

WASHINGTON STATE PRIMARY CARE NEEDS ASSESSMENT

EXECUTIVE SUMMARY

Findings

In Washington State, multiple barriers to primary care access, including socioeconomic inequality, rising costs, healthcare policy demands, and the distribution of healthcare resources and economic opportunity across the state, persist. COVID-19 will exacerbate many of these conditions. Despite these numerous challenges, innovative and replicable solutions continue to emerge.

Between zip codes and counties, health disparities remain. Wealth and economic opportunity are unevenly distributed. Residents of Washington's small, rural counties experience disproportionately high levels of poverty and unemployment and have fewer healthcare resources and professional opportunities than residents of larger, urban counties.

Rental housing affordability is also a significant challenge for Washington State residents. As of 2018, Washington State had the fifth highest rate of homelessness and the most regressive tax system in the nation.

Due to Washington's geography and inadequate rural public transportation, travel between communities to access healthcare or employment can be difficult. Additionally, several rural counties lack the sufficient internet connectivity necessary for utilizing telehealth systems to expand access to care. These factors impact health and healthcare access, particularly for low-income residents with challenges to travel.

Racial and ethnic minority groups, who have lower levels of health insurance, are disproportionately underserved by the healthcare system and thus show poorer health outcomes than other demographic groups. Even in safety net settings, the racial distribution of patients seeking healthcare does not reflect the racial distribution of the population, nor do the demographics of healthcare providers. Statewide data collection and reporting has improved understanding of the impact of "race and place" on the health of Washington residents.

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Healthcare providers are unequally distributed across Washington, resulting in large rural areas without an adequate healthcare workforce. Barriers to mental and dental healthcare, including a lack of providers willing to accept Medicaid patients and provider shortages, persist statewide but are particularly acute in rural communities.

Washington State has recently made investments in identifying, reporting, and addressing root causes of health disparities. As a result, innovative partnerships and programs continue to develop. Examples of this include the growth of Washington's Accountable Communities of Health and the state's prioritization of health equity.

Additionally, recent bipartisan legislation promises improved protections for Washington's migrant workers, a group both vital to the state's economy and disproportionately facing barriers to healthcare.

This report and the following recommendations are intended to support the work of decision and policy makers challenged to understand the state of healthcare in Washington:

- 1 Prioritize healthcare system and safety net investments for the state's most underserved communities.
- 2 Expand state-funded healthcare insurance coverage to include all income eligible residents, regardless of immigration status.
- 3 Increase Medicaid reimbursement rates for behavioral health, medical and dental care.
- 4 Mitigate socioeconomic status as a social determinant of health by addressing Washington's regressive tax system.
- 5 Implement Workforce Training and Education Coordinating Board recommendations, including those from the Behavioral Health Workforce report to address current and projected healthcare workforce needs.
- 6 Expand investments in educational pathways to build a healthcare workforce that reflects the communities they serve.