

# Volunteer and Retired Providers Program 2016 and 2017 Survey Results

Compiled June 2018



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## Summary of Findings

The Volunteer and Retired Providers (VRP) Program, funded by the Washington State Department of Health, supports Washington's healthcare safety net by leveraging the power of professional healthcare volunteers and mitigating common financial barriers to healthcare volunteerism. Administered by Washington Healthcare Access Alliance (WHAA), the 2016 and 2017 VRP Program Survey found that volunteers make up a valuable component of the state's healthcare safety net.

WHAA approximates that 1,500 healthcare providers actively use the VRP Program to support their volunteer work. 473 active providers completed the 2016 survey and 621 active providers completed the 2017 survey. These responses showed that healthcare providers contributed 37,470 volunteer hours in 2016 and 48,543 volunteer hours in 2017. We expect that these hours are an underestimation of the total hours contributed by healthcare volunteers across the state. Average hours per provider were 99.7 in 2016 and 95.2 in 2017, with a median of 48 hours per provider both years.

VRP sites – a variety of free/charitable clinics, periodic health fairs, camps, school-based health clinics, federally qualified community health centers, rural health clinics, homelessness outreach units, and more – provided care primarily to low-income and underserved patients. Total patient care hours provided by VRP sites were 52,356 in 2016 and 52,800 in 2017 (a per-site average of 858 hours in 2016 and 825 hours in 2017 and a per-site median of 192 hours in 2016 and 186 hours in 2017).

84,022 patient visits were reported in 2017 and 81,248 patient visits were reported in 2016. If each of these patients had been treated in an emergency room setting at the cost of \$1,500 per visit,<sup>1</sup> the value of this care would be \$126,033,000 in 2017 and \$121,872,000 in 2016. Direct costs to the State of Washington to administer the VRP Program are \$110,000 per year. This represents a return on investment of between \$1,108-\$1,145 of for every dollar spent.

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<sup>1</sup> Cody, E. (2015). *How Much Will Your Next ER Visit Cost?* [online] Washington State House Democrats. Available at: <https://housedemocrats.wa.gov/eileen-cody/how-much-will-your-next-er-visit-cost/> [Accessed 27 Jun. 2018].



## Introduction

Healthcare volunteers are a crucial pillar of public health practice, most commonly serving in safety net settings. The decentralized nature of volunteerism makes it difficult to measure the precise impact of healthcare volunteerism.

In Washington State, however, this impact can be estimated, thanks to the Volunteer and Retired Providers (VRP) Program, a widely used, state-funded program that mitigates common financial barriers to healthcare volunteerism. WHAA estimates that approximately 1,500 active healthcare volunteers use VRP Program support to provide care to low-income patients in a variety of settings. The VRP Program's annual survey allows the state to measure the impact of healthcare volunteerism by quantifying this work.

This survey report includes data from VRP Program operating years 2016 and 2017.



## About the Volunteer and Retired Providers Program

The Volunteer and Retired Providers (VRP) Program is a unique, 26-year-old program funded by the state of Washington that strengthens the state's healthcare safety net by supporting healthcare volunteerism for underserved patients.

Washington Healthcare Access Alliance estimates that over 1,500 volunteer healthcare professionals actively use the VRP Program to provide care to underserved patients. The VRP Program supports volunteer providers by removing the financial barriers to healthcare volunteerism, primarily by paying malpractice insurance premiums for licensed healthcare volunteers and covering the cost of professional licensure for volunteers solely using their license for volunteer work (typically retired providers).

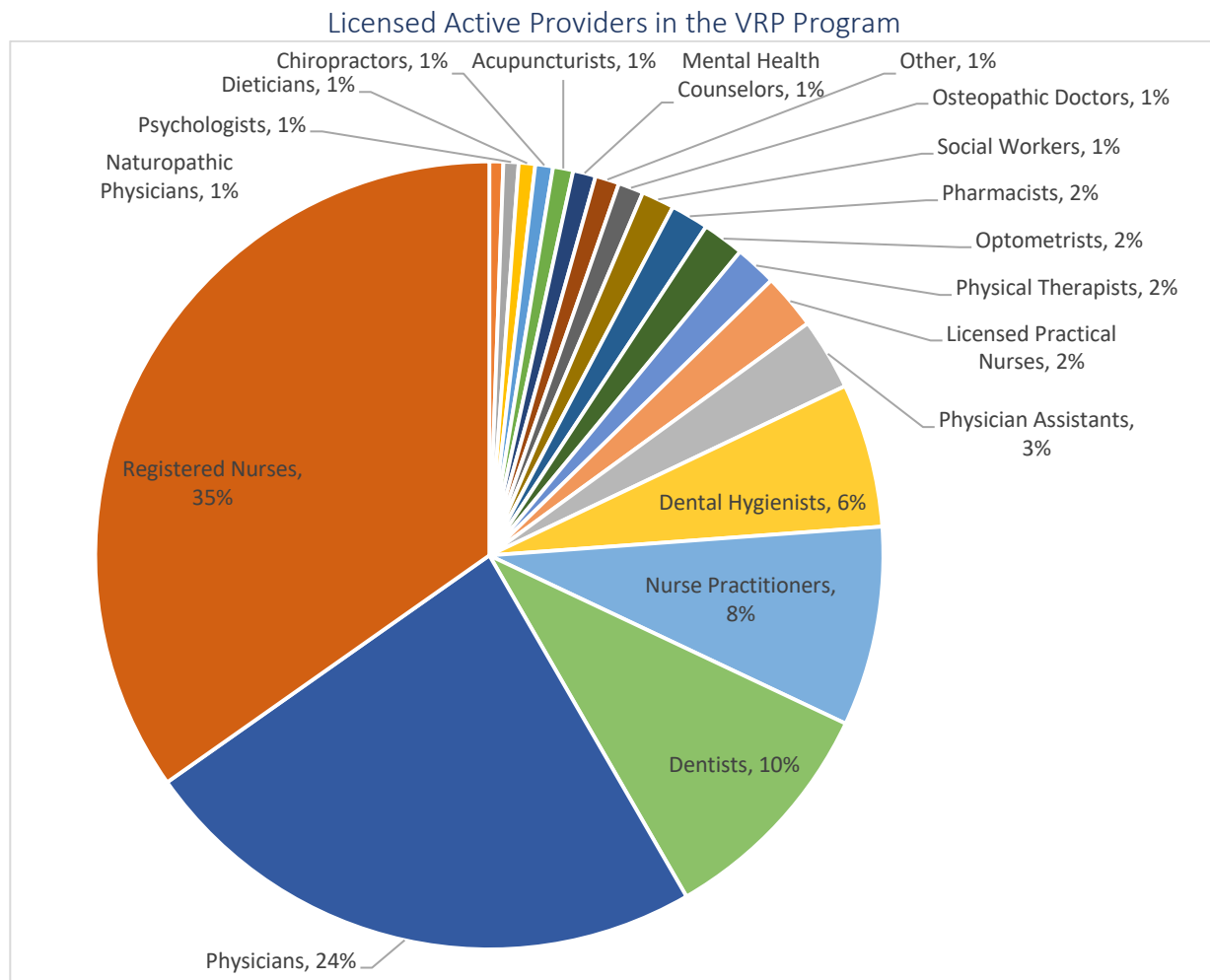
The VRP Program is unique in the state-level recognition it provides to the role and value of healthcare volunteers.



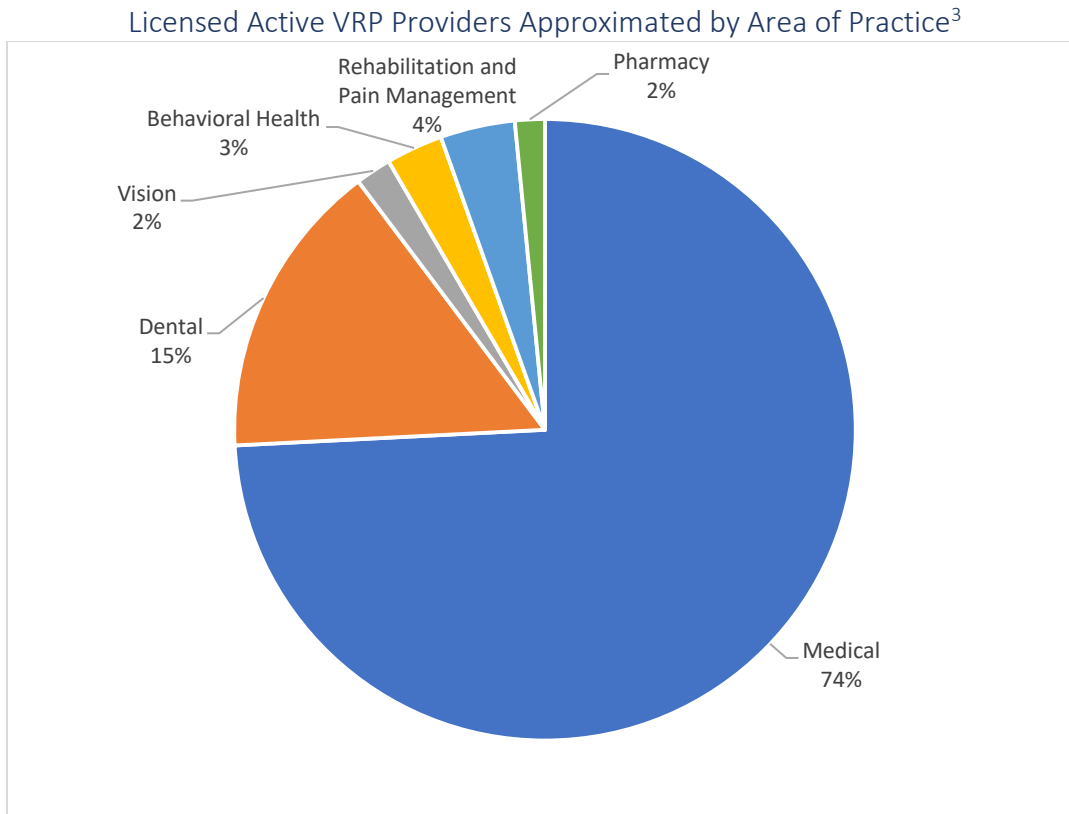
## History of the Volunteer and Retired Providers Program

The VRP Program came into being in 1992, when nine retired healthcare professionals advocated for malpractice insurance coverage to support their volunteer work. The Program was written into law that year via [RCW 43.70.460](#), [RCW 43.70.470](#), and Chapter [246-564 WAC](#), with the explicit goal of leveraging the power of healthcare volunteerism to serve low-income and underserved patients.

