

March 24, 2025

### ***Lack of Funding Is Severely Compromising Patient Care at Juan F Luis Hospital***

We, the physicians at the Governor Juan F. Luis Hospital (JFLH), write to you with deep concern for the health and safety of our patients and your constituents. Over the past eighteen months, JFLH has faced severe financial distress due to declining USVI government funding, delayed and inadequate allotment payments, decreased Medicaid reimbursement, and the disenrollment of Medicaid patients - leading to increased uncompensated patient care. Combined, these have not only caused the hospital deep financial distress, but impaired its ability to function safely and properly.

JFLH's inability to pay vendors and staffing agencies who provide supplies and clinical staff has resulted in vendor credit holds, freezing essential accounts until past debts are settled. The result is a chronic physician and nursing shortage, an absence of critical supplies and deferred maintenance of vital equipment. Thus far in 2025, we lacked basic, essential tests, supplies and equipment **EVERY SINGLE DAY**. These shortages prevent us from providing the standard of safe care that our patients and this community rightfully require and deserve.

While we recognize that JFLH administration is working with the USVI Hospital and Health Facilities Corporation Board of Directors (Territorial Board) and the Legislative Body for medium and long-term solutions, **immediate relief is required to prevent further deterioration of patient care and ensure the safety of those we serve.**

Specific problems include (but are not limited to):

1. JFLH is suffering from an extreme shortage of physicians. We have 33 staff physicians, but we need 63, a shortage of 30 physicians in selected specialties. Until these physicians are on-board, we are dependent on traveling physicians (locum tenens) to provide continuous care. We have been unable to pay individual locum and staffing agencies, and many now refuse to staff JFLH. Lack of physician coverage increases the need to transfer patients off island, which is *fiscally unsound*. Specific examples of staff shortages impacting patient care include:

- Our **only** staff anesthesiologist recently covered all operating room cases day and night for eleven consecutive days. This is an *unsustainable and dangerous* burden for any person. Next week, he will be off island and JFLH will have **no anesthesia coverage**. Without anesthesia, no surgeries, routine or emergent, will be done. Every patient who needs a Cesarean section, appendectomy,

perforated bowel repair, orthopedic surgery due to trauma, or gunshot wound will have to be transferred by air ambulance to Puerto Rico or the mainland, leading to significant, life-threatening delays in treatment.

- In April, three 12-hour shifts in the Emergency Department have no physician scheduled and shortages continue into May. Two JFL staff ED physicians have **recently resigned** due to the lack of essential resources to provide emergency care. Once they leave, nearly half the JFL ED shifts will lack physician coverage.
- JFLH physicians provide patient care over prolonged periods to compensate for physician shortages. One staff internal medicine physician frequently works all day then takes call every other night for weeks at a time. OB/GYN physicians cover 24-hour call shifts for a week or more at a time with no days off.
- JFLH has only **ONE** staff gastroenterologist, urologist, and orthopedic surgeon and limited ability to hire locum results in coverage lapses, delaying patient care and increasing patient transfers off island.
- Continuous coverage by board certified Critical Care Physicians saves lives and JFLH has **ONE** on staff. We have no locum Critical Care coverage scheduled for after April 1, although there are several willing to come if we would pay them.
- These adverse conditions are **unsustainable and unsafe**, and ultimately lead to physician burnout and medical errors. Physician turnover is costly and physician retention is critical to improving the former. If more physicians resign because of adverse working conditions, the pool of physicians willing to live here and work in our hospital will evaporate.

The solution - hire 30 physicians to fully staff JFLH as soon as possible and immediately pay outstanding bills to physicians and staffing agencies so they can provide coverage while hiring permanent staff. Estimated cost to recruit and relocate permanent staff is **\$600,000** and we need **\$7,000,000/year to pay them**. We need to bring locum physicians in for the 9-12 months it will take to get permanent staff here. We are requesting \$7,000,000 to pay either locum or permanent physicians over the next year. A fully staffed hospital will result in decrease emergency department wait times, increase hospital revenues, improved hospital capabilities, improved patient care, and better physician retention. All these will result in a healthier community.

2. JFLH lacks medications, reagents, supplies and equipment because we are on credit hold for most of our vendors. These shortages adversely affect patient care and outcomes. For example:
- The JFLH laboratory frequently cannot to measure critical labs for **days at a time** including:
    - Potassium- high or low potassium causes deadly cardiac arrhythmias
    - Creatinine needed to identify kidney failure
    - Clotting studies to determine the cause of bleeding
    - Troponin to diagnose heart attacks
    - Pregnancy tests
    - Arterial blood gas to properly adjust ventilator settings in intubated patients
    - Blood cultures and bacterial sensitivities to ensure that the correct antibiotics are given and to prevent unnecessarily prolonged hospitalizations
  
  - The operating room has been on emergency surgery only status for days at a time for lack of supplies, most recently anesthesia circuits (connects a patient to the anesthesia machine) and Bovie pads (needed to control bleeding). We lack supplies for specific surgeries such as dialysis access, leading to harmful delays in care. Our elective operating room case schedule has been severely limited and is reflected in decreased revenue, worsening our financial crisis. Our OB/GYN physicians and surgeons have cancelled most elective operative cases in 2025 due to shortages in the operating room.
  
  - Our pharmacy also suffers from inability to pay our pharmaceutical vendors. For example, we have very limited supplies of:
    - tPA, the drug used in medical treatment of heart attacks and strokes, enough to treat one or two patients.
    - Many antibiotics to treat infections
    - Cardiac medications for patients with severely high or low blood pressure
    - The pharmacy just dispensed our last tetanus vaccine, standard of care for any significant open injury.
  
  - Critical equipment remains unrepaired due to outstanding vendor payments. Two Critical Care Unit rooms have non-functioning monitors, reducing the number of Critical Care beds available and increasing Emergency Department wait times. Additionally, the JFLH portable X-ray machine – essential for performing bedside

imaging on critically ill patients who can not be transported - has been out of service for months.

3. JFLH has a chronic lack of support staff, and our inability to pay traveling support staff adversely affects patient care.
  - We have a shortage of ultrasound technicians, leaving several shifts a week with no ultrasound coverage. It is impossible to diagnose life threatening conditions such as testicular torsion, blood clots and ectopic pregnancy without ultrasound.
  - JFLH Department of Surgery has a shortage of surgical technicians, resulting in cancelled elective cases and lost revenue.

The solution - pay off a significant proportion of outstanding account receivable including all past due physician and staff support bills. The hospital currently has **\$22,000,000 in outstanding debt, and we need to immediately pay \$10,000,000** of this to provide safe care. The USVI government allotment for uncompensated care is inadequate and should be increased by \$1.4 million per month. We cannot sustain fiscal solvency without this.

JFL Hospital fails to provide US standard-of-care medicine on a regular basis due to budget constraints. There is no doubt shortages have led to adverse patient outcomes. We, the undersigned physicians, are under legal obligation to report unsafe conditions to our government, our community, our patients, the Centers of Medicare and Medicaid Services and other payers. JFL hospital staff have repeatedly raised these concerns with the Territorial Board, yet have seen no improvements.

For the sake of our patients and the health of our community, we are urgently pleading with the Government of the Virgin Islands for emergency one-time funding to improve care **now**, while awaiting medium- and long-term solutions to be implemented.

<b>Need</b>	<b>Cost</b>
Recruit permanent physician staff	\$600,000
Annual pay new physician staff/locum	\$7,000,000
Current vender liability	\$10,000,000
<b>Total</b>	<b>\$17,600,000</b>

Respectfully,

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