# Health Care Market Oversight Public Comments 006 Adventist-MCMC

This document presents written public comments related to the preliminary review of transaction 006 Adventist-MCMC by Oregon Health Authority (OHA) under the <u>Health Care Market Oversight</u> program. OHA held a public comment period from January 24 to February 8, 2023 and received 50 written public comments via email to <u>hcmo.info@oha.oregon.gov</u>. Comments are presented below in the order received and may include typos or misspellings. Personal contact information for individuals has been removed.

OHA expresses no views on the substance of these comments, and their publication does not constitute an endorsement by OHA of the views expressed.

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# **Public Comments**

### 1. Subject: Adventist acquisition of MCMC

Received 1/26/23

To whom it may concern,

I am a Mid Columbia region primary care physician practicing in this area for 25 years.

My primary practice is in Hood River county, however we have many patients served by MCMC under our care. I would be relieved to have a well capitalized non-profit hospital system such as Adventist assume management of this critical local health system. I believe this would improve continuity and availability of specialty care in our region, and improve integration into the broader healthcare environment in our region.

I fully support this acquisition.

Thank you.

Richard Starrett MD Summit Family Medicine

#### 2. Subject: Health care

#### Received 1/26/23

 This hospital doesn't seem to be able to keep doctors. That can have a negative effect when every time you see one it's different. None seem to agree with past doctors.
 Their billing comes many months later. It may take over six months for a bill, and they threatened to send to collections.

February 9, 2023



3. Most times you wait hours in ER to see a doctor.

4. A physician assistant isn't a doctor, but they say you need a primary doctor but you only get a PA.

5. I would rather go to Hood River hospital then MCMC.

I don't have anything good about MCMC, it used to be a great place then they got this CEO. Gone downhill since. Building a new hospital will not help with the problems they have.

Thank you

G. Dunagan

# 3. Subject: Adventist acquisition of Mid-Columbia Medical Center: public comment *Received 1/27/23*

As a longtime Gorge resident and retired physician and health policy person, I am interested in this acquisition, and what it impact might be.

My impression is that it needs to happen, as MCMC has been losing practitioners and hence patients for years. My concerns involve three major areas:

1. religious restrictions.

What is meant by " will provide reproductive health care"? Will elective termination of pregnancy, tubal ligations, voluntary sterilizations, morning after pills, other contraception, all be permitted in the hospital and the practices it acquires? What about us "death with dignity" – – medically assisted dying? I would want to make sure that there were no limitations imposed on these services because of the faith – based nature of the acquiring entity. Given that the closest hospital on the Oregon side of the border is a Catholic one, Providence Hood River, which does restrict these healthcare services within the hospital walls and in the practices that it owns, access to such important services by willing practitioners and other caring providers in The Dalles is of paramount importance

2. Relationship with the federally qualified health center, ONE COMMUNITY HEALTH.

There is a history of MCMC competing (some, including myself, would say, somewhat unfairly) with the sole federally qualified health Center, located in The Dalles, ONE COMMUNITY HEALTH. This dates back to MCMC quietly creating rural health clinic designations for all of its primary care practices — directly competing for Medicaid market share, when OHP was in the course of expanding and more favorable reimbursement rates became available — knowing that OCH was striving to open its own clinic in The Dalles. MCMC, though invited to participate in several planning meetings about the OCH goal there, failed to disclose its own RHC planning and despite the predictable impact on OCH market analysis.

I cannot claim to know where all of that stands today; indeed, I have heard a rumor that ONE COMMUNITY HEALTH is now so busy that it has a waiting list. That is arguably appropriate; it is an essential community provider for The Dalles, as it is in Hood River and for the entire service area the organization serves. There have been other issues, however, about support of the FQHC by MCMC in the past, or rather, arguably about lack of support for it. Being retired, and not current on these matters, I only hope that that past history is indeed over. But with an acquisition by Adventist, I would want to see some assurances of close and non-competitive collaboration between the new hospital and its practices and the FQHC, in every dimension.

Everyone will gain by diverse patient panels everywhere in The Dallas primary care practices. Any future move to compete for better-insured patients, develop exclusive provider network contracts that could harm OCH and its patients, etc. would be terrible to see.

3: collaboration with other regional hospitals and organizations.

Aggressive moves to compete with Providence Hood river have long been the norm. On this, I have no doubt. It pains me to remember many such actions, as well as certain outright denials of them by people (now gone) who were in leadership of MCMC. That is hopefully irrelevant going forward. What counts is that health is the highest priority— health of the communities served by all of the organizations; and that collaboration, not competition, should be the transparent norm and accountable to transparent, real agreements and planning. The applies also to hospitals and practices on the Washington side, since the Columbia River is a border that does not firmly segregate patients by their state of residence. Collaboration and sharing of resources as a goal applies to allied health services, such as physical therapy, occupational therapy, audiology, etc.; medical and nursing specialties; hospice and home health; public health; social services; behavioral health; support of seniors and caregivers; and many other services I am not enumerating here.

To date, the American "system" is unfortunately all too well represented in the Gorge, with different entities which should be concerned with quality, compassion, fair treatment of staff, equity, inclusion, and social/structural/moral determinants of health —-instead being overly focused on market share and revenues. I hope that this will improve with the acquisition contemplated.

Thank you for soliciting public input and for the oversight that this process represents.

Sincerely,

Tina Castañares, MD

Among former positions:

---Medical Director, Interim Executive Director, Board member of ONE COMMUNITY HEALTH ;

---Health officer for Hood River county for 12 years;

---member, national Board of trustees, American hospital Association;

—-founding member of the Oregon Health Services Commission developing prioritized list for OHP rollout;

—-National Ombudswoman on Farmworker Health to the Deputy Director of the Bureau of Primary Health Care (HRSA);

---primary care physician in the Dalles, Hood River, and White Salmon for over 25 years;

---Medical Director of Hospice of The Gorge 10 years;

---Senior Fellow and Affiliate Faculty roles, resp., at OHSU and Providence ethics centers.

### 4. Subject: MCMC

#### Received 1/27/23

Sir,

I think the CEO of MCMC needs to leave and his wife. I prefer OHSU, but, I'm sure Adventist would do just fine.