Since its inception, the VRP Program has evolved to include Washington State Department of Health licensed volunteers, including physicians, dentists, nurse practitioners, nurses, physician assistants, and more, who use the program for malpractice insurance and/or license renewal to support their volunteer activities. Volunteers participated at over 100 sites serving approximately 81,000 patients in 2016 and 84,000 patients in 2017.<sup>2</sup>



<sup>2</sup> As measured by patient visits.



Initial funding for the VRP Program was provided from the Washington State Legislature to the Office of Community and Rural Health (OCRH) within the Department of Health. Since 2017, the VRP Program has been administered by [Washington Healthcare Access Alliance \(WHAA\)](#), a nonprofit established to provide leadership and support to the healthcare safety net, prioritizing the work of free and charitable clinics.

Washington's expanded [Good Samaritan Law](#) provides additional protection from liability for uncompensated healthcare volunteers.

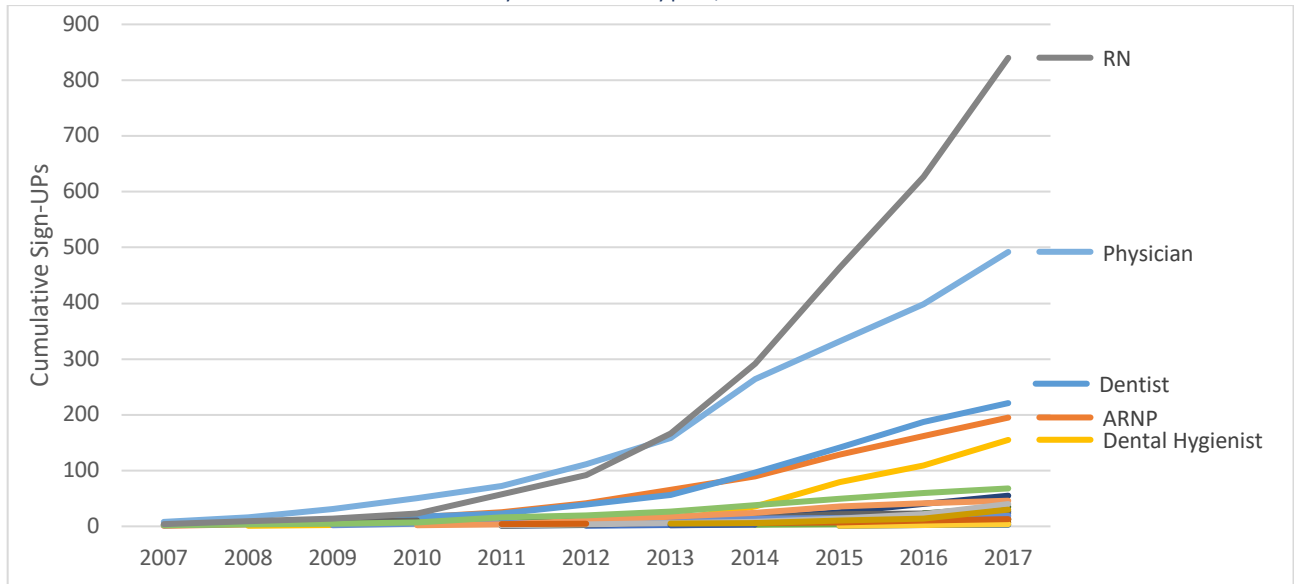
In 2014, the Washington State Legislature passed [Engrossed House Bill 2351](#), authorizing healthcare providers licensed in another U.S. jurisdiction to practice in Washington State as volunteers. Out-of-state volunteers are eligible for VRP malpractice coverage to protect their volunteer work. Out-of-state volunteers may only volunteer in Washington State up to 30 calendar days per year.

VRP Program engagement has steadily increased since the program's inception. Volunteer enrollment in the past ten years has seen a significant increase.

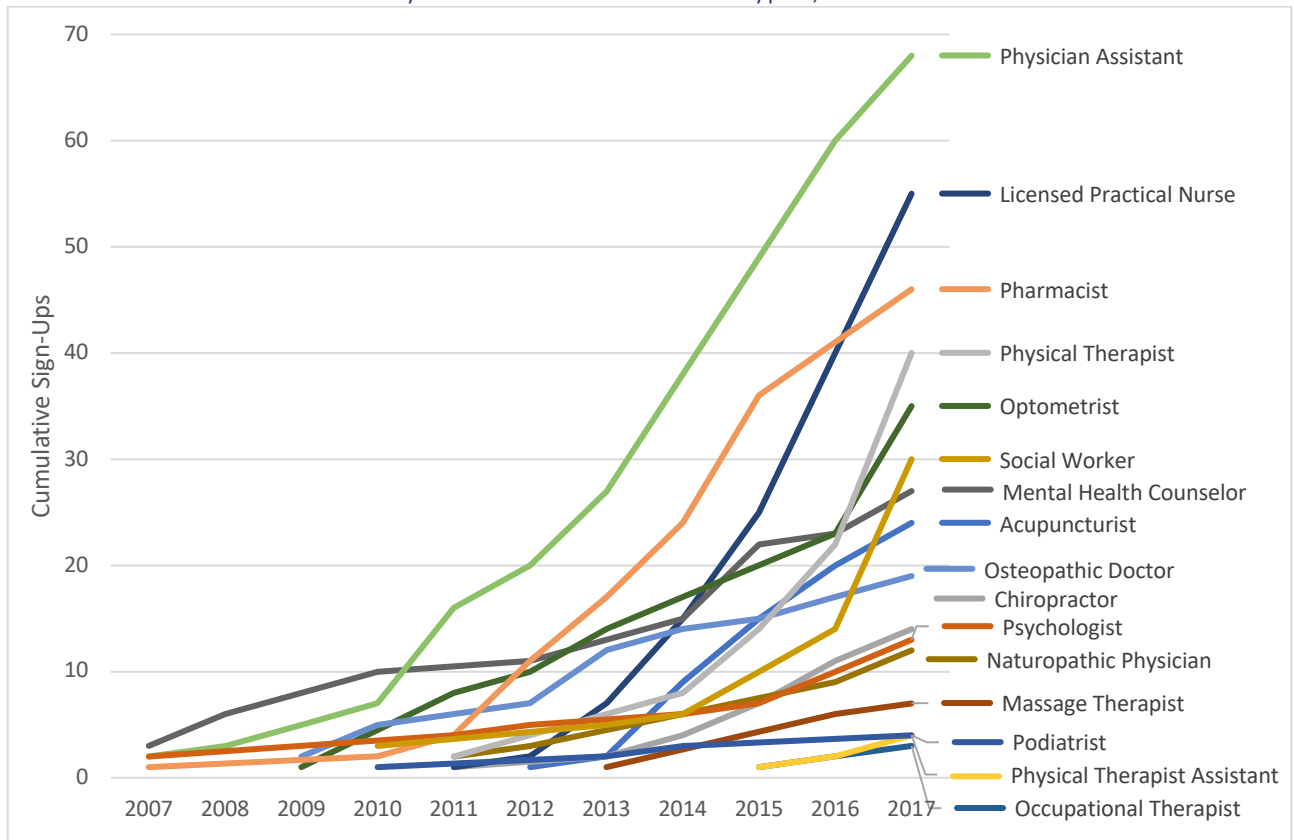
<sup>3</sup> This graph is an approximation of active provider types by area of practice for the purpose of assessing aggregate data; some providers may work within multiple scopes of practice.



