



ANNUAL REPORT 2011



Letter from Executive Director and Board President

When you begin an organization like Project Access Northwest, helping uninsured residents of King and Snohomish counties is always the primary goal. Along the way you need to work out challenges like funding, recruiting provider volunteers and finding skilled case managers who make the program work. We're delighted with our success thus far. In 2011, nearly 1100 providers volunteered to care for the 4500 patients who were referred through our program.

The growth in provider volunteers from 115 when the program started in 2006 to more than 1000 in 2011 is testimony that the program is working.

Our provider volunteers consistently praise Project Access case managers for their skills in removing administrative barriers so providers can "do what we do best—see patients." Project Access makes that easier because we handle the scheduling and coordination for the patients. The growth in provider volunteers from 115 when the program started in 2006 to more than 1000 in 2011 is testimony that the program is working. Each year in our annual report, we salute our safety net clinic providers and the specialists who volunteer for the next tier of care.



Zachary Smulski
Board President



Sallie Neillie
Executive Director

Changing lives, one patient at a time

This year, we're fortunate to include stories from two patients in our report. Both **George Woodall** and **James Crawford** are the parents of young children. George became a dad at age 50; James became a dad at age 23. Their needs for specialty care were different, but they shared a common goal: they wanted to enjoy

their young families and be productive members of the community. Project Access Northwest helped that happen. George and James were uninsured and had nowhere to turn for the care they needed, but both of them give credit to Project Access Northwest for “changing my life.”

As we reflect on the challenges facing any health care non-profit organization these days, we keep James’ and George’s words at the forefront. We’re delighted with our growth in provider volunteers and patients served. We’re grateful for the support of donors and sponsors who make this program possible. However, we all know people like George and James for whom health challenges seem insurmountable. This year we dedicate the annual report to the thousands of patients served by Project Access Northwest since we started

in 2006. Changing someone’s life so he can take a walk with his family or see his young daughter’s face in detail is really why we do this work. It’s one of the best reasons for health care—improving the quality of someone’s life. Thank you to the sponsors, donors, volunteer providers, community health centers and Project Access staff who make that happen.



Zachary Smulski, Board President



Sallie Neillie, Executive Director

Mission:

Project Access Northwest collaborates with providers in the health care community to open doors to medical and dental care for individuals with limited access.

Vision:

Everyone in our community will have appropriate access to health care services.

Patient George Woodall takes a big, pain-free step forward

“I’m a real optimist, I always have been,” says **George Woodall**, a Seattle artist and teacher. “When you start a new family at the age of 50, you want to enjoy every moment,” Woodall explains. “I felt like I had a new start when I married Marina and Gretta was born.”

Woodall’s life changed dramatically during a trip to Russia for one of his art shows, when he formed a close friendship with his interpreter, Marina. They married and had a lovely daughter, Gretta. Unfortunately, soon after his daughter was born in 1999, Woodall dropped a board on his left foot. The foot wasn’t broken, but it was painful and didn’t seem to be getting better. Although Woodall has had health insurance off and on over the years, he was uninsured at the time and didn’t know where to go for help. He kept the pain

to himself for several years. When Gretta became old enough to want to run and play with her dad, he realized he couldn’t keep up. He couldn’t join the family on their daily walks; in fact he could hardly stand without pain. It was time to do something.

Through his primary care doctor and Project Access, Woodall was referred to **Gregory Grabowski, DPM**, a specialist in podiatry and reconstructive surgery.

“George had really painful arthritis of the mid-foot,” Dr. Grabowski explains. “We were able to surgically fuse the two arthritic joints. The procedure is not particularly difficult, and George found that his foot felt better even before he started walking on it.”

For Woodall, the surgery felt like a new lease on life. “I’m looking forward to many long years ahead with a happy family life,” he says. “Project Access and Dr. Grabowski made that possible.”



Woodall laughs about a recent walk with his family. “Last weekend I ran up three long flights of stairs at Northgate right in front of my wife and daughter. They were blown away!”

“You become a doctor to help people and improve their quality of life, if possible,” says Dr. Grabowski. “Project Access has made it easier to care for patients like George. By coordinating the appointments and hospital care ahead of time, the administrative challenges of volunteering are eliminated.”

Woodall’s wife has recently completed her teaching certificate and is now teaching in the Seattle School District. The whole family now has health insurance.



