUSINESS				
A. <u>Business Sustainability Plan</u>	The Board was presented with the Business Sustainability Plan (Draft 19.9). Management highlighted that the key goal was to develop a plan that would provide sustainability so that the Hospital would be able to continue its operations. It was pointed out that a part of the plan for sustainability was two-fold. The first was for the government to borrow a $125M bond that would be used strictly to modernize the facility (not for operations), and the second was for the government to establish a dedicated funding source for the Hospital by raising the Gross Receipts Tax by .75%. After a thorough review of the draft was conducted, it was decided that revisions would	All Trustees	None	Approved/ Closed

	be made to certain tables and graphs to reflect the most current data. Trustee Posadas motioned and it was seconded by Trustee Davis to approve the Business Sustainability Plan subject to technical changes. The motion carried with all ayes.			
III.PUBLIC COMMENT				
	There were no public comments.	All Trustees	None	None
IV. ADJOURNMENT				
	There being no further discussions, Chairman Mr. Lizama declared the meeting adjourned at 7:43 p.m.	Trustee Lizama	None	Approved

Transcribed by: _____
Theo M. Pangelinan
Administrative Assistant

Submitted by: _____
Melissa Waibel
Secretary, Board of Trustees

CERTIFICATION OF APPROVAL OF MINUTES: The minutes of the July 10, 2017 special meeting was accepted and approved by the GMHA Board of Trustees on this 13th day of December, 2017.

Certified by: _____
Eloy S. Lizama
Chairman, Board of Trustees

Minutes of the Regular Meeting of the Guam Memorial Hospital Authority Board of Trustees

June 1, 2017 | 6:00 p.m.
Daniel L. Webb Conference Room

ATTENDANCE

Board Members:
Eloy Lizama
Lillian Posadas
Melissa Waibel
Sharon Davis
Dr. Ricardo Terlaje

Executive Management:
PeterJohn Camacho
Edward Birn
Zennia Pecina
Dr. Vincent Duenas
Dr. Kozue Shimabukuro
Dr. Friedrich Bieling
Benita Manglona (Off-island)

All Other(s):
Dr. Michael Um
Joe Rosario – MRE, Inc.

ISSUE/TOPIC/DISCUSSIONS	DECISION(S)/ACTION(S)	RESPONSIBLE PARTY	REPORTING TIMEFRAME	STATUS
I. CALL MEETING TO ORDER AND DETERMINATION OF QUORUM				
	After notices were duly and timely issued pursuant to *Title 5 Guam Code Annotated, Chapter 8 Open Government Law, Section 8107(a)* and with a quorum present, Trustee Lizama called to order the regular meeting of the GMHA Board of Trustees at 6:07 p.m. on Thursday, June 1, 2017 in the Daniel L. Webb Conference Room of the GMHA located in Tamuning, Guam.	Trustee Lizama	None	Informational
II. ACCEPTANCE OF REGULAR SESSION MINUTES				
A. February 23, 2017	A draft of the February 23, 2017 meeting minutes was reviewed. Trustee Posadas motioned and it was seconded by Trustee Waibel to approve the minutes as printed. The motion carried with all ayes.	All Trustees	None	Approved/ Closed
III. NEW BUSINESS				
A. Resolution 2017-25, Relative to Approving 46 News Fees and Updating 8,515 Professional Fees	Trustee Terlaje motioned and it was seconded by Trustee Posadas to approve Resolution 2017-25. The motion carried with all ayes.	All Trustees	None	Approved/ Closed
B. Resolution 2017-26, Relative to Correcting Accounts Receivables to Reflect Active Balances	Trustee Waibel motioned and it was seconded by Trustee Terlaje to approve Resolution 2017-26. The motion carried with all ayes.	All Trustees	None	Approved/ Closed
C. Ratification of Approval of the FY-2018 Budget Proposal presented at the 03/27/17 Working Session	Trustee Posadas motioned and it was seconded by Trustee Waibel to ratify approval of the Hospital's FY-2018 Budget Proposal. The motion carried with all ayes.	All Trustees	None	Approved/ Closed

D. 2016 Life Safety Management Plan Evaluation	Trustee Waibel motioned and it was seconded by Trustee Posadas to approve the 2016 Life Safety Management Plan evaluation. The motion carried with all ayes.	All Trustees	None	Approved/ Closed
E. 2016 Medical Equipment Management Plan Evaluation	The issue of missing equipment was raised. It was explained that equipment would be assigned to a department/unit and then be loaned to another making it difficult to trace its location. A suggestion to implement a color code system was made to improve the tracking process. Trustee Waibel motioned and it was seconded by Trustee Posadas to approve the 2016 Medical Equipment Management Plan Evaluation. The motion carried with all ayes.	All Trustees	None	Approved/ Closed
F. 2016 Utility Systems Management Plan Evaluation	Trustee Waibel motioned and it was seconded by Trustee Posadas to approve the 2016 Utilities Management Plan Evaluation. The motion carried with all ayes.	All Trustees	None	Approved/ Closed
IV. OLD BUSINESS				
A. GMH We Care Charity Fund Updates	Dr. Shimabukuro reported that she had worked with legal counsel to finalize the We Care Charity Fund Bylaws as suggested by the Board of Trustees. Some revisions included making the bylaws general and developing procedures or protocols internally for the actual review process. It was mentioned that the review committee consisted of representation from guest relations and social services. Dr. Shimabukuro and Dr. Um provided further clarifications to queries regarding the case review process, fundraising methods, and the collaboration with the GMH Volunteers Association to name a few. Trustee Terlaje motioned and it was seconded by Trustee Davis to approve the We Care Charity Fund Bylaws as presented. The motion carried with all ayes.	Dr. Shimabukuro	None	Approved/ Closed

V. BOARD SUB-COMMITTEE REPORTS				
A. <u>Joint Conference and Professional Affairs (JCPA) Subcommittee</u> 1. Resolution 2017-27, Relative to the Reappointment of Active Medical Staff Privileges (exp. 03/31/19) for: • Michael W. Cruz, MD • Ricardo Eusebio, MD • Glenn Cunningham, MD Resolution 2017-28, Relative to the Appointment of Provisional Medical Staff Privileges (03/31/18) for: • Linh Tieu, DO • Anu Vijayakumar, MD Resolution 2017-29, Relative to the Reappointment of Active Associate Medical Staff Privileges (exp. 03/31/19) for: • James W. Murphy, MD	Trustee Posadas motioned and it was seconded by Trustee Waibel to approve Resolutions 2017-27 through 2017-28 as presented. The motion carried with all ayes.	Trustee Terlaje	None	Approved/ Closed
2. Resolution 2017-51, Relative to the Reappointment of Active Medical Staff Privileges (exp. 04/30/19) for: • Eugene De Guzman, MD • Alix Chenet, MD • Young Chang, MD • Jeffrey Cruz, MD • Kamala Thanapandian, MD	Trustee Waibel motioned and it was seconded by Trustee Davis to approve Resolution 2017-51 as presented. The motion carried with all ayes.			
Resolution 2017-52, Relative to the Appointment of Provisional Medical Staff Privileges (04/30/18) for: • Miran Ribati, MD	Trustee Posadas motioned and it was seconded by Trustee Davis to approve Resolution 2017-52 as presented. The motion carried with all ayes.			
Resolution 2017-53, Relative to the Appointment of Active Associate Medical Staff Privileges (exp. 04/30/19) for: • Alan Garvin, MD	Trustee Waibel motioned and it was seconded by Trustee Davis to approve Resolution 2017-53 as presented. The motion carried with all ayes.			
Resolution 2017-54, Relative to the	Trustee Waibel motioned and it was seconded by			