Growth by Provider Types, 2007-2017<sup>4</sup>



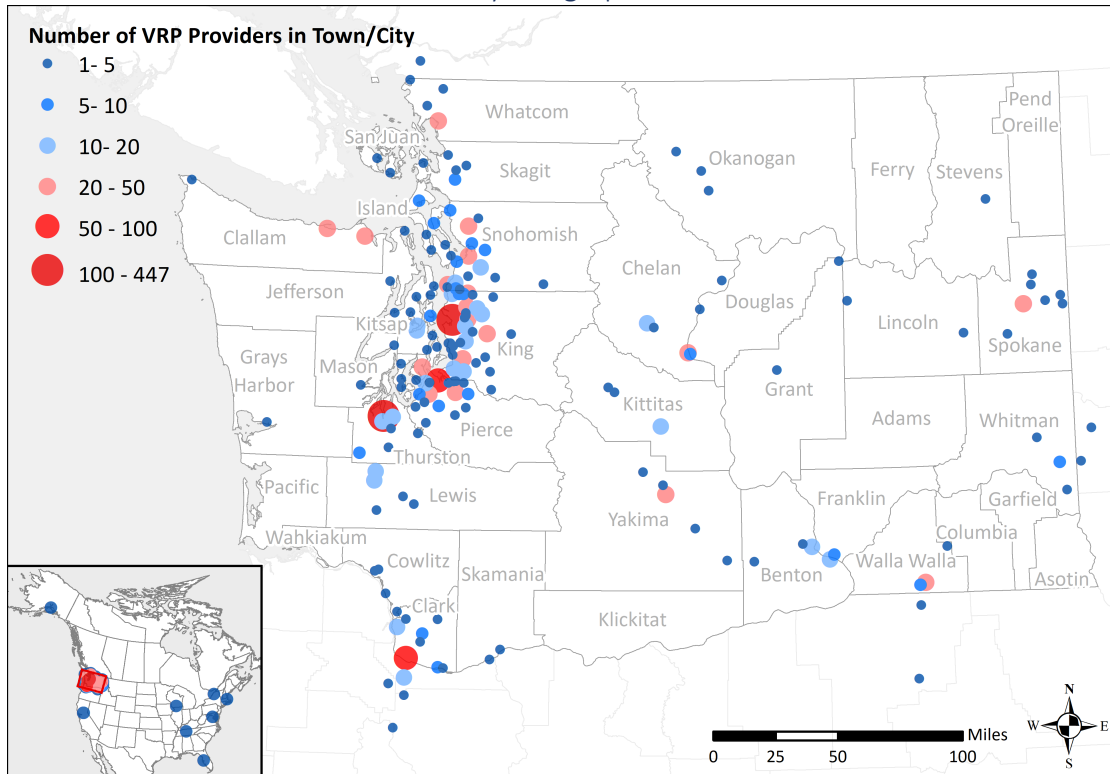
Growth by Lower-Volume Provider Types, 2007-2017<sup>5</sup>



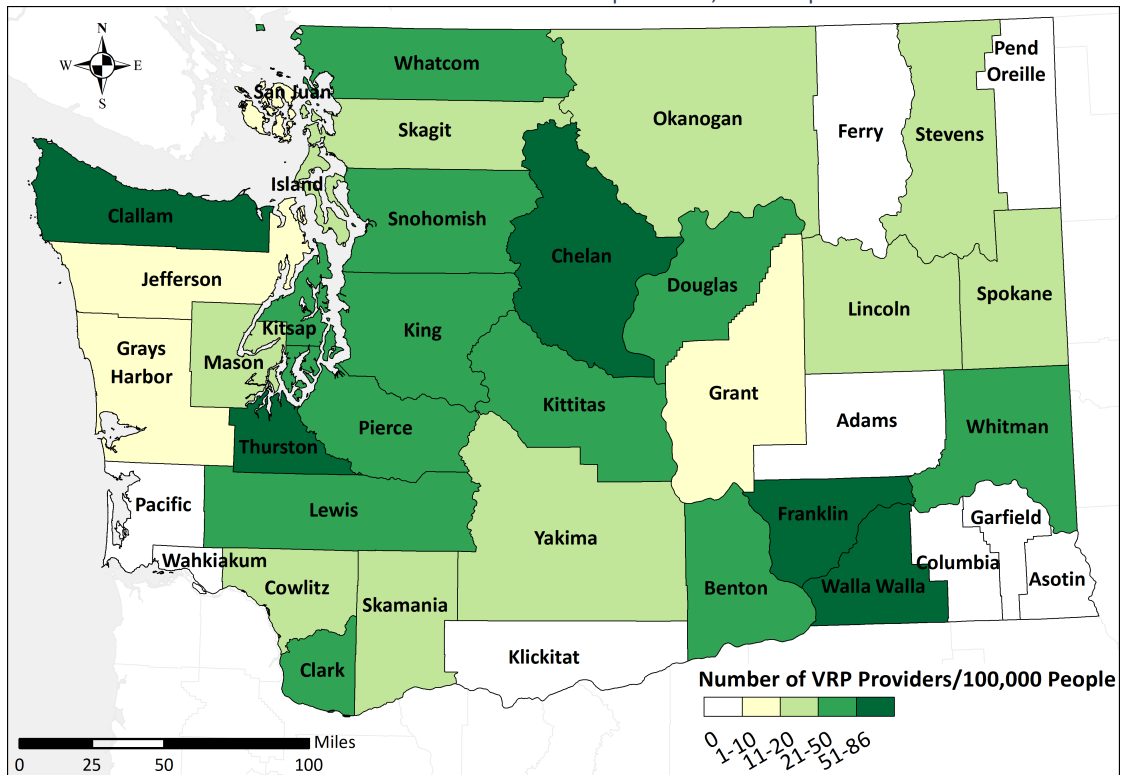
<sup>4</sup> Includes providers who are no longer active in VRP Program to accurately reflect VRP Program activity.

<sup>5</sup> Excludes all provider types with one member enrolled in VRP Program. Includes providers who are no longer active in VRP Program to accurately reflect VRP Program activity.

VRP Providers by Geographical Distribution



Number of VRP Providers per 100,00 People



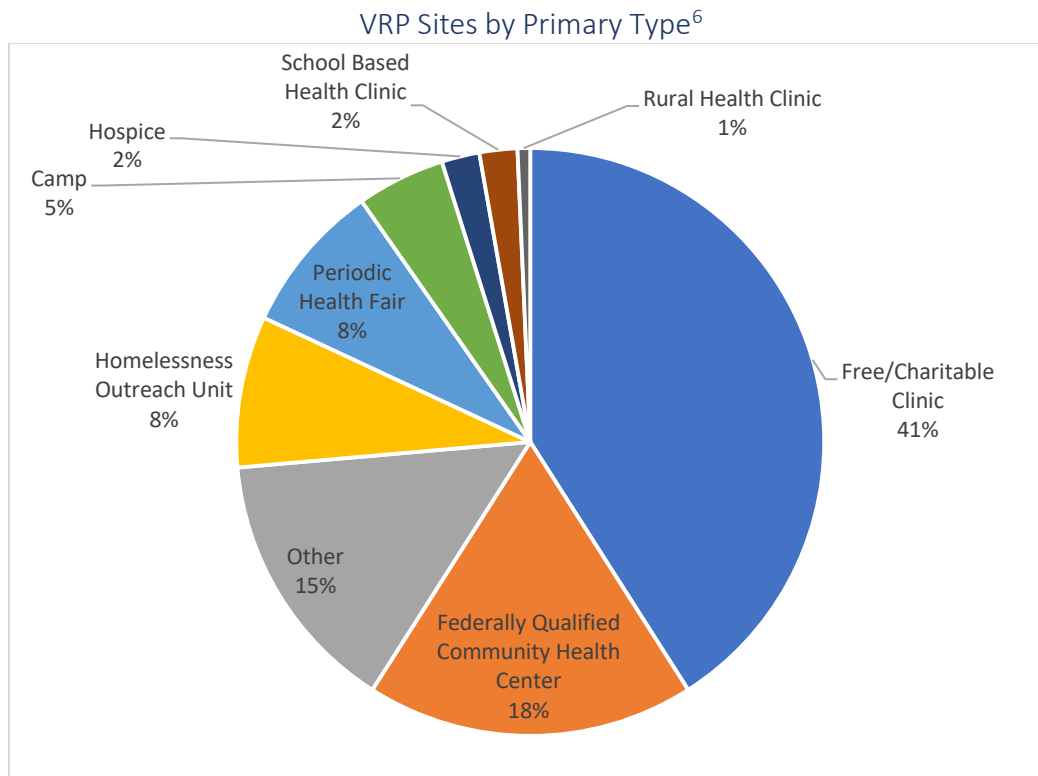
## Limits of the VRP Program

Volunteers in the VRP Program must be associated with a site approved by VRP Program administrators. All VRP sites vetted upon application to the VRP Program to ensure that they serve low-income patients, assure continuity of care, have arrangements for after-hours coverage, have a referral system, and do not compensate volunteers.

Volunteers must provide care limited to noninvasive procedures.

- Noninvasive medical care is defined by the legislation authorizing this program to include giving injections, draining abscesses and suturing minor lacerations. Obstetric care is not covered under noninvasive medical care.
- Noninvasive dental care is defined by the legislation authorizing this program to include diagnosis, oral hygiene, restoration and simple extractions. Orthodontia is not covered under noninvasive dental care.

VRP sites fall into multiple categories, encompassing traditional community clinics to shelters and beyond.



Free/charitable clinics are nonprofit clinics that provide care at no charge to the patient. They may request or suggest a donation, but they do not bill any third-party payers, including

<sup>6</sup> All sites were assigned one "type" for the sake of visualization, however, many sites fall into multiple categories.

Medicaid, Medicare, or commercial insurers. This clinic type may be bricks-and-mortar, mobile, or both. Free/charitable clinics may also hold events in their communities.

Camps utilize volunteer providers to provide care for campers, who are individuals with a health condition around which the camp is organized. Camps are screened for low-income eligibility and most VRP camps serve campers with medical conditions.

Periodic health fairs might also be thought of as free clinic events, in which episodic care is provided for a discrete amount of time.

School-based health clinics serve students within schools and typically focus on primary care, sports physicals, and behavioral health.

Federally qualified community health centers are clinics that qualify for funding under Section 330 of the Public Health Service Act (PHS), and provide care to an underserved area or population, offering a sliding fee scale for comprehensive services.

Rural health clinics can be public, for-profit, or non-profit entities, and are located in rural and underserved areas.