Lorna Elliott, The Dalles, OR.

#### 5. Subject: MCMC

#### Received 1/28/23

I'm not knowledgeable about the technicalities of running a medical facility so whoever takes the reins at MCMC I hope they take many things into consideration—

I've lived in The Dalles for six years and during that time I've had the same PCP who is a great provider. However, I've needed to see specialists and they come to the area but don't stay. Please recruit good doctors and support them so we can establish a good relationship with them and keep them here so people don't have to travel to Gresham or Portland for medical services.

Based on the number of older adults in our community the provider pool of experts available to address the health needs is inadequate. Our older adults need the expertise of a certified gerontologist to complement the work of the two nurse practitioners in the area. Please hire professionals who are skilled to tend to the unique needs of a growing population of older adults in our region.

The Waters Edge facility was another valuable resource for older adults and its recent closure is very unfortunate. Marketing that resource and helping older adults get transportation to and from that location would make it a better utilized resource for the community. For those of us who work, making it accessible before and after work hours would make it even more viable for us. Please revitalize the Waters Edge fitness center resource for our community.

In the six years that I've lived here there have been so many fluctuations to the operations of MCMC (bringing in OHSU and then severing those ties, new doctors that come and go so quickly) has been an embarrassing experience for our community. Please bring in a well balanced and professionally run operation so that when people are vulnerable and need medical assistance they have reliable and trustworthy services when they need them.

There has been talk of MCMC building a new hospital where it might be more easily accessible than the current one. That does make sense and seems necessary, however, I would ask that you please first build a strong foundation as a healthy and viable professional organization within the community, establish trust with the people of our community before beginning to build a physical structure.

Thank you for this opportunity to share my concerns.

Tama Bolton, MEd, Cert. in Gerontology

#### 6. Subject: purchase of MCMC

#### Received 1/28/23

One of my concerns would be doctors leaving if they don't feel they are getting the support they need. That has been a problem for some time now at MCMC and some clinics are down to just one or two MDs. Also, I would hope that Adventist would be more forthcoming that MCMC has been the past few years about the causes of problems. There has been too much bureaucratic speak and not enough leveling with patients. Except for management the past few years, MCMC has always been a high quality hospital that provides excellent care and I think that maintaining that level, or even raising it, should be a priority of Adventist.

Mark Ward

#### 7. Subject: Adventist and MCMC Merger

#### Received 1/30/23

As a nurse and long time community member, I am in support of the merger of the two organizations.

Thank you,

Amy Schanno-Sugg, RN, CCM Mid Columbia Medical Center Director of Case Management

# 8. Subject: Merger

#### Received 1/31/23

Undoubtedly there has been serious thought to determine why medical staff is unwilling to work for MCMC. What reasons are given by personnel during extensive exit interviews? During my brief work experience at MCMC in 2010, rules were rigid, and used as weaponry. Independent problem solving was not tolerated. I had a much better work experience at Klickitat Hospital.

### 9. Subject: MCMC

#### Received 1/31/23

Thank you for gathering input from community members. MCMC has a history of losing doctors and other staff, which has been a detriment to our community. They are or have closed specialty clinics in Hood River, the chemo center at Celilo, and a large part of Water's Edge Including the cardiology clinic. Our communities deserve local care.

Many community members have been without access to a primary care doctor for 2-3 years, specialty clinics have closed or have a long wait. My husband and I have been personally affected.

We've lost our PCP and have no one to get care from. My daughter, referred to dermatology, had to wait 6 m for an appointment, just a week before her appointment it got rescheduled , another 4 month wait, then canceled because the provider left. She never saw the dermatologist. A family friend was hospitalized with a blood clot (after having heart surgery the year before). They were told he needed to see a doctor within 1 week of discharge, they called all the local offices but no one would see him. They're in their 80's and had to travel out of town to find a doctor. Friends in Sherman county drive 2 hours to Hood River for primary care. Families in The Dalles drive to Gresham or Portland for primary care because they want to see the same doctor for more than a year..One family drives all the way to HIIIsboro to see the cardiologist. A real tragedy is that many families and older citizens can't afford that luxury. They can't drive that far, get the time off work to drive those distances, their kids miss a whole day of school or their insurance won't cover it. There are kids with complex health needs that are without a primary doctor here so they go to OHSU's urgent care/ER for ear infections and flu symptoms.

Our communities deserve access to local health care. These stories are representative of what's been going on for years. I don't know if Adventist is the answer, if they can elicit the changes needed in our community, but we need a change. We need better access to local quality health care across the lifespan than we've been able to get through MCMC as a stand alone facility. Thank you again for gathering input and considering our rural health needs.

Lori Treichel

The Dalles, OR

### 10. Subject: MCMC and Adventist

#### Received 1/31/23

To the Oregon Health Authority,

I oppose the acquisition of Mid-Columbia Medical Center (MCMC) by Adventist Health. This deal would ensure that the only two hospital systems in the area would be faith-based. There are many people in our community (LGBTQIA2S+, BIPOC, those accessing reproductive healthcare, those accessing end-of-life care) who feel uncomfortable or even unsafe in Christian/Catholic faith-based settings and deserve to have access to a secular option for healthcare. If this deal goes through, the closest secular hospital option would be over an hour's drive on a highway that is subject to seasonal road closures. This is not an accessible alternative. In a community in which resources are already in short supply, further limitations would only create more hardship.

In a time of great division, I hope you will stand on the side of inclusion and health promotion for our communities with the least amount of access. I strongly urge OHA to not move forward with this deal as it would ultimately harm our community.

Signed,

Kit Clasen pronouns: they/them/theirs Pride Alliance Drop-in Support

# 11. Subject: Concerns about MCMC Acquisition *Received 1/31/23*

To the Oregon Health Authority,

I oppose the acquisition of Mid-Columbia Medical Center (MCMC) by Adventist Health. This deal would ensure that the only two hospital systems in the area would be faith-based. There are many people in our community (LGBTQIA2S+, BIPOC, those accessing reproductive healthcare, those accessing end-of-life care) who feel uncomfortable or even unsafe in Christian/Catholic faith-based settings and deserve to have access to a secular option for healthcare. If this deal goes through, the closest secular hospital option would be over an hour's drive on a highway that is subject to seasonal road closures. This is not an accessible alternative. In a community in which resources are already in short supply, further limitations would only create more hardship.

