



Vermont’s Hospitals: High Quality Care in a Rural Environment at Lower Cost

VERMONT CONSISTENTLY RANKS HIGHLY FOR GOOD HEALTH COMPARED TO OTHER STATES

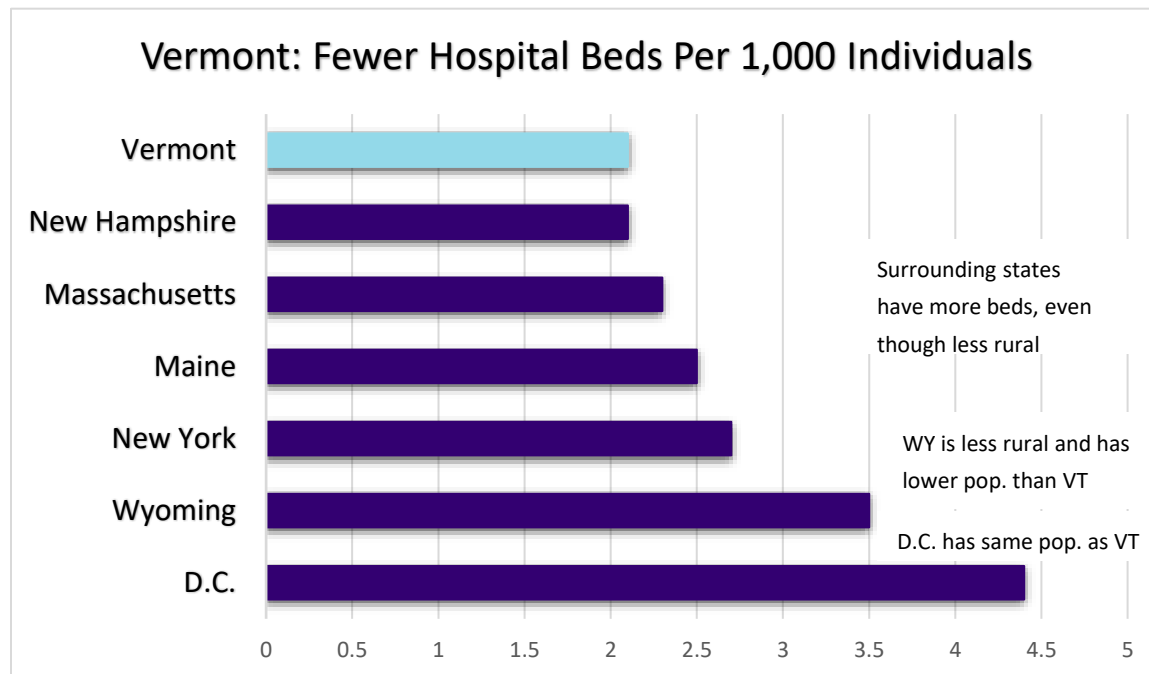
- United Health Foundation ranks Vermont as number 1 for 2019¹
- Commonwealth ranks Vermont as number 6 for 2020²

VERMONT’S HOSPITALS DELIVER CARE IN ONE OF THE MOST RURAL STATES IN THE NATION

Vermont is the second most rural state in the nation.³ Providing access to quality health care for a population that is widely dispersed, instead of concentrated in one area, is challenging. Through careful regulation and the Certificate of Need process, Vermont has worked to strike an effective balance between access to care and the facilities needed to provide it.

VERMONT’S HOSPITALS PROVIDE QUALITY CARE TO RURAL COMMUNITIES WITH FEWER BEDS (BASED ON REGIONAL AND INTERNATIONAL COMPARISONS)

Vermont is 39th in the nation for number of hospital beds available to the population