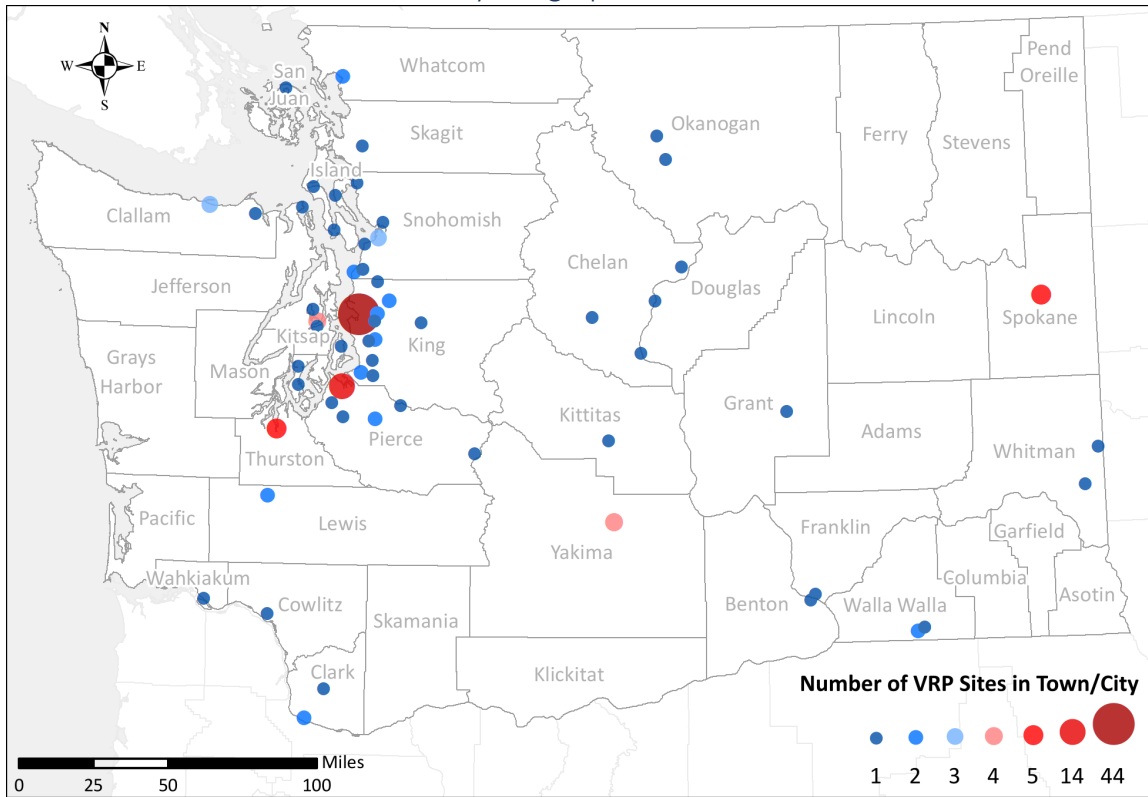
Homelessness outreach units are specifically focused on serving homeless patients and may be located in a specific physical location or mobile. Many homelessness outreach units may be event-based or ongoing.

VRP sites classified as “other” may include a variety of entities, such as for-profit organizations providing a set level of charity care to low-income patients, FQHC lookalikes, and specialty care coordination organizations.





VRP Sites by Geographical Distribution



## Survey Process & Methodology

Washington Healthcare Access Alliance (WHAA) began the 2016 and 2017 Volunteer and Retired Providers (VRP) Program surveys on January 17, 2018. The surveys were primarily conducted electronically via email, with outreach to VRP sites and person-to-person calls to providers from a random sample of program participants.

WHAA reviewed survey questions with the Washington State Department of Health, the WHAA Board of Trustees, and other stakeholders. Survey questions were also reviewed by national free clinic researcher and academic, Dr. Julie Darnell.

WHAA sent links to the electronic survey and an introduction to the survey process to all listed VRP providers and sites on January 17. WHAA sent a survey reminder to all those who didn't respond to the survey on February 9 and at the end of February. Reminders were also included in all clinic director messages (four were distributed during this time period) and in the monthly clinic calls held by WHAA.

WHAA implemented a survey outreach process for providers in order to correct for any non-responses via email. WHAA selected a random sample of 400 suspected active providers to contact via telephone.

WHAA hosted a "call night" on February 20, 2018 with several volunteers from partner organization Data for Good. Calls were placed to 166 randomly selected active VRP providers over the course of two hours. 12 surveys were completed over the phone, and survey reminders were left via voicemail for all other providers. WHAA staff then called the remaining 234 providers from the random sample. In total, 82 providers from the random sample completed a survey, with a response rate of 25% (21% including inactive providers in the total).<sup>7</sup>

WHAA closed the provider survey on April 25. WHAA closed the site survey on May 24.

Because the VRP surveys collected data for both 2016 and 2017, surveys and constituent lists were divided by sign-up year to minimize confusion among constituents. VRP providers and sites that signed up in 2017 received a survey asking only for data from 2017, whereas all other VRP providers and sites received a survey link for both 2016 and 2017 data.

For providers and sites who expressed difficulties completing the electronic survey, WHAA conducted survey questions over phone and email, rather than via electronic forms.

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<sup>7</sup> 64 providers were identified as inactive through the random sample, either self-reported or by verifying licensure status, bringing the random sample to approximately 16.5% inactive. It is likely that more providers in the random sample are inactive (i.e. not currently volunteering and non-responsive to the survey).

The survey identified a number of inactive providers. Survey response rates were calculated without including providers identified as inactive in the VRP Program.

### **Hours Calculation**

WHAA corrected provider hour estimates that appeared too large to be realistic in the interest of not overestimating service hours.

- Six responses were over 167 hours per month; WHAA divided these numbers by 12 with the assumption that these responses were a yearly estimate.
- All providers who volunteer at events that occur once a year, and who reported monthly hours above 7 hours/month, were divided by 12, with the assumption that these responses were a yearly estimate. (For instance, a provider volunteering once a year reporting 10 hours/month would result in 120 hours total, an unlikely number for once-a-year events.)

If VRP sites offered a range of monthly patient care hours (e.g. 30-60 hours per month), WHAA used the lower number to offer a conservative estimate.

### **Patient Visits/Unduplicated Patients**

Many VRP sites do not track unduplicated patients but do track patient visits (not all sites track precise numbers for patient visits). However, if a site reported numbers unduplicated patients but not patient visits, we used their reported unduplicated patient number as a stand-in for the number of patient visits, with the assumption that this would provide a conservative estimate of patient visits. If a site responded with patient visits but not unduplicated patients, we did not calculate a number of unduplicated patients.



## Site Survey Results

Sixty-seven of 106 active sites responded to the 2017 survey (63% response rate), and 62 of 99 active sites responded to the 2016 survey (67% response rate).<sup>8</sup>

VRP sites reported an increase of 444 patient care hours from 2016 to 2017, an increase of approximately 0.85%. VRP sites reported an increase of 2,774 total patient visits from 2016-2017, an increase of approximately 3% in patient visits to free and charitable care services.

We anticipate that the difference in numbers between number of patient visits and number of unduplicated patients is partially due to VRP sites' capacity to collect data on unduplicated versus total patients. For many sites, this is a challenge.

Three federally qualified community health centers use VRP volunteers to supplement paid staff. These sites have longer operating hours and serve a much larger patient population than is typical of most VRP sites. The data included below were thus calculated both including and excluding federally qualified community health center responses.

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<sup>8</sup> This response rate codes the University of Washington Service Learning Program, which operates multiple student-run health projects, and Community Health Care, which operates multiple clinics, as single sites.



## Numbers of Patients Served, Reported by VRP Sites

|   | <b>2016</b> | <b>2017</b> |
|---|-------------|-------------|
| Total Patient Care Hours Per Year                     | 322,356     | 322,800     |
| Total Patient Care Hours Per Year, Not Counting FQHCs | 52,356      | 52,800      |
| Total Patient Visits <sup>9</sup>                     | 351,566     | 276,547     |
| Total Patient Visits, Not Counting FQHCs              | 81,248      | 84,022      |
| Total Unduplicated Patients <sup>10</sup>             | 41,445      | 87,980      |
| Total Unduplicated Patients, Not Counting FQHCs       | 41,445      | 41,153      |

## Average Numbers of Patients Served, Reported by VRP Sites

|   | <b>2016</b> | <b>2017</b> |
|---|-------------|-------------|
| Average Patient Care Hours Per Year by Site                       | 5,199       | 4,818       |
| Median Patient Care Hours Per Year by Site                        | 192         | 180         |
| Average Patient Care Hours Per Year Per Site, Not Counting FQHCs  | 858         | 825         |
| Median Patient Care Hours Per Year by Site, Not Counting FQHCs    | 192         | 186         |
| Average Number of Patient Visits Per VRP Site                     | 6,392       | 4,687       |
| Median Number of Patient Visits Per VRP Site                      | 752         | 565         |
| Average Number of Patient Visits Per VRP Site, Not Counting FQHCs | 1,505       | 1,449       |
| Median Number of Patient Visits Per VRP Site, Not Counting FQHCs  | 721         | 564         |

<sup>9</sup> We do not think that the number of patient visits decreased radically from 2016-17 as shown above, but rather that this discrepancy is due to differences in reporting from year-to-year.

<sup>10</sup> We do not think that the number of unduplicated patients increased radically from 2016-17 as shown above, but rather that this discrepancy is due to differences in reporting from year-to-year.

Care hours per patient visit remained stable, at about 38 minutes overall and 34 minutes by averages.