In a time of great division, I hope you will stand on the side of inclusion and health promotion for our communities with the least amount of access. I strongly urge OHA to not move forward with this deal as it would ultimately harm our community.

Signed,

Dan Clasen

#### 12. Subject: MCMC

Received 1/31/23

To the Oregon Health Authority,

I oppose the acquisition of Mid-Columbia Medical Center (MCMC) by Adventist Health. This deal would ensure that the only two hospital systems in the area would be faith-based. There are many people in our community (LGBTQIA2S+, BIPOC, those accessing reproductive healthcare, those accessing end-of-life care) who feel uncomfortable or even unsafe in Christian/Catholic faith-based settings and deserve to have access to a secular option for healthcare. If this deal goes through, the closest secular hospital option would be over an hour's drive on a highway that is subject to seasonal road closures. This is not an accessible alternative. In a community in which resources are already in short supply, further limitations would only create more hardship.

In a time of great division, I hope you will stand on the side of inclusion and health promotion for our communities with the least amount of access. I strongly urge OHA to not move forward with this deal as it would ultimately harm our community.

Signed,

Fiona Dunlop

### 13. Subject: MCMC Comment

#### Received 2/1/2023

To whom it may concern,

I oppose the acquisition of Mid-Columbia Medical Center (MCMC) by Adventist Health. This deal would ensure that the only two hospital systems in the area would be faith-based. There are many people in our community (LGBTQIA2S+, BIPOC, those accessing reproductive healthcare, those accessing end-of-life care) who feel uncomfortable or even unsafe in Christian/Catholic faith-based settings and deserve to have access to a secular option for healthcare. If this deal goes through, the closest secular hospital option would be over an hour's drive on a highway that is subject to seasonal road closures. This is not an accessible alternative. In a community in which resources are already in short supply, further limitations would only create more hardship.

I am an atheist, and I have a teenager who is transgender. We have received excellent nonjudgmental and gender-affirming care at MCMC, including during an emergent health situation when we were feeling scared. It really helped put us at ease when the staff used my son's correct pronouns and treated him with kindness, sensitivity, and respect from the start.

In a time of great division, I hope you will stand on the side of inclusion and health promotion for our communities with the least amount of access. I strongly urge OHA to not move forward with this deal.

Thank you,

Marisa Cieloha

# 14. Subject: MCMC acquisition *Received 2/1/2023*

To the Oregon Health Authority,

I oppose the acquisition of Mid-Columbia Medical Center (MCMC) by Adventist Health. This deal would ensure that the only two hospital systems in the area would be faith-based. There are many people in our community (LGBTQIA2S+, BIPOC, those accessing reproductive healthcare, those accessing end-of-life care) who feel uncomfortable or even unsafe in Christian/Catholic faith-based settings and deserve to have access to a secular option for healthcare. If this deal goes through, the closest secular hospital option would be over an hour's drive on a highway that is subject to seasonal road closures. This is not an accessible alternative. In a community in which resources are already in short supply, further limitations would only create more hardship.

In a time of great division, I hope you will stand on the side of inclusion and health promotion for our communities with the least amount of access. I strongly urge OHA to not move forward with this deal as it would ultimately harm our community.

Signed,

Britani Stratton

# **15**. Subject: Oppose the Acquisition of MCMC *Received 2/1/2023*

To the Oregon Health Authority,

I oppose the acquisition of Mid-Columbia Medical Center (MCMC) by Adventist Health. This deal would ensure that the only two hospital systems in the area would be faith-based. There are many people in our community (LGBTQIA2S+, BIPOC, those accessing reproductive healthcare, those accessing end-of-life care) who feel uncomfortable or even unsafe in Christian/Catholic faith-based settings and deserve to have access to a secular option for healthcare. If this deal goes through, the closest secular hospital option would be over an hour's drive on a highway that is subject to seasonal road closures. This is not an accessible alternative. In a community in which resources are already in short supply, further limitations would only create more hardship.

In a time of great division, I hope you will stand on the side of inclusion and health promotion for our communities with the least amount of access. I strongly urge OHA to not move forward with this deal as it would ultimately harm our community.

Signed,

Jennifer Twohig

# 16. Subject: MCMC Adventist deal

Received 2/1/2023

To the Oregon Health Authority,

I oppose the acquisition of Mid-Columbia Medical Center (MCMC) by Adventist Health. This deal would ensure that the only two hospital systems in the area would be faith-based. There are many people in our community (LGBTQIA2S+, BIPOC, those accessing reproductive healthcare, those accessing end-of-life care) who feel uncomfortable or even unsafe in Christian/Catholic faith-based settings and deserve to have access to a secular option for healthcare. If this deal goes through, the closest secular hospital option would be over an hour's drive on a highway that is subject to seasonal road closures. This is not an accessible alternative. In a community in which resources are already in short supply, further limitations would only create more hardship.

In a time of great division, I hope you will stand on the side of inclusion and health promotion for our communities with the least amount of access. I strongly urge OHA to not move forward with this deal as it would ultimately harm our community.

Signed,

Kalah Hanken-Follett

# 17. Subject: Against the MCMC/Adventist Acquisition *Received 2/1/2023*

#### Dear OHA,

I'm writing today to voice strong opposition to the acquisition of Mid-Columbia Medical Center by Adventist Health. This deal would result in one area only having faith-based hospitals for care. Faith-based hospitals are not equitable and accessible to everyone, and quite often pose threats to the rights of those who do not share the same faith. I'm particularly concerned about LGBTQIA2S+ folks, those accessing reproductive healthcare, and those accessing end-of-life care.

I know that I personally would not feel comfortable in a Christian/Catholic hospital, and I would have to delay care or forgo it entirely to preserve my safety and wellbeing if faith-based care was my only option. People in this service area deserve to have access to a secular option. It is inequitable otherwise. We cannot rely on contractual promises of equitable service -- notes on paper only go so far and many of us cannot bear the risks of a system that does not keep its promise. There is no trust here, it is a non-starter.