Reappointment of Allied Health Professional Staff Privileges (exp. 04/30/19) for: • Sheri Foote, CNM • Jeanelle Martinez, CNM Resolution 2017-55, Relative to the Reappointment of Active Medical Staff Privileges (exp. 05/31/19) for: • Fernan De Guzman, MD • Hugo Koo, MD • Juwen Lin, MD Resolution 2017-56, Relative to the Reappointment of Allied Health Professional Staff Privileges (05/31/19) for: • Ramona Domen, CRNA	Trustee Posadas to approve Resolution 2017-54 as presented. The motion carried with all ayes. Trustee Posadas motioned and it was seconded by Trustee Waibel to approve Resolution 2017-55 as presented. The motion carried with all ayes. Trustee Waibel motioned and it was seconded by Trustee Posadas to approve Resolution 2017-56 as presented. The motion carried with all ayes.			
B. <u>Quality and Safety Subcommittee</u> 1. A-PC1000, Two Midnight Rule Policy	• Trustee Posadas explained that this policy was developed to address CMS criteria for admissions. Trustee Davis motioned and it was seconded by Trustee Waibel to approve Policy A-PC1000 as printed. • Trustee Posadas informed the committee that the Hospital continued with its performance improvement activities. She also stated that action plans were being developed as issues arose.	Trustees Posadas	Updates to be reported at the next scheduled meeting.	Informational
C. <u>Human Resources Subcommittee</u> 1. Resolutions 2017-30 through 2017-48, Relative to Retirements for the following individuals: • Nerissa G. Agag, Medical Equipment Technician • Mohammad T. Ashraf, Accounting Technician I • Frances G. Brown, Rehabilitation Technician I • Eleuterio V. Camat, Emergency Room Technician	Trustee Posadas motioned and it was seconded by Trustee Davis to approve the resolution as presented. The motion carried with all ayes. *Mr. Camacho mentioned that retirees were usually presented their resolution during Hospital Week, but HR was looking at presenting them more timely (i.e., at the point of retirement).*	Trustees Waibel and Posadas	Updates to be reported at the next scheduled meeting.	Approved/ Closed

• Nida v. Castro, Ward Clerk • Lyn P. Ceria, Medical Laboratory Technician II • Doris Jean A. Cruz, Accounting Technician Supervisor • Perlita E. Cruz, Rehabilitation technician III • Luz C. David, Hospital LPN I • Mercedita I. Estira, Staff Nurse II • Rowena Fuertes, Staff Nurse II • Eleanor M. Nauta, Staff Nurse II • Gregory C. Paulino, Hospital Pharmacy Technician II • Cecilia C. Quitugua, Hospital Environmental Services Supervisor • Christina L.B. Quitugua, Computer Operator Supervisor • Vicente J. Quitugua, Guard • Marylene K. Robang, Nurse Aide II • Patricia S. Sanchez, Medical Records Clerk • Sabina I. Taijeron, Staff Nurse II				
2. Resolution 2017-57, Relative to Approving a 2% Differential Job Differential Pay Pilot Program for Nurses in the Adult Intensive Care Unit (ICU) needed to Attract Nurses into a Unit Highly Specialized in Caring for Critically Ill Adult Patients	Trustee Waibel explained that this resolution was developed to address the issues with recruiting nurses for the ICU and other specialty areas. She pointed out that this program would be implemented in the ICU and assessment would be done to determine its effectiveness. Trustee Posadas motioned and it was seconded by Trustee Davis to approve the resolution as presented. The motion carried with all ayes.			
3. Resolution 2017-58 Relative to the Creation of the Long Term Care Administrator (SNF)	Trustee Waibel noted that the creation of the position was a requirement under CMS. Trustee Terlaje motioned and it was seconded by Trustee Davis to approve the resolution as presented. The motion carried with all ayes.			
4. Resolution 2017-59, Relative to the Amendment of the Hospital	Trustee Waibel explained that this resolution revised the standards and requirements for			

Environmental Services Technician I Position 5. Resolution 2017-60, Relative to the Creation of the Director of Hospital Business Development and Strategic Planning Position	recruiting purposes. It was noted that there was no financial impact on the hospital. Trustee Davis motioned and it was seconded by Trustee Posadas to approve the resolution as presented. The motion carried with all ayes. Trustee Waibel noted that this position was unclassified and that targets would be developed for the individual who fills this position. Trustee Posadas motioned and it was seconded by Trustee Davis to approve the resolution as presented. The motion carried with all ayes.			
D. <u>Facilities, Capital Improvement Projects (CIP), and Information Technology Subcommittee</u> 1. Resolution 2017-49, Relative to Completing GMHA RFP No. 001-2016, Hospital Rooftop Solar PV Project Funded by the Department of the Interior (DOI), Office of Insular Affairs' Empowering Insular Communities (EIC) Grant Program, GUAM-EIC-2015-2	Trustee Waibel motioned and it was seconded by Trustee Posadas to approve Resolution 2017-49. The motion carried with all ayes. *Mr. Camacho mentioned that the Office of the Attorney General would not approve the packet until this resolution was provided.* <u>Other Discussions</u>: • Trustee Davis informed the committee that projects were progressing and that there were no risks foreseen at the time. • Mr. Camacho noted that the Hospital had submitted a formal letter to CMS regarding the status of the SNU Walkway Project. • Mr. Camacho noted that the USDA had approved the format used to prepare the packet, but had also issued a provision requiring the government to seek interim financing. He stated that the Guam Economic Development Authority would be submitting a request for consideration to the USDA.	Trustees Davis	Updates to be reported at the next scheduled meeting.	Informational

E. <u>Governance, Bylaws and Strategic Planning Subcommittee</u>	Trustee Waibel informed the Board that the committee continued working on revisions to the 2018-2020 Strategic Plan Environmental Assessment.	Trustees Waibel and Terlaje	Updates to be reported at the next scheduled meeting.	None
F. <u>Finance and Audit Subcommittee</u> 1. Resolution 2017-50, Relative the Signing of a Remote Deposit Capture Agreement with bank of Guam	Trustee Davis motioned and Trustee Waibel seconded to approve Resolution 2017-50 as presented. The motion carried with all ayes. <u>Others</u>: Chairman Mr. Lizama made note that the Finance & Audit Subcommittee last met on April 21, 2017. He deferred the financial to the CFO's report.	Trustee Lizama	Updates to be reported at the next scheduled meeting.	Deferred
VII. ADMINISTRATORS' REPORTS				
A. <u>Hospital Administrator/CEO</u>	Mr. Camacho provided his written report and highlighted the following: • The Hospital had met with Noridian Healthcare solutions and discussed DRGs. The plan was to request for information (via a FOIA request) to compare what is being done in Hawaii with Guam. This would help determine if the transition to DRG status would be beneficial for GMH. • The Community Health Briefings have been postponed until further notice. • He had attended a "Summit to End Veterans Homelessness" and obtained information for potential community partners. This was an opportunity to help address the situation with social cases at the Skilled Nursing Unit.	Mr. Camacho	Updates to be reported at the next scheduled meeting.	Informational
B. <u>Associate Administrator of Medical Services</u>	Dr. Shimabukuro reported that the following: • The Utilization Review Committee was resurrected and was presently reviewing certain areas where improvements were needed (e.g., blood transfusions, medication reimbursements, etc.). • The anesthesia department was now stabilized. There are a total of four physicians and three certified nurse anesthetists providing coverage for	Dr. Duenas and Dr. Shimabukuro	Updates to be reported at the next scheduled meeting.	Informational

	anesthesia services. She mentioned that discussions were ongoing regarding the possibility of implementing a "closed" membership for the Department of Anesthesia. Doing so would address issues concerning liabilities involving privileged practitioners who were not employed or contracted to provide services at the Hospital.			
C. <u>Associate Administrator of Professional Support Services</u>	Dr. Shimabukuro mentioned that discussion continued on the plans to expand outpatient services.	Dr. Shimabukuro	Updates to be reported at the next scheduled meeting.	Informational
D. <u>Assistant Administrator of Nursing Services</u>	Ms. Pecina reported the following: • The census in the regular floors decreased; however, there was an increase in the critical areas. • There were two (2) Crisis Prevention Institute certified individuals on staff. • The Nursing Clinical Ladder was under review at the Human Resources subcommittee level. • EPOWERdoc was scheduled to "go-live" in the emergency Room.	Ms. Pecina	Updates to be reported at the next scheduled meeting.	Informational
E. <u>Chief Financial Officer</u>	Mr. Birn submitted his report and highlighted the following: • revenues were 1% below compared to last year due to the change in the census; • both revenues and collections had increased; • cost was relatively steady with the most significant change being contractual adjustments; • the Hospital presented its FY-2018 budget proposal to the legislature with $33M operating cash and $5.3M capital expenditure requirements; and • the charge master was synchronized with Craneware and Craneware would be used as the main tool for charges.	Mrs. Manglona and Mr. Birn	Updates to be reported at the next scheduled meeting.	Informational

F. Medical Staff President	There was no report provided.	Dr. Bieling	Updates to be reported at the next scheduled meeting.	Informational
VIII.PUBLIC COMMENT				
	There were no public comments.	All Trustees	None	None
IX. ADJOURNMENT				
	There being no further business matters to discuss, Chairman Mr. Lizama declared the meeting adjourned at 9:09 p.m.	Trustee Lizama	None	Approved

Transcribed by: _____
Theo M. Pangelinan
Administrative Assistant

Submitted by: _____
Melissa Waibel
Secretary, Board of Trustees

CERTIFICATION OF APPROVAL OF MINUTES: The minutes of the June 1, 2017 regular session meeting was accepted and approved by the GMHA Board of Trustees on this 13th day of December, 2017.

