

## Madrona Voices

### PHD Election – Things to Consider

We considered creating a pro/con report. However, what some people consider a pro, others might consider a con. We don't want to tell you how to vote. We know intelligent and well-informed people on both sides of this issue. We have worked hard to research all of the information you find here and on our website.

We have talked to our fellow islanders, to the providers, and to the candidates. The perspectives below are some we have heard and read. They may seem like valid ideas to some and unreasonable to others. We list them here simply as points to ponder as you decide what the correct vote is for you and our community. We write them in the form of questions, as it is up to you to consider whether or not each is a reason to vote either FOR or AGAINST the PHD.

- Do you think that, without the PHD, our current health care providers (or new ones) and staff will provide care on-island, even though they can make more money elsewhere? Do you think the current health care providers and staff are paid too much, too little, or about right?
- Do you think that there will be primary care providers on-island, if the PHD isn't established?
- Do you think that someone will operate a cash-only, no-insurance-accepted clinic, if the PHD does not pass? Would that cash-only clinic meet your needs? Do you think it would meet the needs of the community?
- Do you think that your health care needs will be adequately met, if the PHD does not pass?
- Both Dr. Shinstrom and Dr. Russell subsidized their clinics in the form of time. Those who supported the OMF-funded clinic often did so with cash. Do you think donors will continue to subsidize, in either time or cash, like they have in the past?
- Do you like or dislike the policies of the probable PHD-funded providers?
- Do you feel that the benefits you receive from having a PHD are worth the higher taxes?
- Do you think the commissioners that are likely to be elected, if the PHD passes, will support the people or things you want supported?
- Do you trust that the elected commissioners will set the levy responsibly and spend the money wisely?
- If you like or dislike the sales pitch of either the "pro-PHD" or "anti-PHD" camps, is that reason enough to vote "yes" or "no" on having a PHD?

Statement	Our Comments
<p>We will not have primary care on the island, if we don't vote for the PHD.</p> <p>Or:</p> <p>We always have had doctors on-island and will continue to have, even if we don't vote for the PHD.</p>	<p>Both statements make assumptions that may or may not be true. Those making the statements don't have the ability to predict the future any better than you do.</p> <p>It is true that, without donors or tax subsidies, doctors and staff on-island may work for less than what they could make elsewhere.</p> <p>Some assume that tax dollars are necessary to persuade enough quality doctors to stay on-island. Others assume that either donors will continue to help or that enough quality doctors will agree to work for less because they like the island. These are the key questions, and there are conflicting beliefs as to what will happen.</p>
<p>If we vote for the PHD, we will have 24/7 urgent care.</p>	<p>Only the elected commissioners can make this decision after considering the cost and how they want to define "urgent care." Those who are making assurances we will have 24/7 urgent care do not currently have the authority to make it happen. Read the statements by each candidate to see how you interpret their answers on this issue.</p> <p>Typical urgent care centers primarily treat injuries or illnesses requiring immediate care, but not serious enough to require an ER visit.</p> <p>Orcas Island Fire and Rescue does not currently provide urgent care services. It does stabilize a person, if possible, and then arrange for transport to or recommend a visit to a higher care provider.</p>
<p>Both clinics will be supported.</p>	<p>Those who are making that statement do not currently have the authority to make it happen. Only the elected commissioners can make this decision. Not all candidates are committed to this. Some candidates support the idea for now. Some candidates believe that it is inefficient to operate two clinics and would like to see one clinic rather than two. Read their statements to learn more.</p>
<p>UW doesn't do courtesy labs</p>	<p>False, if said now. UW Medicine does do courtesy labs now. It did not prior to April.</p>
<p>UW doesn't refer patients to non-UW specialists</p>	<p>False. It does.</p>

<p>UW doesn't accept medical notes from non-UW specialists into the patient history</p>	<p>False. It does.</p>
<p>Kaiser insurance won't allow UW patients to go to non-Kaiser specialists.</p>	<p>False.</p> <p>People who have a Kaiser Medicare Advantage Plan or a Kaiser HSA plan are required to use doctors in the Kaiser system or who have a contractual agreement with Kaiser when they are available in the area where the patient lives or are as close to the patient as other providers. Patients can request non-Kaiser providers in the second scenario, but the decision is up to Kaiser.</p> <p>Since Kaiser has no doctors in San Juan, Skagit, or Whatcom counties, people who have Kaiser insurance rarely have problems with non-Kaiser referrals that are closer than a Kaiser affiliate.</p> <p>Kaiser currently provides coverage for primary care at both the UW Medicine clinic and the Orcas Island Family Health Center.</p> <p>The issue is with Kaiser and would be the same regardless of who operates the clinic. The issue persists whether the PHD passes or not.</p>
<p>There is a three-year contract with UW that the PHD must abide by.</p>	<p>False. The commissioners have no obligation to honor the contract that OMF and UW have with each other. It doesn't matter what their contract says; it cannot bind an unrelated third party. It is true that the OMF/UW contract says that if the PHD doesn't accept essentially the same contract, UW can leave at the end of October 2018. That doesn't mean that the PHD commissioners have to comply. Passage of the PHD does not obligate the PHD or the public to assume the OMF/UW contract.</p> <p>The essential elements of the OMF/UW contract are that UW Medicine will not operate at a loss and will only agree to continue to operate a clinic on-island if someone (OMF, PHD, a large donor, etc) agrees to make up the difference.</p> <p>The other element is that UW Medicine requires that they have sole authority to determine who is an employee or associate of UW Medicine.</p>

	Whether the provider is UW or some other entity, it is likely that each will stipulate that they do not operate at a loss and that they have sole authority to control who works for them.
Only one clinic provides care to those who cannot pay.	Actually, there are three clinics that provide care to people, regardless of ability to pay. One works to assist people in gaining government support. The other two are more likely to write off debts.
If the PHD passes, taxes will have gone up by 43% since 2016.	<p>False. Taxes on Orcas Island went up by 21.2% between 2016 and 2017. Most of this increase was caused by changes in education funding. Some of that was approved by the voters. Some of it was caused by the State legislature.</p> <p>If the PHD passes, there will be an increase of another 0% to 9.5% in the taxes due to the PHD. The range is because the commissioners can set the PHD tax from \$0 to \$0.75/\$1,000 in valuation. Some candidates say they favor setting the tax at less than the maximum possible. However, some candidates favor the full \$0.75/\$1,000.</p> <p>The tax change between 2016 and 2019 will be at least 21.2% and probably closer to 30%, if the voters approve the PHD.</p>

With a PHD, healthcare on the island will be largely influenced by five elected neighbors. They will decide who to subsidize and how much subsidy to provide.

Without a PHD, healthcare on-island would likely be more influenced by donors (if they exist) and/or generous doctors/staff willing to work for less than they could elsewhere (if they exist). If the donors or generous doctors are not existent here, then travel for primary care might be more common. Some believe these donors and/or generous doctors and staff will exist. Others do not want to rely on this happening.

We encourage a vote based on an accurate understanding of the facts rather than on the messages or the methods used to sway your vote toward support or opposition of the PHD.

If you want to be notified anytime we post new material on our site, please visit [MadronaVoices.com](http://MadronaVoices.com) and sign up for updates. We are hoping to post OMF responses to our financial questions soon.