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**Sent on:** Tuesday, October 29, 2024 2:13:39 PM

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**Subject:** Public Comment: Act 167 Community Engagement

A new GMCB Public Comment has been received.

**Submit Time:** 2024-10-29T14:13:36Z

**Name:** Ellen Schwartz

**Affiliation:**

**Town/City:** Brattleboro

**Topic:** Community Engagement: Hospital Sustainability and Act 167

**Comment:** I am glad to see that this report recognizes that our healthcare system needs systemic change, and would like to comment on some of the particular changes being proposed, as well as some important omissions from the report. Housing. The report correctly identifies housing as a critical component of solving the healthcare crisis. The consultant points out that we can't provide home-based care to people who don't have homes, or when we don't have affordable housing for the homeware providers. There are surely other reasons we need to solve the housing crisis, not all of them driven by the desire to move care out of hospitals. It is unconscionable that Vermont has so many unhoused or precariously housed people, and on the healthcare front, it is hard to impossible to be healthy if you are living on the streets, in a tent, or in an unhealthy or unsafe home. Expanding access to community-based primary care. This is an important recommendation that will not only keep people from unnecessary emergency room visits but also improve the overall health of people in Vermont. The imminent closure of the Rockingham Health Center moves in the opposite direction from this recommendation. Hospital "repurposing." Getting as much care out of hospitals as quickly as possible may (or may not) save money in the short term, but in the absence of universal access to care—including primary care—it is going to make it harder for people living in the remote areas of Vermont to access hospital care when they need it. We don't yet have the non-hospital specialty centers or birthing centers envisioned by the report. Nor do we have a transportation system that can get people to hospitals that in many cases will be farther from home. I would invite the consultant to drive the back roads of Vermont in winter or mud season, and then think again about the wisdom of moving hospital care farther from these communities. Glaring omissions. The report says nothing about the main reason why people don't get care, which is being uninsured or underinsured. Even if all of the consultant's recommendations were implemented, it won't make a whit of difference to the person who doesn't qualify for Medicaid and can't afford insurance, or the person who has a high-deductible plan and foregoes care because of the cost. Those folks will still end up in the ER if they don't die first. "Charity" care. How much money do hospitals end up spending to cover uninsured people who show up at the ER? If someone is on Medicaid, the hospital gets some money towards their care. If they are uninsured and can't self-pay, the hospital has to cover the cost. How much is this affecting the hospitals' bottom lines? What are we spending money on? Since the decision not to finance Green Mountain Care for all (not just Medicaid recipients), Vermont has spend hundreds of thousands of dollars on studies and plans that were supposed to bring down costs and improve quality, notably the ACO, and now this report. We continue to send public money to OneCare, including money that goes to administration, not actual healthcare. The state could spend more taxpayer dollars on closing hospital units and transferring that care to other hospitals, ultimately consolidating hospital care, and ten years

later wonder why it hasn't improved access or quality or reduced costs. Alternately, we could spend public money on three things that could actually address the reasons why people don't get care and that have the potential to avoid unnecessary hospitalizations, namely: 1. Universal healthcare—so no one avoids needed care due to cost 2. Solving the housing crisis as recommended by the consultant 3. Expanding access to community-based primary care as recommended by the consultant. I urge you to move in these three directions.

**Post Comment:** Yes