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Topic

Accountable Care Organization

Comment

Hello, I am an independent specialist and am very concerned that there is no strategy whatsoever at this point in time to incorporate the Green Mountain Surgery Center or independent specialists into this experiment. My fear is that there will be an emphasis on funneling all care into UVMHC so as to control the funds and maximize the profits for UVMHC. For example, if a primary care provider wishes to refer a patient for a screening colonoscopy and the options are to send them to employed model where the providers are salaried or to the independent model where costs have been demonstrated to be at least 50% less than the hospital charges, what is the incentive to send to the less costly option at the surgery center? Independent practices have already demonstrated their value and ability to control costs. The problem is not the independent model but rather the corporate model of UVMHC. This has been facilitated by the lack of sufficient oversight of the GACB. What is the use of requiring benchmarks at the beginning of the ACO experiment if the GACB continues to water down these requirements. As is well known, health care in Vermont is suffering through this pandemic and many providers are retiring or leaving the state. Rather than support in the growth of independent practices with their demonstrated ability to offer high quality cost effective care, it seems to me that the GACB is continuing to facilitate the development of a monopoly under UVMHC. Thank You, David N. Schwartz, MD