

Free Clinic of Southwest Washington

VOLUNTEER AND RETIRED PROVIDERS PROGRAM 2022 SURVEY REPORT

www.wahealthcareaccessalliance.org vrp@wahealthcareaccessalliance.org





CarePoint Clinic

TABLE OF CONTENTS

<u>Acknowledgements</u>

Current Program and 2022 Survey Process

2022 Survey Summary

2022 VRP Program

2022 Volunteer Survey Results

2022 Site Survey Results

<u>Appendix 1: Healthcare Volunteer Suggestions/Comments</u>

Appendix 2: VRP Site Suggestions/Comments

Appendix 3: 2022 Healthcare Volunteer Survey

Appendix 4: 2022 Site Survey



Olympia Union Gospel Mission

ACKNOWLEDGEMENTS

As Washington's State's free clinic association, Washington Healthcare Access Alliance appreciates the opportunity to administer the Volunteer and Retired Providers Program, the backbone of healthcare volunteerism in Washington.

Thank you to the Washington State Department of Health for this contract and for program oversight and collaboration, to Physicians Insurance for partnership as the malpractice insurance provider, and to the Ellison Foundation, Roots and Wings Foundation, Moccasin Lake Foundation, MultiCare Health System, and the Charis Fund for grant awards supporting this work.

Thank you to the wide range of safety net entities that provide healthcare to Washington's most vulnerable patients, and to current and past trustees on the Washington Healthcare Access Alliance board.

All images included are of actual Volunteer and Retired Providers Program sites in Washington State, photographed by Auston James. This report was compiled by Kris Ives, Program and Data Manager.

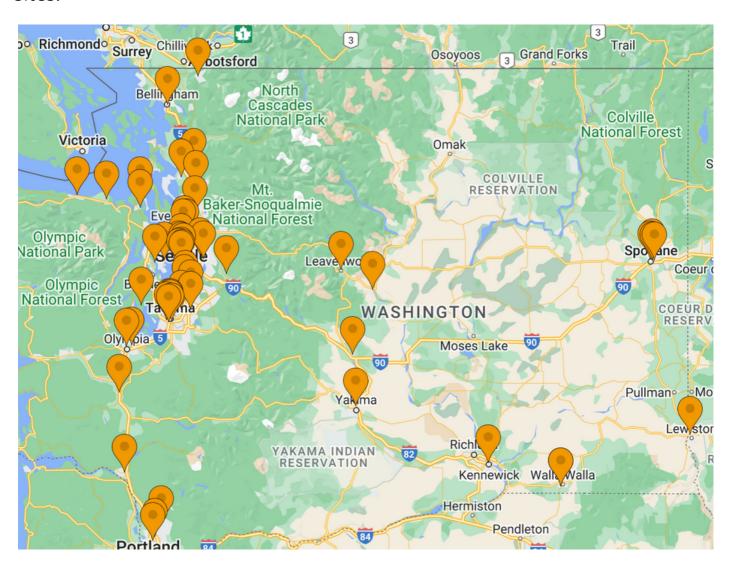


Battle Ground HealthCare

CURRENT PROGRAM OVERVIEW AND 2022 SURVEY PROCESS

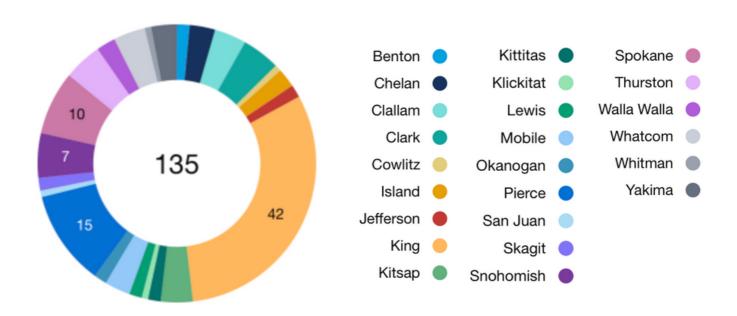
CURRENT PROGRAM

The Volunteer and Retired Providers (VRP) Program supports Washington's healthcare safety net through malpractice insurance coverage and professional licensure for volunteers who only use their license for unpaid work. Organizations that participate in this program include free and charitable clinics, addiction recovery and support programs, camps, school-based health clinics, federally qualified community health centers, rural health clinics, homelessness services units, and other organizations that utilize healthcare volunteers to serve Washington's most vulnerable patients. There are currently over 3,000 enrolled volunteers and 135 VRP Program sites.

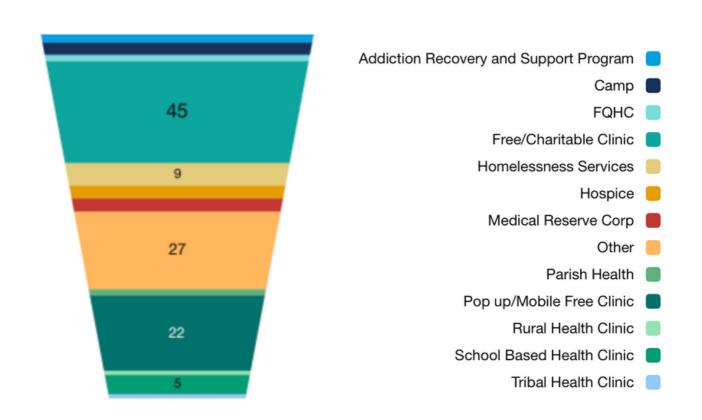


CURRENT PROGRAM

VRP Sites by County



VRP Sites by Site Type



CURRENT PROGRAM

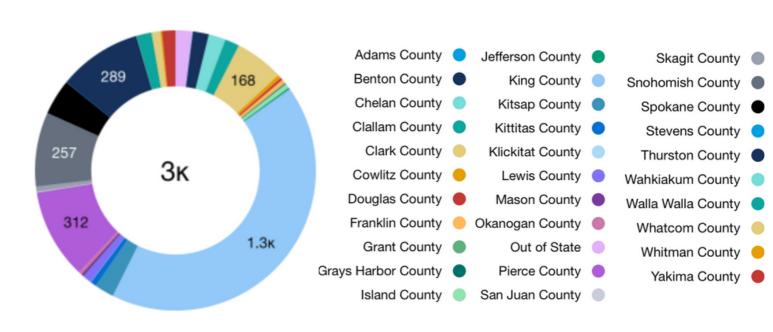
The majority of healthcare volunteers use the VRP Program for malpractice insurance. License renewals are also available for providers who are only using their license to volunteer.

VRP Providers by Provider Status



The VRP Program volunteers live and serve in 31 counties across the state. There are also a number of out of state volunteers who serve and are eligible for VRP Program malpractice coverage for up to 30 calendar days per year.

VRP Providers by County



2022 SURVEY PROCESS

Program data was collected via two digital surveys, one emailed to all active volunteers and one for all enrolled sites. Follow up with all non responsive entities was conducted at regular intervals and survey support was offered to volunteers and sites.

The VRP Program organizations, in a data collection partnership with the <u>National Association of Free and Charitable Clinics</u> (NAFC), enabled dually enrolled sites to complete a single survey for both entities. Survey questions were added or modified to match the NAFC's survey and to reflect the changing healthcare safety net landscape, including questions related to patient location, race, gender, and social determinants of health.



