| What is your name? | Richard Fralick |
| :--- | :--- | :--- |
| Photo |  |

for now, but use money as an incentive for them to combine services; 3) UW Medicine Orcas Island Clinic rather than Orcas Family Health Center; 4) Orcas Family Health Center rather than UW Medicine Orcas Island Clinic; 5) Other

Will you consider working with a primary/urgent care provider other than UW Medicine?

If \$0.55/\$1,000 supported both existing clinics and you were able to levy another \$0.20/\$1,000 would you be more likely to ...

If funds are available for supporting services beyond primary care, what services would you be most willing to support?

What is your opinion regarding the buildings that currently house the clinics?

How will you decide the amount of subsidy legitimately needed by those asking for support? How do you plan to verify they are not inflating their cost?

Are there any services you would require to be provided in order to receive support? If so, what?
consolidation of the practices cannot be predicted at this time Depending on developing circumstances such an outcome might become practicable.

## Yes

Other (please explain):
I believe that the primary fiduciary responsibility of the PHD will be to support sustainable primary care to the Orcas community at a reasonable tax rate. Analysis would indicate that this can be done for between $\$ 0.50$ to $\$ 0.60$ per $\$ 1000$. However at this time there are so many assumptions used in the analysis (the clinic assistance numbers, debt service costs, patient data, etc.) that it is not possible to say with great confidence what the final millage rate will be. Once a comprehensive budget analysis is completed the elected commissioners will determine what if any additional services could be provided if a greater millage rate is levied up to the maximum amount allowed. Urgent care, faster debt retirement or starting a budget reserve might warrant such additional expenditures. As demonstrated by my track record as a County Council Member I am financially conservative would approve such additions only if I was convinced that they provide good value for the additional tax burden.

Urgent care and 24/7 emergency service

I am open to either option

A detailed financial analysis of the current clinics' operations must be undertaken. Obtaining patient census and patient visit data will be critical to the study. Once obtained the information will be used to determine the correct level of assistance to be provided to the practices.

Sustainable primary care. Cooperation on enhanced urgent care and emergency services. Willingness to provide metrics showing the quality of clinical services being delivered.

| The hospital district, if it <br> passes, is required by <br> law to hire a | Yes, but I prefer not to identify my preferences |
| :--- | :--- |
| superintendent. That |  |
| person may play a very |  |
| important role in |  |
| implementing the policies |  |
| you help set. Do you |  |
| have someone you would |  |
| like to see in that role? |  |$\quad$| Should complaints a <br> person might have about <br> one of the subsidized <br> providers go | Directly to the provider, but the commissioners have the ability to review <br> the provider's records of complaints |
| :--- | :--- |
| The role of the Commissioners is to set policy and through their <br> superintendent to see that policy implemented. The Commissioners' role <br> is not to micro-manage the clinics. |  |