Gregory Grabowski, DPM

Podiatry

Swedish Health Services

“You become a doctor to help people and improve their quality of life, if possible...Project Access has made it easier to care for patients like George. By coordinating the appointments and hospital care ahead of time, the administrative challenges of volunteering are eliminated.”

Greg Grabowski, DPM examines George Woodall's foot after surgery. Dr. Grabowski is a volunteer with Project Access Northwest and a specialist in podiatry with a special interest in arthroscopy and reconstructive surgery. He practices at Swedish Medical Center and Overlake Hospital Medical Center.

Patient James Crawford sees a much brighter future

“**F**or the first time, I can see the facial features of my four-year-old daughter,” says **James Crawford**, age 30.

Seven years ago, Crawford started losing his sight.

“It was like looking through a swimming pool,” he explains. “You can see that something is there, but you can’t quite make out what it is or see the details. Everything looks like a big blob.”

Crawford was diagnosed with keratoconus, a degenerative eye disease of the cornea that affects teens and young adults. Eventually his vision deteriorated so much that he could no longer drive and he lost his job.

Through his primary care doctor and Project Access Northwest, Crawford was referred to **Niraj Patel, MD, FACS**, an ophthalmologist at Pacific Medical Centers.

“James’ vision was at the point that glasses or contact lenses no longer worked for him; he needed a cornea transplant,” Dr. Patel explains.

Project Access worked closely with Dr. Patel and with **SightLife**, a non-profit global health organization and eye bank based in Seattle. SightLife agreed to donate the cornea tissue, Dr. Patel donated his medical services and **Seattle Surgery Center** donated the operating facility.

In February 2012, Crawford received a new cornea. His vision has improved so he can see the facial features of his two children; Evan, age 7, and Audrey, age 4.



“Project Access Northwest changed my life. It’s that simple,” said Crawford. “I didn’t think there was any chance that I would ever be able to afford the surgery I needed. Project Access helped remind me of the goodness of people in the world.”

Dr. Patel agrees. “Project Access Northwest is a wonderful safety net program. With the help of the Project Access case managers, the administrative challenges of providing charity care have been eliminated; allowing us to do what we do best, see patients. The yearly growth in provider volunteers is evidence that the program really works.”



Niraj Patel, MD, FACS

Ophthalmology

Pacific Medical Centers

“Project Access Northwest is a wonderful safety net program. With the help of the Project Access case managers, the administrative challenges of providing charity care have been eliminated; allowing us to do what we do best, see patients. The yearly growth in provider volunteers is evidence that the program really works.”

Niraj Patel, MD, FACS and James Crawford discuss the successful surgery that restored Crawford’s eyesight. Dr. Patel is a volunteer with Project Access Northwest and an ophthalmologist at Pacific Medical Centers. He has a special interest in cataract, cornea and vision correction surgery. He has been named one of Seattle’s best doctors in Seattle Magazine or Seattle Met every year since 2005.

“Dental pain is one of the top five reasons for an ER visit..”



Franco Audia, MS, DDS

Oral Surgeon

Bel-Red Oral & Maxillofacial Surgery

“Uninsured patients with severe dental pain often end up at one of the local hospital emergency rooms. These patients can be seen in our safety net clinics, but if they need more complex surgical care, they may need to be seen by an oral surgeon. These patients often have multiple life challenges, and if we can help with just one small part of it... we can help them move on with their lives, whether it’s eliminating pain and infection or getting the dentures they need to help them find a job.”

“You can’t live a normal life without dental care..”