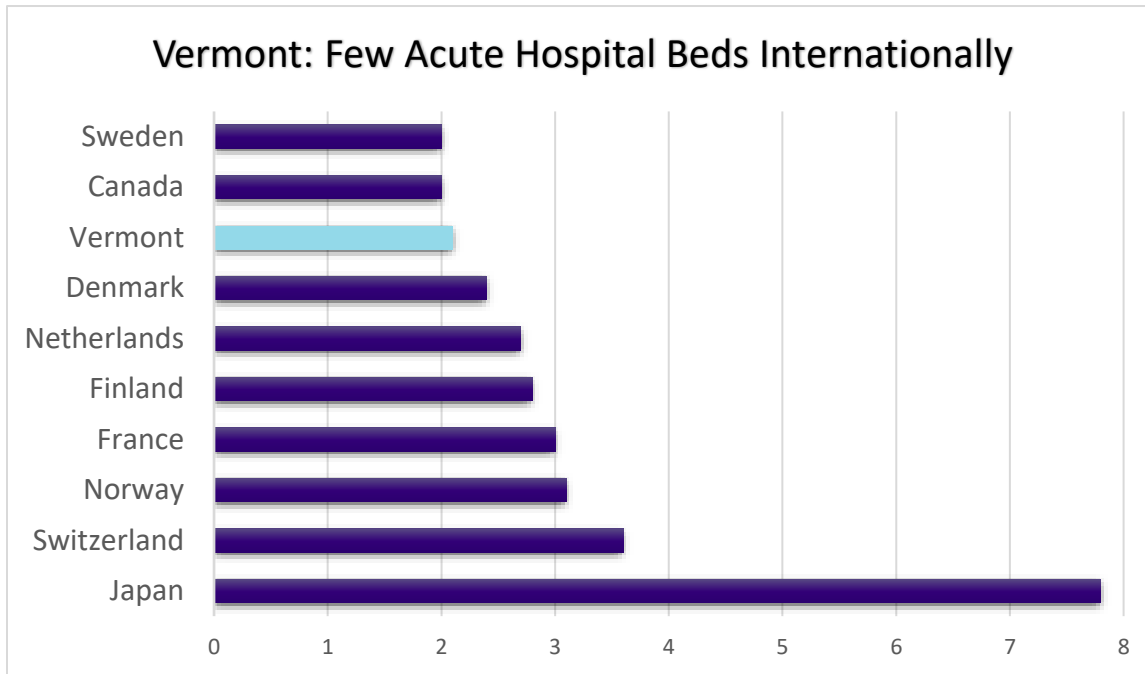
Source: Kaiser Family Foundation, [Hospital Beds per 1,000 Population by Ownership Type](https://www.kff.org/health-equity/issue-brief/hospital-beds-per-1000-population-by-ownership-type/), 2018

As the following table illustrates, Vermont has 2.1 acute hospital beds per 1,000 individuals, comparable to Canada’s 2.0 acute hospital beds per 1,000 individuals and fewer than many countries with universal health care.

¹ America’s Health Rankings, 2019 Annual Report, <https://www.americashealthrankings.org/learn/reports/2019-annual-report>

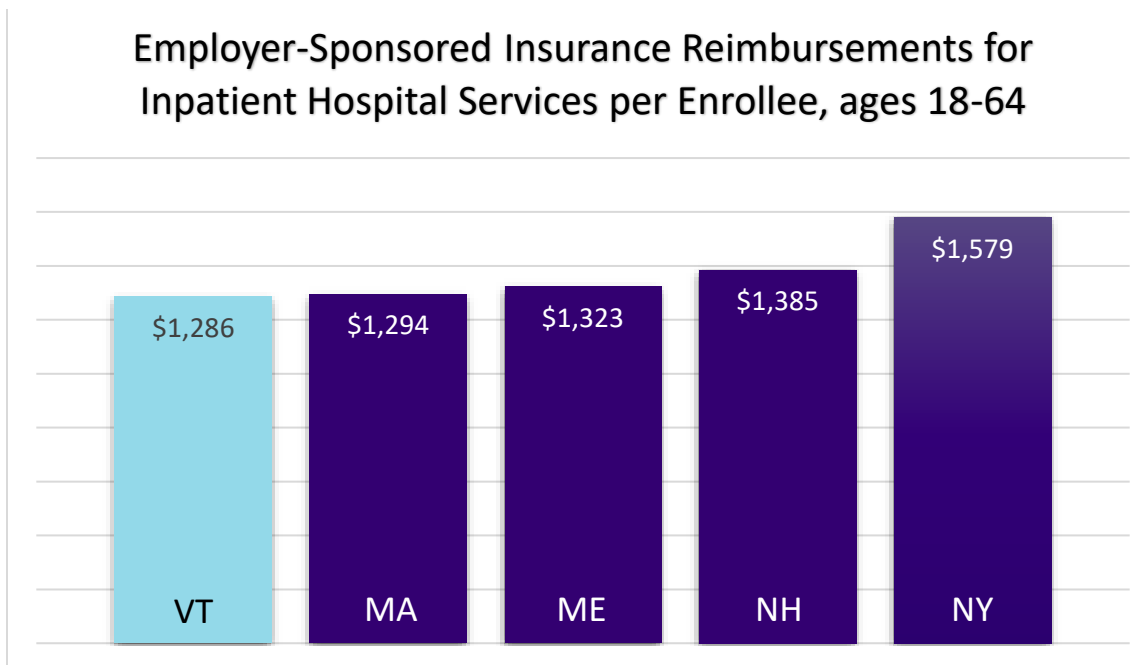
² The Commonwealth Fund, 2019 Scorecard on State Health System Performance, <https://scorecard.commonwealthfund.org/rankings/>

