

Evalytics, LLC

Research, Program Evaluation, Consulting



HealthTran

**Half-Time Program Evaluation Report
June 2016**

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Program Evaluation Report

August 2014 – May 2016

BACKGROUND

HealthTran is a consortium comprised of multiple organizations with a dual purpose: 1) address improvements in the health status of residents living in nine counties of South Central Missouri; and 2) gather reliable and valid data concerning the nexus of rural health care and transportation, a problem often cited as a cause of non-compliance.

The consortium includes, at this point in time, the following:

- Missouri Rural Health Association (MRHA)
- Missouri Public Transit Association (MPTA)
- Transit Providers: SMTS, Inc., OATS, Inc., South Howell Medical Transport Operations, City of West Plains, Licking Bridge Builders, Inc., and Preventative Healthcare Transport.
- Ozarks Medical Center and its Rural Clinics and Specialty Clinics
- Community Health Centers: Southern Missouri Community Health Center (SMCHC), Ozark Medical Center (MOCH), and Jordan Valley Community Health Center (JVCHC)

INTRODUCTION

HealthTran began in December 2013 with a grant from the Missouri Foundation for Health. Its purpose was to better understand the barriers rural residents face in getting health care services, with a specific emphasis on the role of transportation as a barrier. Essentially HealthTran is a transportation facilitator in these rural communities. It works with public and private transit providers to offer and schedule residents, with an identified transportation need, rides to their health care appointments.

From December 2013 until August 2014, HealthTran conducted its planning and start-up phases. This work included: gathered data from patients at various health care center and hospital sites; meeting and discussing barriers and opportunities with health and transit partners; hiring staff; creating a system of referral from health care providers to obtain transportation for patients; developing research and evaluation protocols to track activities; and, creating an Access database to house the data.

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Beginning in August 2014, HealthTran offered mobility management services along with transit accommodations for individuals who did not have reliable transportation to their health care appointments or to their home after being in a hospital. Between the start-up in August 2014 through May 2016, HealthTran has provided these services to 723 individuals and processed the mobility management of 4,842 referrals for transportation.

This report provides information on HealthTran services from August 2014 through May 2016. The data were collected primarily by HealthTran staff, entered into Access, and analyzed by a third-party evaluator, Evalytics LLC. This report provides demographics of the people who are using HealthTran, why they are using HealthTran, the trips they make, and which health care facilities they visit.

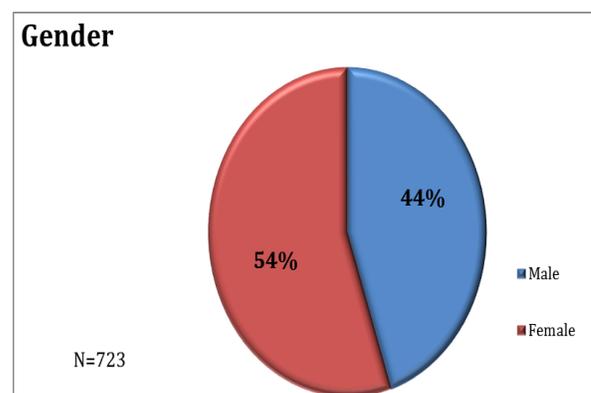
FINDINGS

The tracking and data collection system is straight-forward. A typical scenario¹ would be as follows:

Healthcare facilities staff refers a patient who needs transportation to HealthTran via a form that is emailed to the HealthTran Coordinator. This form includes the patient's name, address, phone number, the appointment date and time, and destination facility. The HealthTran Coordinator (HTC) reviews the information to determine if the transportation referral is in the designated HealthTran area. If so, the HT Coordinator contacts the patient by phone to confirm the appointment day and time and to gather additional information about the patient and transportation need. Once confirmed, the HTC enters the contact information, referral information, date and time of appointment, destination, and any further information needed for a trip to be scheduled with a transit provider. The HTC enters the transit information which produces a trip sheet and emails or faxes it to the transit provider who will be handling the trip.

HealthTran Riders

From August 2014 to June 2016, there were 723 individuals in South Central Missouri who were referred to HealthTran from a health care facility or

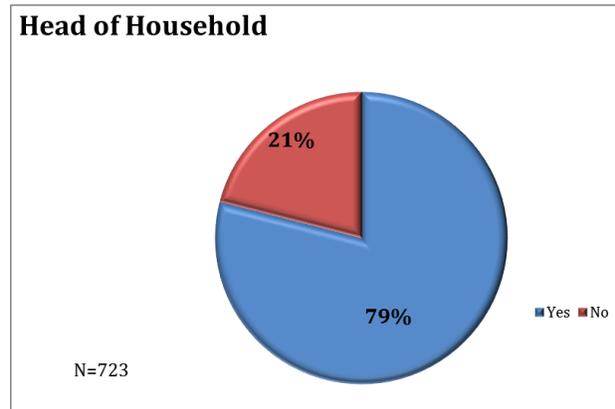


¹ This process applies to most processes. There are exceptions, e.g., someone being discharged from the hospital who needs transportation.

