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To: GMCB - Health Systems Finances<GMCB.HealthSystemsFinances@vermont.gov>; Bredice, Tara<Tara.Bredice@vermont.gov>; LaJeunesse, Kristen<Kristen.Lajeunesse@vermont.gov>

Subject: Public Comment: Hospital Budget 2023-11-15T19:49:15Z

A new GMCB Public Comment has been received.

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Name: Miller Pearsall

Affiliation: Northwestern Medical Center

Town/City: St. Albans, VT

Topic: Hospital Budget

Comment: As a physician at Northwestern Medical Center in St. Albans, I would like to express my deep concern with the path healthcare is taking in this state. I have worked in Vermont for several years as an emergency medicine provider. NMC prides itself in offering great care to its community, but this has become increasingly difficult. Each year, we are trying to do more with less, and sadly the quality of care is starting to suffer as a result of diminishing resources. Vermont's current state funding is neglecting to provide the proper resources for elder care, patients with substance use disorder and/or mental health issues. Consequently, these most vulnerable populations end up absorbing numerous ED beds throughout the state at any one time. We manage boarders in our ED for days, and even weeks at times, while having a constant influx of new patients. This is the ramification of too few longterm care and psychiatric beds as well as inadequate dementia-care in our state. I cannot imagine a worse place for both mentally ill and elderly patients to be for any prolonged period of time. And as our beds become occupied by non-emergent boarders and admitted patients waiting for inpatient beds, a lethal bottleneck forms, delaying care for patients arriving with acute processes. Despite efforts to improve access to primary care, more and more people are using the ED for basic healthcare needs. Driven by concerns of lost revenue, patients we once would admit are getting discharged based on hard metrics rather than individual needs. Often these patients return within days, only to be admitted in worse condition, and thus for longer hospital stays. This is "care" driven by a focus on the bottom dollar. Is this truly the kind of care Vermonters deserve? Transferring patients to UVMHC is increasingly difficult due to their own growing constraints. This is in part because UVMHC is having to manage some patients who could not, but should be able to, access care more locally. Emergency Departments, which were never intended to be safety nets have acted as such for years, but now even our last safeguards are crumbling under the weight of a dysfunctional and unsustainable system. Physicians have all taken an oath to do no harm, but the system in which we are working is failing our patients and our communities, making it nearly impossible to practice in accordance with that oath. Is it any wonder people are leaving healthcare professions? This is a systemic issue that feels comparable to a dam about to fail. But Vermont is a small, nimble state where its citizens take care of one another, as was exemplified during the COVID-19 pandemic. Our state became a model of how to adapt during a time of turmoil, and I am confident we can do that again. The crisis we are facing now has been more insidious in nature, but is no less harmful. I know this is a very complex issue far above my understanding, but as a practitioner on the ground, I can say with certainty that limiting access to care in Vermont's smaller communities is a short-sighted approach that will neglect the needs and future health of Vermonters. The right care in the right setting will only improve outcomes, and that is what Vermonters deserve. Thank you for your time and consideration. Very Respectfully, Miller Pearsall, MD

Post Comment: Yes