Certified by: _____
Eloy S. Lizama
Chairman, Board of Trustees

Guam Memorial Hospital Authority

BYLAWS OF THE BOARD OF TRUSTEES

These bylaws of the Guam Memorial Hospital Authority ("GMHA") Board of Trustees ("Board") are adopted effective December 13, 2017.

ARTICLE I
MISSION STATEMENT

The mission of the GMHA is to provide quality patient care in a safe environment.

ARTICLE II
GENERAL PROVISIONS

1. The principal office of the GMHA Board is located at:

   Administration Offices
   Guam Memorial Hospital Authority
   850 Governor Carlos G. Camacho Road
   Tamuning, Guam 96911

   All communications to the GMHA Board shall be addressed to its principal office except as may otherwise specified by resolution, regulation, or rule.

2. The GMHA shall operate on a fiscal year commencing on October and concluding on September of the following calendar year.

ARTICLE III
BOARD OF TRUSTEES

1. MEMBERSHIP

The Board shall be composed of ten (10) members, appointed by the Governor with the advice and consent of the Legislature, as follows:

a. Four (4) members representing the general public, who shall possess a background and experience in healthcare, management, finance or any other business-related field;
b. One (1) member representing the Allied Health Professions;
c. Two (2) members representing the Guam Nursing Association; and

d. Two (2) members representing the Guam Medical Community.

In addition, one (1) member who shall be the President, or designee, of the Guam Memorial Hospital Volunteers Association, who shall be an ex-officio member with full participatory rights and privileges, but without the right of voting. The GMHA Volunteers Association President or designee shall have been a member of the GMHA Volunteers Association for a minimum of five (5) years prior to assuming a position on the Board. [Title 10 G.C.A., Section 80105(a)]

2. TERM

The members of the Board shall serve staggered terms of six (6) years. On the expiration of the term of any member, or in the event of a vacancy on the Board due to resignation, death or any other cause, the Governor shall, with the advice and consent of Legislature, appoint another member for a full term in the first instance, or for the remainder of the unexpired term. When there is a change of administration of the government of Guam after a gubernatorial election, no courtesy resignation shall be requested by the new administration nor offered by any member of the Board. [Title 10 G.C.A., Section 80105.3]

3. QUALIFICATIONS

The composition of the members of the Board shall be broadly based in terms of its members' personal expertise and shall strive for a balanced representation of the general population. Trustees, and Trustee candidates, must be United States citizens or permanent resident aliens domiciled in Guam for at least three (3) years prior to appointment to the Board. No person shall sit on the Board as a member who is an employee of the Guam Memorial Hospital Authority. [Title 10 G.C.A., Section 80105.4]

4. COMPENSATION

Each Trustee shall be entitled to receive the sum of One Hundred Dollars ($100.00) for his/her attendance at any meeting of the Board, but such compensation shall not apply to more than four (4) meetings or exceed Four Hundred Dollars ($400) in any one (1) calendar month. No Trustee shall receive any other compensation, but shall be reimbursed for actual travel, subsistence and out-of-pocket expenses incurred in the discharge of his or her responsibilities, including authorized attendance at meetings held away from Guam. [Title 10 G.C.A., Section 80105(b)]

5. CONFLICTS OF INTEREST

The best interest of the community and the Hospital are served by Board members who are objective in the pursuit of their duties as Board members, and who exhibit that objectivity at all times. The decision making process of the Board may be altered by interests or relationships which might in any instance, either intentionally or coincidentally bear on that member's opinion or decision. Therefore, it is considered to be in the best interest of the Hospital for relationships of any Board member which may the influence decisions related to the Hospital to be disclosed to all other members of the Board on a regular and contemporaneous basis.

No Board member shall use his/her position to obtain or accrue any benefit. All Board members shall at all times avoid even the appearance of influencing the actions of any employee of the Hospital or Corporation, except through his/her vote, and the acknowledgment of that vote, as a Board member for or against opinions or actions to be stated or taken by or for the Board as a whole. A Trustee shall abstain from voting on any issue in which the Trustee has an interest other than as a fiduciary of the Hospital.

No Trustee shall be actively engaged in the selling of services or goods to the Hospital without the express approval of the Board of Trustees. The form of approval shall be by the adoption of a Board Resolution confirming said approval. This restriction shall not apply to health care professionals who provide direct patient care services to the Hospital. [Title 10 G.C.A., Section 80105.1(d)]

No Trustee shall act when a conflict of interest occurs. The Trustee shall disclose the nature of the conflict of interest to the members present and abstain from any discussion or voting on the issue until it has been disposed of by action of the remaining members present. If a Trustee knowingly fails to disclose a conflict of interest in the manner listed herein and subsequently votes on an action to be taken by the Board, then the vote of the conflicted Trustee shall not be counted for purposes of constituting official Board action. Any Trustee who knowingly fails to disclose a conflict of interest in the manner listed herein shall be subject to removal from the Board, pursuant to 10 G.C.A. § 80107. [Title 10 G.C.A., Section 80105.1 (e)]

6. FIDUCIARY DUTY

The Board shall be liable for the negligent act of any hospital employee or officer, if the Board knew or had notice that said employee or officer was inefficient and incompetent to perform the services for which he was hired, or said Board retained such inefficient or incompetent person after knowledge or notice of such inefficiency or incompetency. However, no Trustee shall be liable for any decision made in the good faith, non-malicious fulfillment of his duties. The Board shall be liable as fiduciaries in the execution of their duties. [Title 10 G.C.A., Section 80105.1 (a) to (c)]

The members of the Board shall not, by reason of such membership, be deemed employees of the government of Guam. [Title 10 G.C.A., Section 80106]

7. GENERAL POWER AND OBLIGATIONS

The governance and control of the GMHA is vested in the Board. [Title 10 G.C.A., Section 80105(a)]. The Board shall be responsible for controlling and directing the affairs, property, and interests of the GMHA and may exercise all powers and authorities conferred upon the GMHA as permitted by law. By way of example, and not of limitation, the Board shall have the power to:

a. Determine policies for the organization, administration, and development of the GMHA's and its strategic plan;

b. Be responsible for the maintenance of the standards of medical care, safety, and professionalism at the Hospital in accordance with all applicable laws and regulatory and accrediting bodies;

c. Support the maintenance and operation of a facility providing acute, chronic and all other health care services, including those services specifically provided by contract for the Guam Behavioral Health and Wellness Center, for the people of Guam. [Title 10 G.C.A., Section 80109 (a)];

d. Acquire, subject to the laws of Guam, by grant, purchase, gift, devise or lease, and hold and use for the GMHA any real property necessary or convenient or useful for the carrying on of any of the GMHA's powers. [Title 10 G.C.A., Section 80109 (e)];

e. Authority to appoint, reappoint, and terminate members of the Hospital Medical Staff, as well as to grant and suspend clinical privileges. These actions shall be governed by procedures approved by the Board, with the advice of the Medical Staff through its President, and in accordance will applicable provision of the Medical Staff Bylaws as may be revised.

f. Provide for third-party peer review services for those peer review proceedings wherein the physician who is the subject of a peer review asserts that an impartial proceeding cannot otherwise be achieved. [Title 10 G.C.A., Section 80109 (n)(1)(A)];

g. Overturn a medical peer review as strictly prescribed by the National Practitioner Data Bank, as provided pursuant to Title 45 – Public Welfare, Part 60, Code of Federal Regulations, and as the regulations and authorizing statutes may be revised. [Title 10 G.C.A., Section 80109 (n)(2)];

h. Contract with a corporation to exercise any or all the powers of the Administrator, and of those officers authorized by 10 G.C.A. § 80108, if the Board so chooses. [Title 10 G.C.A., Section 80109 (p)];

i. Hire or contract an Administrator, who will be the GMHA's Chief Executive Officer and will have full charge of the operations and maintenance of the Hospital. [Title 10 G.C.A., Section 80110];

j. Establish and administer rules and regulations governing the compensation and classification of health professionals of the Hospital. [Title 10 G.C.A., Section 80113];

k. Study the financial needs of the GMHA, and report annually to the Governor and the Legislature concerning the condition of the Hospital. [Title 10 G.C.A., Section 80116];

l. Provide concurrence to the Administrator, as appropriate, to solicit, accept, utilize and administer on behalf of GHMA donations, contributions, gifts and bequests for any specific purpose relative to medical care, and may expend any sums so received for the purposes intended by the giver, or donor, in addition to the regular appropriations made for such purposes. [Title 10 G.C.A., Section 80120]; and

m. Perform such acts as may be reasonably necessary to accomplish the purpose for which the GMHA was formed. [Title 10 G.C.A., Section 80109 (g)]

8. EXECUTIVE SECRETARY

The Board may appoint an executive secretary who shall serve at the pleasure of the Board and whose qualifications, duties, responsibilities, and compensation shall be set by the Board.