If the deal goes through, the closest secular hospital option would be over an hour's drive on a highway that is subject to seasonal road closures -- not an accessible option. In a community in which resources are already in short supply, more limitations only create hardship.

I hope that you will stand on the side of inclusion and health promotion for our communities with the least amount of access. I **strongly** urge OHA not to move forward with the deal as it will ultimately harm our community.

Thank you,

Kris Bifulco

## 18. Subject: MCMC LETTER

Received 2/1/2023

To the Oregon Health Authority,

I oppose the acquisition of Mid-Columbia Medical Center (MCMC) by Adventist Health. This deal would ensure that the only two hospital systems in the area would be faith-based. There are many people in our community (LGBTQIA2S+, BIPOC, those accessing reproductive healthcare, those accessing end-of-life care) who feel uncomfortable or even unsafe in Christian/Catholic faith-based settings and deserve to have access to a secular option for healthcare. If this deal goes through, the closest secular hospital option would be over an hour's drive on a highway that is subject to seasonal road closures. This is not an accessible alternative. In a community in which resources are already in short supply, further limitations would only create more hardship.

In a time of great division, I hope you will stand on the side of inclusion and health promotion for our communities with the least amount of access. I strongly urge OHA to not move forward with this deal as it would ultimately harm our community.

Signed, Julio

### 19. Subject: MCM/Adventist

Received 2/1/2023

To the Oregon Health Authority,

I oppose the acquisition of Mid-Columbia Medical Center (MCMC) by Adventist Health. This deal would ensure that the only two hospital systems in the area would be faith-based. There are many people in our community (LGBTQIA2S+, BIPOC, those accessing reproductive healthcare, those accessing end-of-life care) who feel uncomfortable or even unsafe in Christian/Catholic faith-based settings and deserve to have access to a secular option for healthcare. If this deal goes through, the closest secular hospital option would be over an hour's drive on a highway that is subject to seasonal road closures. This is not an accessible alternative. In a community in which resources are already in short supply, further limitations would only create more hardship.

In a time of great division, I hope you will stand on the side of inclusion and health promotion for our communities with the least amount of access. I strongly urge OHA to not move forward with this deal as it would ultimately harm our community.

Signed,

Jamilah Allen

# 20. Subject: MCMC acquisition opposition *Received 2/1/2023*

To the Oregon Health Authority,

I oppose the acquisition of Mid-Columbia Medical Center (MCMC) by Adventist Health. This deal would ensure that the only two hospital systems in the area would be faith-based. There are many people in our community (LGBTQIA2S+, BIPOC, those accessing reproductive healthcare, those accessing end-of-life care) who feel uncomfortable or even unsafe in Christian/Catholic faith-based settings and deserve to have access to a secular option for healthcare. If this deal goes through, the closest secular hospital option would be over an hour's drive on a highway that is subject to seasonal road closures. This is not an accessible alternative. In a community in which resources are already in short supply, further limitations would only create more hardship.

In a time of great division, I hope you will stand on the side of inclusion and health promotion for our communities with the least amount of access. I strongly urge OHA to not move forward with this deal as it would ultimately harm our community.

Signed,

Maggie Converse, she/her

#### 21. Subject: MCMC-Adventist purchase

#### Received 2/1/2023

I am a Family Physician who lives in The Dalles writing with several concerns about the proposed Adventist / MCMC purchase. I am one of 17 clinicians (Physicians, Physician Assistants and a Nurse Practitioner) who left MCMC over the past three years due to unheeded patient safety concerns and a hostile work environment. Currently, the MCMC board is appointed by the CEO, which is not publicly accountable. My concern is the purchase by Adventist will compound these issues.

Access: Historically, MCMC has been an option for patients seeking care at a non-religiously affiliated hospital. The Adventist purchase of MCMC would limit this option for community members, since the next nearest hospital is Providence Hood River hospital, also part of a religiously affiliated health system. Community members are concerned about a restriction in full spectrum women's health services among other impacts.

Local Accountability: The current need is for the hospital board to connect and engage the local community. A distant, corporately appointed board with only a community appointed advisory board will not bring the responsiveness to the local community that is needed here.

Sensitivity and responsiveness to marginalized members of this community: In Wasco County, 36% of the residents have Medicaid. The Columbia Gorge Health Council which oversees the local CCO has made heroic efforts to reach out and serve this population. Recently, MCMC has stopped participating in community-based efforts to improve social supports for this population citing "low return on investments". I am concerned that a distant governance board may be even more removed from the needs of the most vulnerable, and often voiceless in our community.

The Dalles needs a strong local hospital. It should provide access that is safe and responsive to the needs of the whole community. Allowing a purchase and monopoly by a large, distant, corporate institution moves us away from that ideal.

Sincerely,

Judy Richardson, MD, MBA

The Dalles, Oregon

### 22. Subject: MCMC affiliated w Adventist

#### Received 2/1/2023

I am for Adventist health joining Mcmc.... We are in need of a good medical facility and with the larger corporation I would hope they would be able to fit that need.... It's been over a year since I have had a PCP and our services are going downhill fast... it is different to travel to Portland for our care... Hope this helps with your decision

Cheryl Richardson

# 23. Subject: Adventist purchasing MCMC *Received 2/1/2023*

Oregon Health Authority,

I oppose the acquisition of Mid-Columbia Medical Center (MCMC) by Adventist Health. This deal would ensure that the only two hospital systems in the area would be faith-based. There are many people in our community (LGBTQIA2S+, BIPOC, those accessing reproductive healthcare, those accessing end-of-life care) who feel uncomfortable or even unsafe in Christian/Catholic faith-based settings and deserve to have access to a secular option for healthcare. If this deal goes through, the closest secular hospital option would be over an hour's drive on a highway that is subject to seasonal road closures. This is not an accessible alternative. In a community in which resources are already in short supply, further limitations would only create more hardship.

In a time of great division, I hope you will stand on the side of inclusion and health promotion for our communities with the least amount of access. I strongly urge OHA to not move forward with this deal as it would ultimately harm our community.