Patient Care Hours Divided by Total Patient Visits

|  | 2016                      | 2017                      |
|--|---------------------------|---------------------------|
| Total Patient Care Hours/Total Patient Visits, Not Counting FQHCs            | 0.64 hours (38.4 minutes) | 0.63 hours (37.8 minutes) |
| Average Patient Care Hour/Average Patient Visit Per Site, Not Counting FQHCs | 0.57 hours (34.2 minutes) | 0.57 hours (34.2 minutes) |
| Median Patient Care Hour/Median Patient Visit Per Site, Not Counting FQHCs   | 0.27 hours (16.2 minutes) | 0.33 hours (19.8 minutes) |

VRP sites also served patients utilizing a wide range of budgets. VRP site budgets range from \$0 to \$1.6 million.<sup>11</sup>

VRP Site Budgets<sup>12</sup>

|  | 2016          | 2017          |
|--|---------------|---------------|
| Total Budgets of VRP Sites                 | \$139,154,048 | \$150,859,548 |
| Total Budgets of VRP Sites, without FQHCs  | \$17,037,694  | \$28,743,194  |
| Average Budget of VRP Sites, without FQHCs | \$362,504     | \$542,324     |
| Median Budget of VRP Sites, without FQHCs  | \$50,000      | \$50,000      |

The number of total volunteers reported by VRP sites far outpaced the number of licensed professionals enrolled in the VRP Program, which demonstrates the large number of individuals engaged in this work as volunteers beyond healthcare providers.

Total Number of Annual Volunteers Reported by VRP Sites

|                |                  |
|----------------|------------------|
| <b>Total</b>   | 11,705           |
| <b>Average</b> | 177              |
| <b>Median</b>  | 43 <sup>13</sup> |

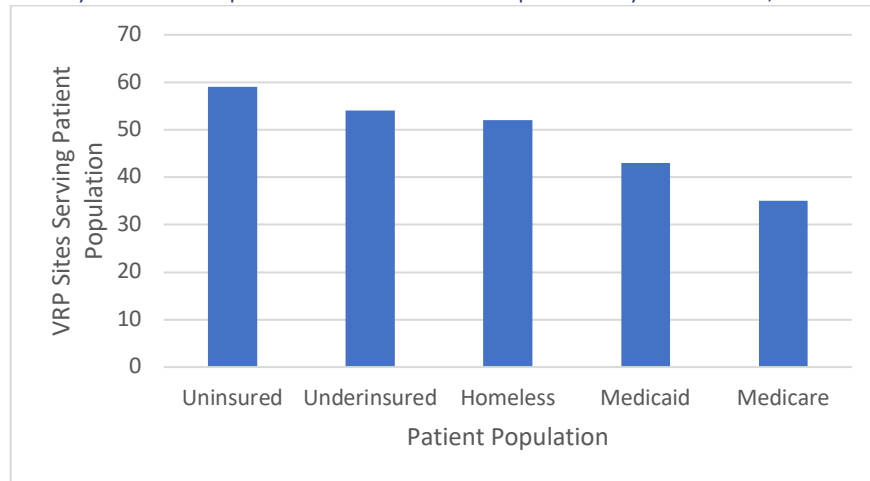
<sup>11</sup> Other budgets included \$7 million for a camp and \$72 million for a federally-qualified community health center.

<sup>12</sup> Average with FQHCs counted: \$2,685,294; Median with FQHCs: \$52,175.

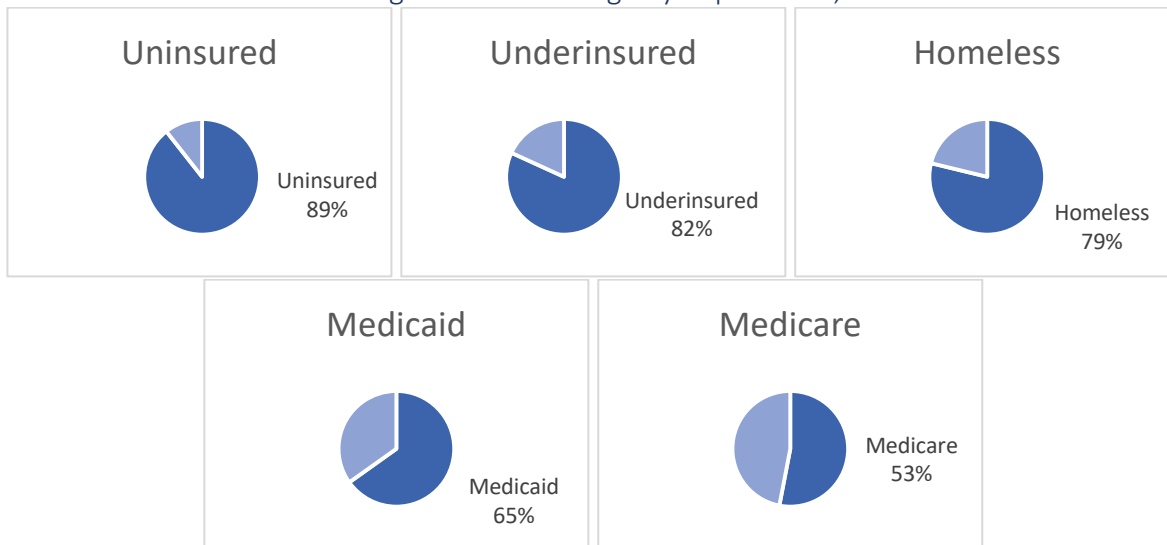
<sup>13</sup> Median rounded up from 42.5.

The surveys asked VRP sites if they served key patient population categories – uninsured, underinsured, Medicare, Medicaid, and homeless patients. VRP sites were asked to note if they serve “key populations” – Medicare, Medicaid, uninsured, underinsured, and homeless populations. Patient populations served by VRP sites were primarily made up of uninsured and underinsured patients, followed by homeless, Medicaid, and Medicare patients.

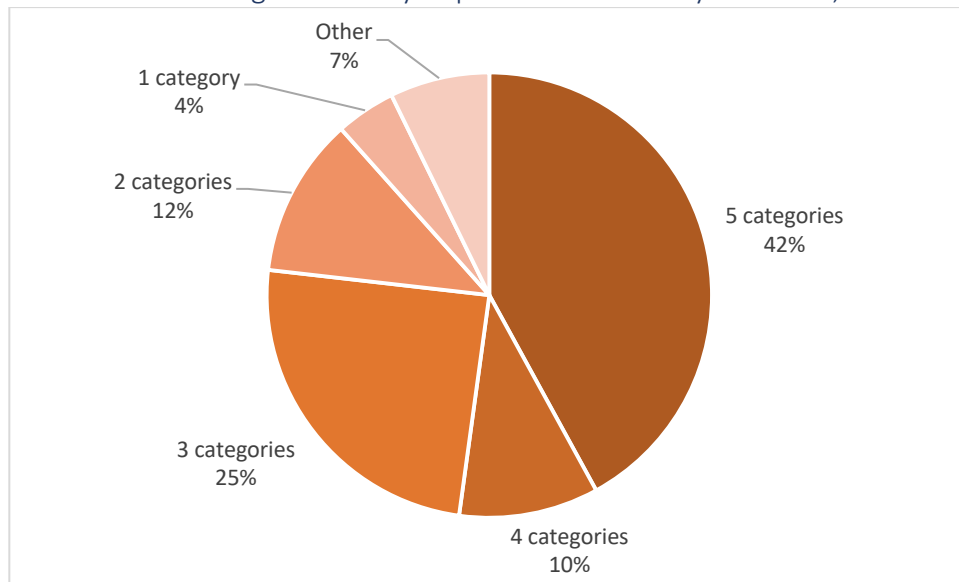
Key Patient Populations Served as Reported by VRP Sites, 2017



Percentage of Sites Serving Key Populations, 2017



These five patient categories are not mutually exclusive – more than 75% of VRP sites reported serving three or more key patient populations.

Number of Categories of Key Populations Served by VRP Sites, 2017<sup>14</sup>

Little change was demonstrated in the patient populations served by VRP Program sites between 2016 and 2017.

VRP sites also offered a wide range of health services, with resource/referrals being the most-common service offered by VRP sites, followed by acute medical, chronic medical, and dental.

Types of Health Services Offered by VRP Sites, 2017



Little change was demonstrated in the distribution of healthcare services offered through VRP Program sites between 2016 and 2017.

<sup>14</sup> Other categories named by VRP sites included refugee and immigrant patients, and campers at medical camps.





