One Call One Click
GoHealth!

FEBRUARY 26TH, 2016
DURHAM, NC

SALLY WILSON & STEPHANIE WILLIAMS
Opportunity

- High costs to medical providers – missed appointments, late appointments, time spent to assist with transportation to avoid missed/late appointments, frustration
- High costs to clients – missed and never scheduled appointments, anxiety, money for transportation, cell phone minutes
- What happens with people who don’t have regular access to preventive care? They get sicker and end up in the emergency department and may be hospitalized.
Who are our Clients?

- Persons with severe and persistent mental illness, living on limited incomes, who are uninsured or have Medicaid
  - Typical Medicaid client is living on $733/month
- May move frequently, may use “minute” phones
- May have health concerns that require paratransit for immediate short-term needs or for certain trips, but may be able to use fixed route sometimes or in the future
- May not have reliable friends and family members to help with rides
- Resourceful but need system that works for them
Who are our Clients?

- **Martha**
  - Lost her job and will have to leave her home
  - Her son used to take her to appointments but is no longer able
  - Starts missing appointments and ends up in the ED

- **Ana**
  - Lives in trailer park over mile from bus stop
  - Speaks very little English
  - Easily confused when going to new places
  - At risk of losing services
Solution

We do not want to be transportation experts... because we aren’t. So we want --

- ONE number to call to learn about paratransit options (and we want call center operators to understand our client needs and be able to communicate in their language) – Regional Transit and Information Center – SAME number to call for paratransit as fixed route
- ONE website with web-based bilingual eligibility forms and instructions
- IMPROVED OPTIONS to schedule rides so we not have long hold times and we know that van will arrive and when (and ideally eliminate double scheduling for Medicaid transports)
- STREAMLINED process for expedited conditional trip eligibility
- EXPANDED reduced fare options
## One Call – One Click Services

(www.onecalltoolkit.org by Community Transportation Association of America)

<table>
<thead>
<tr>
<th></th>
<th>Distinct Systems</th>
<th>Some Coordination</th>
<th>Fully Integrated</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Eligibility</strong></td>
<td></td>
<td></td>
<td></td>
<td>Include 3 of 5 main paratransit providers, common portal &amp; cross-training</td>
</tr>
<tr>
<td><strong>Appropriate service</strong></td>
<td></td>
<td></td>
<td></td>
<td>One call center for paratransit and fixed route, data collection to identify opportunities to transition paratransit riders for certain routes</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th></th>
<th>Low Tech</th>
<th>High Tech</th>
<th>Other</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Scheduling</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Auto call/texts to riders</td>
<td>Web-based scheduling</td>
<td></td>
</tr>
<tr>
<td><strong>Affordability</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Increased use of reduced fare options</td>
</tr>
</tbody>
</table>
Market

- Consumers identify transportation as barrier to behavioral health
- Consumers identify cost, lack of awareness, frustration, and lack of trust as barriers to transportation
- Research shows 20-30% of paratransit users could use fixed route for some trips, and riders are more likely to be matched to appropriate ride if services are handled through one call center
- Communication is key to reducing missed van rides and appointments & requires new strategies
Outcomes

- Clients have enhanced independence, better health and better quality of life
- Clinicians have higher show rates and workplace satisfaction
- Transit system has fewer missed van rides and greater ability to match riders to most cost effective transportation
Why Us, Why Now

- Engaged, informed partners
  - One large FQHC and one major health system with shared EHR
  - Case managers & consumer advocates ready to test and market the solution with our clients and report on outcomes

- Aligns with other priorities within Durham County
  - Mayor’s Initiative to End Poverty looking at transportation as central to economic independence
  - Annual Durham Health Summit to focus on social determinants of health this year
  - Duke University Health System exploring opportunity to create Accountable Health Community with transportation as key component
Preliminary Budget

- $0 to enhance regional call center & website
- Fixed, upfront costs
  - $250,000 for auto call/auto text software
  - $15,000 for provider portal
  - $300,000 for online scheduling software
  - $25,000 to administer and evaluate these efforts
- Annual costs
  - $35,000 for paratransit & discount bus passes
  - TBD annual fees for software
Questions?

Team Members
Stephanie L. Williams, Community Relations Supervisor, Alliance Behavioral Healthcare
Sally Wilson, Executive Director, Project Access of Durham County
Brian Fahey, Transit Administrator, GoTriangle
Linda Thomas-Wallace, Transportation Program Manager, Durham County ACCESS
Pinkey Dunston, Community Member
Julia Gamble, Nurse Practitioner, Duke Outpatient Clinic
Heidi Dohnert, Community Support Team Manager, Carolina Outreach
Mel Downey-Piper, Director of Health Education, Durham County Department of Public Health
Charita K. McCollers, Social Worker, Lincoln Health Care for the Homeless Clinic
Lynn Thomas, Program Manager, Durham County Department of Social Services

Next Steps
Presentation to Senior Management, GoTriangle

Contact Information
Sally Wilson, swilson@projectaccessdurham.org, 919-470-7261
Stephanie Williams, swilliams@alliancebhc.org, 919-651-8854