

A new GMCB Public Comment has been received.

Submit Time: 11/7/2023

Name: Clay Westbrook

Affiliation: Volunteer Board member of Gifford Health Care

Town/City: Randolph VT

Topic: Health Care environment perspective from a Vermonter

Comment: I couldn't make the public session but wanted to express my opinion about how important Gifford is to our small rural community. Gifford is a small Critical Access Hospital that is really important to the lives of the people who live in central Vermont. Proximity of care is paramount for people who can't afford to, don't have transportation, or don't have the time to travel 30-40 minutes to larger hospitals (DHMC or UVM). My aging parents receive care at Gifford and we have confidence in the providers and team there. My three sons were born at Gifford and we had a phenomenal experience, even needing technical care for my wife. We didn't realize how lucky we were to work with Gifford birthing until hearing other couples remark about poor experiences at other large hospitals. There are many challenges in the healthcare environment and Gifford is working honestly and intently to provide great care at a fair price. I understand the need for regulation and attempts to keep hospitals on budget. I think Gifford has done a great job accomplishing that. I would encourage GMCB to have more representation from providers who are stuck in the system and see clearly the challenges in the environment, and who can best temper the need for regulation and patient care. Healthcare is in an environment that is ripe for a sea change - I am not sure regulation will wholly create that change. It might need to become so broken as a system that a large national scale shift takes place. I find it astounding that Healthcare is one of our largest industries, yet doesn't provide anything for our national GDP. It is also a much larger percent of my family budget of costs than it was for my father or grandfather's generations. Currently, the largest challenge faced by care organizations is turnover of providers and wage escalation. This was instigated by generational shift of retirement by baby boomer age providers. The cost to recruit providers that don't exist and fill open shifts with locum providers should be a major focus. It makes operating a hospital budget on target very challenging - even more challenging to be regulated on. I keep hearing the interest in switching to an "all payer" model with attributed lives for better outcomes. It sounds fantastic in theory. I don't understand how we can expect organizations to take on the risk and or run both models simultaneously. A provider in the "fee for service model" has 15 minutes to provide care, the organization and regulators are under metrics that are requiring them to hit that. How can we expect to switch to a different model, where the provider can have more time to help solve that patients problems when we are stuck in the old model? Can't be done simultaneously. In closing, I would just like to say, Vermont is lucky to have an organization like Gifford Health Care with people who care, who are professional and doing their best through challenging times. Gifford is uniquely positioned to serve the poor, underseverd and aging population of central Vermont through their unique FQHC model. Please regulate with care.

Post Comment: Yes