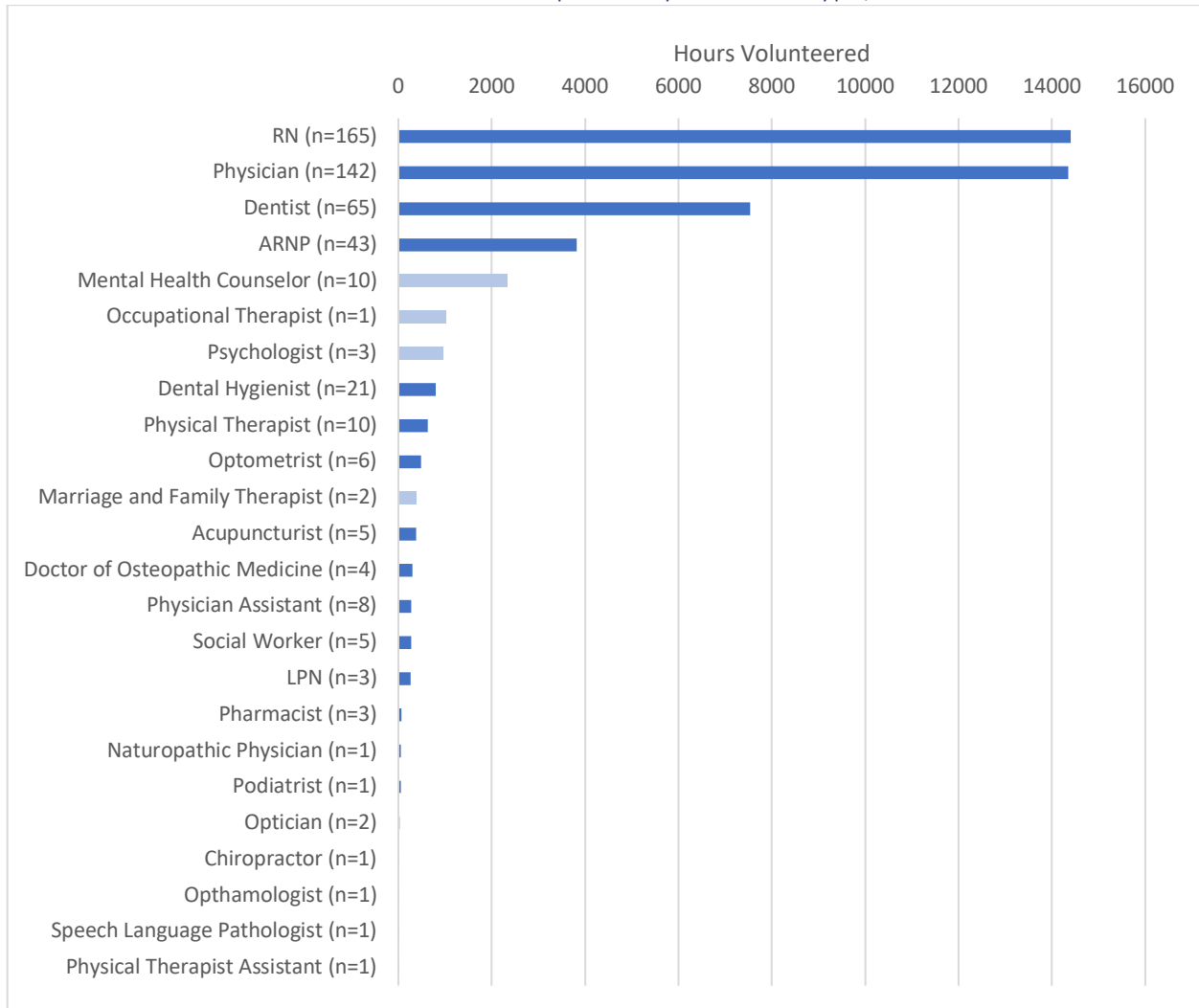
## Provider Survey Results

473 of 1,269 active providers completed the 2016 survey (response rate 37%) and 621 of 1,808 active providers completed the 2017 survey (response rate 34%).

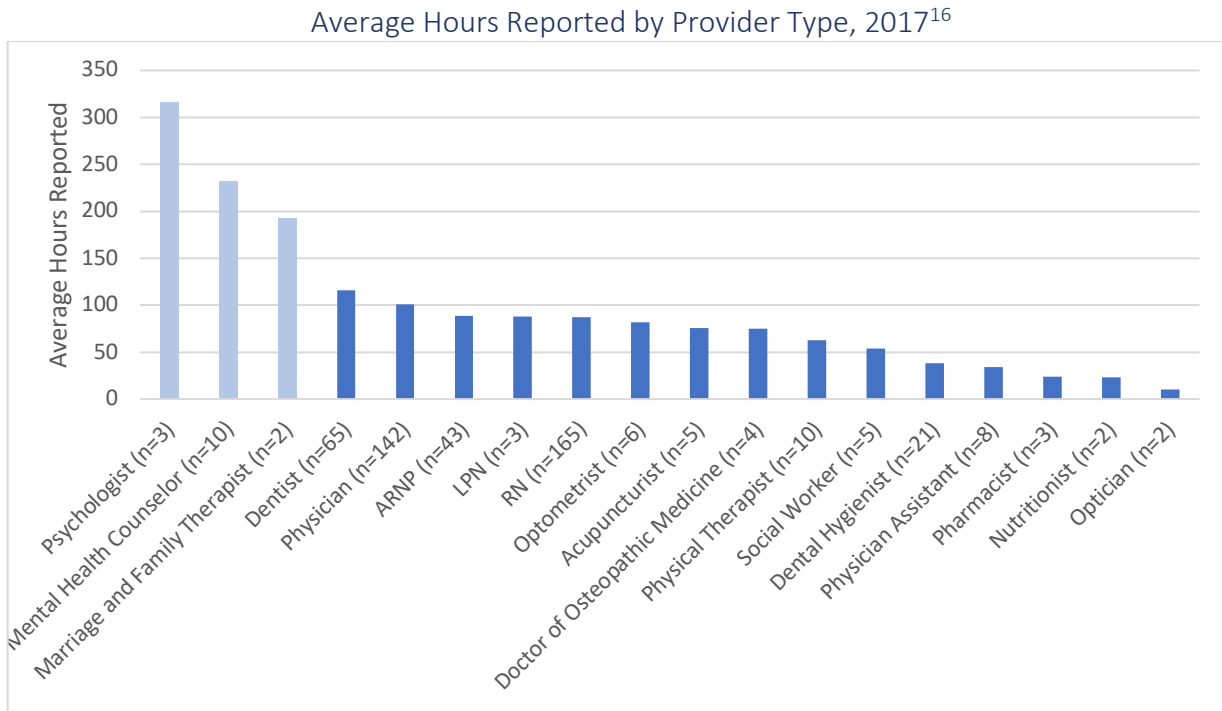
Annual Hours Reported by Providers

|      | Total     | Average Per Provider | Median |
|------|-----------|----------------------|--------|
| 2016 | 37,470.2  | 99.65                | 48     |
| 2017 | 48,543.16 | 95.18                | 48     |

Hours reported by provider types remained relatively consistent with provider type counts in the VRP Program between both program years, with RNs, physicians, and dentists contributing the largest share (with the exception of some outliers).

Total Volunteer Hours Reported by Providers Type, 2017<sup>15</sup>

<sup>15</sup> We suspect the hours reported by occupational therapists, mental health counselors, psychologists, and marriage and family therapists appear large due to outlier providers contributing an unusually large number of hours.



We did not see a significant difference in hours by provider type between 2016 and 2017.

<sup>16</sup> All provider types with only one respondent (n=1) are not included in this graph. We suspect that the average numbers for Marriage and Family Therapists, Mental Health Counselors, and Psychologists are influenced by outliers.



## Retired Providers

The VRP Program caters to both retired and non-retired providers, with an extra benefit offered to retired providers (fee free license renewal for volunteer retired providers).

Survey Respondents by Retirement Status

|             | Number of Non-Retired Providers | Number of Retired Providers |
|-------------|---------------------------------|-----------------------------|
| <b>2016</b> | 202                             | 165                         |
| <b>2017</b> | 355                             | 218                         |

Though fewer survey respondents reported being retired, the total hours reported by retired providers were overall higher than those reported by non-retired providers.<sup>17</sup>

Yearly Hours Reported by Non-Retired and Retired Providers

|                                | Non-Retired Providers | Retired Providers |
|--------------------------------|-----------------------|-------------------|
| <b>2016 Total Yearly Hours</b> | 13,617                | 23,279            |
| <b>2017 Total Yearly Hours</b> | 24,889                | 30,749            |

Averages of annual hours reported by retired and non-retired providers showed similar differences in retired and non-retired providers.

Average Yearly Hours by Non-Retired and Retired Providers

|                                  | Non-Retired Providers | Retired Providers |
|----------------------------------|-----------------------|-------------------|
| <b>2016 Median Yearly Hours</b>  | 40                    | 96                |
| <b>2016 Average Yearly Hours</b> | 67.75                 | 141               |
| <b>2017 Median Yearly Hours</b>  | 44                    | 96                |
| <b>2017 Average Yearly Hours</b> | 44                    | 150               |

<sup>17</sup> Because respondents were asked if they were *fully retired* from paid practice, it is possible that *partially-retired* volunteers may factor into the “non-retired” count.



## Opportunities for Survey Growth and Improvement

Despite multiple phone and email outreach efforts to all VRP sites, and phone calls to 400 enrolled providers, survey participation was below 40% for providers and around 60% for VRP sites. We expect that this response rate is the product of multiple factors, including multiple, recent transitions in program administration, the significant gap of time between these surveys and the previous survey, and the fact that previous survey data has not been shared with the clinics and volunteers that provided it. Additional challenges to this process were the large number of inactive providers and sites not coded as inactive in the program database, and the difficulties for sites and providers in reporting data for two years rather than one. For these reasons, WHAA anticipates that next year's survey will achieve higher response rates.

Since the survey process, WHAA has implemented a "survey requirement" in application forms for all new VRP providers in an effort to increase survey reporting.

With the growth of organizations providing free care outside of clinic settings (such as street medicine), WHAA plans 2018's survey to include questions related to the nature of mobile care organizations, periodic health fairs, and other free care setups.



## Appendix 1: Selected Provider Comments

“I would like a better way than I am currently aware of to find volunteer opportunities. It was great to have my license paid for, as well as receiving free malpractice insurance. The insurance company was very punctual in getting back to me and making the process straight forward.”

“I have no issues – I greatly appreciate your coverage. Without it I probably could not volunteer.”

“I was very relieved to learn about the VRP Program and how I was able to use it to volunteer and not have to use my malpractice coverage through my regular work – they were not terribly interested in covering the volunteer work. So, thank you.”

