

From: stan.welles.kenai.assy@acsalaska.net
To: [Blankenship, Johni](#)
Subject: [Fwd: 2014-19-39]
Date: Wednesday, January 28, 2015 1:44:56 PM
Attachments: [winmail.dat](#)

----- Original Message -----

Subject: 2014-19-39
From: "Welles, Stan" <swelles@kpb.us>
Date: Wed, January 28, 2015 1:37 pm
To: "Stan Welles" <stan.welles.kenai.assy@acsalaska.net>

Good Afternoon from Hawaii, Johni;

Here is some useful input for our consideration of Ordinance 2014-19-39. Would you distribute it to my fellow Assembly folks? Thanks.

Sincerely,
Stan Welles

Respectfully;

Two years ago the North Slope Borough did the same thing the Mayor is proposing. They hired a consultant and produced an excellent, comprehensive report.

Go to 'north-slope.org' <<http://north-slope.org>>
select - 'departments'
select - 'Health & Social Services'
select - 'Baseline Community Health Analysis Report'
Scroll down a few lines to a line that gives you the option to look at the 'Full Report' and select it.

Remember, the Mayor thought \$200,000 would not cover the eventual cost. Yes, he is right, they come at about \$175/hour. According to Luke Welles -Vice President/CFO for the Arctic Slope Native Association (ASNA)-; the North Slope Borough paid a little over \$1,000,000 for this report.

Luke has three other suggestions and an observation. Let me outline his credentials. He is currently one of the key health care contract negotiators in the native health arena and recognized as being very knowledgeable in ObamaCare.

He is sent regularly to Anchorage, Juneau and Washington D. C. for health care cost negotiations. His background includes a number of years as CFO for YKHC (Hospital in Bethel), CFO and participant in organizing LifeMed, and now his above mention work with ASNA.

He suggests that we contact each of the three following very experienced organizations and express our objectives and desires to them and hear what they may be able to do for us.

Those three are:

URBAN INSTITUTE FOR HEALTH STUDY-DID THE HEALTH ASSESSMENT FOR THE ALASKA NATIVE TRIBAL HEALTH CORP FOR MEDICAID EXPANSION

MCDOWELL GROUP-WORK FOR STATE HEALTH AND SOCIAL SERVICES

INSTITUTE OF SOCIAL AND ECONOMIC RESEARCH AT THE UNIVERSITY OF ALASKA ANCHORAGE

Now, with the objective of lowering health care cost, Luke's unequivocal observation for lowering the Borough/School District employee health care cost would be to transfer all the employees to ObamaCare. Incidentally, he is knowledgeable about our current health care benefits and realizes the anxiety it would cause.

On a side note, remember the Central Peninsula Hospital's Quarterly Report given to us at the January 20th meeting? Based on the 0.05 mill rate; the claim was made that the hospital was making a negligible burden upon the Borough tax payers?

That's not true in the least is it? Shouldn't the question be asked, "What percentage of the hospital's revenue is based upon Borough/School District health care benefits?" It seems to me that the hospital ought to go through its patient list for last year and identify those that are Borough/School District employees and break out that portion of the hospital revenues. Doesn't that revenue also represent another part of the taxpayer support of the hospital?

Respectfully,

Stan Welles

Sent from my iPad