³ Census Bureau Data, https://www.census.gov/newsroom/releases/archives/2010_census/cb12-50.html



OECD Data, [Hospital beds](#), 2018; Kaiser Family Foundation, [Hospital Beds per 1,000 Population by Ownership Type](#), 2018.

REIMBURSEMENT FOR INPATIENT HOSPITAL SERVICES IS LOWEST IN THE REGION



Data: Truven MarketScan, Source: [The Commonwealth Fund](#)



Vermont's Health Care Reform: Doing More with Less

Vermont's hospitals are fueling major health care reform for much less than other states serving similar populations.

- California has \$1.5 billion in federal funds to apply to care coordination and the social determinants of health through their Whole Person Care program.⁴ They expect to enroll 300,000 individuals.
- Pennsylvania is working on a similar payment reform effort with 13 of its rural hospitals. The federal government has made \$25 million available to oversee and provide key resources inform the model.⁵

When Vermont signed its All Payer Model agreement, the federal government was to supply as much as \$209 million in funds to support the work. To date, hospitals and community providers have seen only a fraction of that funding (approximately \$9.5 million total).

Despite minimal federal funding for health reform efforts, Vermont is one of the top five states for investing Medicare dollars in primary care.

Hospital Sustainability Planning: A Little Goes a Long Way

With COVID-19 rates rising again, hospitals are gearing up for a hard winter. Unlike the spring, where elective procedures were suspended, hospitals are working to continue serving their communities while working under COVID restrictions and treating patients with COVID. In addition to providing treatment, hospitals are allocating resources towards vaccine distribution, administering COVID-19 infusion treatments, performing community testing, and acquiring personal protective equipment during a time of cyber attacks and severe workforce shortage.

As a result, we ask that the Green Mountain Care Board and the legislature allow for flexibility and simplicity with hospital sustainability planning.

FLEXIBILITY: EXTEND DEADLINE FOR FINAL REPORT

Current flexibility for COVID-19 in Act 159 only extends the legislative reporting deadline two and a half months—from September 1, 2021 to November 15, 2021. It is possible that COVID could continue throughout that time period, which would put a strain on hospital resources. **VAHHS requests the legislature provide greater flexibility by extending the reporting deadline to January 15, 2022.**

SIMPLICITY: FOCUSED INQUIRY

Vermont's hospitals want to do the work of sustainability planning. VAHHS requests that this process be a focused and goal-oriented inquiry to work towards hospital financial sustainability in order to achieve population-based health improvements while maintaining community access to services.

⁴ https://harbageconsulting.com/wp-content/uploads/2019/03/Harbage_WPC_MidPointPaper.pdf

⁵ CMS.gov, Pennsylvania Rural Health Model, <https://innovation.cms.gov/initiatives/pa-rural-health-model/>