

—Slug:..... COMM-0866.opin.view.grinold  
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—For section..... Voices/Viewpoint  
—Format..... Opinions  
—Dateline..... Brattleboro  
—Article Number:..... 43645



**Notes from editor (not for publication):**



HEADLINE ELEMENTS:

####BEGIN HED####

1 Supporting BMH: a practical investment in community  
2 resilience

####END HED####

####BEGIN SUBHED####

3 Brattleboro Memorial Hospital is struggling because the  
4 longstanding business model for rural healthcare is being  
5 dismantled before a sustainable path has been identified

####END SUBHED####

6 TEXT BODY:

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7 ANCHOR INSTITUTIONS play an outsized role in regional  
8 stability, a role that often becomes most visible only after their  
9 loss. For southeastern Vermont, Brattleboro Memorial Hospital  
10 (BMH) is one of those cornerstones. It is one of our region's

11 largest employers and one of the clearest indicators of our  
12 community's long-term health.

13         Recent announcements regarding progress between  
14 BMH leadership and its unions are very encouraging and reflect a  
15 meaningful commitment to collaboration, stability, and the long-  
16 term strength of healthcare in our region. This progress also  
17 creates space to address the broader forces reshaping rural  
18 healthcare and the role each of us plays in supporting BMH's  
19 continued stability and success.

20         To support BMH responsibly, we must look beyond the  
21 headlines and recognize what is happening.

22         The hospital is navigating a forced and rapid shift in how  
23 healthcare is funded and delivered, not only here in our rural  
24 state but nationally. BMH is not struggling because it is failing at  
25 its mission; it is struggling because the longstanding business  
26 model for Vermont rural healthcare is being dismantled before a  
27 sustainable path has been identified.

28         Its \$14.5 million budget deficit identified last fall reflects  
29 structural changes imposed by state and federal policy. For  
30 instance, changes to pharmacy funding under Act 55 capped the  
31 revenue that hospitals can generate from outpatient drugs, an  
32 approximately \$5 million impact to BMH's bottom line.

33         While intended to curb statewide price-gouging, these  
34 margins were never "excess profit" at BMH. Instead, they served  
35 as a financial bridge, allowing the BMH to serve Medicare and  
36 Medicaid patients, programs that routinely reimburse below the  
37 actual cost of care.

38         \* \* \*

39         IT IS IMPORTANT to acknowledge that the hospital's  
40 journey toward stability hasn't been without missteps. Initial  
41 financial reporting last fall proved overly optimistic and damaged  
42 trust with regulators and stakeholders.

43         However, the response to those errors has been decisive.

44         The BMH board of directors has taken meaningful steps  
45 to correct the course. By bringing in interim leadership and

46 specialized consultants, the board has committed to the level of  
47 transparency that regulators and the public rightly expect. We are  
48 now seeing the outcomes of that leadership; stabilizing influence  
49 on operations, long-term commitments for staffing, realistic,  
50 accurate accounting process, all creating a renewed foundation  
51 of trust with local stakeholders, regulators, and the greater BMH  
52 community.

53 Notably, the partnership demonstrated by legislative  
54 leadership, state regulators, hospital leadership, and the broader  
55 BMH community in recent months has been both encouraging  
56 and meaningful for the future of healthcare in our region. The  
57 willingness of all parties to collaborate toward practical solutions  
58 reflects a shared commitment to maintaining a strong, stable, and  
59 sustainable healthcare system for the communities BMH serves.

60 \* \* \*

61 THE RECENT coming together of BMH leadership and staff  
62 to secure the hospital's future must now be matched by the  
63 community's engagement. Behind the financial statements are  
64 more than 500 of our neighbors: nurses, physicians, technicians,  
65 and support staff. Supporting our local healthcare provider is not  
66 an act of charity; it is a practical investment in the resilience of  
67 our community.

68 Our call to action is simple: start here. Whether you  
69 need routine screenings or specialized care, choosing BMH is a  
70 direct vote for the continued viability of the greater Brattleboro  
71 region. A thriving economy starts with a healthy community, and  
72 a healthy community is one that stands behind the institutions  
73 and the people who care for it.

74 This is a moment for engagement rather than distance. If  
75 we want southeastern Vermont to remain a premier place to live,  
76 work, and raise a family, we must protect and utilize our hospital.  
77 A community that loses its hospital is permanently shaped by that  
78 loss; a community that sustains one is defined by its strength.

####END TEXT####

BIO/COATTAIL:

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79 ADAM GRINOLD is executive director of the [Brattleboro](#)  
80 [Development Credit Corporation](#).

####END BIO/COATTAIL####

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83

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