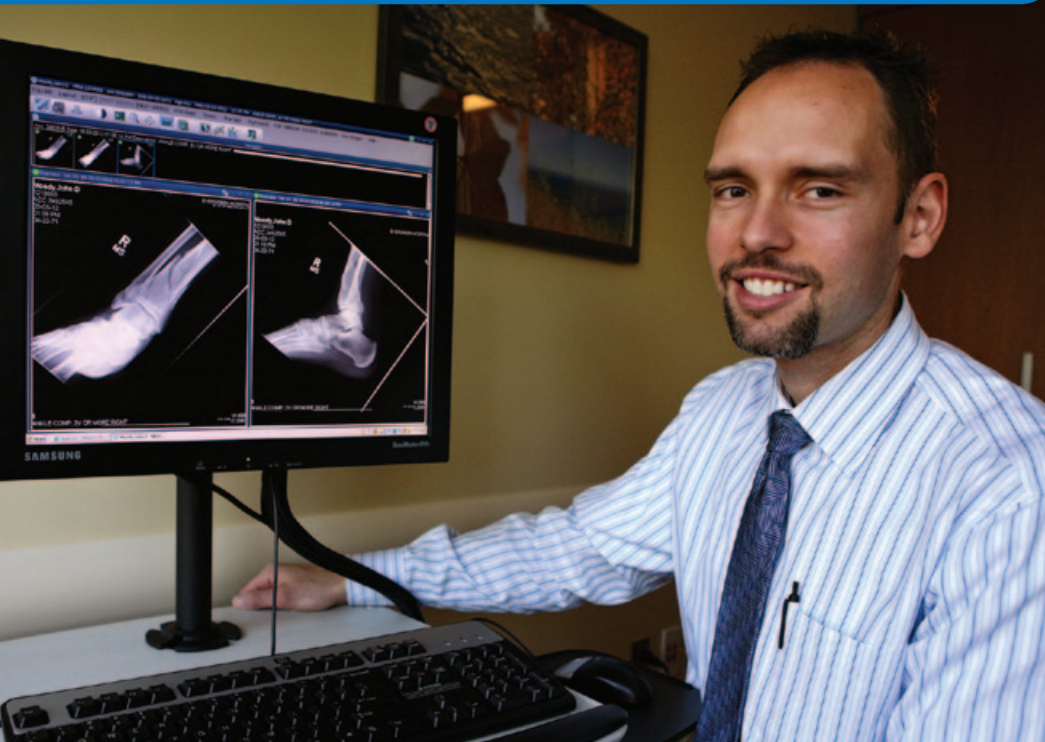
Moffett Burgess, DDS

*Downtown Public Health Center—
Dental Clinic*

“We serve a high-needs homeless population at this clinic. We do as many extractions as we do fillings... In order to get dentures the patient might need oral surgery and bone contouring beyond the scope of our clinic. Without an oral surgeon to provide this specialty dental care... there is nothing we can do for them. Thanks to Project Access Northwest and the volunteer oral surgeons, these patients can get the dental work they need. This can change their lives. You’re more likely to get a job if you’re missing a limb than if you’re missing a front tooth.”

Moffett Burgess, DDS practices dentistry at the Downtown Public Health Center—Dental Clinic, where she provides dental care for homeless teens and adults. Her dental assistant, Jane Crigler (shown in cover photo), coordinates patients’ specialty dentistry needs with Project Access Northwest.

“These are often good people who fell through the cracks..”



Ronald V. Gregush, MD

*Orthopedic/Sports Medicine
Evergreen Orthopedic Clinic*

“Project Access Northwest is a safety net for people who don’t have health insurance... Sometimes they have complex medical histories or acute injuries and they need to have specialty medical care so they can get back to their jobs and their lives. The case managers do an excellent job of coordinating the care these patients need, including physical therapy. It’s rewarding because the vast majority of the time the patients are very thankful that we were able to take care of them.”

“This is where medicine and ethics intersect..”



Robert A Palmer, DO

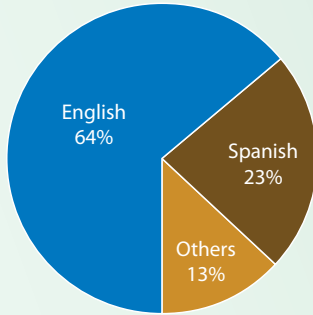
*Gastroenterology and Hepatology
The Everett Clinic*

“Subspecialty care is very difficult to come by if you don’t have insurance... it’s cost-prohibitive. This forces people to make really difficult decisions. I think this is where medicine and ethics intersect. A lot of us are really very interested in trying to alleviate suffering... It’s distressing when you know there are people not getting the care that they need simply because they don’t have the means. Project Access Northwest makes it easy to volunteer. I think the work we do through Project Access has a significant and lasting impact for patients, so it’s well worth it.”

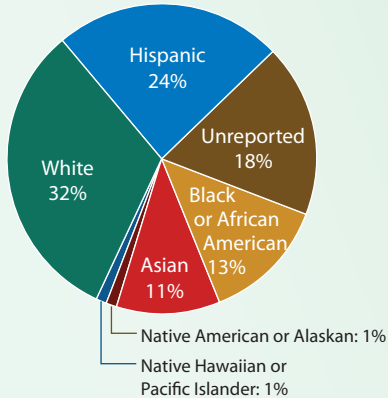
Robert Palmer, DO, is a volunteer with Project Access Northwest and a gastroenterologist practicing at The Everett Clinic in Snohomish County. He has a special interest in liver disease management and colon cancer screening.