Lahai Health

2022 SURVEY SUMMARY

2022 SURVEY SUMMARY

Volunteer Survey Summary

- There were **2,796** volunteers enrolled in the VRP Program in 2022
- Data from 990 volunteers was collected
- 623 volunteers reported providing services in 2022
- Average volunteer hours per respondent was 88

Site Survey Summary

- There were **155** sites* enrolled in the VRP Program in 2022
- Survey responses representing 84 sites were received
- **82,158** unduplicated patients were served and **283,706** patient visits were reported in 2022 by these sites

*The way in which organizations were categorized was modified in 2022 for clarity and accuracy. Organizations with multiple sites are now counted as single organizations with sub-accounts. Because of this, the number of total enrolled sites shows fewer than in past years.

Return on Investment for Washington State

- The total value of volunteer time reported, based on the fair market value of professional hours by license type, was \$4,415,243.
 (Professional rates used for this valuation were derived from <u>ESD.WA.GOV</u> <u>2022 Labor Market Report</u>.)
- If each reported patient visit had been treated in a 30 minute first time office visit at the <u>Healthcare Bluebook "fair cost"</u> of **\$188 per visit**, the cost of healthcare provided by VRP Program volunteers and sites in 2022 would have been **\$53,336,728**.
- The direct cost to the State of Washington to administer the VRP Program is \$130,000 per year. This represents **\$410** in donated healthcare services for every dollar spent.



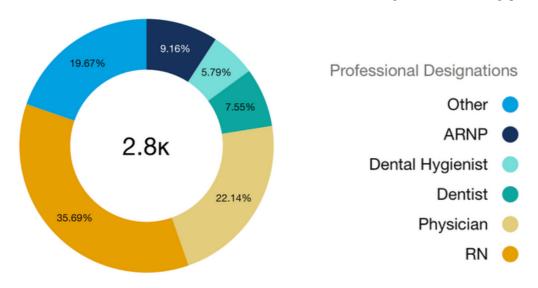
Community Health Partners

rs 2022 VRP PROGRAM

2022 VRP PROGRAM

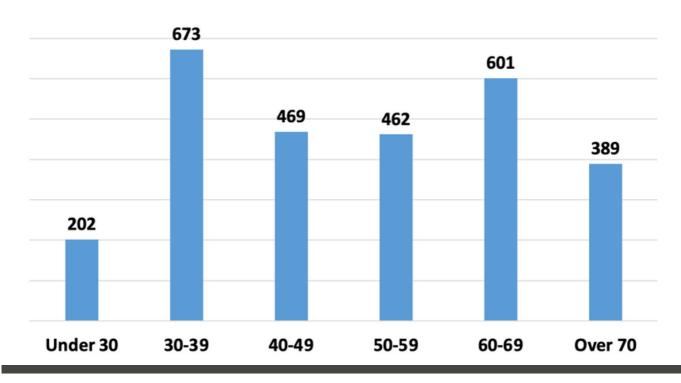
VOLUNTEERS BY LICENSE TYPE AND AGE

2022 Healthcare Volunteers by License Type



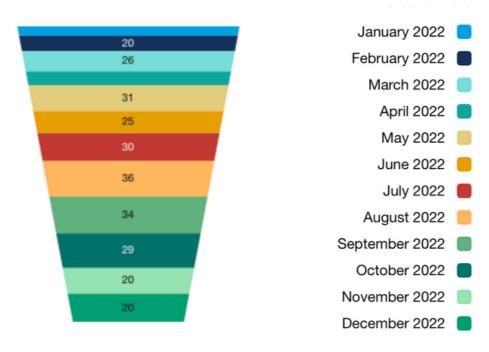
Nurses and physicians are the most common provider types enrolled in the VRP Program. Volunteers aged 30-39 years represented the largest group of volunteers in 2022.

2022 Healthcare Volunteers by Age Group



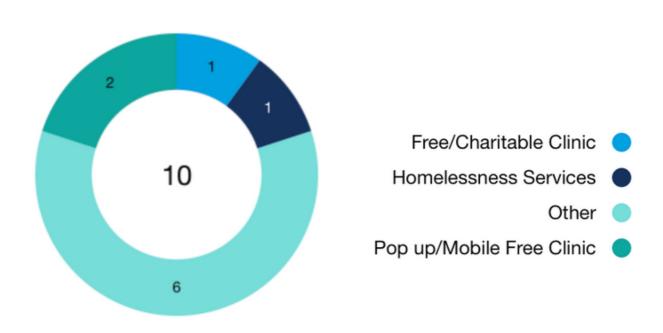
2022 VRP PROGRAM 2022 VRP PROGRAM ENROLLMENT

2022 Volunteer Enrollment



The VRP Program enrolled **301 new volunteers** in 2022 and **10 new safety net sites.**

2022 Site Enrollment

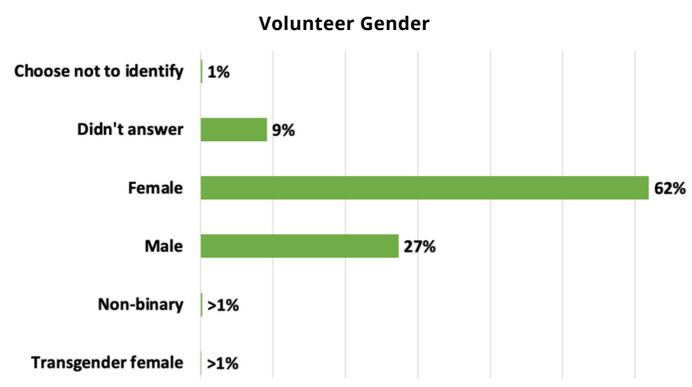




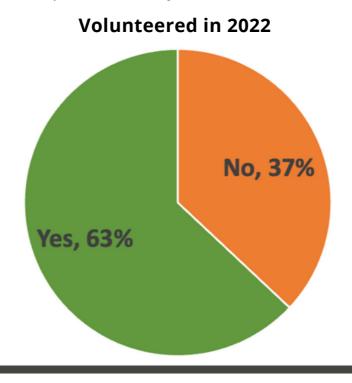
Sequim Free Clinic

2022 VOLUNTEER SURVEY RESULTS

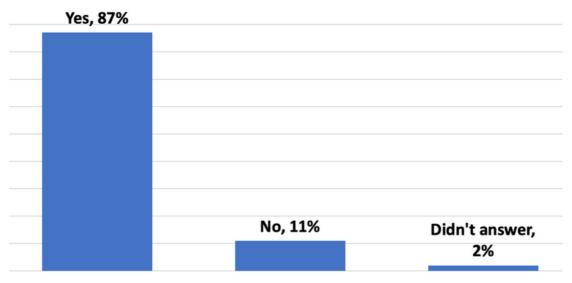
Volunteers' gender was a new question for the 2022 Volunteer Survey.



63% of the respondents report that they volunteered in 2022.