Signed,

Shannon O'Brien

# 24. Subject: Mid-Columbia Medical Center (MCMC) by Adventist Health *Received 2/1/2023*

To the Oregon Health Authority,

I oppose the acquisition of Mid-Columbia Medical Center (MCMC) by Adventist Health. This deal would ensure that the only two hospital systems in the area would be faith-based. There are many people in our community (LGBTQIA2S+, BIPOC, those accessing reproductive healthcare, those accessing end-of-life care) who feel uncomfortable or even unsafe in Christian/Catholic faith-based settings and deserve to have access to a secular option for healthcare. If this deal goes through, the closest secular hospital option would be over an hour's drive on a highway that is subject to seasonal road closures. This is not an accessible alternative. In a community in which resources are already in short supply, further limitations would only create more hardship.

In a time of great division, I hope you will stand on the side of inclusion and health promotion for our communities with the least amount of access. I strongly urge OHA to not move forward with this deal as it would ultimately harm our community.

In addition, I am friends with some of the doctors at MCMC who also oppose this acquisition.

Thank you,

Stacy Rust

### 25. Subject: Adventist Purchasing MCMC

#### Received 2/2/2023

MCMC currently operates health facilities in the Columbia Gorge areas. Adventist has full understanding of how to provide health services in rural communities. I am hopeful you will approve Adventist to purchase MCMC as soon as possible. This region needs good health care for all of our citizens and includes some Washington communities along the Columbia River. MCMC has now announced they will close their Celilo Cancer Center effective 2/28. The patients will not have access to their treatments as well as future patients needing care. Current patients will be forced to seek out other providers, most likely in Portland which is a 159 mile round trip which will be very difficult. There is no assurances they will be able to find care as most of these facilities are booked months in advance. Once again we are getting desperate to find any type of health care in this area. We need your help quickly in order to finalize the Adventist purchase.

Thank you,

Tom Elledge

# 26. Subject: Comment on Adventist becoming owner of MCMC *Received 2/2/2023*

I wholeheartedly support Adventist Health becoming new owner of MCMC. The dwindling availability of physicians in this area has been a troubling development for over a year. I am still waiting to be notified of who my new primary care provider will be to replace the one that left a year ago. One can't help but think the resources of Adventist will be a positive for overall health services here. Thank you for considering this input.

Steve Caldwell

#### 27. Subject: (no subject)

Received 2/2/2023

Something needs to change. We have no doctors. Anything would be better.

#### 28. Subject: Mid-Columbia Medical Center/Portland Adventist *Received 2/2/2023*

As a resident of The Dalles for the past 35 years, I have always been proud of our small community hospital--until Dennis Knox took over. MCMC was voted one of the best places to work in Oregon repeatedly; the PlaneTree library was a wonderful resource for preventative care; the Celilo Cancer Center brought patients throughout the state, and the Watersedge Wellness Center was an amazing place that marketed specifically to learning to age well in place--with an emphasis on preventative health. Prior to Mr. Knox, all administrators lived in our community and schooled

their children here. Mr. Knox commutes from Portland. He severed ties with OHSU. In March of 2022 my husband and I met with him to try to understand why we were losing so many primary care providers and why he had decided to work with Portland Adventist instead--was it because his wife is their chief financial officer? We now have NO primary care providers in The Dalles who live here permanently. Instead, we are staffed with Nurse Practitioners and Physician Assistants. All other staff rotate through on a traveling basis. One of the first things he did was limit the size of the workout areas at Watersedge so that he could put in an Urgent Care Center which has yet to operate seven days a week because he cannot staff it. Next, he closed down the Plane Tree library. The end of December saw the final closing of

the Watersedge Wellness Center. Last week we learned that Celilo would no longer provide treatment. Dennis Knox will assure that all of these problems are because of the pandemic--but strangely all of the primary care providers are working--they are just working elsewhere. I would be in favor of this merger if we could return to the model of primary care providers who build relationships with their patients. However, I would strongly suggest that if this merger occurs, Dennis Knox retire to live in the new home he is building in Portland and that we try, once again, to return to a community hospital model.

Thank you.

Mary Beth Thouvenel.

# 29. Subject: Adventist purchase of MCMC *Received 2/2/2023*

To whom it may concern:

One of my concerns would be that Medicare and Blue Cross, along with other insurance companies to be accepted for services. And that quality of care would be equal or better.

Thank you! Kathee A Clark

#### 30. Subject: Adventist Health and MCMC

#### Received 2/2/2023

I'm writing my thoughts of the upcoming purchase of Mid Columbia Medical Center by Adventist Health.

1/ Will the Adventist religious views have a heavy influence on how the medical staff dispenses their medical services.

2/ Since the hiring of MCMC's current administrator's, did his wife's position at Adventist Health influence the current plan?

3/ Will Adventist Health restore oncology services at Celilo Cancer center?

4/ Will Water's Edge gym reopen?

5/ I would like more transparency by Adventist Health and MCMC about their decision making process upfront instead an abundance of gossip.

Thank you.

Jayne Guidinger

### 31. Subject: MCMC

Received 2/2/2023

To the Oregon Health Authority,

I oppose the acquisition of Mid-Columbia Medical Center (MCMC) by Adventist Health. This deal would ensure that the only two hospital systems in the area would be faith-based. There are many people in our community (LGBTQIA2S+, BIPOC, those accessing reproductive healthcare, those accessing end-of-life care) who feel uncomfortable or even unsafe in Christian/Catholic faith-based settings and deserve to have access to a secular option for healthcare. If this deal goes through, the closest secular hospital option would be over an hour's drive on a highway that is subject to seasonal road closures. This is not an accessible alternative. In a community in which resources are already in short supply, further limitations would only create more hardship.

In a time of great division, I hope you will stand on the side of inclusion and health promotion for our communities with the least amount of access. I strongly urge OHA to not move forward with this deal as it would ultimately harm our community.