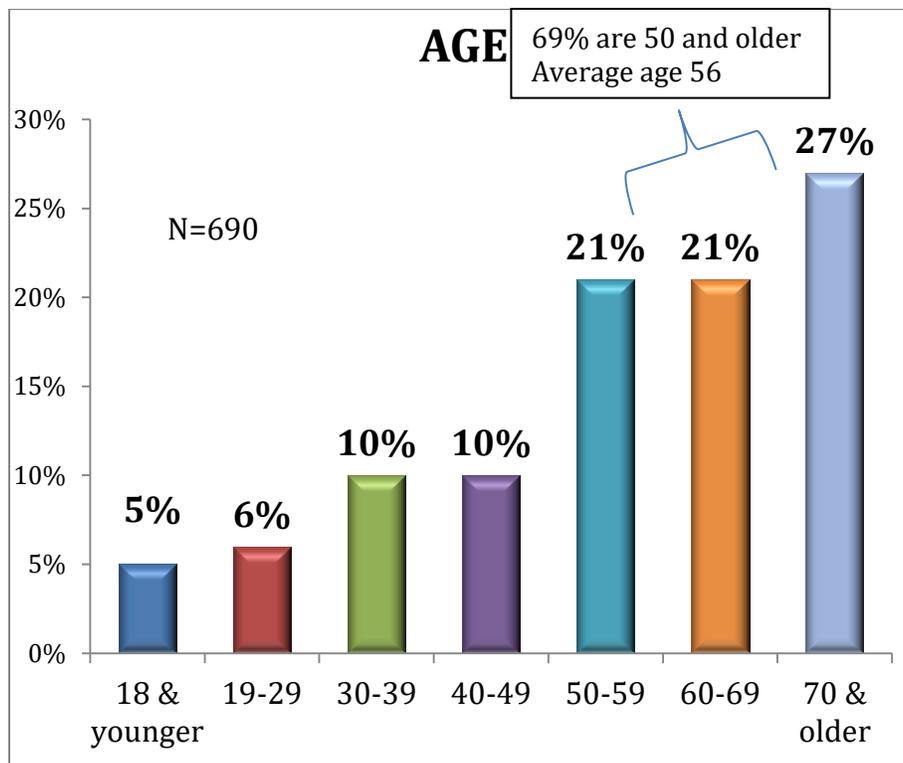
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provider for transportation assistance. In terms of Sex or Gender, slightly more than one-half were female with 54 percent.

Most of the riders were Head of Household. Only 21 percent were spouses or children.

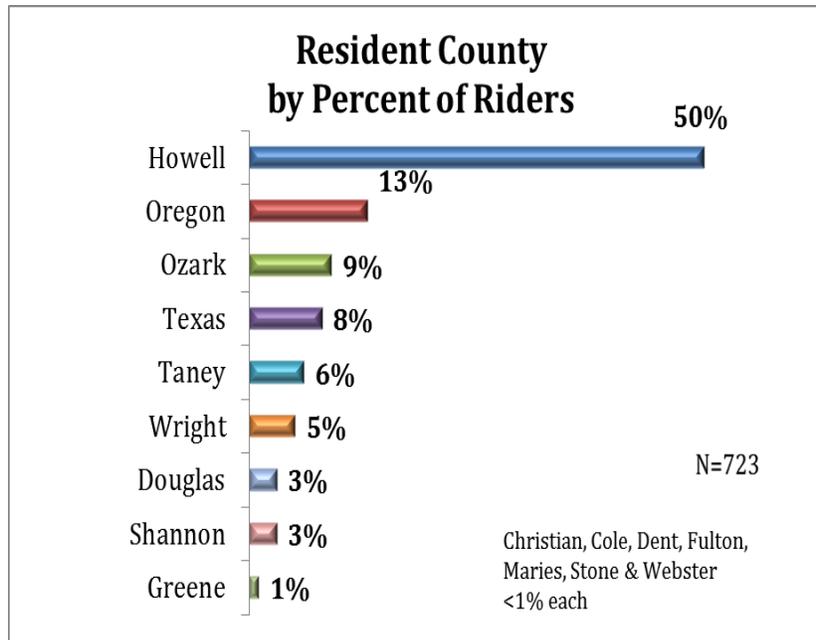


Age data were available for 690 (95%). The average age is 56 years. More than two-thirds are age 50 and older while 11 percent are in their 20's and younger.