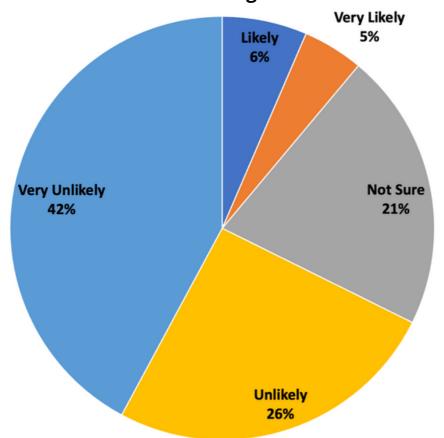


Still Require Malpractice Insurance



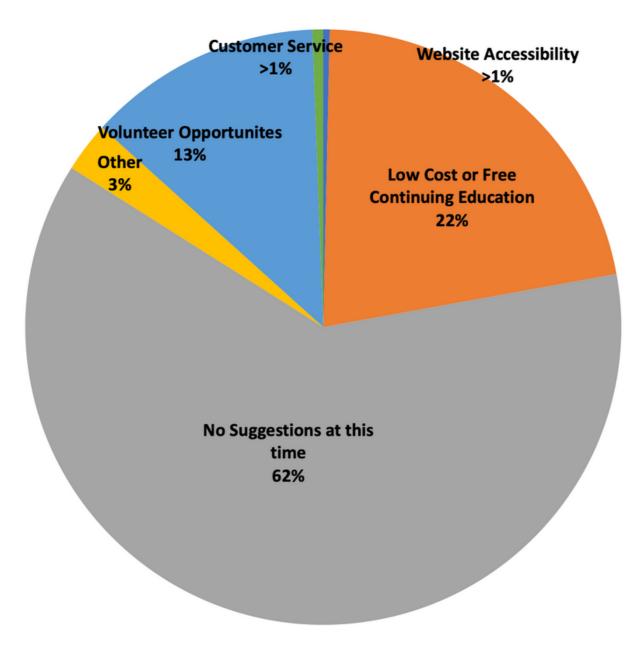
87% of respondents plan to volunteer in 2023.

Likelihood of Volunteering Without VRP Program



68% of volunteers that responded indicated that volunteering without the VRP Program was unlikely or very unlikely.

VRP Program Support Improvement Suggestions



22% of the volunteers who responded to the survey identified more opportunities for **low cost or free continuing education** as an improvement they'd like to see. 13% reported they are interested in **more volunteer opportunites**.

HOURS REPORTED

• Total 2022 hours reported: **54,648.50**

Average hours per volunteer that provided service: 88

• Total value of volunteer time reported: **\$4,415,243** (Professional rates used for this valuation were derived from <u>ESD.WA.GOV 2022</u> <u>Labor Market Report.</u>)

Year	2020	2021	2022
Total Volunteer Hours Reported	49,626	50,814	54,648.5
Average per Volunteer	47.44	110	88

More volunteer hours were reported in 2022, although the average per volunteer was less than in 2021.

Several volunteers noted that concerns related to COVID transmission impacted their volunteering in 2022, but that they hoped to volunteer more in the future.

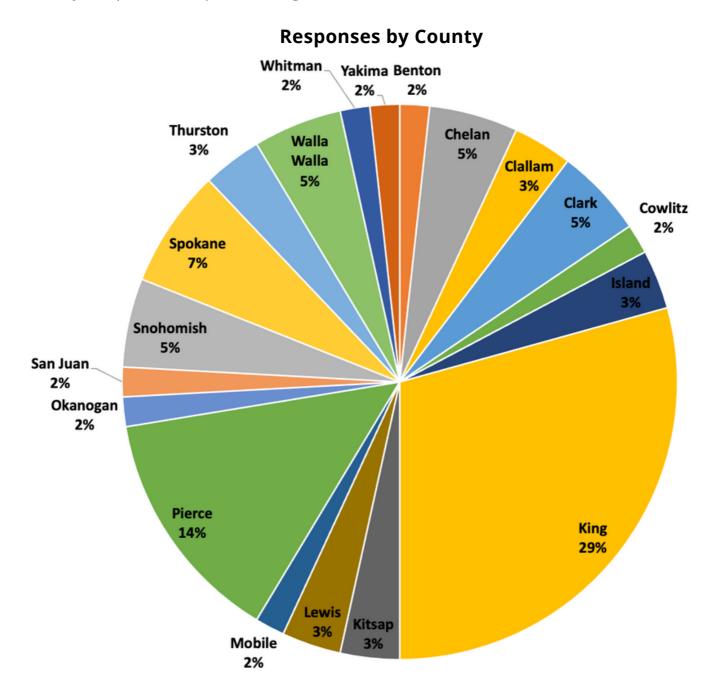


SOS Health Services

2022 SITE SURVEY RESULTS

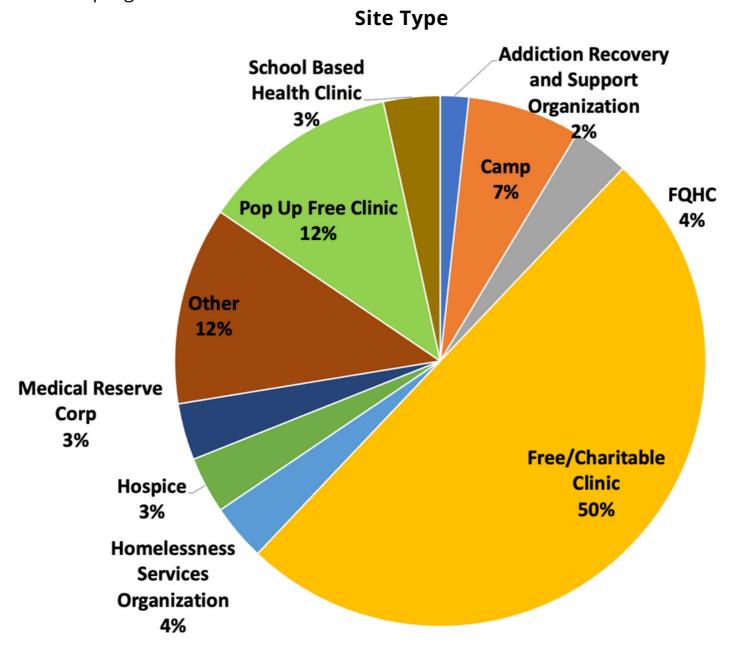
SITE SURVEY RESULTS SITE RESPONSES BY COUNTY

Survey responses representing 84 sites and 18 counties were received.



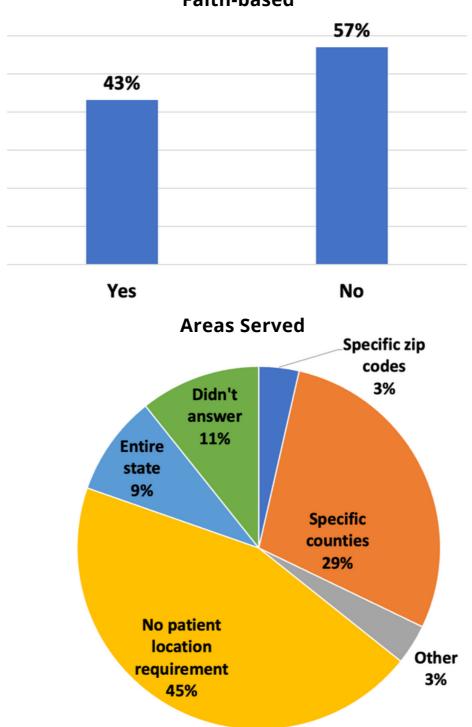
SITE SURVEY RESULTS SITE RESPONSES BY SITE TYPE

Although the VRP Program is primarily utilized by free and charitable clinics, other entities also utilize licensed healthcare volunteers supported through the program.