“This is an extremely helpful program for nonprofit organizations that rely on volunteer healthcare professionals. No recommendations at this time.”

“Providing license and malpractice is all I need. A win-win partnership.”

“I think the support the state gives is amazing and wonderful.”

“Thank you for covering the cost of my license renewal and for publishing free and low-cost CE opportunities.”

“I think promoting the program so that other retired providers would volunteer at free clinics would be great. There is so much need and not enough volunteers.”

“Thank you for providing this very essential coverage. It helps MANY people.”

“This is a great program! I feel very fortunate to have the support which you offer. It is important that the VRP Program and those who allow it honor the needs of some of our brothers and sisters and provide this backup.”

“I want you to know how much I appreciate that you provide malpractice coverage and pay for my license! I am not sure I would be volunteering otherwise, as the costs would be pretty high for an individual.”

“I am grateful this program assists retired professionals continue to serve those in need. Thank you!”



## Appendix 2: VRP Site Survey

1. Please confirm/correct the accuracy of our records:
  - Organization Name
  - Mailing Address
  - County
  - Best phone number for VRP administrators to reach you
  - Phone number provided to the public (if different than above)
  - Primary Contact Name
  - Primary Contact Email
  - Website
2. What is the total FTE of your paid staff?
3. How many volunteers do you have?
4. What is your annual operating budget?
5. How many hours of patient care do you provide each month?

### 2016 site survey

6. Please select the category that best described your site in 2016.
  - Camp
  - Federally Qualified Community Health Center
  - Free/Charitable Clinic
  - Periodic Health Fair
  - Rural Health Clinic
  - School Based Health Clinic
  - Homelessness Outreach Unit
  - Tribal Health Clinic
  - Other (please specify):
7. Please check all that applied to your organization in 2016:
  - Multiple Clinic Sites
  - On-site Pharmacies
  - PAP Assistance
  - Partnership with Off Site Pharmacy
  - Electronic Health Record Usage
  - Formal Collaboration with a Hospital
  - Sliding Fee Schedule
  - Bill Medicaid
  - Completely Free to Patients
  - Accept Patient Donations at Time of Care

8. For January 1 through December 31, 2016, please provide the following data:  
\_\_\_\_\_ Unduplicated Patients  
\_\_\_\_\_ Patient Visits
9. Please check all services provided in 2016:
- Chronic Medical
  - Acute Medical
  - Dental
  - Mental Health
  - Resource/Referrals
  - Specialty Care
  - Care Coordination
  - Pain Management
  - Physical/Occupational Therapy
  - Other:
10. Who did your volunteers serve in 2016?
- Medicare patients
  - Medicaid patients
  - Uninsured patients
  - Underinsured patients
  - Homeless patients
11. Optional: If you have data on your Medicare, Medicaid, underinsured, and homeless patients by total numbers or by percentage of 2016 patient population, please describe it below.
12. How could we help you better?

**2017 site survey**

13. Please select the category that best described your site in 2017.
- Camp
  - Federally Qualified Community Health Center
  - Free/Charitable Clinic
  - Periodic Health Fair
  - Rural Health Clinic
  - School Based Health Clinic
  - Homelessness Outreach Unit
  - Tribal Health Clinic
  - Other (please specify):
14. Please check all that applied to your organization in 2017:

- Multiple Clinic Sites
- On-site Pharmacies
- PAP Assistance
- Partnership with Off Site Pharmacy
- Electronic Health Record Usage
- Formal Collaboration with a Hospital
- Sliding Fee Schedule
- Bill Medicaid
- Completely Free to Patients
- Accept Patient Donations at Time of Care

15. For January 1 through December 31, 2017, please provide the following data:

\_\_\_\_\_ Unduplicated Patients

\_\_\_\_\_ Patient Visits

16. Please check all services provided in 2017:

- Chronic Medical
- Acute Medical
- Dental
- Mental Health
- Resource/Referrals
- Specialty Care
- Care Coordination
- Pain Management
- Physical/Occupational Therapy
- Other:

17. Who did your volunteers serve in 2017?

- Medicare patients
- Medicaid patients
- Uninsured patients
- Underinsured patients
- Homeless patients

18. Optional: If you have data on your Medicare, Medicaid, underinsured, and homeless patients by total numbers or by percentage of 2017 patient population, please describe it below.

19. How could we help you better?





## Appendix 3: VRP Provider Survey

1. Please confirm/correct the accuracy of our records
  - Name
  - Address
  - County
  - Phone
  - Preferred phone (home, mobile, work)
  - Email
  - Preferred email (personal, work, alternate)
  - Birth year
  - Provider license number
  - State that issued your provider license
  - Professional Designation
  - Volunteer Site(s)
2. Are you completely retired from paid practice? Y/N
3. Did you volunteer in 2016? Y/N
4. Did you volunteer in 2017? Y/N
5. How many hours per month did you volunteer in 2016, on average?
6. How many hours per month did you volunteer in 2017, on average?
7. How could we help you better in your volunteer role?
  - Application
  - Customer service
  - Website accessibility

## Appendix 4: Active VRP Sites and Survey Respondents

Sites that completed surveys are noted in blue font. (Any sites that are exempted from the survey requirement due to enrollment after the reporting period are noted in green.)

| Site Name   | Primary Site Type                           | County          |
|---|---|-----------------|
| Acute Specialty Access Clinic                         | Free/Charitable Clinic                      | King            |
| AMEN Everett  | Periodic Health Fair                        | Snohomish       |
| Back to School Health Fair (Tacoma Christian Center)  | School Based Health Clinic                  | Pierce          |
| Battle Ground HealthCare                              | Free/Charitable Clinic                      | Clark           |
| Bellingham/Whatcom County Project Homeless Connect    | Periodic Health Fair                        | Whatcom         |
| Camano Island Dental Center                           | Other                                       | Island          |
| Camp Korey  | Camp  | Skagit          |
| Camp Leo for Children with Diabetes                   | Camp  | Pierce          |
| Camp Promise - West                                   | Camp  | Pierce          |
| Camp STIX   | Camp  | Spokane         |
| CarePoint Clinic                                      | Free/Charitable Clinic                      | King            |
| Caring Hands Worldwide                                | Free/Charitable Clinic                      | Mobile/Multiple |
| Christ Community Free Clinic                          | Free/Charitable Clinic                      | King            |
| Clallam County Homeless Outreach                      | Periodic Health Fair                        | Clallam         |
| Community Health Care: Eastside Medical Clinic        | Federally Qualified Community Health Center | Pierce          |
| Community Health Care: Hilltop Family Medical Clinic  | Federally Qualified Community Health Center | Pierce          |
| Community Health Care: Lakewood Family Medical Clinic | Federally Qualified Community Health Center | Pierce          |
| Community Health Care: Parkland Clinic                | Federally Qualified Community Health Center | Pierce          |
| Community Health Care: Spanaway Clinic                | Federally Qualified Community Health Center | Pierce          |
| Community Health Care: Urgent Care Clinic at Hilltop  | Federally Qualified Community Health Center | Pierce          |
| Community Health Partners                             | Free/Charitable Clinic                      | Cowlitz         |
| Compassion Connect Vancouver                          | Periodic Health Fair                        | Clark           |
| Congregations for the Homeless                        | Free/Charitable Clinic                      | King            |

| Site Name  | Primary Site Type                           | County    |
|--|---|-----------|
| Connect1D  | Camp  | Snohomish |
| Cornerstone Medical Services   | Free/Charitable Clinic                      | King      |
| Country Doctor Community Health Centers: Carolyn Downs Community Health Center | Federally Qualified Community Health Center | King      |
| Country Doctor Community Health Centers: Country Doctor Community Clinic       | Federally Qualified Community Health Center | King      |
| Crystal Mountain Aid Room  | Other                                       | Pierce    |
| DECOD Clinic - University of Washington  | Free/Charitable Clinic                      | King      |
| Diabetes Association of Pierce County  | Camp  | Pierce    |
| End of Life Washington   | Hospice                                     | King      |
| Enso House   | Hospice                                     | Island    |
| Entiat Regional Health Clinic  | Free/Charitable Clinic                      | Chelan    |
| Everybody's Health Clinic  | Free/Charitable Clinic                      | Pierce    |
| Excelsior Youth Center Medical & Behavioral Clinic                             | Other                                       | Spokane   |
| First Lutheran Health Ministries   | Free/Charitable Clinic                      | Kitsap    |
| Frank Haskell Lions Eye Clinic   | Free/Charitable Clinic                      | Whatcom   |
| Free Clinic of Southwest Washington  | Free/Charitable Clinic                      | Clark     |
| Grace & Mercy Medical Ministry   | Free/Charitable Clinic                      | Pierce    |
| Grace Clinic   | Free/Charitable Clinic                      | Benton    |
| Grace Clinic at Tri-Cities Union Gospel Mission                                | Homelessness Outreach Unit                  | Franklin  |
| Health & Hope Medical Outreach   | Free/Charitable Clinic                      | Lewis     |
| Hepatitis Education Project  | Homelessness Outreach Unit                  | King      |
| Holden Village   | Other                                       | Chelan    |
| Holy Rosary Blood Pressure Clinic  | Free/Charitable Clinic                      | Snohomish |
| HopeCentral  | Other                                       | King      |
| Hospice Without Borders: Amahoro House   | Hospice                                     | Thurston  |
| House of Charity Outreach Center Medical Clinic                                | Free/Charitable Clinic                      | Spokane   |
| IDEA (Inland Dental Expanded Access Clinic)                                    | Free/Charitable Clinic                      | Spokane   |
| Institute of Human Values  | Homelessness Outreach Unit                  | Yakima    |
| Integrative Care Outreach  | Homelessness Outreach Unit                  | King      |