Project Access Northwest at a Glance

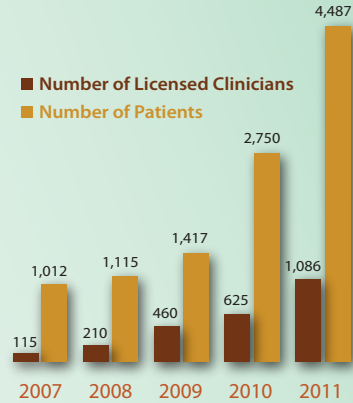
Languages



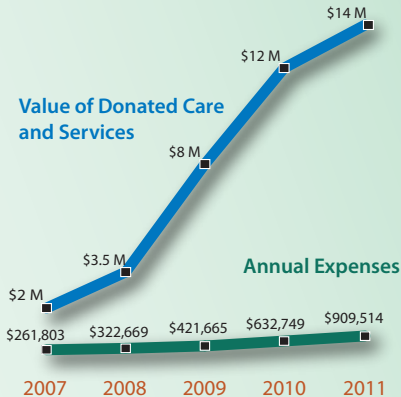
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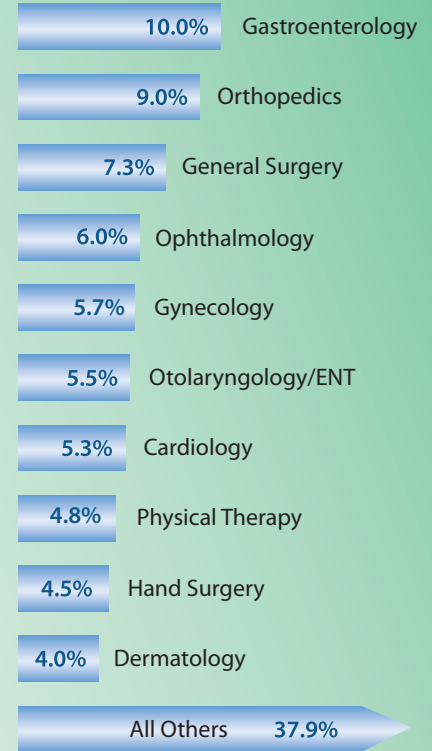
Service Growth



Fiscal Growth



Specialty Referrals



2011 Financial Statements

Statement of Income & Expense		
Revenue	Dec. 31, 2011	Dec. 31, 2010
Contributions	\$354,273	\$402,602
In-Kind Contributions	\$0	\$0
Government Contracts & Grants	\$68,137	\$54,804
Non-Government Contracts & Grants	\$496,100	\$215,000
Interest Income	\$589	\$1,034
Other Income	\$0	\$4,990
Total Income	\$919,099	\$678,430
Expense		
Salary, Wages & Benefits	\$580,066	\$331,123
Professional Services (including Interpretation)	\$187,670	\$183,935
Facilities	\$26,400	\$20,050
Insurance	\$6,143	\$9,969
Other Expense	\$109,235	\$87,672
Total Expense	\$909,514	\$632,749
Net Ordinary Income	\$9,585	\$45,681

Statement of Financial Position (Balance Sheet)		
Assets	Dec. 31, 2011	Dec. 31, 2010
Current	\$355,834	\$292,012
Fixed	\$317	\$9,812
Total Assets	\$356,151	\$301,824
Liability & Equity		
Current	\$66,401	\$6,766
Equity	\$289,750	\$295,058
Total Liabilities & Equity	\$356,151	\$301,824

Unaudited Financial Statements.

Donors see 16:1 return on their health care dollar

Charitable Contributions ensure Project Access Northwest's mission is fulfilled

Our donors see a **16:1 return** on their health care dollar. They recognize and support the work of Project Access Northwest because:

We help hospitals save charity care dollars.

Project Access Northwest helps reduce inappropriate emergency room utilization and saves overall hospital charity costs. Washington State Department of Health data estimates that avoiding an uncompensated Emergency Department visit saves a hospital \$1500 in uncollected charges.