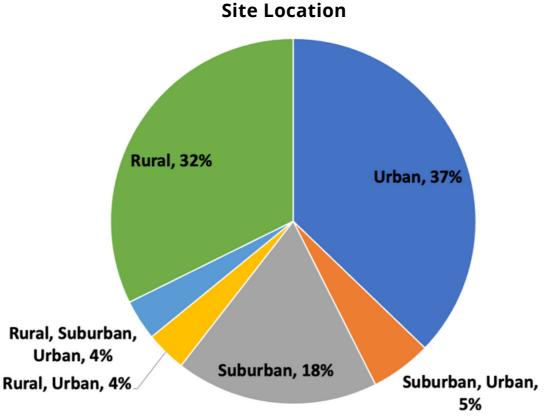
SITE SURVEY RESULTS SITE RESPONSES BY SITE TYPE

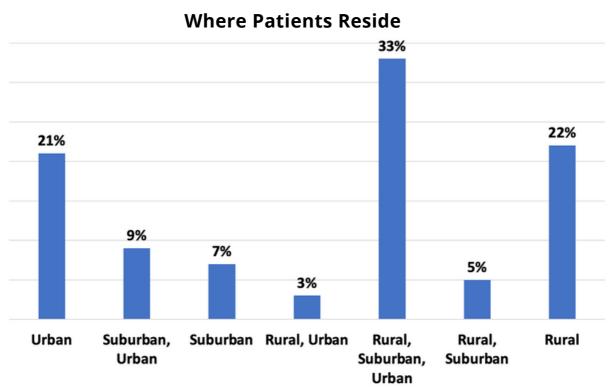
43% categorize their organization was faith-based. 45% have no patient location requirement. **Faith-based**



SITE SURVEY RESULTS SITE RESPONSES BY SITE TYPE

Sites were asked to note their locations and where their patients reside.

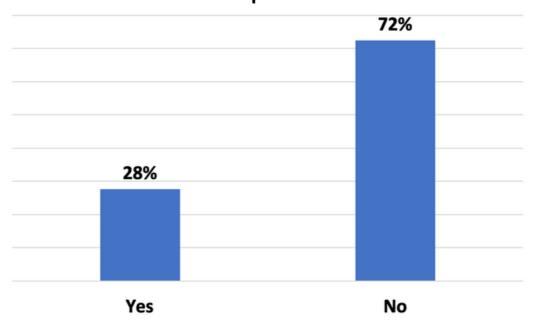




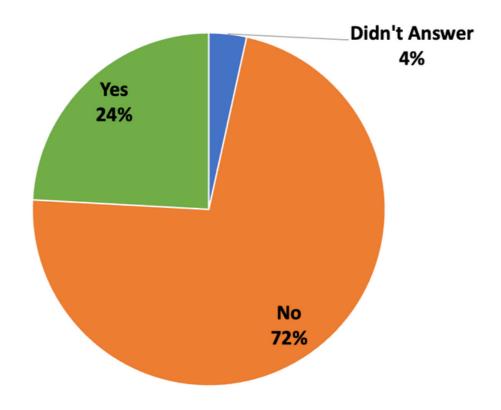
SITE OPERATIONS

Sites were asked if they have multiple sites and if they offer mobile services.

Multiple Sites



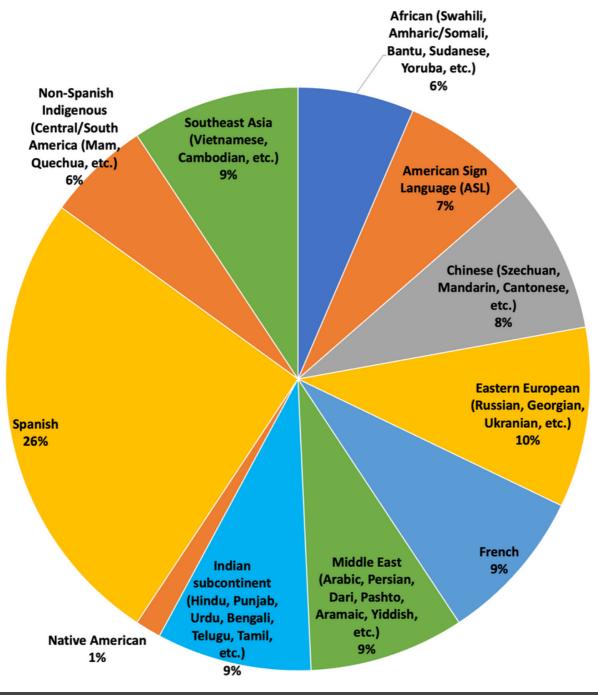
Mobile Services



SITE SURVEY RESULTS SITE OPERATIONS

67% of the sites reported that they provide service in multiple languages. The top barriers to this were stated to be cost and a lack of multilingual, paid staff or volunteers.

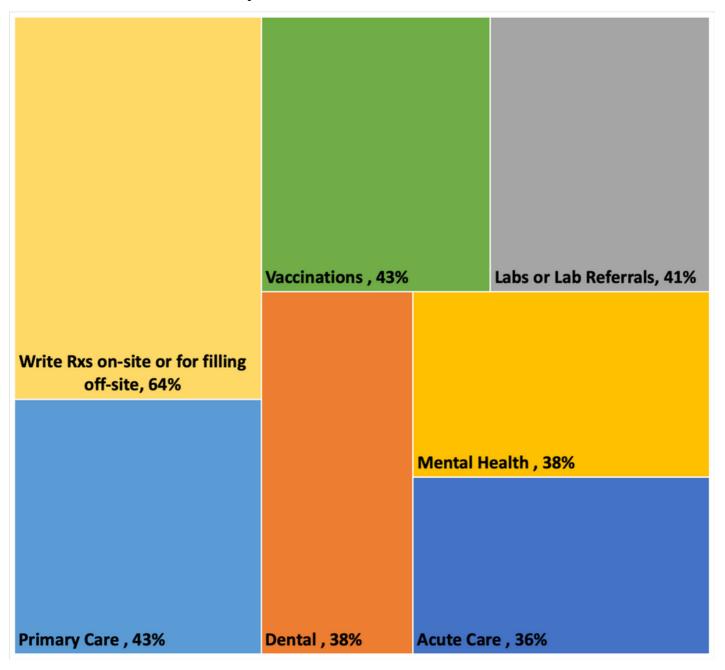
% of Clinics Providing Translation Services



SITE SURVEY RESULTS SITE OPERATIONS

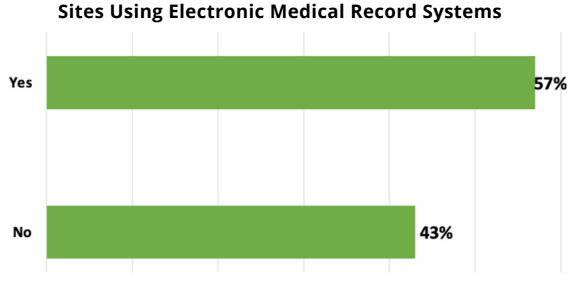
Sites provide a wide array of services. Below are the most common services reported, by percentage.