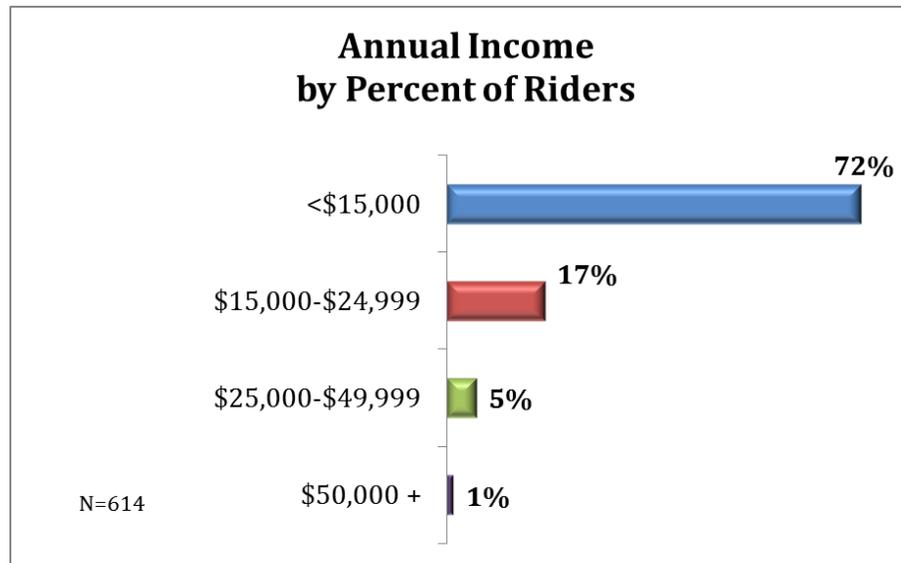


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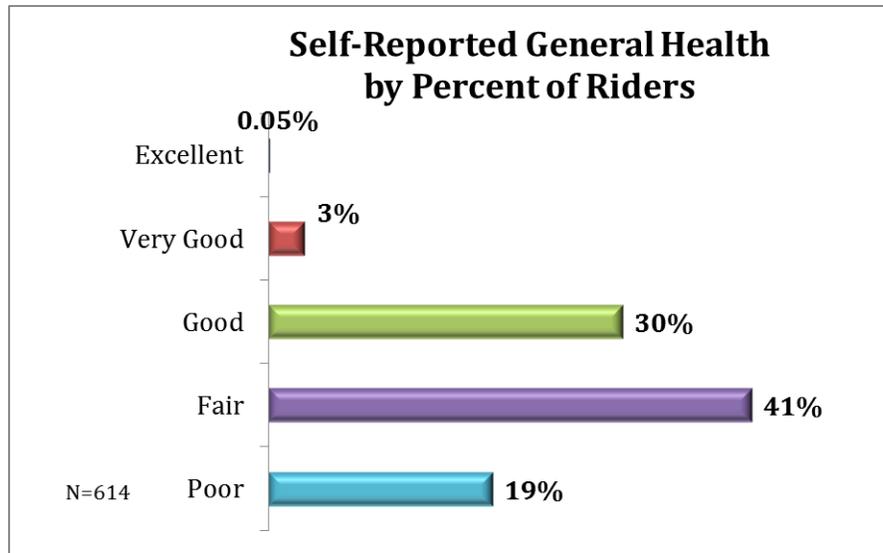
While the riders come from 16 different counties in South Central Missouri, nearly two-thirds reside in Howell and Oregon counties.



Nearly three-quarters (72%) of HealthTran riders reported an income of less than \$15,000.