We help reduce Emergency Department use by the uninsured.

After enrolling patients through an organization using the Project Access model, seven communities across the nation saw between a 40 to 60 percent drop in inappropriate Emergency Department use by the uninsured.

We leverage donation dollars.

In 2011, Project Access Northwest served nearly 4,500 low-income patients. With 2011 operating expenses of \$909,514, we have leveraged sponsorship and charitable dollars to provide nearly \$14 million in donated care and services in 2011—and nearly \$40 million since 2006.

"I believe my efforts (as a volunteer provider) are a small contribution to support low-income uninsured patients and (being a donor) is the right thing to do.

I'm pleased to support Project Access in any way I can."

—Henry Li, MD, The Polyclinic

Thank you to our generous sponsors and donors

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We want all of the donors to Project Access Northwest to know that we use their gifts wisely and well. Our commitment to being good stewards of our resources while working to support our volunteer specialists and their patients, is paramount—know that we appreciate everyone's support.

If you've been one of Project Access Northwest's donors, thank you.

If you haven't, please consider donating now. www.projectaccessnw.org.

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Elizabeth Gold, MD
Philip Gold, MD

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Michael P Golden, MD
Gary E Goodman, MD
Justin S Goodman, MD
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Ann Gorai, MD
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DPM
Greg Grant, DPM
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PT MSPT
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Roberta Huang, MD
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RD CD CDE
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Joseph Jereczek, PT
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DPM FACFAS
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Allyson Kessary, OTR/L
E Edward Khalfayan, MD
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DPM FACFAS
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Arnold Levin, MD
Martin D Levine, MD
Howard S Lewis, MD
Rayburn S Lewis, MD
Bryan Desmond
Leyton, MD
Henry Y Li, MD

Participating Providers

Jamie Libman, MD
Sophia Lichenstein-
Hill, ARNP
Carlyn M Liebert, ARNP
Jenny Lies, PT
William H Likosky, MD
Erik C Liija, DPM
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Pamela Paley, MD
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Martin Pointon, MD

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OTR/L CHT
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OTR/L CHT

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Duong Tran, PA-C
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Thomas Tubbesing, MD
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Dean C Walund, MD
Chia Wang, MD
Grace Wang, MD
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Ying M Wang, MD
Jeffery Ward, MD
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D J Wardle, DPM
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William B Warnekros, DPM
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DENTAL PROVIDERS

Anoosh Affri, DDS
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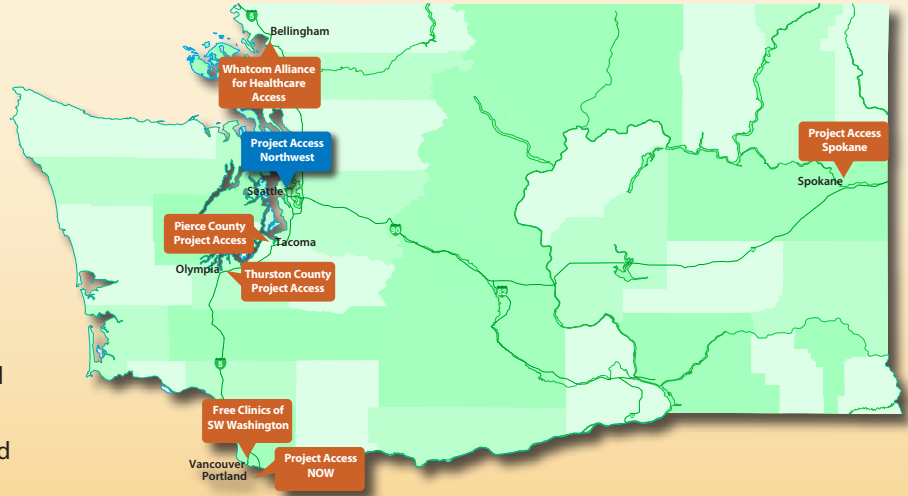
Case Manager

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The Project Access Model:

A solution that works across the state (and nation)

There are seven Project Access programs in the state of Washington and more than 50 across the nation. Each collaborates with local physicians and/or dentists and other health care volunteers to build a distributed network of charity care. 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.



1111 Harvard Avenue ■ Seattle, Washington 98122 ■ www.projectaccessnw.org
Telephone: 206.788.4204 ■ Fax: 206.382.3507 ■ info@projectaccessnw.org