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Sent on: Thursday, August 1, 2024 12:52:27 PM

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Subject: Public Comment: Community Engagement: Hospital Sustainability and Act 167 2024-08-01T12:52:25Z

A new GMCB Public Comment has been received.

Submit Time: 8/1/2024 12:52:25 PM

Name: Richard Davis

Affiliation:

Town/City: Brattleboro

Topic: Community Engagement: Hospital Sustainability and Act 167

Comment: TINKERING AROUND THE EDGES By Richard Davis The alarm is being sounded. Vermont's health care system is in crisis and if we don't take serious measures to change things the non-system we have will become financially unsustainable by 2030. According to a recent article in The Commons, "Dr. Bruce Hamory and his team were hired by the Green Mountain Care Board (GMCB) in response to the Vermont Legislature passing Act 167 for health care reform. The legislation is intended to create a sustainable, affordable, and equitable future for Vermont's 14 hospitals and health care providers in general." Act 167 has a few good elements and I am sure that Hamory and his team have come up with some good ideas to make the delivery and accessibility of health care in Vermont better. At one of a number of state-wide meetings held in Brattleboro on July 17 Hamory said that we have to stop tinkering around the edges and make changes to help health care in Vermont financially viable. But everything I heard makes me believe that all of the ideas that have been presented recently continue to tinker around the edges, as have all of the efforts of health care reform since the failure to enact a single payer system in Vermont played out during the Shumlin administration. Hamory and his team point out many of the problems that need to be dealt with. Nothing new there. High costs of insurance, long wait times in emergency rooms and difficulty finding a primary care provider among many. It is easy to point out all of the shortcomings and I would like to know how much money we spent to have these consultants tell us what we already know. They do make recommendations for change, but they mostly are centered around hospitals and hospital care. Sure, hospitals take up the biggest chunk of health care dollars but we need to spread our efforts more in the direction away from that kind of expensive care. Hospitals thrive within a system of perverse incentives. They want to make people healthy but they only make money when people are sick and need care. When they and the rest of the health care world do a good job of preventing illness they are losers and that means hospitals need a new world view. Some have adapted, but it will always be a no-win situation with our current financing and insurance system. The consultants present noble goals. They state, "We want to move to a future healthcare system in Vermont that focuses on earlier identification and treatment of illness, and patients being able to obtain care at the most appropriate level- in their home, in their community and close by." They also offer suggestions for change that to their way of thinking may be the kind of changes that will help reach their goal before 2030. While these are good things to do they are still measures that tinker around the edges. They include: embed updated modern technology, provide housing and home-based and mobile-based community care, modernize emergency medical services and transportation services, develop regionalized specialized centers, pay all providers based

on access, quality efficiency and equity. Until we eliminate the profit motive from the delivery of health care nothing will change, no matter how many consultants we hire and how many reports we write. The only way to stop tinkering around the edges is to eliminate private insurance companies and re-engineer the way we pay for health care by making hospitals and other health care delivery providers no longer slaves to the insurance industry. A single payer system would do that. Medicare For All would do that. But this country does not have the political will to make the changes that need to happen so that a person's state of health is no longer determined by their income.

Post Comment: Yes