ARTICLE IV
MEETINGS

1. REGULAR & SPECIAL MEETINGS

The Board shall hold a regular monthly meeting on such day and time as prescribed by resolution. All such meetings shall be open to the public, and the Board shall consider any such matters as may be properly brought before it. The GMHA Medical Staff shall be represented at the meeting by one or more medical staff members, duly selected by the Medical Staff.

Special meetings may be called by the Chairperson or by a majority of the members, as often as may be necessary. [Title 10 G.C.A., Section 80105.2] Meetings of the Board, regular or special, shall be subject to Title 5 G.C.A., Chapter 8, Open Government Law.

2. ATTENDANCE REQUIRED

The members of the Board are required to adhere to the attendance policy as guided by the Chairperson. The Chairperson shall determine whether a Trustee's absence from a Board meeting is excused. Three (3) consecutive unexcused absences from regular meetings of the Board shall be cause for removal from membership of the Board of Trustees, and the Governor may execute such removal upon recommendation of the Chairperson.

3. PARLIAMENTARY PROCEEDINGS

All meetings shall be conducted in accordance with the most recent edition of Robert's Rules of Order, unless in conflict with provisions of these Bylaws. Minutes shall be kept of the proceedings at all meetings pursuant to Title 5 G.C.A., Chapter 8 - Open Government Law.

4. NOTICE

Notice of Regular and Special Meetings shall be provided as follows: five (5) working days public notice and a second public notice at least forty-eight (48) hours prior to the start of the meeting. [Title 5 G.C.A., Section 8107]

For Special Meetings, the five (5) working days public notice and the second forty-eight (48) hours prior notice may be waived in the event of an emergency certified to in writing by a public agency. Written notice may be dispensed with as to any member who at, prior to or subsequent to the time the meeting convenes, files with the clerk or secretary of the public agency a written waiver of notice. [Title 5 G.C.A., Section 8108]

5. QUORUM

A majority of the members shall constitute a quorum and an affirmative vote of five (5) members is required for any action to be valid. [Title 10 G.C.A., Section 80105.2]

A Trustee shall be deemed present at a meeting if he/she participated by conference telephone, speaker telephone, or other method by which all persons participating in the meeting can hear one another at the same time. If a quorum is not present at any meeting, those present may adjourn the meeting until such date and hour as a quorum may be had, and no further notice of the adjourned meeting shall be required.

6. EXECUTIVE SESSION

At any Regular or Special meeting of the Board, the Members may, by vote, close the meeting to the public to meet in executive session pursuant to Title 5 G.C.A., Section 8111.

ARTICLE V
OFFICERS

The Board shall elect a Chairperson, a Vice-Chairperson, a Secretary and a Treasurer from among its membership every two (2) years. [Title 10 G.C.A., Section 80108].

a. The **Chairperson** shall call and preside at all regular and special meetings and shall be ex-officio, a member of all committees with voting privileges. He/She shall have such duties and responsibilities as shall be delegated to him/her by these Bylaws, and by the GMHA, from time to time.

b. The **Vice-Chairperson** shall perform the duties and exercise the powers of the Chairperson during the absence or disability of the Chairperson, and perform such other duties as may be delegated by the Board.

c. The **Secretary** shall keep or cause to be kept accurate and complete minutes of all Board and Committee meetings and to ensure that the minutes are maintained and filed systematically in a safe place; send or cause to be sent notices of meetings on order of the

Chairperson or as allowed by law; send or cause to be sent all correspondence of the Board and maintain copies of all correspondence; and attest to the official actions of the Board.

d. The **Treasurer** shall oversee the GMHA's financial condition at all times and recommend changes to the policies and procedures if necessary; Chair the Finance and Audit Committee; perform the duties and exercise the powers of the Chairperson during the absence or disability of the Chairperson and the Vice-Chairperson; perform all duties and have all powers incident to the Office of the Treasurer as are determined by the Board.

ARTICLE VI
COMMITTEES

The Board shall have the power to appoint and regulate the duties, functions, powers and procedures of committees, standing or special, from among the Members and such advisory committees or bodies, as it may deem necessary or conducive to the efficient management and operation of the GMHA, consistent with applicable laws.

a. The Chair of all standing and special committees shall be appointed by the Chairperson of the Board at the first meeting following reappointment of Board Officers.

b. The Chairperson of the Board may attend, as an ex-officio member with voting privileges, all standing and special committees.

c. Committee assignments may be revised by the Chairperson of the Board, in his/her discretion, as necessary.

d. Members of the GMHA Medical Staff shall be named as consultant members to a standing or special committee, as appropriate, by the Chairperson of the Board.

e. The Special Ad-hoc Committee Chair will report the findings and recommendations of his/her committee to the Board within the timeframe required by the Chairperson of the Board.

f. Standing committees shall inquire and report on matters within their jurisdiction, either at the request of the Board, the Chairperson, or on their own initiative except for those matters which are referred to another committee by the Chairperson of the Board or pursuant to the Bylaws.

1. FINANCE AND AUDIT COMMITTEE

a. Composition - The Finance and Audit (F&A) Committee shall consist of at least one (1) member of the Board, who will be appointed by and serve at the discretion of the Board. The Treasurer of the Board shall be one of the appointed members.

Management shall be represented by the following persons: Hospital Administrator/CEO, Associate Administrator of Operations, Associate Administrator of Medical Services, Associate Administrator of Professional Support Services, Assistant Administrator of Nursing Services, Chief Financial Officer, Assistant Chief Financial Officer, Chief Planner, and Internal Auditor in an Ex-Officio capacity.

Voting members shall be the designated Board member(s), management representatives, and others as designated by the F&A Committee Chair. The F&A Committee Chair is authorized to invite individuals from the community to be Ex-Officio members of the F&A Committee.

b. Meetings - The F&A Committee shall be chaired by the Treasurer of the Board, and meet monthly or as often as designated by the Chair. A quorum is established when a majority of the voting members are present. An affirmative vote of the majority of those present shall be taken to establish action. Votes may be taken orally or by a show of hands.

c. Responsibilities - Subject to such policies and guidelines as established by the Board, the F&A Committee shall:

i. Review and address the financials of the Hospital, the financing for capital improvements, and audit issues.

ii. Provide recommendations to the Board on the direction and prioritization for the allocation of resources required for the general operations, capital improvements and special projects that may arise.

iii. Monitor the implementation of the financial and capital improvements plans and recommend policies and/or changes that will result in process efficiency.

iv. Formulate the short and long-range financial plans for capital improvement projects.

v. Review all 3rd party financial and management audits and ensure implementation of corrective actions on findings.

vi. Develop and implement initiatives to strengthen internal controls for the prevention of fraud, waste, abuse, and mismanagement of government resources.

vii. Review the adequacy of the hospital's policies and procedures as they relate to financial processes and capital improvements and recommend changes to the Board to effectuate improvement and full compliance with governing laws, executive orders, and other regulations.

viii. Explore the availability and enhance the hospital's capacity for federal, private, public and non-profit grant funding.

2. HUMAN RESOURCES COMMITTEE

a. Composition - The Human Resources (HR) Committee shall consist of at least one (1) member of the Board, who will be appointed by and serve at the discretion of the Board.

Management shall be represented by the following persons: Hospital Administrator/CEO, Chief Financial Officer, Assistant Chief Financial Officer, Associate Administrator of Operations, Associate Administrator of Medical Services, Associate Administrator of Professional Support Services, Assistant Administrator of Nursing Services, and the Personnel Services Administrator.

Voting members shall be the designated Board member(s), management representatives, and others as designated by the HR Committee Chair. The HR Committee Chair is authorized to invite individuals from the community to be Ex-Officio members of the HR Committee.

b. Meetings - The HR Committee Chair shall meet monthly or as often as designated by the Chair. A quorum is established when a majority of the voting members are present. An affirmative vote of the majority of those present shall be taken to establish action. Votes may be taken orally or by a show of hands.

c. Responsibilities - Subject to such policies and guidelines as established by the Board, the HR Committee shall:

i. Periodically review the compensation, benefits, and other terms and conditions of all classified employees.

ii. Annually review with recommendations to the Board the job description, compensation, benefits and other terms and conditions of the positions of the Hospital Administrator, the Associate Administrator of Operations, the Chief Financial Officer and Legal Counsel.

iii. Review and recommend for approval to the Board the job descriptions of newly established positions.

iv. Periodically review hiring and employee promotion practices to assure non-discrimination and compliance with all federal and local employment and labor laws.

v. Review and recommend to the Board labor relations and negotiation policies and procedures.