Top Services (% of Clinics)

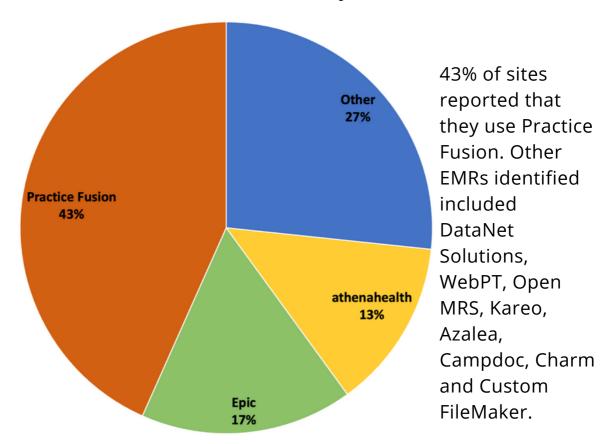


SITE SURVEY RESULTS SITE OPERATIONS

The majority of sites report use of an electronic medical record (EMR) systems.



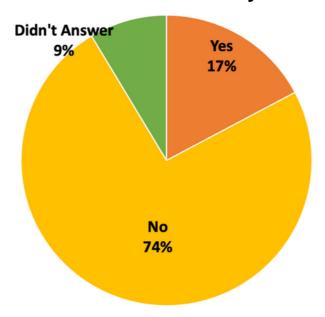
Electronic Medical Record Systems Used



SITE OPERATIONS

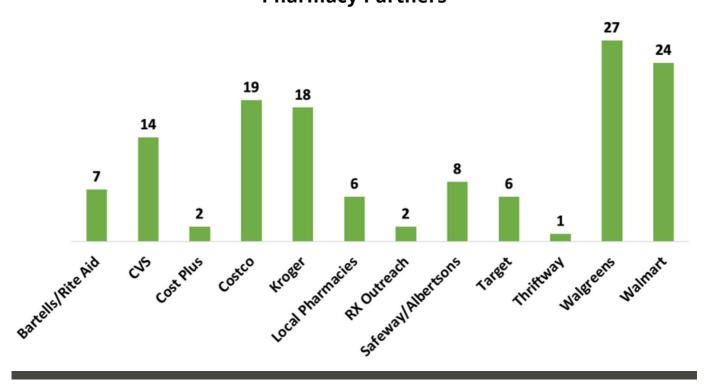
The majority of sites do not have on-site pharmacies and work with partners to provide access to medications.





The top pharmacy partners listed were Walgreens, Walmart, Costco, Kroger, and CVS.

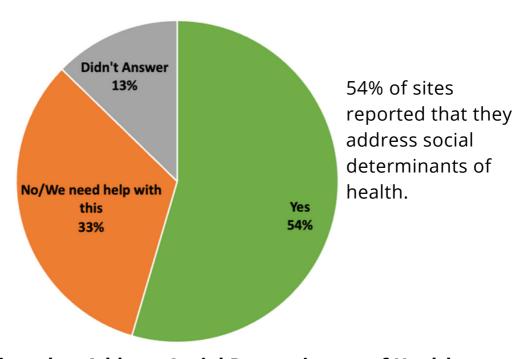
Pharmacy Partners



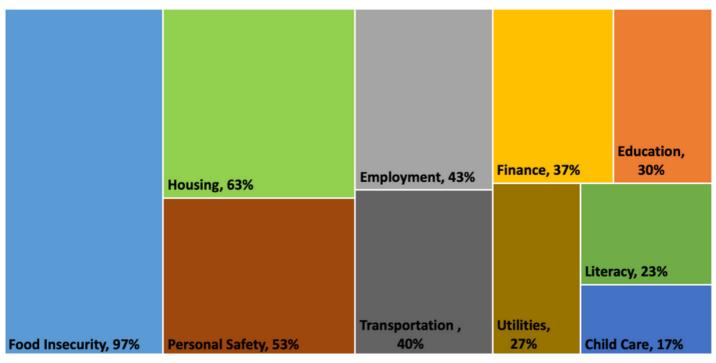
SITE OPERATIONS

VRP Program sites were asked if they screen for social determinants of health.

Social Determinants of Health

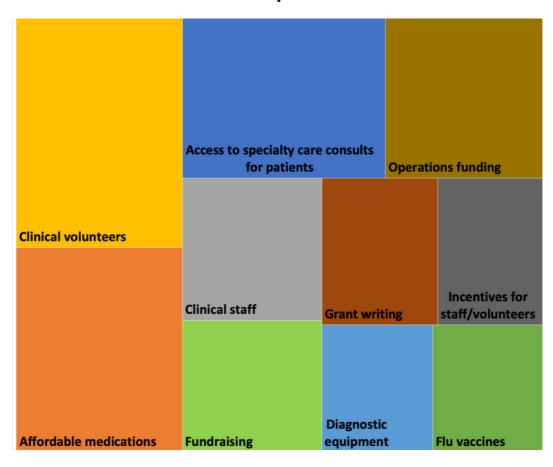


% of Sites that Address Social Determinants of Health



SITE OPERATIONS

VRP Program sites were asked to identify their top ten needs as an organization. Sites Top Needs

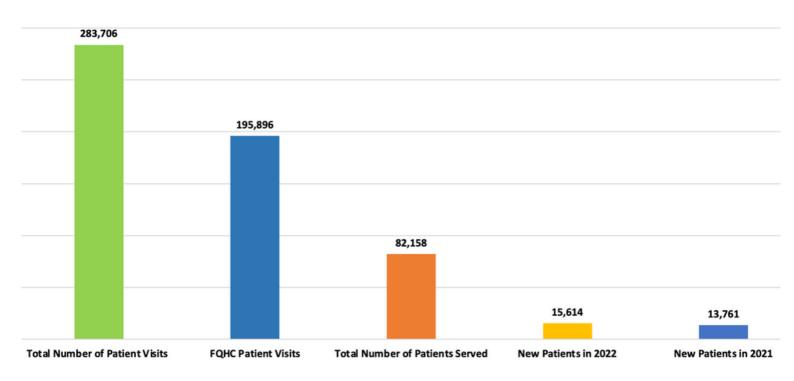


- 1. Clinical volunteers
- 2. Affordable medications
- 3. Access to specialty care consults for patients
- 4. Operations funding
- 5. Clinical staff
- 6. Fundraising
- 7. Grant writing
- 8. Incentives for staff/volunteers
- 9. Flu vaccines
- 10. Diagnostic equipment

PATIENT INFORMATION

In 2022, most of the VRP Program sites that were closed during the pandemic reopened, and camps and other pop-up health events reinstated in-person events.

Patient Volumes

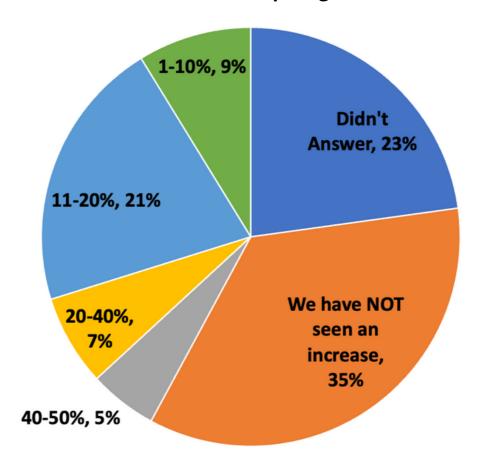


Please note that not all VRP Program sites track "total number of patients" or "new patient" data separately.

