# Healthcare Access Mobility Design Challenge



February 26, 2015











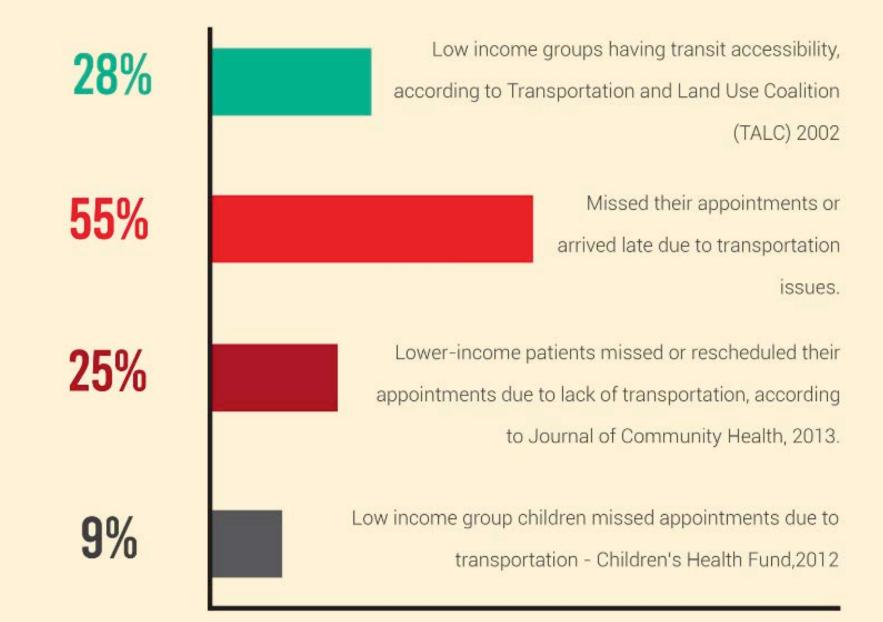
# HOW DOES LACK OF TRANSPORTATION AFFECT HEALTHCARE?

3.6 MILLION Americans

miss or delay medical care because they lack appropriate transportation to their appointments



# LOW INCOME GROUPS HIGHLY AFFECTED



## **OPPORTUNITY**



Develop a dynamic scheduling software structure that would facilitate the incorporation of patient's transportation needs while scheduling their appointments

# HOW BIG IS THE PROBLEM IN WORCESTER?



300-400 patient visits per day.

80%

Pre-booked appointments in earlier visits

**SOME FACTS** 

213,130

clinical encounters per year.

85,000-105,000

patient visits per year.

15%

Rate of missed Appointments

## PATIENT SCHEDULER DISPATCHER Needs to make separate calls to Scheduler and Dispatcher Scheduler uses software to Dispatcher uses software to schedule appointments schedule trips Primary care Referrals to other Passenger Vans Other providers Interpreter services Taxis Doctor doctors Very complex process: there is no centralized transportation scheduling management

# THE CURRENT SCENARIO

THE PATIENTS' PERSPECTIVE

The patient deals with TWO WORLDS APART

They need to schedule their appointment and decide / figure out which transportation option they will use.

There is a lot of confusion from the patient's perspective on which service to use and when it is appropriate to schedule their ride through various demandresponse services and depending on their eligibility for transportation benefits.

### **FUNDING AND SUPPORT**

#### **Collaboration**







#### **Funding**





#### **Support**





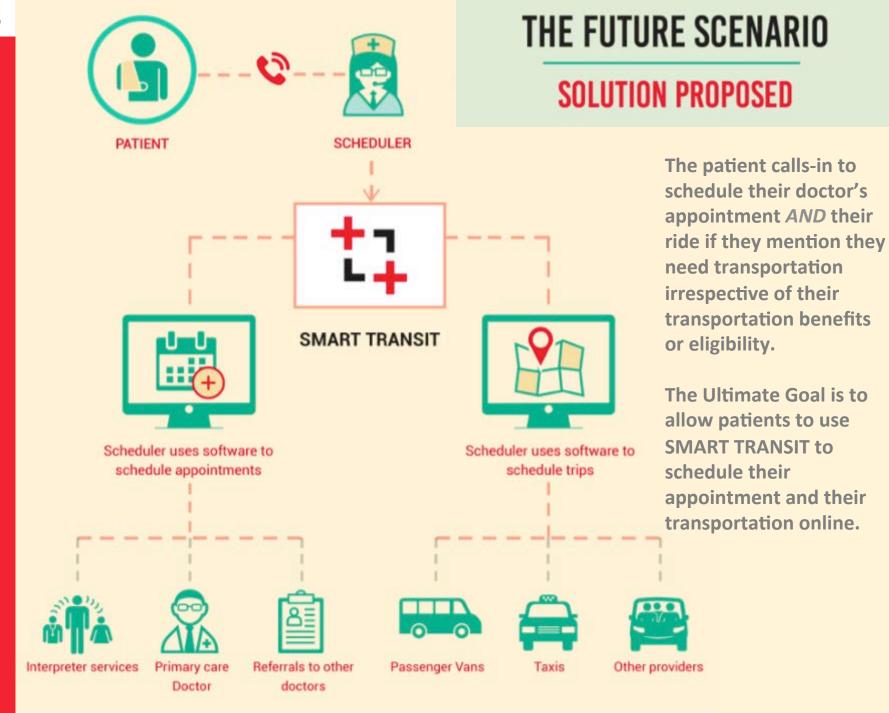


#### **Future Collaborations**





Transportation leadership you can trust.