3. JOINT CONFERENCE AND PROFESSIONAL AFFAIRS COMMITTEE

a. Composition - The Joint Conference and Professional Affairs (JCPAC) Committee shall consist of at least one (1) member of the Board, who will be appointed by and serve at the discretion of the Board. At least one of the appointed members of the JCPAC Committee will be a clinician member or representative of the medical community from the Board.

Management and additional representation shall be comprised of the following persons: President of the Medical Staff and two (2) additional members of the Medical Executive Committee, Hospital Administrator/CEO, Associate Administrator of Medical Services, Associate Administrator of Professional Support Services, Chairperson of the Credentials Committee, Assistant Administrator of Nursing Services, Associate Administrator of Clinical Services, Administrator of Quality, Patient Safety, and Regulatory Compliance, Hospital Risk Management Program Officer, Hospital Medical Health Records Administrator, and the Hospital Medical Staff Office Supervisor.

Voting members shall be the designated Board member(s), management representatives, and others as designated by the JCPAC Committee Chair. The JCPAC Committee Chair is authorized to invite individuals from the community to be Ex-Officio members of the JCPAC Committee.

b. Meetings - The JCPAC Committee shall meet monthly or as often as designated by the Chair. A quorum is established when a majority of the voting members are present. An affirmative vote of the majority of those present shall be taken to establish action. Votes may be taken orally or by a show of hands.

c. Responsibilities - Subject to such policies and guidelines as established by the Board, the JCPAC Committee shall:

i. Serve as a forum for education and discussion of issues of mutual concern related to patient care, medical policies, staffing and resources, and the relationship between the hospital and members of the medical staff.

ii Review and monitor compliance to the Medical Staff standards of Joint Commission.

iii. Provide Medico-administrative liaison between the Medical Staff, the Hospital Administration, and the Board of Trustees.

iv. Receive, review, and make recommendations to the Board regarding Medical Staff/Medical Executive recommendations for appointment and reappointment of members to the Medical Staff and for granting, restricting or revoking of clinical privileges of such members. The Committee may, in accordance with bylaws, return a recommendation to the medical staff for further documentation or reconsideration.

v. Receive, review and make recommendations to the Board regarding revisions and amendments to the Medical Staff Bylaws and Rules and Regulations.

vi. Receive and make recommendations to the Board regarding any communications, requests, or suggestions presented by the Medical staff through its duly authorized representatives.

vii. Oversee the effectiveness of the medical staff credentialing process and makes recommendations for changes in policies and procedures for Board approval.

viii. Review medical staff recommendations of disciplinary or corrective actions involving medical staff members as provided in the bylaws and submitting these recommendations to the Board for action.

ix. Oversee the education and development of physician leaders.

x. Monitor physician perception and satisfaction, and oversee physician relations activities.

4. QUALITY AND SAFETY COMMITTEE

a. Composition - The Quality and Safety (Q&S) Committee shall consist of at least one (1) member of the Board, who will be appointed by and serve at the discretion of the Board.

Management and additional representation shall be comprised of the following persons: Hospital Administrator/CEO, Chief Financial Officer, Assistant Chief Financial Officer, Associate Administrator of Medical Services, Associate Administrator of Professional Support Services, Assistant Administrator of Nursing Services, President of the Medical Staff, Administrator of Quality, Patient Safety, and Regulatory Compliance, Hospital Risk Management Program Officer.

Voting members shall be the designated Board member(s), management representatives, and others as designated by the Q&S Committee Chair. The Q&S Committee Chair is authorized to invite individuals from the community to be Ex-Officio members of the Q&S Committee.

b. **Meetings** - The Q&S Committee shall meet monthly or as often as designated by the Chair. A quorum is established when a majority of the voting members are present. An affirmative vote of the majority of those present shall be taken to establish action. Votes may be taken orally or by a show of hands.

c. **Responsibilities** - Subject to such policies and guidelines as established by the Board, the Q&S Committee shall:

i. Develop and recommend broad policies to promote the quality and safety of patient care and the quality of professional medical, dental and nursing practices.

ii. Evaluate the professional practice of medical, dental, nursing and other health care providers within GMHA according to the standards of their respective practices that promote safe patient care.

iii. Assure compliance with the standards of the Joint Commission, other accrediting bodies and licensing agencies concerned with the quality and safety of patient care

iv. Develop policies that safeguard the confidentiality of patient information.

v. Evaluate, improve, and recommend the continuing education systems and programs for medical, dental, nursing, other healthcare providers and non-clinical staff.

vi. Regularly provide the full Board with an assessment of the quality health care services, the initiatives for improvement, the impact of new methodologies, and the compliance to Joint Commission standards.

vii. Encourage the development of multidisciplinary teams to evaluate the process and outcomes that provide the environment by which optimal quality of care can fulfill the mission of GMHA.

viii. On a monthly basis provide to the full Board a summary report on Risk Management issues

5. FACILITIES, CAPITAL IMPROVEMENT & INFORMATION TECHNOLOGY COMMITTEE

a. **Composition** - The Facilities, Capital Improvement (CIP), and Information Technology (IT) Committee shall consist of at least one (1) member of the Board, who will be appointed by and serve at the discretion of the Board.

Management representation shall include the following persons: Hospital Administrator/CEO, Chief Financial Officer, Assistant Chief Financial, Associate Administrator of Operations, Chief Planner, Hospital Information Technology Administrator, Hospital Materials Management Administrator, and Facilities Maintenance Manager.

Voting members shall be the designated Board member(s), management representatives, and others as designated by the Committee Chair. The Committee Chair is authorized to invite individuals from the community to be Ex-Officio members of the Committee.

b. **Meetings** - The Facilities, CIP and IT Committee shall meet monthly or as often as designated by the Chair. A quorum is established when a majority of the voting members are present. An affirmative vote of the majority of those present shall be taken to establish action. Votes may be taken orally or by a show of hands.

c. **Responsibilities** - Subject to such policies and guidelines as established by the Board, the Facilities, CIP & IT Committee shall:

i. Establish and recommend to the Board an annual Capital Improvement plan consistent with the financial plan.

ii. Monitor monthly the progress of ongoing Capital Improvement projects.

iii. Monthly provide an assessment of facility maintenance needs and prioritize the resolution of those needs.

iv. Coordinate with appropriate departments and individuals the implementation of CIP projects.

v. Establish and recommend to the Board an annual IT improvement and training plan.

vi. Provide to the Board an assessment of technology needs of the GMHA.

vii. Provide a report to the Board of the progress made in CIP, IT and Facilities maintenance.

viii. Create and update as necessary a master plan for development, expansion, modernization, and maintenance of the Hospital's primary facilities and report its status to the Board.

ix. Provide mid-term (1-5 years) and long-term (5-10 years) capital and IT plans to the Board.

6. GOVERNANCE, BYLAWS & STRATEGIC PLANNING COMMITTEE

a. Composition - The Governance, Bylaws, and Strategic Planning (GBSP) Committee shall consist of at least one (1) member of the Board, who will be appointed by and serve at the discretion of the Board.

Management representation shall include the following persons: Hospital Administrator/CEO, Associate Administrator of Operations, Associate Administrator of Medical Services, Assistant Administrator of Nursing Services, Chief Financial Officer, Assistant Chief Financial Officer, and Chief Planner.

Voting members shall be the designated Board member(s), management representatives, and others as designated by the Committee Chair. The Committee Chair is authorized to invite individuals from the community to be Ex-Officio members of the Committee.

b. Meetings - The GBSP Committee shall meet quarterly or as often as designated by the Chair. A quorum is established when a majority of the voting members are present. An affirmative vote of the majority of those present shall be taken to establish action. Votes may be taken orally or by a show of hands.

c. Responsibilities - Subject to such policies and guidelines as established by the Board, the GBSP Committee shall:

i. Establish the Hospital Strategic Plan and recommend to the Board for review, approval, and implementation.

ii. Review the progress of the implementation of the Strategic Plan and present to the Board the status on a quarterly basis.

iii. Receive reports from management regarding the accomplishments of the strategic goals and objectives.

iv. Present to the Board the status of the achievement of the strategic goals and objectives.

v. Annually review the Hospital By-Laws and make recommendations for amendments to the Board.

vi. Review local and national laws for appropriateness to the established governance and authority of the Hospital and make recommendations for changes in policies, structure, and by-laws accordingly.

vii. Develop and establish the orientation program for new Board members. The program should be reviewed annually for updates and submitted to the Board for approval.