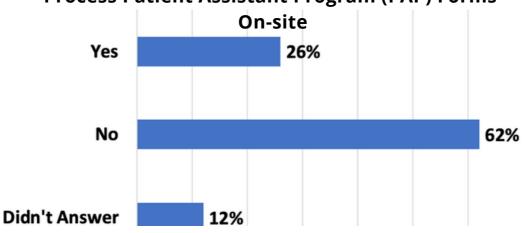
SITE SURVEY RESULTS PATIENT INFORMATION

42% of sites that responded stated an increase in patients inquiring about care.

Increase in Patients Inquring About Care

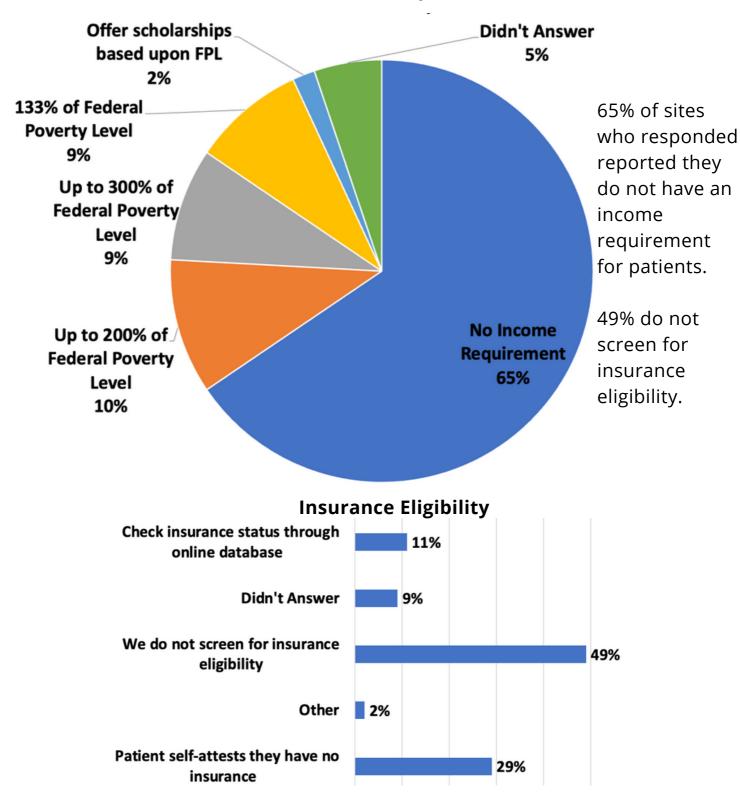




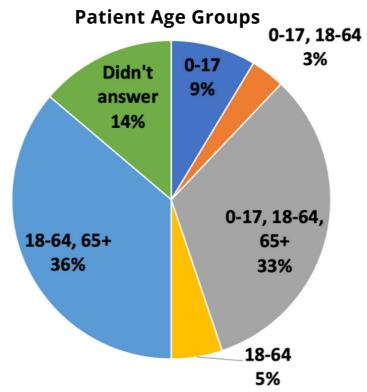


SITE SURVEY RESULTS PATIENT INFORMATION

Patient Income Requirement

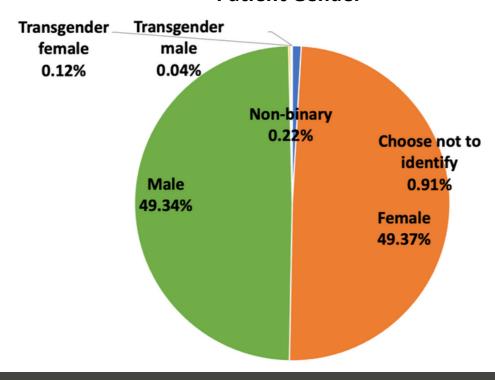


PATIENT INFORMATION



Patient age groups served and gender data was reported from those sites that track this information. 38% of sites stated that they do not track patient gender.

Patient Gender



PATIENT INFORMATION

Over 30% of the site survey respondents noted that they do not track patient race. The majority of the sites that track patient race do not track race and ethicity separately.

Patient Race Native Hawaiian or other Pacific American Indian or **Islander patients** Alaska Native 1% patients 2% Racial identity **Asian patients** Black or African does not align with 6% **American** patients other categories 3% 4% **Caucasian patients** Hispanic/LatinX 35% patients 49%

APPENDIX 1

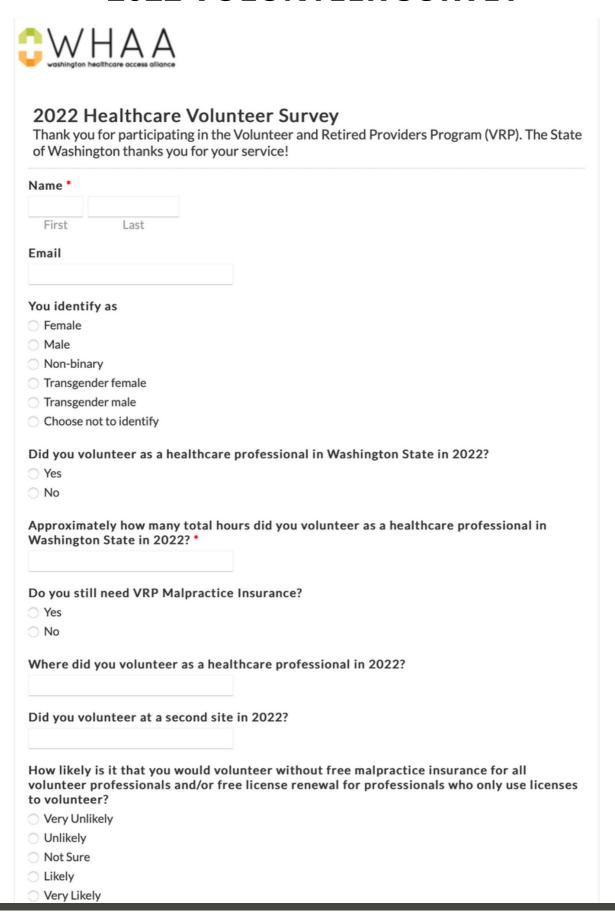
HEALTHCARE VOLUNTEER SUGGESTIONS/COMMENTS

- I appreciate the support of this program to help us to take care of an underserved population in Yakima County -- mostly uninsured farm workers who keep food on our tables.
- The VRP program has made it possible for me to volunteer because I cannot afford individual malpractice insurance. This is a vital program!
- Thank you for this program! As someone entering a volunteer role in a professional capacity for the first time in many years, I feel this program certainly serves to reduce barriers to me serving my community.
- I have been slow to volunteer due to COVID concerns.
- It's reassuring to know I can volunteer in public health and though unlikely to need liability insurance, it's there behind me if needed.
- COVID made it hard for me to volunteer. I hope to volunteer more this year. I still keep my Oregon and Washington dental licenses current.
- I appreciate this provision immensely. I came from a state which did not have a VRP program. This programs helps me to feel more secure in volunteering in the areas conmensurate with the full breadth of my skill set, which I absolutely feel compelled to do to utilize my gifts for those with inequity in access to healthcare.
- Providing a professional name tag would be helpful since some of us aren't affiliated with a healthcare institution anymore. I think it helps make us appear more legitimate to the patients. Thanks!
- I really enjoyed my volunteer time, but at 75 years of age, it was finally time to really retire. Thanks, everyone, for support of this program. It really does fill an urgent need.

