

525 Clinton Street
Bow, NH 03304
Voice: 603-228-2830
Fax: 603-228-2464



61 Elm Street
Montpelier, VT 05602
Voice: 802-229-0002
Fax: 802-223-2336

For Immediate Release

Contact: Susan Noon (603 228-2830 x 144
Mobile (603) 866-6020

Bi-State and Members Testify; Host Annual Reception for VT Legislators



With Gov. Scott, AHS Secretary Gobeille and DVHA Commissioner, Cory Gustafson

MONTPELIER, VT – Jan. 18, 2017 – On a wintry mid-January day, Bi-State and senior leadership from Vermont’s Federally Qualified Health Centers met with representatives in the Vermont Legislature and attended briefings before House Ways and Means, Senate Health and Welfare, and Senate Finance committees. The group met with Speaker Mitzi Johnson, Lt. Governor David Zuckerman, and Gov. Phil Scott. Gov. Scott also invited the Vermont Agency of Human Services secretary, Al Gobeille and Department of Vermont Health Access commissioner, Cory Gustafson, to join the meeting.



With Lt. Gov. Zuckerman

Each briefing was a well-balanced mix of information about community health centers, answering questions from the government officials and used extensive data to show why health centers matter and how the Legislature can support access to primary care for all Vermonters.

Fay Homan, MD (second from left in photo), who practices at Little Rivers Health Care in Wells River, offered compelling insight into what makes a day at a health center different from other primary care practices. “Last month, I had a “typical morning” in the office that started out looking relatively simple; only six patients on my

schedule. The first was delightful; a chubby, drooling six-month old for a well-child visit. Next was a relatively simple one; a former opiate addict, now in our MAT program, with a urinary infection. Then things got more complicated; a frail senior who’d fallen at home, with a large laceration on his arm who needed stitches as well as a review of his medications and underlying causes of the fall. After that, during a visit that could have been a quick newborn weight check, I had to switch focus as the mother started crying and I realized she had severe post-partum depression. Next was an agitated schizophrenic senior with diabetes, heart disease, and emphysema. He believed a psychiatrist had put a listening device in his neck. Finally, just before lunch, during a visit to “discuss mood”, a 14 year old passed a note across the desk disclosing that she and her sister had been sexually abused by their father for the past 4 years.”

Being part of an FQHC gives me resources to get through a morning like this that I wouldn't have had when I was in private practice. The payment system allows for a little more time with patients than I had before. We have more support on site: mental health counselors, drug and alcohol counselors, and a care coordinator. In an FQHC, patients are more likely to trust their doctors, have confidence in the health care system, and get the wrap-around care they need.”

Following the testimony and meetings, Bi-State and its Vermont members hosted the annual ice cream social and reception for Vermont Legislators in the State House Cafeteria.

###

About Bi-State Primary Care Association

Bi-State Primary Care Association is a nonpartisan, nonprofit organization that represents Community Health Centers and supporting organizations that provide health care to more than 300,000 people at 121 locations throughout New Hampshire and Vermont. Bi-State supports access to high quality, effective and affordable primary health care with an emphasis on reaching medically and geographically underserved populations. Bi-State Primary Care Association was founded as a 501(c) (3) charitable organization in 1986 with offices in Bow, New Hampshire and Montpelier, Vermont.