



# Project Access NOW

## frequently asked questions

*Physicians & other Healthcare Providers*



### 1. WHAT IS PROJECT ACCESS?

Project Access is a nationally replicated model that uses a coordinated volunteer physician network to provide health care to low-income, uninsured individuals.

### 2. WHAT IS PROJECT ACCESS NOW?

Project Access NOW is a regional collaborative focused on designing, implementing, and managing regional supports and resources to benefit the low-income uninsured of Clark, Multnomah, Washington and Clackamas Counties.

### 3. WHO CAN RECEIVE SERVICES THROUGH PROJECT ACCESS NOW?

Project Access NOW and its collaborative partners coordinate donated services for people with an identified medical need who do not have health insurance, do not qualify for any publicly funded coverage, and have income below 200% of the Federal Poverty Level.

### 4. HOW DO I GET ANCILLARY SERVICES (LAB, DIAGNOSTIC IMAGING) FOR THE UNINSURED PATIENT?

Project Access NOW patients are pre-screened for charity care at all hospitals in the region. Patients receive a card that indicates physician approved services will be provided at no cost to the patient. You only have to place the order with the hospital or participating service provider.

### 5. HOW WILL THE PATIENT GET THE MEDICATION I MAY PRESCRIBE?

Project Access NOW patients receive a pharmacy benefit through a program called Pharmacy Bridge. This regional PBM allows patients to access medication on our formulary directly from pharmacies for a \$4 co-pay. Pharmacy Bridge is supported by volunteer pharmacists and serves as a resource for connecting patients to a variety of prescription programs that will enable them to have consistent access to their medications. Sampling is encouraged if enough medication to complete a course of treatment can be provided.

### 6. WHAT IF THE PATIENT DOESN'T SPEAK ENGLISH OR HAS SOME OTHER BARRIER TO GETTING CARE?

Care Coordinators are responsible for working with the patients to make sure that any barriers to care are addressed. Interpreters will be provided as needed. Other potential barriers such as transportation will be addressed as they are identified.

### 7. WHAT ABOUT THE UNINSURED PATIENTS THAT I ALREADY TAKE CARE OF?

The goal of Project Access NOW is to create an infrastructure that makes serving qualifying uninsured patients as easy as possible for volunteers. At the beginning of the project, our ability to accept referrals directly to Project Access from volunteers will be limited. Please call us at 503.222.6541 to explore options for your patient. Our project is ambitious and practical. We want to start small, learn as we go, develop our relationships so that we create an effective and sustainable program. We appreciate your patience during our start up phase.

### 8. HOW MANY PATIENTS WILL I BE ASKED TO SEE?

Ultimately, the number of patients you are willing to care for is your decision. We recommend that Primary Care physicians accept 5 new patients per year and that specialists agree to take on 10 cases per year.

### 9. HOW DO I KNOW THAT I AM BEING EQUITABLY TASKED WITH OTHER VOLUNTEERS?

Project Access NOW uses a database that tracks the number of referrals offered by each physician and equitably distributes these between the volunteers in each specialty on a yearly basis. In no event will you be asked to provide any more than the number for which you agree.



#### 10. DO I BILL PATIENTS OR COLLECT ANY CO-PAYMENT?

No, Project Access NOW is based on an all-volunteer professional workforce, and is intended to coordinate with local hospitals' threshold of 200% of the Federal Poverty Level for the provision of charity care. In addition, providing free care provides additional liability protection (see next FAQ). The cost of running the program is kept down by not handling money, collections, payment plans, etc. Offices submit a claim to Project Access NOW (just as they would for any patient with insurance). There will be no reimbursement, but we will keep track of your contributions and be able to gather valuable data that will help us report the return on investment for our funders.

#### 11. WHAT IS MY LIABILITY FOR TREATING UNINSURED PATIENTS?

Both Oregon and Washington have laws that protect physicians and other health care providers who serve patients for free. The reality is that the uninsured as a group are not very litigious and part of our challenge in proving this is that there is so little data to examine. Your local Project Access program will provide you with details about these "Good Samaritan" laws and will facilitate any documentation needed to assure you are protected if you are interested in signing up for additional limitation of risk.

#### 12. WHAT IF A PATIENT DOESN'T COME TO APPOINTMENTS OR DOESN'T FOLLOW THE TREATMENT PLAN?

An important element of the Project Access model is making expectations of patients clear from the beginning. This is neither insurance nor an entitlement program. It is a volunteer program that requires patients to keep their appointments and follow treatment plans to the best of their ability. Care Coordinators work with patients to help them overcome any barriers to receiving care. Ultimately, a patient who misuses the program will not be allowed to participate.

#### 13. WHAT IF A PATIENT HAS MORE PROBLEMS THAN I CAN ADDRESS?

The Care Coordinator is available to help connect patients to resources for their needs beyond your ability to meet. Whenever you are not sure how to proceed, contact the Care Coordinator.

#### 14. WHAT WILL THE IMPACT OF PARTICIPATION IN PANOW BE ON MY OFFICE STAFF?

The intent of Project Access NOW is to make caring for uninsured patients as similar as possible to caring for insured patients. We will work with your staff to create a streamlined process. There should be little extra burden to office staff. In fact, Care Coordinators are available to help with a variety of needs which may indeed make caring for Project Access NOW patients even a little easier.

#### 15. WHAT IF I FEEL THAT I HAVE COMMITTED TO MORE THAN I CAN HANDLE?

Let program staff know immediately. We will reduce your commitment to a level with which you are comfortable. No one should be a victim of "burnout" in Project Access NOW.

#### 16. WHY SHOULD I GET INVOLVED?

Most physicians decide to practice medicine because they want to be of service to others. Many doctors get involved in overseas volunteer medical service as a result. Project Access NOW celebrates this altruism and offers a way to make a difference right in your community in a way that is organized, safe and equitable.

Project Access NOW makes it easier to serve the uninsured. Project Access NOW patients will have facilitated access to medications, hospitalizations, lab testing, diagnostic imaging and other ancillary services. The Project Access system is designed to allow you order tests, schedule hospitalizations and care for your uninsured patient in a manner very similar to caring for insured patients.

We want to help you "do the right thing". We believe that most physicians sincerely want to use their professional talents to serve their neighbors that are in need, and are looking for a convenient, simple way to do so. Project Access NOW is the vehicle that helps manage the challenges of caring for the most vulnerable in our community. Project Access allows you the freedom to focus on healing and connects people to the health care they need. Today.



#### PLEASE CONTACT US:

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