Signed,

Katherine Owenswood

# 32. Subject: I oppose the acquisition of Mid-Columbia Medical Center (MCMC) by Adventist Health

#### Received 2/2/2023

To the Oregon Health Authority,

I oppose the acquisition of Mid-Columbia Medical Center (MCMC) by Adventist Health. This deal would ensure that the only two hospital systems in the area would be faith-based. There are many people in our community (LGBTQIA2S+, BIPOC, those accessing reproductive healthcare, those accessing end-of-life care) who feel uncomfortable or even unsafe in Christian/Catholic faith-based settings and deserve to have access to a secular option for healthcare. If this deal goes through, the closest secular hospital option would be over an hour's drive on a highway that is subject to seasonal road closures. This is not an accessible alternative. In a community in which resources are already in short supply, further limitations would only create more hardship.

In a time of great division, I hope you will stand on the side of inclusion and health promotion for our communities with the least amount of access. I strongly urge OHA to not move forward with this deal as it would ultimately harm our community.

Signed,

Amirra Malak

#### 33. Subject: MCMC/Adventist

#### Received 2/2/2023

Healthcare is very much needed in this small rural community of The Dalles, Oregon. We are suffering from lack of local services due to small hospitals not being able to keep up with the ever more expensive costs of providing care. We are a rural hub for surrounding populations that depend and need access to healthcare without driving hours to get care. We have an aging community that makes travel not possible to big cities. We need to bring back some services that have been lost or cut back due to financial constraints, staffing and ability to expand to serve the community. Our community is desperate for local healthcare. Most of our community does not have local primary care providers, due to provider and management disagreements that could not be resolved. Patients have had to take their general care to Hood River and White Salmon providers and Portland providers. They are overwhelmed with the patient load and that is pushing their patients care out and affecting their care.

Financially this hospital has tried for many, many years to do the right thing and expand and bring in specialty care. We have a award winning cancer center that is our gold standard of care and we are very proud of. But due to ability to staff with oncologists we are closing this service the end of Feb 2023. They hope to being it back, but currently they cannot afford locums and there are providers that will not work at MCMC, due to current administration and how they treat and have treated previous providers. This also goes for nurses and other positions.

Our community needs a fresh start, with a supporting larger organization that wants to bring back healthcare to our area. We need to build back our healthcare services to serve our community and surrounding communities. we need to build back trust in the community and MCMC needs to have the investment of a hospital system that can keep healthcare alive in our area.

I have worked for MCMC for many years and have seen the ups and downs, but the last few years have been devastating to our patients and employees. Covid did not help our situation, but still feel that we cannot survive on our own and the people who would pay price, is our patients and employees. This is already affecting cancer patients and some will likely die because we cannot get out of this, without help. I am completely heartbroken about our medical oncology dept closing and now we have sick, elderly and financially vulnerable people having to go to portland for treatments. That is not how we should be taking care of our most medically fragile patients.

We need new management with a fresh set of values and reality, which is to NOT build a new hospital, but to focus on providers and patient care and enhance what we already have. We need management that cares and puts patient care first, which we do not have now. I believe that Adventist can do that. Yes, they are a business but they also are successful at what they do and have the resources to help do it right.

Employees turnover is rampant, due to two main factors- executive management and poor pay/benefits. We have been run into the ground with not replacing people who leave when desperately needed. We also realize there are global healthcare shortages, but there are some issues with MCMC that are self created and will not go away without change. We want our

community to come back to us and economically we are the largest employer in the area, so there are many other trickle down effects if MCMC is not allowed to be purchased by an larger more stable healthcare organization.

There are a few legacy employees that are still here after all these years, because we don't want to leave our community hanging and want to do the best we can for them. We want to see our patients again. We have healthcare providers that still live here, but have left to work for other employers and won't try to come back until something is done. We are a small community and we all know each other and know that all of us want healthcare for our community to be available again, but with a better support system and resources to keep doing it for many years to come.

Please approve this venture, so we can care for our patients again.

Thank you for listening,

Annali Cross

### 34. Subject: MCMC merger with Adventist

#### Received 2/2/2023

I am 76 years old and have lived in The Dalles most of my life. I had my babies at MCMC and spent a few nights there and have had many medical tests at MCMC. I have had excellent care in all instances and events in my dealings with MCMC and all of the medical staff I have come in contact with over the years. I haven't had a lot of illnesses until the last few years where I have been diagnosed with Afib, lung disease, Trigeminal Neuralgia, and am now dealing with constant headaches.

It is so horrible what is happening to our wonderful medical system in The Dalles these last few years with doctors, nurses and other medical staff leaving MCMC on a regular basis. It is not only sad but is also terrifying. My husband and I have lost many doctors who we trusted in the last few years. I have had many appointments in the last year and a half and am terrified that it will not be available to me here in The Dalles. We are to the age where we are needing the medical profession more than ever before. We know people locally who need the medical profession even more than we do. We haven't needed the Celilo Center personally but have felt comforted that it was there if we do need it some day. We know so many people who have had cancer and our hearts go out to those who will no longer have the wonderful care they have received there.

I sincerely encourage OHA of Oregon to merge Mid-Columbia Medical Center with Adventist Health to keep this hospital in The Dalles. It is desperately needed not only for people of The Dalles but for so many people from our surrounding communities.

Thank you for your consideration in this matter.

Sincerely,

Diana Compton

### 35. Subject: MCMC

Received 2/3/2023

To whom it may concern

I fully support Adventist Health and MCMC merger!

Respectfully,

Dawn OpBroek RN BSN CEN Interim Director of Emergency Services, Nursing Resources & Security Mid Columbia Medical Center

# 36. Subject: Merger between Adventist and Mid-Columbia Medial Center *Received 2/3/2023*

Good Evening,

I wanted to take a moment to share my thoughts on the proposed merger between Adventist and Mid-Columbia Medical Center (MCMC).

I have been an RN for over 20 years. Though budgets have often been tight, I have never seen such a wide-spread/systemic struggle. Large and small organizations struggle to keep doors open, keep staff paid, and ensure we will be there when our patients need us. I have spoken with health care professionals from other hospitals and clinics. The problems are universal. Resources are more scarce than they have ever been in my time as a nurse (the capital to keep operations going, provider shortages, nursing staff shortages, and other staffing shortages).

