



RETINA CENTER

O F V E R M O N T

February 16, 2018

Sen. Virginia Lyons

Sent via email: vlyons@leg.state.vt.us

Dear Senator Lyons,

I am writing in relation to current Bill S.278, relating to the regulation of ambulatory surgical centers (ASCs) in Vermont. I am a physician and co-owner of Retina Center of Vermont (RCV), a two-doctor subspecialty Ophthalmology practice in South Burlington. After completing residency at the University of Pennsylvania's Scheie Eye Institute and fellowship at Harvard's Massachusetts Eye & Ear Infirmary I began vitreoretinal practice in Vermont in 1997. My practice partner and I have, between us, over three decades of experience serving the retinal needs of Vermonters. We provide approximately half of the retinal care in the region, and we currently maintain "admitting privileges" to perform surgery at the only vitreoretina-equipped surgical facility in our region; i.e. the University of Vermont Medical Center.

I know my patients' care needs intimately well. As their physician and as an employer who purchases employee health insurance I have watched as coverage costs have skyrocketed in our region over the past two decades. At the same time, the prevalence of 'high deductible' commercial health insurance plans and the sizes of due-directly-from-patients' co-pays and deductibles have also risen. For many, this is a broken equation that breaks workers' and families' budgets when they must come up with unaffordably large sums of money for care on top of monthly insurance premiums. For too long, those in our region who pay for care have been severely disadvantaged by the lack of more affordable options for high quality care. That Vermont is literally last of 50 in the entire nation with respect to access to high quality, affordable ASC-based surgical and other procedural care is a problem that is sorely overdue for a fix, as dozens of regional businesses, patient and consumer advocacy organizations, and insurers have spent the last two years telling the Green Mountain Care Board (GMCB), which approved, in a 4-to-1 vote this past year, the Certificate of Need (CON) application by the Green Mountain Surgery Center (GMSC), our state's soon-to-be (hopefully...) first multi-specialty ASC.

The proposals outlined in Bill S.278 pose an immediate threat to this 'environment' by placing unnecessary burdens on ASCs in Vermont such as imposing a 6% provider tax, requiring that ASCs fund a sizable portion of the GMCB operations, requiring budget approval by the GMCB, and mandating redundant governmental oversight. These proposals would create massive overhead costs which would not only hinder low-cost care for Vermont's one existent ASC, but would altogether snuff out the ability for a new ASC to operate in Vermont.

The GMCB has already acknowledged the need for a new ASC in Chittenden County, and it has admitted that it would benefit patients, businesses, and taxpayers by offering care that is equivalent to that at major medical centers but at a lower cost. And, the GMCB - through the CON process - has already acquired oversight of the proposed ASC's development, and has imposed numerous conditions for the next four years in addition to the regulations already enforced by Medicare and the Joint Commission.

Please consider what 'value' the regulations proposed in Bill S.278 would bring to Vermont's ASCs and their patients if, in the end, those regulations only serve to shut them down.

Thank you for your attention to this very serious matter.

Sincerely,

David J. Weissgold, MD
Retina Center of Vermont

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