ARTICLE VII
AMENDMENTS

1. PROPOSAL

a. Any member of the Board may propose the amendment of these Bylaws at any regular meeting of the Board or at any special meeting of the Board called for that purpose.
b. Any member of the Board, or the Administrator, or his/her designee, may suggest an amendment of these bylaws to the Chairperson of the Governance, Bylaws, and Strategic Planning Committee.
c. All proposed and suggested amendments to these bylaws shall be referred to the Governance, Bylaws, and Strategic Planning Committee for review and appropriate action.
d. At the next regular meeting of the Board after the Bylaws Committee has completed its study and consideration, the Chairperson of the Bylaws Committee shall report its findings and recommendations to the Board.

2. ADOPTION

a. The Board may vote upon the adoption of amendments to these bylaws at a regular meeting at which time the Chairperson of the Governance, Bylaws and Strategic Planning Committee makes his/her report, or may postpone voting upon adoption until a time no later than the next regular Board meeting.
b. The Board may vote upon the adoption of amendments at a special meeting called for that purpose.
c. Adoption of amendments to these bylaws shall be accomplished by a majority of the total membership of the Board and as required by law.

ARTICLE VIII
INDEMNIFICATION

The Guam Memorial Hospital Authority will indemnify and hold harmless the members of the Board of Trustees for all actions taken by him or her on behalf of the Guam Memorial Hospital Authority.

These Bylaws were adopted at a duly held meeting of the Guam Memorial Hospital Authority Board of Trustees Meeting on December 13, 2017, and as required by law.

Name	Title	Signature
Eloy S. Lizama	Chairman	
Lillian Perez-Posadas	Vice-chairperson	
Melissa Waibel	Secretary	
	Treasurer	
Ricardo M. Terlaje, MD	Trustee	
Sharon Davis	Trustee	
	Ex-officio Member	

GMHA Board of Trustees
REGULAR MEETING ATTENDANCE SHEET
Wednesday, December 13, 2017 | 6:00 p.m. | Daniel L. Webb Conference Room

	NAME	TITLE	SIGNATURE
	Board Members:		
✓	Eloy S. Lizama	Chairperson	
✓	Lillian Perez-Posadas	Vice-chairperson	
✓	Melissa Waibel	Secretary	
		Treasurer	
✓	Sharon Davis	Trustee	
✓	Ricardo M. Terlaje	Trustee	
	Jeanine "Jenny" Cruz	Ex-officio Member	
	Hospital Management:		
✓	PeterJohn D. Camacho	Hospital Administrator/CEO	
	Benita A. Manglona	Chief Financial Officer	
	Edward Birn	Assistant Chief Financial Officer	
	Zennia C. Pecina	Assistant Administrator of Nursing Services	
	Vincent A. Duenas, MD	Associate Hospital Administrator of Medical Services	Excused
✓	Kozue Shimabukuro, MD	Assistant Associate Hospital Administrator of Medical Services	
	James Last, MD	Medical Staff President	
	Guests:		

GMHA Board of Trustees

Wednesday, December 13, 2017 | 6:00 p.m. | Daniel L. Webb Conference Room

AGENDA

I. CALL MEETING TO ORDER AND DETERMINATION OF QUORUM

Note: Five (5) members establish a quorum.

II. ACCEPTANCE OF REGULAR SESSION MINUTES

A. June 1, 2017
B. July 10, 2017

III. OLD BUSINESS

IV. NEW BUSINESS

V. BOARD SUBCOMMITTEE REPORTS

A. Joint Conference and Professional Affairs
   1. Resolution Nos. 2018-03 thru 2018-05 Relative to Appointments/Reappointments to the Medical Staff

B. Quality and Safety
C. Human Resources
D. Facilities, Capital Improvement, and Information Technology

E. Governance, Bylaws, and Strategic Planning
   1. Board of Trustees Bylaws
   2. Policy A-100, Mission Statement
   3. Policy A-110, Vision Statement
   4. Policy A-120, Statement of Values
   5. Policy A-200, Scope of Services

F. Finance and Audit
   1. Resolution 2018-06, Relative to Approving Seventy-three (73) New Fees
   2. Resolution 2018-07, Relative to Approving Twenty-six (26) New Fees

VI. ADMINISTRATORS REPORTS

A. Hospital Administrator/CEO
B. Associate Administrator of Medical Services
C. Acting Associate Administrator of Professional Support Services
D. Assistant Administrator of Nursing Services
E. Chief Financial Officer
F. Medical Staff President

VII. PUBLIC COMMENT

VIII. ADJOURN MEETING

CURRENCY EXCHANGE RATES Keep posted and get more data and details online. Log on to see real time market data with our stock market tool at postguam.com/stock_market.

On Dec. 5, $1 was worth: 50.590 PHP₱ | 112.63 JPY¥ | 1,085.80 KRW₩ | 30.005 TWD NT$ | 6.6123 CNY¥ | 1.3078 AUD A$ | 0.8423 EUR €

Upscale travelers choose United for best frequent-flyer program

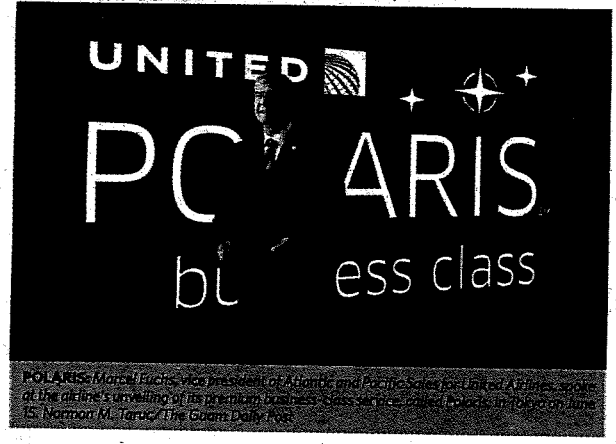
For the 14th consecutive year, readers of Global Traveler, a monthly publication written for frequent business and luxury travelers, voted United Airlines' MileagePlus loyalty program the Best Overall Frequent-Flyer Program in the world, the airline announced yesterday. United has been recognized with this distinction every year since the inception of the survey in 2004.

In the survey completed by frequent business and luxury travelers, United's MileagePlus program was also named the Best Frequent-Flyer Bonus Program for the fifth consecutive year.

The United MileagePlus Club Card from Chase was named Best Credit Card and Best Credit Card Rewards Program, both for the sixth consecutive year, The United MileagePlus Explorer Card from Chase won for Best Frequent-Flyer Affinity Credit Card Redemption for the fifth consecutive year.

'Testament to our commitment'

"What is especially exciting about these honors is that they are awarded by travelers, and therefore a testament to our commitment to providing MileagePlus members and credit card holders with the industry-leading experience," said Luc Bondar, United's vice president for loyalty. "It is our goal to provide a loyalty program that recognizes and rewards all of our members while offering a breadth of valuable earning and redemption opportunities."



POLARIS: Marcel Fuchs, vice president of Atlantic and Pacific Sales for United Airlines, spoke at the airline's unveiling of its premium business class service called Polaris in Tokyo on June 15. Norman M. Tanedo/The Guam Daily Post

> "What is especially exciting about these honors is that they are awarded by travelers."
>
> – Luc Bondar, vice president for loyalty, United Airlines

MileagePlus members earn award miles by flying United, United Express, Star Alliance airlines or other airline partners, and by purchasing products or services from partners around the globe. Members enjoy a variety of options for using those award miles, including to pay for travel, hotel stays, car rentals and merchandise.

Through MileagePlus Exclusives, members are able to use their miles on unique and memorable experiences with a VIP touch across the widest range of mileage levels. Recent examples of MileagePlus Exclusives include: an auction for parts of the airline's now-retired iconic 747 fleet, dinner at world-renowned restaurants, and club level and luxury suites packages for a variety of sporting events.

(Daily Post Staff)

ExpressCare to end ties with TakeCare

ExpressCare, known for its easily accessible clinics at shopping centers, announced it plans to discontinue accepting customers covered by TakeCare.

The clinic will no longer accept TakeCare health insurance beginning Jan. 1, 2018, ExpressCare announced recently.

ExpressCare will continue to accept StayWell, NetCare and SelectCare, as well as TriCare, but may require a referral for TriCare.

TakeCare yesterday stated it is aware of ExpressCare's announcement and will be addressing the matter with ExpressCare directly.

(Daily Post Staff)

UOG MPA class to host tax forum today

The University of Guam Masters of Public Administration Public Budgeting class will host a forum today, "The Tax Link: Guam and the U.S. Tax Code."

The public is invited to attend and to join the discussion. The forum will be held at 5 p.m. today, at the UOG School of Business and Public Administration in the IT&E Lecture Hall, Room 131.