Now is a time when systems MUST band together and pool their resources. Small organizations like ours need the help of systems like Adventist to continue to provide critically important health care services to our community and the surrounding rural communities/counties.

I hope you will see how vitally important this merger is to the health and wellbeing of our community. Please do not delay it's approval. We trust the process and we are counting on the OHA.

Thank you for your time.

Sincerely, Kyna Sears

### 37. Subject: MCMC/Adventist Health

#### Received 2/4/2023

I am in favor of the merger. Hospitals in small towns struggle to get specialists, as evidenced by the recent announcement that the local cancer center in The Dalles will soon discontinue some of it's services. An affiliation with a larger hospital group will hopefully bring some specialists into the area, even if on a limited basis. It's very tough to have to drive to Portland for health care.

Dale Sue McDowell

## Subject: Urgent Request – Please approve the affiliation agreement between MCMC and Adventist Hospitals as soon as possible

#### Received 2/6/2023

Please move quickly to approve the affiliation between Adventist and MCMC

Time is of the essence. While we are "only 90 minutes" away from the Portland metro area ... we are still rural. Because we are rural, we suffer huge inequities in health care. It's easy not to know that The Dalles is actually the hub for a bi-state area known as the Columbia River Gorge that currently serves 7 counties: Wasco, Wheeler, Sherman, Gilliam, Hood River, Klickitat and Skamania ... over 10,000 square miles of mostly rocks and sage brush.

But there are people here that count on having a rural health center. Many drive hours to get to MCMC and it's disheartening to have to add on to that travel a journey through the Cascade Mountain Range to Portland.

Primary Care is essentially non-existent right now. Both my youngest son and wife found out they have cancer late because of limited care. Initially we had to go to Portland, but what a blessing it was to be able to get most of the treatments "locally" at MCMC. Now we're informed there are no oncologists available ... and the closest is now Yakima or Portland. This is urgent by any measure ... good people are needlessly suffering and in many cases ... dying because of inadequate available care.

At some point, my words are just additional noise. Yes ... I can seek care in Portland but like many ... I'm older and tired ... very tired. I urge you to make the decision quickly. Please feel free to contact me. I'd be happy to share with you why we need this lifeline of care and hope ... sooner than later.

Thank you for reading this far. Here's an OPB/NPR audio story on the state of rural hospitals. It's about 10-12 minutes long and worth a listen if you have time. I don't think there will be any surprises for you in this recording  $\bigcirc$ 

http://www.wnycstudios.org/story/rural-hospitals-are-still-

struggling/ (http://www.wnycstudios.org/story/rural-hospitals-are-still-struggling/)

Warm regards,

Frank

### 39. Subject: MCMC

#### Received 2/6/2023

I support the Adventist MCMC deal as I feel it will provide better access to healthcare and resources in the challenging COVID healthcare times. With the national challenges surrounding all industry especially healthcare with staffing, recruitment, burnout, etc. small independent rural hospitals are struggling. Having an affiliation with a larger organization is better in today's new normal.

Thank you,

Jennifer

#### 40. Subject: Adventist-MCMC acquisition

#### Received 2/6/2023

It is clear that under the current leadership it is frustrating to work at MCMC. Dozens of staff have left in the past few years and many to other health care entities. Now the same leadership has initiated the acquisition of MCMC by Adventist. Time will tell if this helps the hospital and its community or not. I hope the state will have some oversight of what changes are implemented and that the current leadership is replaced.

Joanne Ward

#### 41. Subject: MCMC

#### Received 2/7/2023

To whom it may concern:

I am a relatively new employee to MCMC and arrived in the midst of COVID. Healthcare all over has been hit hard during COVID and much harder in rural communities. Having grown up in areas where there is very little access to healthcare I have been thankful for what we do have in The Dalles. With this merger I feel that we can continue to have the access to healthcare that we need and hopefully open back up what we have lost the last couple of years. We need a bigger pool of providers that a larger organization can afford us.

I fully support this merger and hope that all will see the positive in this merger as well.

Chris

### 42. Subject: MCMC and Adventist

Received 2/7/2023

To the Oregon Health Authority,

I oppose the acquisition of Mid-Columbia Medical Center (MCMC) by Adventist Health. This deal would ensure that the only two hospital systems in the area would be faith-based. There are many people in our community (LGBTQIA2S+, BIPOC, those accessing reproductive healthcare, those accessing end-of-life care) who feel uncomfortable or even unsafe in Christian/Catholic faith-based settings and deserve to have access to a secular option for healthcare. If this deal goes through, the closest secular hospital option would be over an hour's drive on a highway that is subject to seasonal road closures. This is not an accessible alternative. In a community in which resources are already in short supply, further limitations would only create more hardship.

In a time of great division, I hope you will stand on the side of inclusion and health promotion for our communities with the least amount of access. I strongly urge OHA to not move forward with this deal as it would ultimately harm our community.

Signed,

Naomi Hill

#### 43. Subject: Adventist & MCMC Partnership *Received 2/7/2023*

To whom it may concern,

I am a current MCMC employee, and am in support of the MCMC and Adventist partnership. I believe that Adventist would help provide the necessary resources to help with recruitment, retention, facility up keep, and so much more. Healthcare is changing on a national level, and to be able to face those challenges, Mid-Columbia Medical Center needs a partnership. As an MCMC employee, I see compassion, love and humanity carried out on a daily basis, and I believe that even more of that will happen with the partnership with Adventist. I wholeheartedly support the partnership between MCMC and Adventist.

Thank you for your time,

Jessica Rodda Medical Staff Coordinator

# 44. Subject: I SUPPORT the partnership between Adventist Health and MCMC *Received 2/7/2023*

I SUPPORT the partnership between Adventist Health and MCMC. I have worked in healthcare for 13 years. The recent pandemic has shaken the foundation of healthcare not only in the United States, but internationally as well. The pandemic is also responsible for the mass exodus of professionals who have left the health care profession permanently short-staffed with not enough people joining the sector to meet the ongoing demand.

