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

Our Mission
Project Access Northwest collaborates with the health care community to open doors to medical and dental care for low-income individuals with limited access.

Our Target Population
We strike down barriers that people in King, Kitsap and Snohomish counties face accessing health care by developing and implementing strategies to eliminate those barriers.

Our Value
➤ **FOR OUR PATIENTS:** We provide access, reduce health care costs and help patients get healthy.

➤ **FOR OUR PROVIDERS:** We handle the administrative details so our providers’ valuable time is focused on delivering life-changing care.

➤ **FOR OUR PARTNERS:** We offer localized solutions for specific patient care challenges.

➤ **FOR OUR COMMUNITY:** We are part of the critical safety net in the communities that we serve, which strives to ensure that unmet health needs aren’t leaving people vulnerable to long-term issues, hunger or homelessness.

Our Framework
➤ Provide health care access to the most vulnerable.

➤ Raise adequate financial resources to meet our goals.

➤ Ensure we are an organization where programs, volunteers and staff thrive.

➤ Build awareness of Project Access Northwest as a necessary component to the health safety net in our region.

Our Impact
Because of our work, 46,000+ patients served since our founding in 2006 — roughly enough to fill every seat in T-Mobile Park (formerly Safeco Field) — have received access to health care in King, Kitsap and Snohomish counties.
Project Access Northwest works for:

**PATIENTS**

- We serve thousands of residents who do not have adequate health insurance coverage or access to care they need.
- We partner with care providers, hospitals, clinics and other community-based organizations to connect the most vulnerable in our community to the care and services they need.
- We provide a comprehensive solution for patients in need. From diagnosis through treatment, discharge and rehab, patients receive care at no cost to them.

**PROVIDERS**

- We provide comprehensive care coordination to help providers care for those in need.
- Patients are pre-screened and matched to appropriate care. Our patients show up for appointments on time, with all needed labs, tests and imaging. Our program has an impressive no-show rate of less than 4 percent!
- Our providers spend their time on what matters — delivering life-changing care.

**PARTNERS**

- We help medical systems serve patients in need efficiently and cost effectively.
- We have creative partnerships with area hospitals that are yielding big benefits—for both the hospital and the patients.
- Hospitals, medical groups and other organizations throughout Washington make Project Access Northwest part of their philanthropic commitment.

**COMMUNITY**

- We help our neighbors in need, creating a healthier community for all.
- Project Access Northwest helps individuals regain their health, independence, quality of life and ability to contribute back to the community.
- Our work cultivates collaboration between safety net clinics and specialty providers and public community resources — minimizing the cost of per-patient charity care.

**DONORS**

- We are good stewards of donations we receive
- Small investments produce life-changing care.
- A recent study of our gastroenterology patients revealed that $325 in care coordination returns $3,480 in treatment — a 1070 percent return on investment!
- Financial support from individuals and sponsor organizations enables us to keep this important community service available for those in need.
Current programs

**Care Coordination**

*Connecting patients with specialty care*

Care Coordination ensures that low-income people have access to necessary and appropriate specialty care. A qualifying patient who gets care at any of the Community Health Centers or free clinics in King, Kitsap and Snohomish counties can be referred to us when their primary care provider feels they need care beyond what is possible in the primary care setting. We then connect these patients to one of our more than 1,700 volunteer providers in more than 40 specialties, including Physical Therapy, Gastroenterology, Gynecology and General Surgery to name a few. Their care is free of charge if they are uninsured and, if they have Medicaid, the provider bills Medicaid directly.

**Health Home**

*Empowering clients to set and achieve their health care goals*

Health Home connects a care coordinator with a patient who is a high utilizer of the health care system. Through face-to-face visits and supportive follow-up phone and personal interactions, the client sets and achieves goals based on their needs and their personal goals. The care coordinator helps the client overcome barriers, achieve milestones and empower the client to take control of their health.

**Premium Assistance**

*Supporting low-income individuals by paying their insurance premiums*

Many of the large hospitals and hospital systems in this region provide funds to Project Access Northwest so that we can pay the premiums for low-income individuals who are required to purchase insurance on the Exchange, but cannot afford the payments. This improves the health of the client, allows for conditions to be handled when they first present rather than after they have become emergent, and reduces the burden of charity care on hospital systems.

**Onsite Partnership**

We provide office space at no cost to the Prescription Drug Assistance Network (PDAN). Established by the State Legislature in 2005, the PDAN provides assistance to anyone whose prescription drug coverage is inadequate, including private insurance, Medicaid and plans on the Health Care Exchange.