SITE SUGGESTIONS/COMMENTS

- It's difficult for us to pull some of the data requested above, even though we do
 collect some of this information on paper, the aggregation of the information is
 severely limited by our database systems and report request pathways at this
 time.
- This is a little difficult to complete. We offer a one week day camp for children living with Type 1 diabetes. We are NOT a clinic. We have medical and non medical professionals volunteer their time and services to help make Panther Day Camp possible. Our agency, Diabetes Association of Pierce County provides 5 services to the community free of charge. We offer diabetes prevention and education programs. This questionnaire is for clinics, so some items just do not fit. Maybe, there could be a separate questionnaire for groups like us. Thanks
- Greatly appreciate the organization in Washington and wish Oregon had the same opportunity.
- We have been closed since March 2020.
- Funding for database systems, data migrations support, and staffing would be a need that would be helpful for our agency, as well as the items toggled above.
- We would love to add you to our discipline-specific outreach lists to connect retired volunteers to event opportunities. Let us know the best route to do so!
- We do a lot of health fairs that's why our numbers are so high. Students also count all client interactions as we do not have official "appointments".

2022 VOLUNTEER SURVEY



2022 VOLUNTEER SURVEY

ities	
year?	
State / Province / Region	
United States	0
Country / Region	

APPENDIX 42022 SITE SURVEY



Volunteer & Retired Providers 2022 Site Survey Thank you for your participation in the Volunteer and Retired Providers (VRP) Program. We survey all participating organizations annually to track the value of this publicly-funded program and to maintain accurate program records.				
Please complete by May 31st.				
Please contact Kris Ives at vrp@wahealthcar questions.	reaccessalliance.org or 267-713-9422 with any			
CONTACT INFORMATION				
Organization name *				
If your name, address or contacts have changed New name	ged, please fill out the section below.			
Organization main physical address				
Street Address				
City	State / Province / Region			
Postal / Zip Code County for main physical address				
Website address (type N/A if you don't have	one)			
Organization phone (for patient and volunted) ### ### ####	er inquiries)			
Direct contact phone (for WHAA staff to rea	ch you)			

APPENDIX 42022 SITE SURVEY

SUMMARY PATIENT CARE INFORMATION	
Number of total patient visits in 2022 *	
Number of total patients in 2022	
Number of new patients in 2022	
ORGANIZATION	
Your organization is considered a/an	
If you have any questions on these categorie vrp@wahealthcareaccessalliance.org.	s, please contact Kris at
Addiction Recovery and Support Program	
Camp	
FQHC	
Free/Charitable Clinic	
☐ Homelessness Services Organization	
Hospice	
Medical Reserve Corp	
Other	
Parish Health	
Pop Up Free Clinic	
Rural Health Clinic (HRSA)	
School Based Health Clinic	
☐ Tribal Health Clinic	
If you selected other, please define below.	
Does your organization have multiple sites?	J
○ Yes	
○ No	
Does your organization have (a) mobile unit(s)?
○ Yes	
○ No	
Is your organization faith-based?	
○ Yes	
○ No	

Do you use an electronic health record/electronic medical record system? If so, which one?
○ No
○ Yes - athenahealth
○ Yes - DataNet Solutions
○ Yes - eClinical Works
○ Yes - Epic
○ Yes - MD Rhythm
○ Yes - Practice Fusion
○ Yes Other
Does your organization have an on-site pharmacy or dispensary?
○ Yes
○ No
Does your organization use pharmacy management software?
Yes
○ No
No but we would like to
Where do your patients fill their prescriptions if not on-site? Mark all that apply.
□ Costco
□ CVS
☐ Kroger
☐ RX Outreach
☐ Target
Walgreens
☐ Walmart
□ Other
Additional locations
Does your organization help process Patient Assistant Program (PAP) forms for your patients on-site?
○ Yes
○ No
In what hind of ones is your experiention leasts 12
In what kind of area is your organization located?
Rural
Suburban
Urban

APPENDIX 42022 SITE SURVEY

Rural
Suburban
Urban
Does your organization exclusively serve any of the following areas?
Entire state
No patient location requirement
Specific zip codes, please list
Specific counties, please list
Other
If you serve specific zip codes, counties, or selected other, please note below.
Does your organization have an income requirement for patients?
No income requirement
Up to 100% of Federal Poverty Level (FPL)
Up to 200% of FPL
Up to 300% of FPL
Up to 400% of FPL
Other
If other, please note below.
in other, prease note below.
How does your organization screen for Medicaid or other insurance eligibility?
Check insurance status by contacting Medicaid office
Check insurance status through online database
Patient must show Medicaid denial letter
Patient self-attests they have no insurance
☐ We do not screen for insurance eligibility
Other

Eroo/No	Suggested donation		es fee	Slidii scal fee	e '	Medicaid/Me or state C		Other payer
				0				0
				0		0		
ested don								
iedicatio	on							
		zation pr	ovides a	t this ti	me (on-site and	off-site	e).
lf-manager nt	ment education	on						
lf	ervices y ducation p	edication ervices your organic ducation program -management education	ervices your organization pr ducation program -management education	edication ervices your organization provides and ducation program f-management education	edication ervices your organization provides at this tiducation program f-management education	edication ervices your organization provides at this time (ducation program	edication ervices your organization provides at this time (on-site and ducation program f-management education	edication ervices your organization provides at this time (on-site and off-site ducation program f-management education

☐ Dermatology
☐ Dietitian/nutrition
☐ Discounted pharmacy cards
☐ Domestic violence counseling/assistance
☐ Employment assistance
☐ Family planning
☐ Fill Rxs on-site
☐ Financial assistance
☐ Health education
☐ HIV treatment
Labs
 Legal assistance
☐ Mammogram referrals
☐ Maternal health
☐ Medication therapy management (MTM)
☐ Mental health
National diabetes prevention program
☐ Neurology
OBGYN
☐ On-site mammography
Orthopedic
☐ Other diabetes education
☐ Pediatric
Physical therapy
Podiatry
☐ Prenatal care
☐ Primary care
Referrals
Screening - Breast cancer
Screening - Cervical cancer
Screening - Colorectal cancer
Screening - Lung cancer
Screening - Oral cancer
Screening - Other cancers
Screening - Skin cancer
Social services Secial tracers
Specialty care
□ STI/STD testing □ Substance abuse treatment
Surgery