Rural healthcare was difficult before the pandemic. The pandemic has layered on many more issues. MCMC and The Gorge would benefit greatly from a partnership with a larger healthcare system. MCMC has served our community for many years and has offered a surprising array of services for a rural provider. With a larger care partner they would be able to keep more patients here in the Gorge from traveling for services. Adventist Health Portland's Northwest Regional Heart and Vascular Center that began practicing at MCMC in 2021 is a nationally recognized program. Adventist currently has two hospitals in Oregon. One of those hospitals is also another rural hospital.

I attended the informational sessions offered by MCMC and Adventist Health. I am an atheist. I was concerned about the prospect of a faith based organization partnering with MCMC. In the informational sessions, the representatives from Adventist were very open in talking about some of the more sensitive topics like abortion. Adventist Health Reps explained although they are religious decisions on reproductive rights are a discussion between a woman and her physician, which leaves women in charge of their own bodies. The Adventist representatives also stated that even though they are a faith inspired nonprofit their faith allows their business to not just be about the bottom line, it's about serving people. They welcome all people, patients, and employees from every walk of life including the LGBTQ+ community. Change is scary and the unknown is even scarier, but I am hopeful that a partnership with Adventist will offer support and bring much needed services to the community members of the Columbia River Gorge region.

Thank you,

Ericka

#### 45. Subject: MCMC

Received 2/7/2023

Hello,

I am a lifelong resident of The Dalles, the home of Mid-Columbia Medical Center. Regarding the purchase of MCMC by Adventist Health, I support the endeavour.

Our local community hospital is failing financially and we have recently seen a reduction in services. I fear that if MCMC is not purchased and integrated into a larger hospital system, like Adventist Health, we will no longer have medical services in The Dalles. We already have a shortage of doctors and other healthcare providers. Having the ability to jointly recruit providers to our area with Adventist is an asset we need.

Adventist intends to invest \$100 million into MCMC. This is something that will take what we have and enhance it, offering better care, close to home for our community.

Again, I support the purchase of MCMC by Adventist Health.

Respectfully,

Amanda Evans The Dalles, Oregon

# 46. Subject: Opposition to acquisition of MCMC *Received 2/7/2023*

To the Oregon Health Authority,

I oppose the acquisition of Mid-Columbia Medical Center (MCMC) by Adventist Health. This deal would ensure that the only two hospital systems in the area would be faith-based. There are many people in our community (LGBTQIA2S+, BIPOC, those accessing reproductive healthcare, those accessing end-of-life care) who feel uncomfortable or even unsafe in Christian/Catholic faith-based settings and deserve to have access to a secular option for healthcare. If this deal goes through, the closest secular hospital option would be over an hour's drive on a highway that is subject to seasonal road closures. This is not an accessible alternative. In a community in which resources are already in short supply, further limitations would only create more hardship.

In a time of great division, I hope you will stand on the side of inclusion and health promotion for our communities with the least amount of access. I strongly urge OHA to not move forward with this deal as it would ultimately harm our community.

Signed,

Abi Loihl

#### 47. Subject: MCMC collaboration feedback Received 2/7/2023

Hi there.

I wanted to express my support for the collaboration. I've worked at MCMC since August of 2017 and have been in numerous nursing / nursing leadership roles in my time here. The Adventist collaboration could not come at a better time, I fully support all aspects of this movement. I believe Dennis Knox has selected / hired the right executive team to take us through this and could not be happier with the culture change that has been happening over the last year or so! The collaboration with Adventist will only add to this positive movement.

Respectfully,

Rhianna Hurff RN BSN Inpatient Director of Nursing Mid Columbia Medical Center

February 9, 2023

### 48. Subject: Comments on acquisition of MCMC

#### Received 2/8/2023

I am not a member of this community but I have relevant past experience with both organizations and many clinicians in this community. I am an Oregonian.

Adventist Health seeks to acquire Mid Columbia Medical Center. Adventist has a well known footprint in Oregon in both metropolitan and rural settings. Its history, financial stability and clinical success are significant and deserve respect.

Mid Columbia Medical Center (MCMC) has sought acquisition offers, and based on their self report, and limited data it appears the community they serve would benefit from acquisition. Some data has been kept confidential but provided to the state of Oregon. Multiple organizations expressed interest in acquiring MCMC.

MCMC has a many decades commitment to a significant "culture" of health care "experience" organized by Planetree. The Planetree logo/brand appears on the MCMC web site and documents from MCMC. Some selected statements from the Planetree web site:

Planetree delivers the leading evidence-based framework for co-designing your roadmap to improved patient and family engagement, better clinical outcomes, increased staff retention and recruitment, and high value care.

We believe that Patient's rights are human rights. In our work we promote respect, inclusion and compassion towards all stakeholders in the healthcare enterprise. Planetree's core philosophy of kindness, caring and respect seeks to help realize and sustain human rights everywhere.

Planetree has a considerable library that provides tools to act on respect, inclusion and compassion related to all vulnerable populations.

The community appears divided on the benefits and risks of this acquisition. Some vulnerable members of the community have expressed significant equity, access and quality concerns. Some community members are concerned about current MCMC leadership/Board and may not be reassured by their retention in the acquisition.

Adventist acknowledges Planetree approaches in a slide in the appendix of the presentation---"Fidelity to Planetree patient-centered ethic of care." No further details are provided. Most of the emphasis in the acquisition is on resources and governance. A slide in the presentation lists Adventist strategies related to access, equity, cost and quality. The Planetree approach is not mentioned nor is any strategy explicitly related to patient experience.

Patient experience is a powerful quality domain and clearly includes elements of equity and access. New facilities, imaging equipment and IT systems may help patient experience, but success will involve much more meaningful cultural and community commitments. Given the long priority at MCMC of Planetree and patient experience it seems the community deserves a more explicit commitment in the acquisition to respect, inclusion and compassion. Culture determines the effectiveness of strategy. It needs to be a higher priority here.

John Santa MD MPH

# 49. Subject: Public Comment From SEIU, CAP & BRO *Received 2/8/2023*

Comment posted separately here.

# 50. Subject: Adventist-MCMC comment submission *Received 2/8/2023*

Comment posted separately here.

# About HCMO

The Health Care Market Oversight program reviews proposed heath care business deals to make sure they support statewide goals related to cost, equity, access, and quality. For more info, you can connect with HCMO staff:

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