Armed with the mission of making medications available in a timely fashion to low-income, uninsured and underinsured Washingtonians at no or reduced cost, PDAN launched its first pilot project in Spokane under the name MTGMEDS in the fall of 2008. PDAN has since opened programs across the state to bring prescription assistance to a range of communities in need.

Since the beginning of our partnership, we have assisted individuals to obtain over $1,223,000 in medication.
Potential program opportunities

We are actively seeking funding and additional partners for two promising strategies that have already been successfully piloted, including:

**Primary Link**

*Connecting inappropriate users of the Emergency Department to primary care homes for better long-term health outcomes*

Primary Link was a pilot with five of the seven Swedish Hospital Emergency Departments in which we receive a daily download of people who used the Emergency Departments for reasons that would have been more appropriately handled in a non-emergent setting.

Our Care Coordinators would reach out to these patients and appoint them into a primary care setting as well as help them establish a primary care home. Resource referrals were made to these patients needing additional assistance, including but not limited to housing, food stability and social services.

**Inpatient Discharge**

*Placing inpatient patients in follow-up appointments within seven days of discharge*

Our Inpatient Discharge Program was a pilot to reduce the rate of return visits that take place in the Emergency Department (a much more expensive alternative) and to reduce the readmission rate for the same issue.

Our strategy was to reach out to low-income patients who have been inpatients, but are ready for discharge. We then placed those patients in follow-up appointments within seven days at the Community Health Centers or with their regular provider if they had one.

**Potential Partnership with Safety Net Connect, Inc. (SNC)**

Kaiser has identified Washington as a year-two launch (2020) state, so we have some time to set the stage. In year one, Kaiser will be focused on Colorado, Hawaii and Georgia (allowing us learning opportunities).

One possible approach is to partner with SNC as they seek to pragmatically roll eConsult out to local/regional/statewide primary care associations. SNC is not looking at eConsult as purely a technology adoption effort. Our partnership would include practice-level transformations to better embrace, understand and utilize “telehealth” technology. Generally speaking, implementation includes consulting, training, implementation and post-implementation circle-backs.
How We Grow

Project Access Northwest is a nonprofit growing as a social enterprise — with a focus on addressing health care needs and on filling gaps in access to health care. We change lives and that change needs capital investment and long-term commitment.

*Any new or expanded strategy must meet these requirements.*

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**Threshold requirements for new endeavors**

**PRINCIPLES**

- Address health and social determinants.
- Focus on demonstrated and significant community need.
- Increase health equity.
- Honor and value community partnerships to promote alignment, efficiency and effectiveness.

**BUSINESS CONSIDERATIONS**

- Have we demonstrated alignment with Project Access Northwest’s Mission, Vision and Strategic Framework?
- Have we identified the way(s) in which we are uniquely qualified for this undertaking?
- Have we identified a path to sufficient (preferably multi-year) funding, staff and infrastructure capacity, impact on existing programs, risk management and flexibility?
- Have we identified a method to evaluate and demonstrate value and return on investment that is greater than the cost?

**TRACKING OUR PROGRESS**

Executive Director will provide the board with updates on activities and progress toward goals at each board meeting.
Organizational framework, goals and activities

Provide health care access to the most vulnerable.

**Goal #1:** Facilitate at least 6,000 client appointments in 2019 and at least 7,000 client appointments in 2020.

Project Access Northwest will meet its operational goals and ensure funding for reserves, for emergencies and new projects.

**Goal #2:** Develop and meet annual budget that adequately funds operating expenses, including competitive and equitable staff compensation, and demonstrates a commitment to an annual margin for reserves and emergencies.

Project Access Northwest will be an organization where staff, volunteers and programs thrive.

**Goal #3:** Replace current care coordination technology platform and CSR platform by 2020.

**Goal #4:** Refine and implement an employee assessment and evaluation procedure that includes at least quarterly coaching and annual performance review process.

**Goal #5:** Leverage volunteers and their skills to achieve our mission.

Build awareness of Project Access Northwest as a necessary component to the health care safety net in our region.

**Goal #6:** Develop at least 10 strategic relationships per year (i.e., elected officials, public/private organizations, etc.), resulting in activities to enhance our role in the community, raise awareness of the organization, and/or increase funding.

**Goal #7:** Ensure stakeholders have opportunities to provide feedback that examines viability of current programs and suggestions for future ones.