Tobacca correction counceling	
Tobacco cessation counseling	
Tobacco cessation referral	
Tobacco cessation treatment	
Translation services	
Transportation assistance	
Vaccinations - adult	
Vaccinations - child	
Vaccinations - COVID 19	
Vaccinations - Flu	
Vision	
Women's health	
Write Rxs for filling off-site	
Do you provide healthcare services and/or outreach in multip	le languages?
Yes	io idiigaages.
○ No	
<i>y</i> 110	
Please note the languages with which you provide services and/or outrostaff or interpreters).	each (e.g. through multilingual
tan or interpreters).	Yes
	165
African languages (Swahili, Amharic/Somali, Bantu, Sudanese, Yoruba, etc.	
American Sign Language (ASL)	
American Sign Language (ASL) Chinese (Szechuan, Mandarin, Cantonese, etc.)	
Chinese (Szechuan, Mandarin, Cantonese, etc.) Eastern European languages (Russian, Georgian,	
Chinese (Szechuan, Mandarin, Cantonese, etc.) Eastern European languages (Russian, Georgian, Ukranian, etc.	
Chinese (Szechuan, Mandarin, Cantonese, etc.) Eastern European languages (Russian, Georgian, Ukranian, etc. French Indian languages (Hindu, Punjab, Urdu, Bengali,	
Chinese (Szechuan, Mandarin, Cantonese, etc.) Eastern European languages (Russian, Georgian, Ukranian, etc. French Indian languages (Hindu, Punjab, Urdu, Bengali, Telugu, Tamil, etc.) Middle Eastern languages (Arabic, Persian, Dari,	
Chinese (Szechuan, Mandarin, Cantonese, etc.) Eastern European languages (Russian, Georgian, Ukranian, etc. French Indian languages (Hindu, Punjab, Urdu, Bengali, Telugu, Tamil, etc.) Middle Eastern languages (Arabic, Persian, Dari, Pashto, Aramaic, Yiddish, etc.)	
Chinese (Szechuan, Mandarin, Cantonese, etc.) Eastern European languages (Russian, Georgian, Ukranian, etc. French Indian languages (Hindu, Punjab, Urdu, Bengali, Telugu, Tamil, etc.) Middle Eastern languages (Arabic, Persian, Dari, Pashto, Aramaic, Yiddish, etc.) Native American languages Non-Spanish, Indigenous languages spoken in	
Chinese (Szechuan, Mandarin, Cantonese, etc.) Eastern European languages (Russian, Georgian, Ukranian, etc. French Indian languages (Hindu, Punjab, Urdu, Bengali, Telugu, Tamil, etc.) Middle Eastern languages (Arabic, Persian, Dari, Pashto, Aramaic, Yiddish, etc.) Native American languages Non-Spanish, Indigenous languages spoken in Central/South America (Mam, Quechua, etc.)	

Spanish	
Other(s)	
you selected other(s), please note below.	
<i>b</i>	
lease note the languages that are needed but you do not have the abi	lity to provide.
,	Yes
African languages (Swahili, Amharic/Somali, Bantu, Sudanese, Yoruba, etc.)	0
American Sign Language (ASL)	
Chinese (Szechuan, Mandarin, Cantonese, etc.)	
Eastern European languages (Russian, Georgian, Ukranian, etc.	
French	
Indian languages (Hindu, Punjab, Urdu, Bengali, Telugu, Tamil, etc.)	
Middle Eastern languages (Arabic, Persian, Dari, Pashto, Aramaic, Yiddish, etc.)	0
Native American languages	
Non-Spanish, Indigenous languages spoken in Central/South America (Mam, Quechua, etc.)	0
None, only English	
Southeast Asia languages (Vietnamese, Cambodian, etc.)	0
Spanish	

Staffing	
Technology	
Volunteers	
If other, please note below.	
SOCIAL DETERMINANTS OF HEALTH	
Does your organization have a system in place to screen (social determinants of health)?	patients for non-clinical needs
 Yes, and we have examples to share 	
Yes, we are working on this	
○ We need help with this	
○ No	
If yes, which of these social determinants do you addres	s? Please select all that apply.
Ability to afford prescribed medications	
○ Child care	
○ Education	
○ Employment	
Finance	
O Food insecurity	
Housing	
Literacy	
O Personal safety	
○ Transportation	
Utilities	
Does your organization have a system in place to refer p (social determinants of health)?	patients for non-clinical needs
Yes, and we have examples to share	
Yes, we are working on this	
○ We need help with this	
○ No	

Please select the top ten needs for your organization.	DI L
	Please choose ten
Access to imaging/radiology services	U
Access to laboratory services	
Access to specialty care consults for providers	
Access to specialty care for patients	
Affordable medication	
Board development training	
Capital funding	
CEU opportunities	
Clinical staff	
Clinical volunteers	
Community health workers	
Contraceptives	
Cryptocurrency donation training	
Dehumidifiers	
Diagnostic instruments/equipment	
Disease management funding	
Diversity and inclusion training	
Ductless heat pumps	
Energy efficient doors	
Energy efficient light bulbs	
Energy efficient refrigerators/freezers	
Energy efficient windows	
Flu vaccines	
Fundraising	
Generators	

Gift cards for patients	
Grantwriting	
Heat pump water heaters	
Incentive/reward funding for staff/volunteers	
Infectious disease training	
Inventory management system	
Laptops/computers/tablets	
Learning collaboratives for special health topics or services (e.g. dental, mental health)	
Learning collaboratives with faith-based clinics	
Learning collaboratives with similar budget clinics	
Learning collaboratives with similar patient size clinics	
Marketing and public relations resources	
Mental health professional development for clinicians	
Mental health self-care for staff/volunteers	
Mentorship to expand hours/capacity	
Mobile unit funding	
Non-clinical staff	
Non-clinical volunteers	
Operations funding	
Personal protective equipment	
Pharmacy software	
Programmatic funding	
Room air purifiers	
Self-care funding	
Solar panels	
Solar water heaters	

Storm windows			
Technical assistance			
Technology funding			
Telehealth diagnostic equipment			
Telehealth/telemedicine products			
Translation/interpretation services			
Transportation vouchers			
Vaccine refrigerators			
Value of service methods			
Virtual learning opportunities			
Website development			
Number of paid dental providers (DDS, RDH, dental assistants) Number of paid clinical providers (MD, NP, PA, DO) Number of paid mental health providers (counselors, therapists, LCSW) Number of paid nurses (RN, LPN, medical assistants) Number of paid pharmacy providers (RPh, pharmacy technicians) Number of paid community health workers No paid staff - all volunteer			

PATIENT QUESTIONS	
the estimated percentage of 1-%10 11%-20% 20%-40% 40%-50% Over 50% We have NOT seen an increase	
Number of patients who are	
Employed	
Unemployed	
■ We do not collect employment Number of patients who are	information.
Insured	
Insured but unable to afford care (underinsured)	
Uninsured	
We do not collect insurance inf Approximate percentage of p previously diagnosed with	formation. patients who have been diagnosed or report having been
Asthma	
Current smoker (tobacco/vaping)	
Depression/anxiety	
Diabetes	

High cholesterol	
Hypertension	
Percentages Unknown	
Patient gender We do not collect gender infor	rmation.
Number of male patients	
Number of female patients	
Number of non-binary paties	nts (identifying as any gender other than female or male)
Number of patients that cho	ose not to identify
Number of transgender fema	ales
Number of transgender male	25
Patient race and ethnicity We do not collect race and eth	nicity information
Number of American Indian	or Alaska Native patients
Number of Asian patients	
Number of Black or African	American patients
Number of Caucasian patien	ts
Number of Hispanic/LatinX	patients
Number of Native Hawaiian	or other Pacific Islander patients
Number of patients whose ra	acial identity does not align with above categories

Please provide any suggestions	as to how we can bette	er support you - thank you for all you
do for the people of Washingto		
	//	
		nowledge and belief, the statements
provided on this form are true I accept	and correct.	
Тассерс		
Save & Resume Later		
SUBMIT		