| <b>Site Name</b>  | <b>Primary Site Type</b>                    | <b>County</b>   |
|---|---|-----------------|
| <b>Interfaith Council</b>   | Free/Charitable Clinic                      | King            |
| <b>International Community Health Services</b>                          | Federally Qualified Community Health Center | King            |
| <b>Jefferson County MASH Clinic</b>                                     | Free/Charitable Clinic                      | Jefferson       |
| Key Free Clinic   | Free/Charitable Clinic                      | Pierce          |
| <b>Korean Nest Mission (Korean-American Coalition for the Homeless)</b> | Homelessness Outreach Unit                  | King            |
| <b>LDS Church Lacey</b>   | Other                                       | Pierce          |
| Liberty Bell High School Physicals                                      | School Based Health Clinic                  | Okanogan        |
| Life Choices Pregnancy Clinic   | Other                                       | King            |
| Life Choices Pregnancy Medical Center                                   | Other                                       | Yakima          |
| <b>Lighthouse Christian Ministries Clinic</b>                           | Free/Charitable Clinic                      | Chelan          |
| <b>MAPS MCRC Clinic</b>   | Free/Charitable Clinic                      | King            |
| <b>Mary's Place</b>   | Homelessness Outreach Unit                  | King            |
| <b>Medical Teams International</b>                                      | Free/Charitable Clinic                      | Mobile/Multiple |
| <b>Mercy Watch</b>  | Homelessness Outreach Unit                  | King            |
| Metropolitan Development Council Healthcare for the Homeless Clinic     | Homelessness Outreach Unit                  | Pierce          |
| Millionair Club Charity Vision Clinic                                   | Free/Charitable Clinic                      | King            |
| Mom & Me Mobile Medical Clinic  | Free/Charitable Clinic                      | Pierce          |
| Moses Lake SDA Adventist Church/Crestview Christian School Clinic       | Periodic Health Fair                        | Grant           |
| My Choices Pregnancy Medical Resources                                  | Other                                       | Clallam         |
| <b>Neighborcare at 45th Street Clinic</b>                               | Federally Qualified Community Health Center | King            |
| <b>Neighborcare at Ballard Homeless Clinic</b>                          | Federally Qualified Community Health Center | King            |
| <b>Neighborcare at Central District</b>                                 | Federally Qualified Community Health Center | King            |
| <b>Neighborcare at Chief Sealth International High School</b>           | Federally Qualified Community Health Center | King            |
| <b>Neighborcare at Columbia City</b>                                    | Federally Qualified Community Health Center | King            |
| <b>Neighborcare at Georgetown</b>                                       | Federally Qualified Community Health Center | King            |

| Site Name   | Primary Site Type                           | County          |
|---|---|-----------------|
| <b>Neighborcare at High Point</b>                     | Federally Qualified Community Health Center | King            |
| <b>Neighborcare at Madison Middle School</b>          | Federally Qualified Community Health Center | King            |
| <b>Neighborcare at Mercer Middle School</b>           | Federally Qualified Community Health Center | King            |
| <b>Neighborcare at Meridian</b>                       | Federally Qualified Community Health Center | King            |
| <b>Neighborcare at Pike Place Market</b>              | Federally Qualified Community Health Center | King            |
| <b>Neighborcare at Rainier Beach</b>                  | Federally Qualified Community Health Center | King            |
| <b>Neighborcare at West Seattle High School</b>       | Federally Qualified Community Health Center | King            |
| <b>Neighborcare Youth Clinic at 45th Street</b>       | Federally Qualified Community Health Center | King            |
| <b>Neighborhood Clinic</b>                            | Free/Charitable Clinic                      | Pierce          |
| <b>New Heights Clinic</b>                             | Free/Charitable Clinic                      | Clark           |
| <b>New Hope Health Center</b>                         | Free/Charitable Clinic                      | King            |
| Open Door Health Clinic                               | Free/Charitable Clinic                      | Kittitas        |
| Palouse Free Clinic                                   | Free/Charitable Clinic                      | Whitman         |
| Palouse Health Center                                 | Rural Health Clinic                         | Whitman         |
| <b>Peace for the Streets by Kids from the Streets</b> | Homelessness Outreach Unit                  | King            |
| Pediatric Interim Care Center                         | Other                                       | King            |
| <b>Peninsula Community Health Services</b>            | Federally Qualified Community Health Center | Kitsap          |
| <b>Pierce County Dentists Care</b>                    | Other                                       | Pierce          |
| <b>Pierce County Medical Reserve Corps</b>            | Periodic Health Fair                        | Pierce          |
| Pope's Kids Place                                     | Other                                       | Lewis           |
| <b>Project Access Northwest</b>                       | Other                                       | King            |
| <b>Project Connect Kitsap</b>                         | Periodic Health Fair                        | Kitsap          |
| <b>Puget Sound Christian Clinic</b>                   | Free/Charitable Clinic                      | King, Snohomish |
| Rainier Valley Community Clinic                       | Free/Charitable Clinic                      | King            |
| <b>Room One (The Lookout Coalition)</b>               | Other                                       | Okanogan        |
| <b>RotaCare Bellevue</b>                              | Free/Charitable Clinic                      | King            |
| <b>RotaCare Lake City</b>                             | Free/Charitable Clinic                      | King            |
| RotaCare Renton                                       | Free/Charitable Clinic                      | King            |
| <b>Ryan's House for Youth</b>                         | Homelessness Outreach Unit                  | Island          |

| <b>Site Name</b>  | <b>Primary Site Type</b>                    | <b>County</b> |
|---|---|---------------|
| <b>Safe Harbor Free Clinic</b>  | Free/Charitable Clinic                      | Snohomish     |
| Saints Cosmas & Damian Parish Health Ministry                                 | Free/Charitable Clinic                      | Pierce        |
| Sea Mar - Marysville Medical Clinic   | Federally Qualified Community Health Center | Snohomish     |
| Sea Mar - Tillicum Medical Clinic   | Federally Qualified Community Health Center | Pierce        |
| <b>Seattle/King County Clinic</b>   | Periodic Health Fair                        | King          |
| Serving Others World Wide / Mercy Missions of the NW                          | Other                                       | King          |
| SmileMobile   | Free/Charitable Clinic                      | King          |
| <b>Somali Health Board</b>  | Other                                       | King          |
| SonBridge Community Center Dental Clinic                                      | Free/Charitable Clinic                      | Walla Walla   |
| <b>SOS Health Services</b>  | Free/Charitable Clinic                      | Walla Walla   |
| Swedish Community Specialty Clinic  | Free/Charitable Clinic                      | King          |
| <b>Tent City 3 at SPU</b>   | Homelessness Outreach Unit                  | King          |
| The Christian Medical Response Team   | Other                                       | Kitsap        |
| <b>The Health Center</b>  | School Based Health Clinic                  | Walla Walla   |
| <b>The Olympia Free Clinic</b>  | Free/Charitable Clinic                      | Thurston      |
| <b>The Seattle Stand Down</b>   | Periodic Health Fair                        | King          |
| <b>The Sequim Free Clinic (Dungeness Valley Health &amp; Wellness Clinic)</b> | Free/Charitable Clinic                      | Clallam       |
| <b>Trinity Neighborhood Clinic</b>  | Free/Charitable Clinic                      | Pierce        |
| <b>Union Gospel Mission Inland Northwest</b>                                  | Free/Charitable Clinic                      | Spokane       |
| Union Gospel Mission Olympia  | Free/Charitable Clinic                      | Thurston      |
| <b>Union Gospel Mission Seattle</b>   | Free/Charitable Clinic                      | King          |
| <b>Union Gospel Mission Yakima</b>  | Free/Charitable Clinic                      | Yakima        |
| <b>University Temple United Methodist Church</b>                              | Free/Charitable Clinic                      | King          |
| <b>Upper Valley Free Clinic</b>   | Free/Charitable Clinic                      | Chelan        |
| <b>UWSOM: Aloha Inn</b>   | Other                                       | King          |
| <b>UWSOM: Casa Latina</b>   | Other                                       | King          |
| <b>UWSOM: CHAP</b>  | Other                                       | King          |
| <b>UWSOM: Othello Outreach Clinic</b>   | Periodic Health Fair                        | King          |
| <b>UWSOM: SHIFA Health Fairs</b>  | Other                                       | King          |
| <b>UWSOM: U-District Street Medicine</b>                                      | Homelessness Outreach Unit                  | King          |



| Site Name  | Primary Site Type      | County    |
|--|------------------------|-----------|
| <b>UWSOM: Urban Grace Foot Care Project</b>                  | Other                  | King      |
| <b>UWSOM: UTEST</b>  | Periodic Health Fair   | King      |
| <b>Volunteers in Medicine of the Olympics Clinic</b>         | Free/Charitable Clinic | Clallam   |
| <b>VOSH Northwest</b>  | Free/Charitable Clinic | King      |
| Wahkiakum County Department of Health & Human Services       | Free/Charitable Clinic | Wahkiakum |
| <b>Wellness House</b>  | Free/Charitable Clinic | Yakima    |
| <b>West Sound Free Clinic</b>                                | Free/Charitable Clinic | Kitsap    |
| <b>Yakima Valley Community College Dental Hygiene Clinic</b> | Free/Charitable Clinic | Yakima    |
| <b>YMCA Camp Orkila</b>                                      | Camp                   | San Juan  |