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Sent on: Wednesday, September 18, 2024 12:41:59 AM

To: GMCB - Health Systems Finances<GMCB.HealthSystemsFinances@vermont.gov>; Foster, Owen<Owen.Foster@vermont.gov>; Barrett, Susan<Susan.Barrett@vermont.gov>; Barber, Michael<Michael.Barber@vermont.gov>; Walsh, Thom<Thom.Walsh@vermont.gov>; Murman, David<David.Murman@vermont.gov>; Lunge, Robin<Robin.Lunge@vermont.gov>; Holmes, Jessica A.<Jessica.A.Holmes@vermont.gov>; Hengstler, Mark<Mark.Hengstler@vermont.gov>; LaJeunesse, Kristen<Kristen.Lajeunesse@vermont.gov>

Subject: Public Comment: Hospital Budget 2024-09-18T00:41:55Z

A new GMCB Public Comment has been received.

Submit Time: 9/18/2024 12:41:55 AM

Name: Luke Wohlford

Affiliation: Chief EM Resident Physician

Town/City: Burlington

Topic: Hospital Budget

Comment: To whom it may concern, I am an emergency medicine resident physician at UVMHC, and my comments reflect my own opinion and not those of my training program or other organizations I am associated with. Working in the Emergency Department, I have a unique viewpoint from working in the healthcare safety net for the majority of Vermonters and many New Yorkers. The strain on our regional healthcare resources is felt daily, with pitifully few patients able to access primary or specialty care as quickly as needed. Understandably, people now commonly present to the emergency department as a last resort for even non-emergent conditions, adding strain to the emergency department. Other departments are clearly at their limits, as patients wait in the emergency department for hours to be admitted to the hospital, a dangerous and morbid system for our most vulnerable and elderly populations (1). The "standard of care" even seems to shift as overloaded specialty and admitting teams propose discharging patients who would never be discharged in a system with better inpatient bed availability. While an emergency medicine shift can feel like a constant barrage of crises, both patients and emergency department staff have felt a conspicuous shift towards a more taxed emergency system in our hospital. It should also be acknowledged that as the only hospital in the state that houses resident physician programs, attracting trainees to our state is critical to the health of our care system in the future. It is well-documented that a majority of residents stay to practice in the state where they complete their residency, especially primary care physicians who we so desperately need (2). Beyond resident programs, UVMHC hosts countless training programs that educate LNAs, RNs, EMTs, paramedics, NPs, imaging technicians, and additional medical professionals required to run our system. Ensuring that patients can receive the care they need while securing the supply of future Vermont healthcare professionals is as important now as it has ever been. All of this is to say, it seems inconceivable that the UVMHC budget could be cut in Vermont's current healthcare climate. A facility that serves as the only hospital in Vermont's largest urban area and is the main hub of trauma and specialty care in our region should not be punished for failing to be profitable. In fact, the very nature of our area's high healthcare costs speaks to our region's struggles, which will only worsen unless we invest in the future and proactively improve the system. I may not be in the boardrooms and C-suite offices where decisions are made, but systemic failures are on full display during any emergency department shift. I sincerely hope that more severe underfunding will not be added to the list of issues affecting healthcare for our patients. Respectfully, Luke Wohlford, MD, MPH 1. Joseph JW, Elhadad N, Mattison MLP, et al. Boarding Duration in the Emergency Department and Inpatient Delirium and Severe Agitation. *JAMA Netw Open*. 2024;7(6):e2416343. Published 2024 Jun 3. doi:10.1001/jamanetworkopen.2024.16343 2. 2023 Report on Residents Executive Summary. AAMC. Published 2023. Accessed from <https://www.aamc.org/data-reports/students-residents/data/report->

residents/2023/executive-summary

Post Comment: Yes