This forum will address the history of Guam's tax system, our current tax system and the possibility of changing our system in the future, the class stated.

'Inform the public and increase awareness'

"As a class initiative, our main objective is to inform the public and increase awareness on the issue of GovGuam's remaining linked or choosing to delink from the federal tax system so everyone can understand the issue from both perspectives," said forum coordinator Leonel Llegado.

Professor Doreen Crisostomo added: "We hope that by bringing together public and private sector representatives who worked on the development of Guam's tax system, we can give the people a clear picture of how our tax system was established, how it has evolved, and what the advantages and disadvantages are of maintaining the status quo or changing our system in the future."

(Daily Post Staff)

DEPARTMENT OF EDUCATION
DIVISION OF SPECIAL EDUCATION
www.gdoe.net
500 Mariner Avenue
Barrigada, Guam 96913-1608
Telephone: (671)300-1323 or 2296
Email: sped@gdoe.net

JON J.P. FERNANDEZ
Superintendent of Education

YOLANDA S. GABRIEL
Assistant Superintendent, Sped

DOE-Division of Special Education
Guam Advisory Panel for Students with Disabilities (GAPSD)
Annual Meeting

December 12, 2017 Tuesday, at 11:30 am to 1:00 pm
Location: SPED Training Room 2
Chief Brodie Elementary School, Tamuning

For more information and special accommodations please call Special Education Parent Services at 300-2292/1521.

This advertisement was paid for with 100% Federal Funds Part B Grant of Individuals with Disabilities Education Act CFDA #84.027A

Guam Memorial Hospital Authority
Aturidåt Espetåt Mimuriåt Guåhan
850 Governor Carlos G. Camacho Road
Tamuning, Guam 96913

PUBLIC NOTICE

BOARD OF TRUSTEES MEETING

The Board of Trustees meeting originally scheduled for Thursday, November 30, 2017 was postponed and rescheduled to **Wednesday, December 13, 2017 at 6:00 p.m. in the Daniel L. Webb Conference Room.**

You may contact Toni Tenorio at 647-2218, Monday through Friday from 8:00 a.m. to 5:00 p.m. for special accommodations, auxiliary aids, or other services.

/s/ PeterJohn D. Camacho, M.P.H.
Hospital Administrator/CEO

This advertisement was paid for with government funds.





ABOVE: *Guam Symphony, led by musical director and conductor Stephen C. Bednarzyk, performed at Guam Symphony Society's Seaside Holiday Concert Sunday at the Gov. Joseph Flores Memorial Park Amphitheater.*

RIGHT: *Even Santa came out for the Guam Symphony Society's Seaside Holiday Concert Sunday at the Gov. Joseph Flores Memorial Park Amphitheater. Santa rode in on his carabao sleigh and passed out candy.*

Photos by David Castro/The Guam Daily Post

Seaside concert draws hundreds to Ypao

With the island sun blazing down, the Guam Symphony Society's Seaside Holiday Concert yesterday drew several hundred people eager to kick off the holiday season to the Gov. Joseph Flores Beach Park Amphitheater in Tumon. An afternoon of music and mayhem was on tap for the families who enjoyed arts and crafts, food, photo booths, contests, Santa stations and face painting. A visit from Santa on his carabao sleigh capped off the afternoon of fun. The St. John's School String Group and Mangilao Hot Jazz group opened the afternoon of musical performances before the Guam Symphony Orchestra and Chorale took the stage, led by musical director and conductor Stephen Bednarzyk.

(Daily Post Staff)

For more

For more photos, go online at www.postguam.com.



MUSICIANS PRIDE: *Guam Symphony performed at Guam Symphony Society's Seaside Holiday Concert Sunday at the Gov. Joseph Flores Memorial Park Amphitheater.*

PUBLICATION NOTICE

In accordance with the provisions of Guam Code Annotated, Title XI, Chapter III, Section 3315, notice is hereby given that:

JOUNG OK CHOI

dba: NEW CHOI'S RESTAURANT

has applied for a Class: **4 General On Sale Alcoholic Beverage License** said premises being marked as Lot: **5096-1-3-R3 Unit 117 Star Bldg., Upper Tumon.**

Guam Memorial Hospital Authority
Aturidåt Espetåt Mimuriåt Guåhan
850 Governor Carlos G. Camacho Road
Tamuning, Guam 96913

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/s/ PeterJohn D. Camacho, M.P.H.
Hospital Administrator/CEO

This advertisement was paid for with government funds.

GUAM MEMORIAL HOSPITAL AUTHORITY
ATURIDÅT ESPETÅT MIMURIÅT GUÅHAN
850 GOV. CARLOS CAMACHO ROAD
OKA, TAMUNING, GUAM 96913
TEL.: (671) 647-2544 or (671) 647-2330; FAX: (671) 649-0145

This Public Notice is paid for by government funds, and is paid for by Guam Memorial Hospital Authority.

NOTICE OF PUBLIC HEARING

NOTICE IS HEREBY GIVEN that the Guam Memorial Hospital Authority (GMHA) will be conducting a Public Hearing on hospital new rates, fees and charges. Documents relating to this proceeding are available on our website at www.gmha.org under Public Information - GMHA Press Release – GMHA Public Hearing. Should you have any questions, please feel free to contact *Mr. Frumen Patacsil*, Hospital Quality Improvement Specialist at 648-7945 or *Ms. Benita Mangiona*, Chief Financial Officer at 647-2367.

Date: Wednesday, December 13, 2017
Time: 9:30 a.m.
Place: GMHA Daniel L. Webb Conference Room, Administration Wing, 850 Gov Carlos Camacho Road, Oka Tamuning, Guam.

Individuals requiring special accommodations should contact Toni Tenorio, ADA Coordinator, at 647-2218/2367 to make appropriate arrangements.

GUAM MEMORIAL HOSPITAL AUTHORITY
REVIEW AND ENDORSEMENT CERTIFICATION

The signatories on this document acknowledge that they have reviewed and approved the following:

□ Bylaws Submitted by Department/Committee: Administration

□ Rules & Regulations Policy No.: A-200

■ Policies & Procedures Title: Scope of Services

	Date	Signature
Reviewed/Endorsed	09/20/17	
Title		PeterJohn D. Camacho, MPH Chairperson, Executive Management Council
Reviewed/Endorsed	11/29/17	
Title		Friedrich Chris Bieling, MD, FACOG Chairperson, Medical Executive Committee
Reviewed/Endorsed	11/29/17	
Title		~~Ricardo Terlajc, MD~~ Melissa Waibel Chairperson, BOT-Governance, Bylaws, & Strategic Planning
Reviewed/Endorsed	12/13/17	
Title		Eloy Lizama Chairperson, Board of Trustees

***Use more forms if necessary. All participating departments/committees in developing the policy should provide signature for certification prior to submitting to the Compliance Officer.**

GUAM MEMORIAL HOSPITAL AUTHORITY
ADMINISTRATIVE MANUAL

APPROVED:	RESPONSIBILITY:	EFFECTIVE DATE:	POLICY NO.	PAGE
PeterJohn D. Camacho, MPH Hospital Administrator/CEO	Executive Management Council, Medical Executive Committee, Board of Trustees		A-200	1 of 1
TITLE: SCOPE OF SERVICES				
REVIEWED/REVISED: 08/2017				
ENDORSED: EMC__/2017, MEC __/2017, BOT-GBSP __/2017, BOT __/2017				

PURPOSE:

To define the scope of services provided by the Guam Memorial Hospital Authority (GMHA).

POLICY:

In support of its mission and in striving to achieve its vision, GMHA offers a wide range of services. These services include acute and non-acute care, skilled nursing, emergency care, surgical services, diagnostic, therapeutic, and a host of professional support services.

- The **acute care units** provide all customary acute care services such as pediatric and adult medical services; pediatric and adult intensive care services; adult progressive care and telemetry; ob ward services; and **non-acute units** provide obstetrics services to include labor & delivery, nursery, postpartum, and birthing.
- The Skilled Nursing Unit (SNU) provides **skilled nursing and intermediate care** at an off-site facility.
- **Emergency care** is a 24-hour service for trauma cases, full spectrum of medical and surgical emergencies, and extended emergency services such as short stay observation.
- **Urgent care** is a service that is set up to assist patients with a nonlife-threatening illness or injury by providing easy access quality healthcare when most primary care clinics are closed.**Comprehensive inpatient and outpatient surgical services** are available in the operating room with four surgical suites, one cystoscopy room, one endoscopy unit, a post anesthesia recovery area, and one room in Labor & Delivery for C-Sections.
- **Inpatient and outpatient diagnostic and therapeutic services** include laboratory and comprehensive blood bank services, that are College of American Pathologists (CAP) accredited and US Food and Drug Administration (FDA) registered, radiology, nuclear medicine, nuclear cardiology, thallium stress tests, CT scan, ultrasonagraphy, and angiography imaging services; inpatient pharmacy, respiratory and cardiopulmonary services; physical, speech, occupational, cardiac, and recreational therapies; and inpatient hemodialysis.
- **Other professional support services** include dietary/nutritional counseling; spiritual care; medical social services; patient/family education; staff education, guest relations and special services which includes echocardiogram, stress test, electrocardiogram (EKG), electroencephalogram (EEG), myocardial perfusion (MIBI) scan, interventional radiology and cardiology*, and neurology, cardiology and orthopedic consultations.
  *Available when resources permit

Note: GMHA does not have an Organ Transplant or Harvesting program at the present time. Due to its remote location within the outer Pacific, GMHA is neither covered by any organ procurement organization, nor served by a tissue and/or eye bank.

