

Project Access - a Local Solution

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Access to necessary health care is something many of us take for granted. We get sick - we go to the doctor. Tests are run, procedures are ordered and medications are prescribed. We get the care we need. However, over 835,000 uninsured Washington State residents don't have this option when they become ill. Community health clinics and other safety net clinics do an amazing job of meeting the primary care needs of low income patients, regardless of their insurance status. If a patient has a health care need beyond primary care, the uninsured patient faces many challenges in getting appropriate, timely and cost effective care.

Physicians and health system lead-

ers in seven Washington counties have stepped forward to address this problem with an innovative program called Project Access which builds on the compassion of licensed clinicians and the health systems with which they work. This model makes good business sense. Project Access collaborates with physicians and health system leaders to build a distributed network of charity care. Project Access partners assume that if everyone does a little bit, and contributes what he/she does best, local communities can dramatically change the picture of access to needed health care services for our low income neighbors.

Based on a model initially developed in Asheville, North Carolina, the seven Washington State Project Accesses have common guiding principles, yet each is reflective of their local community's needs.

The Guiding Principles that are the foundation of each Project Access include:

- Health care for the uninsured will be organized and timely
- Physicians commit to participating, and each determines how many patients they will serve in a given time period

- Other services a physician needs will be organized and donated as well
- Patients will show up on time for their appointments and follow their physician's treatment plan – the local Project Access will help the patient understand his/her responsibility in being a good patient
- The local effort must be responsive to the physician's concerns
- Everyone does what they do best – laboratories, imaging centers, ambulatory centers, hospitals and a host of other critical partners support the physician's commitment and provide donated services that the physician needs to treat the patient
- Everyone does their fair share
- Project Access celebrates and recognizes the physician and health care delivery system's generosity

While a network of donated care isn't the long-term solution for the health care system's shortfalls, Project Accesses provide care to patients who can't wait for health care reform – in whatever form it ends

up taking.

Project Accesses have been able to work with patients and health care systems to use limited and valuable charity care effectively and efficiently. As there are no dollars changing hands, Project Accesses have had the opportunity to effect change without consideration of impacting a revenue source for any of our partners. Our goal is to assure that needed labs, imaging and other pre-visit work-up information is available at the time of the initial exam. As an example, Project Access Northwest (serving King and Snohomish counties) interviewed multiple specialists in our highest demand specialties. Through this process, we determined that the community standard of obtaining an MRI for a patient with a problematic knee doesn't meet the need of the orthopedic physician. Weight bearing, plain films are preferred by the physician to make an appropriate diagnosis and provide treatment – and this type of imaging is much less expensive. Not doing unnecessary MRIs created tremendous savings to hospitals that were absorbing the cost of these tests.

Project Accesses are also providing a learning lab for some of the challenges facing all health care systems; using physicians' time effectively, assuring appropriate utilization and managing transitions of care. The typical low income uninsured patient population has a no-show rate of 30% - close to 1/3 of the time, a patient does not show

up for a scheduled appointment. Not only does the patient forgo necessary care, the appointment slot goes unused wasting the provider's time, the office's time and potentially turning away a commercially insured patient. With the attention to case management and patient education related to a patient's responsibility in his/her health care, Project Accesses have a no-show rate that ranges from 1% – 6%. If a physician's practice is willing to donate time and services, it is critical that the appointed patient show up for the appointment.

Project Access makes sure all information is available to the treating clinician, supports the clinician by making necessary follow-up appointments, scheduling procedures, providing interpreters as needed and seeing that documentation on treatment rendered is available to the initial referring clinician. This reduces the burden of uncompensated care on the hospital systems, decreases the amount of charity care that gets mistakenly charged to bad debt and makes it easy for the physician or other local clinicians to provide a discrete amount of charity care in the comfort of his or her own practice.

Project Access was first introduced in Washington State in Spokane, under the auspices of the Spokane County Medical Society. Since then, other Project Accesses have opened in Whatcom, Thurston, Clark, Pierce, King and Snohomish counties. Each has a structure

that makes sense in the particular community, either as part of a local medical society, an independent 501(c)3 or a department in a social service non-profit. Combined, over 2,000 physicians or other licensed clinicians have committed to participating in their local Project Access. By year end 2010 (the year of the most recent data), these dedicated clinicians donated close to one hundred million dollars in care for the low income uninsured in our state. While it may not seem like much for our physicians, hospitals, labs, imaging centers and a myriad of other partners to see one or two new patients per month, thanks to the number of partners that have stepped forward, Project Access is making a huge difference in the health of our local communities.

Sallie Neillie is the Executive Director and Founder of Project Access Northwest which was founded in early 2006 with the help and support of a committed group of individuals. Since its inception, Project Access Northwest has served approximately 12,000 patients from all over King County – and beginning in late 2010, Snohomish County. The specialty care services they received are valued at over \$30 million dollars. Sallie can be reached at 206-788-4204 or sallien@projectaccessnw.org. The organization's web-site is www.projectaccessnw.org and contains contact information for all the Project Accesses in Washington State.

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