#### **MARKET RESEARCH: CO-CREATION SESSIONS**

- WRTA Hub
- Neighbor 2 Neighbor
- Worcester Community
   Connections Coalition
- Family Health Center IT Department
- Family Health Center / Patient's at Waiting Room Area
- Centros Las Americas / Latino Elder Program
- South East Asian Coalition







#### **MARKET RESEARCH: HOW DO PATIENTS GET TO THE FHC?**



45 % Take the bus



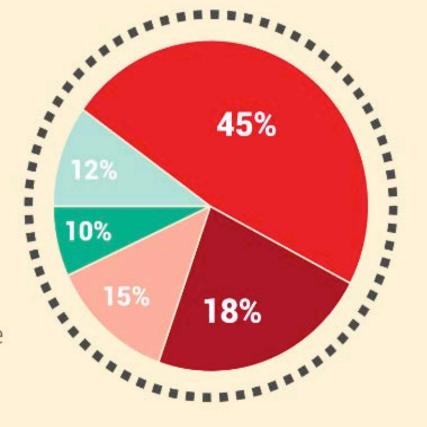
18 % Drive by themselves



15 % Share a ride with a friend



10 % Use a taxi or livery service

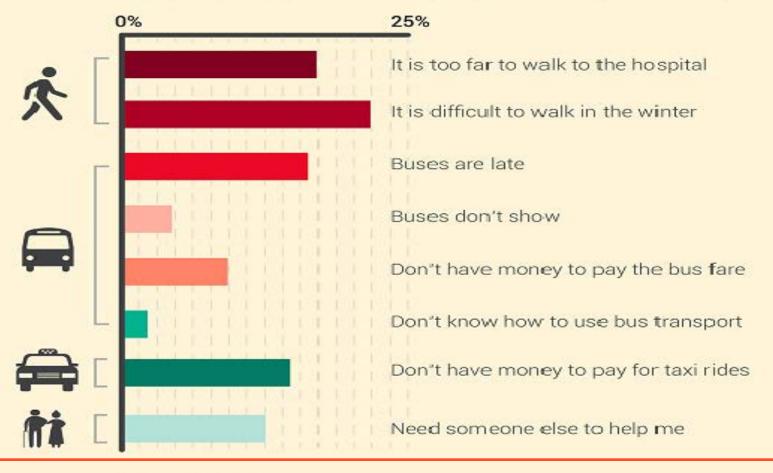




12 % Walk to the hospital

51% of respondents mentioned they had some type of transportation problem.

# REASONS FOR TRANSPORT PROBLEMS





Preferred to picked up at their neighbourhoods.

86% **††††**†

Are interested in scheduling a ride to the FHC at the same time they are scheduling their doctor's appointment.



#### HOW MUCH DOES IT COST A 3-MILE ONE-WAY TRIP TO THE FHC BY MODE?



#### **MASSACHUSETTS**

In FY14 average transportation cost for MassHealth

transportation benefit was \$17.57 per trip.

People mentioned they are willing to pay between \$1.50 to \$3.50 per trip.

23% mentioned they can't afford to pay the bus fare.

WRTA \$1.50 (Single Fare)

Car \$1.71 (IRS Standard Mileage Rates)

WRTA \$3.50 (One Day Pass)

Uber \$8.07 (Booking fee and tip included)

Taxi \$10.88 (Taxi Fare Finder)

PT-1 \$19.39 (HST Region 5 – Worcester)

PBSTM \$25.80 (patrons pay only \$2.25 per trip)

WRTA's average trip length is 3.3 miles.

Based on the assumptions related with patients' frequency of visits and costs associated by mode, we can estimate that the average out-of-pocket yearly expenses for those patients that use transit for one-way trip paying a single-fare is \$1.2M. A round trip will be double the amount, \$2.4M.

If the **One-Day Pass** is used the average annual patient's out-of-pocket expense in transit is **\$2.8M**, or **\$67.48 per person**.

#### **BUSINESS MODEL**



- Develop as an Open-Source software in collaboration with Cambridge Systematics (CamSys)
- The 1-Click open source platform developed by CamSys has a community of users in 6 states, a good starting point
- CamSys can develop a "beta" deployment of Smart Transit System (unsupported not hosted by CamSys) for a minimum of about \$150K-\$200K. Functionalities get better with cost.
- Participating agencies (hospital) pay for annual supporting and maintenance cost of the order \$12,000-\$36,000
- Background Research on transit partnership and survey cost for each hospital is of the order of \$20,000
- Approximate cost of piloting the product for atleast 3 hospitals is about \$ 72,000 (hosting +supporting + maintainance cost)
- Total funding requested for :  $(200,000 + 60,000 + 72,000 + 20,000) \approx 350,000 400,000$

### HOW MUCH MONEY FHC IS LOSING DUE TO MISSED APPOINTMENTS?

The FHC cited to have an average of **800** missed encounters in a monthly basis. Currently, the standard rate per person/visit is **\$154**.

It is estimated that the FHC losses

\$1,478,400.00

million of dollars per year solely on missed appointments.

51% missed their appointments due to transportation, that translates to

\$739,200

loss specifically related to transportation problems.

In average, 180 patients use the WRTA fixed-route in a daily basis to go to FHC.

If FHC pays \$3.50 for a One-Day Pass for these patients, the daily expense will be \$630. In a year (251 weekdays) the expense will reach \$158,130.00.

This amount is only 10.7% of FHC loss due to missed appointments.

#### NEW OPPORTUNITIES AND COLABORATIONS



Collaboration with MassDoT and Cambridge Systematics for next grant cycle



Tap into existing transit initiatives in Massachusetts like use of transit database, Massrides initiated by GATRA region, MART's general public shuttle service



Implement a MassHealth Smart Transit Card where the day of the appointment a One-Day Pass is uploaded unto the beneficiaries card based on request for transportation using the Smart Transit app.



Participate on UBER's Affiliate Program.