RECISSION:

Policy No. A-200, *Scope of Services* of the GMHA Administrative Manual made effective May 12, 2012.

GUAM MEMORIAL HOSPITAL AUTHORITY
REVIEW AND ENDORSEMENT CERTIFICATION

The signatories on this document acknowledge that they have reviewed and approved the following:

☐ Bylaws Submitted by Department/Committee: Administration

☐ Rules & Regulations Policy No.: A-120

☒ Policies & Procedures Title: Statement of Values

	Date	Signature
Reviewed/Endorsed	09/20/17	
Title		PeterJohn D. Camacho, MPH Chairperson, Executive Management Council
Reviewed/Endorsed	11/29/17	
Title		Friedrich Chris Bieling, MD Chairperson, Medical Executive Committee
Reviewed/Endorsed	11/29/17	
Title		~~Ricardo Terlaje, MD~~ Melissa Waibel Chairperson, BOT-Governance, Bylaws, & Strategic Planning
Reviewed/Endorsed	12/13/17	
Title		Eloy Lizama Chairperson, Board of Trustees

***Use more forms if necessary. All participating departments/committees in developing the policy should provide signature for certification prior to submitting to the Compliance Officer.**

GUAM MEMORIAL HOSPITAL AUTHORITY
ADMINISTRATIVE MANUAL

APPROVED BY:	RESPONSIBILITY:	EFFECTIVE DATE:	POLICY NO.	PAGE
PeterJohn D. Camacho, MPH Hospital Administrator/CEO	Administration		A-120	1 of 1
TITLE: STATEMENT OF VALUES				
LAST REVIEWED/REVISED: 08/2017				
ENDORSED: EMC __/2017, MEC __/2017, BOT-GBSP __/2017, BOT __/2017				

PURPOSE:

To define the Statement of Values for the Guam Memorial Hospital Authority.

POLICY:

The Guam Memorial Hospital Authority will use the Statement of Values as the guiding principles for the organization's operations and delivery of care.

- **Accountability;**
- **Cost Efficiency;**
- **Excellence in Service;**
- **Safety; plus**
- **Quality**

PROCEDURE:

1. The GMHA Board of Trustees Governance, Bylaws, and Strategic Planning Subcommittee shall be responsible for developing the hospital's Statement of Values.

2. The Statement of Values must be reviewed annually by the Executive Management Council, Medical Executive Committee, and the Board of Trustees as part of the strategic planning process.

3. Any and all changes to the Statement of Values must be approved by the GMHA Board of Trustees.

4. Upon the approval, the Hospital Administrator/CEO shall distribute the Statement of Values throughout the organization, in accordance with GMHA Administrative Manual policy no. A-IM500, *Policy Development: Format, Approval, and Distribution.*

RESCISSION:

Policy No. A-120, *Statement of Values* of the GMHA Administrative Manual made effective May 17, 2012.

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GUAM MEMORIAL HOSPITAL AUTHORITY
REVIEW AND ENDORSEMENT CERTIFICATION

The signatories on this document acknowledge that they have reviewed and approved the following:

□ Bylaws Submitted by Department/Committee: Administration

□ Rules & Regulations Policy No.: A-110

■ Policies & Procedures Title: Vision Statement

	Date	Signature
Reviewed/Endorsed	09/20/17	
Title	PeterJohn D. Camacho, MPH Chairperson, Executive Management Council	
Reviewed/Endorsed	11/29/17	
Title	Friedrich Chris Bieling, MD, FACOG Chairperson, Medical Executive Committee	
Reviewed/Endorsed	11/29/17	
Title	~~Ricardo Terlaje, MD~~ Melissa Waibel Chairperson, BOT-Governance, Bylaws, & Strategic Planning	
Reviewed/Endorsed	12/13/17	
Title	Eloy Lizama Chairperson, Board of Trustees	

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GUAM MEMORIAL HOSPITAL AUTHORITY
ADMINISTRATIVE MANUAL

APPROVED BY:	RESPONSIBILITY:	EFFECTIVE DATE:	POLICY NO.	PAGE
PeterJohn D. Camacho, MPH Hospital Administrator/CEO	Administration		A-110	1 of 1
TITLE: VISION STATEMENT				
LAST REVIEWED/REVISED: 08/2017				
ENDORSED: EMC __/2017, MEC __/2017, BOT-GBSP __/2017, BOT __/2017				

PURPOSE:

To define the vision for the Guam Memorial Hospital Authority (GMHA).

POLICY:

In accordance with GMHA Board of Trustees Resolution No. 0986, the Guam Memorial Hospital Authority has established the direction for the organization's future with the vision statement below.

"To achieve a culture and environment of safety and quality patient care meeting national standards and addressing the needs of the Community in a fiscally responsible, autonomous hospital."

PROCEDURE:

1. The GMHA Strategic Planning Committee shall be responsible for developing the hospital's vision statement.

2. The Vision Statement must be reviewed annually by the Executive Management Council, Medical Executive Committee, and the Board of Trustees as part of the strategic planning process.

3. Any and all changes to the Vision Statement must be approved by the GMHA Board of Trustees.

4. Upon the approval, the Hospital Administrator/CEO shall distribute the Vision Statement throughout the organization, in accordance with GMHA Administrative Manual policy no. A-IM500, *Policy Development: Format, Approval, and Distribution.*

RESCISSION:

Policy No A-110, Vision *Statement* of the GMHA Administrative Manual made effective May 17, 2012.

GUAM MEMORIAL HOSPITAL AUTHORITY
REVIEW AND ENDORSEMENT CERTIFICATION

The signatories on this document acknowledge that they have reviewed and approved the following:

□ Bylaws Submitted by Department/Committee: Administration

□ Rules & Regulations Policy No.: A-100

■ Policies & Procedures Title: Mission Statement

	Date	Signature
Reviewed/Endorsed	09/20/17	
Title		PeterJohn D. Camacho, MPH Chairperson, Executive Management Council
Reviewed/Endorsed	11/29/17	
Title		Friedrich Chris Bieling, MD, FACOG Chairperson, Medical Executive Committee
Reviewed/Endorsed	11/29/17	
Title		~~Ricardo Terlaje, MD~~ Melissa Waibel Chairperson, BOT-Governance, Bylaws, & Strategic Planning
Reviewed/Endorsed	12/13/17	
Title		Eloy Lizama Chairperson, Board of Trustees

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GUAM MEMORIAL HOSPITAL AUTHORITY
ADMINISTRATIVE MANUAL

APPROVED BY:	RESPONSIBILITY:	EFFECTIVE DATE:	POLICY NO.	PAGE
PeterJohn D. Camacho, MPH Hospital Administrator/CEO	Administration		A-100	1 of 1
TITLE: MISSION STATEMENT				
LAST REVIEWED/REVISED: 08/2017				
ENDORSED: EMC __/2017, MEC _ /2017, BOT-GBSP __/2017, BOT __/2017				

PURPOSE:

To define the mission for the Guam Memorial Hospital Authority (GMHA).

POLICY:

In accordance with GMHA Board of Trustees Resolution No. 0986, the Guam Memorial Hospital Authority has adopted the Mission Statement.

"To provide quality patient care in a safe environment."

PROCEDURE:

1. The Mission Statement must be reviewed annually by the Executive Management Council, Medical Executive Committee, and the Board of Trustees as part of the strategic planning process.

2. Any and all changes to the Mission Statement must be approved by the GMHA Board of Trustees.

3. Upon approval, the Hospital Administrator will distribute the Mission Statement throughout the organization, in accordance with GMHA Administrative Manual policy no. A-IM500, *Policy Development, Revision, Approval, and Distribution.*

RESCISSION:

Policy A-100 , *Mission Statement* of the GMHA Administrative Manual made effective May 17, 2012.