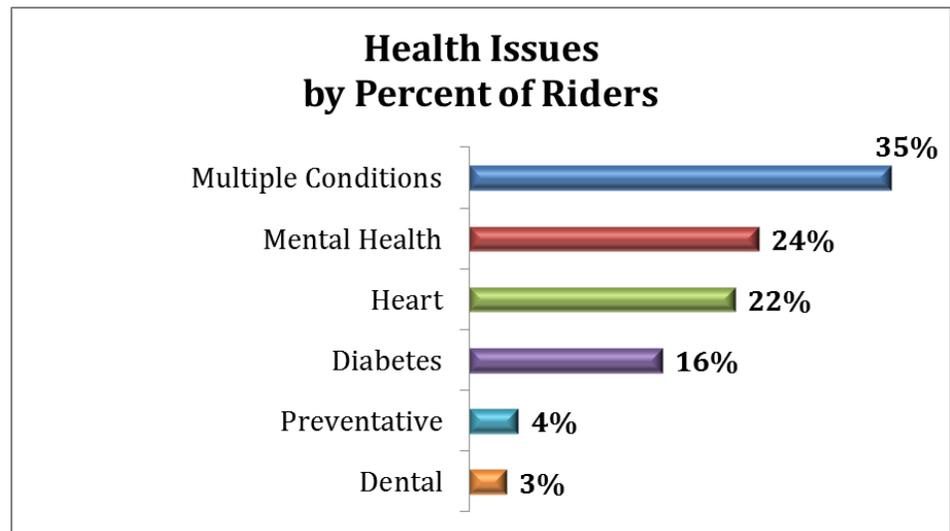


Self-reported general health status during the Pre-Assessment with the HealthTran coordinators, one in five reported “poor” health compared to only three percent who reported “very good” health.

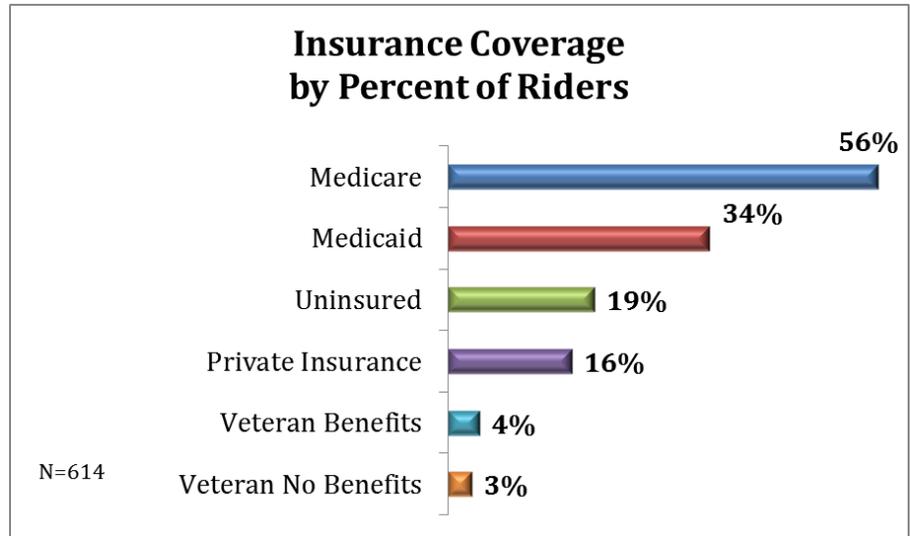


Obviously health issues vary for HealthTran riders. Some of the greatest number of

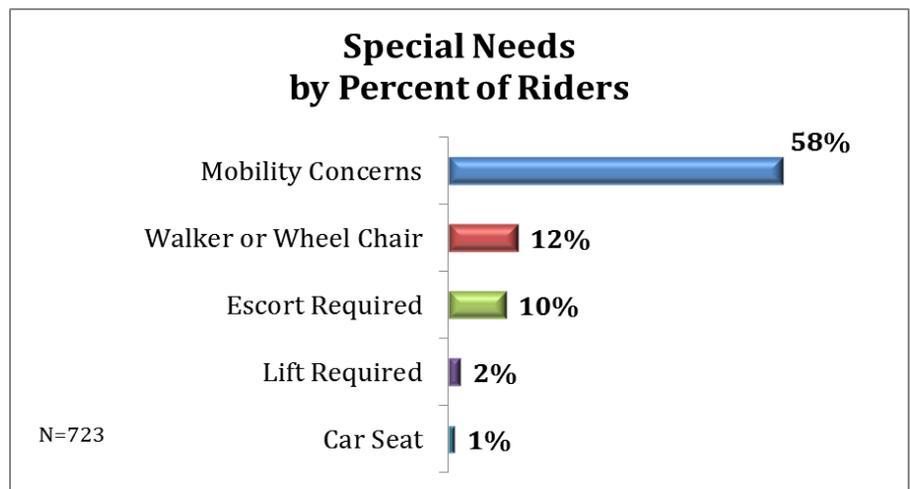
health conditions mentioned by riders includes multiple diagnoses, mental health, heart/hypertension, diabetes, preventative care and dental. More than one-third reported multiple chronic illnesses/diseases. Seven percent of the riders were using HealthTran for preventative and dental care.



Given the age and income levels of this population, it is not surprising that Medicare covers more than one-half and Medicaid another one-third. Note that insurance coverage is not mutually exclusive and that riders could have both Medicare and Medicaid, for example.



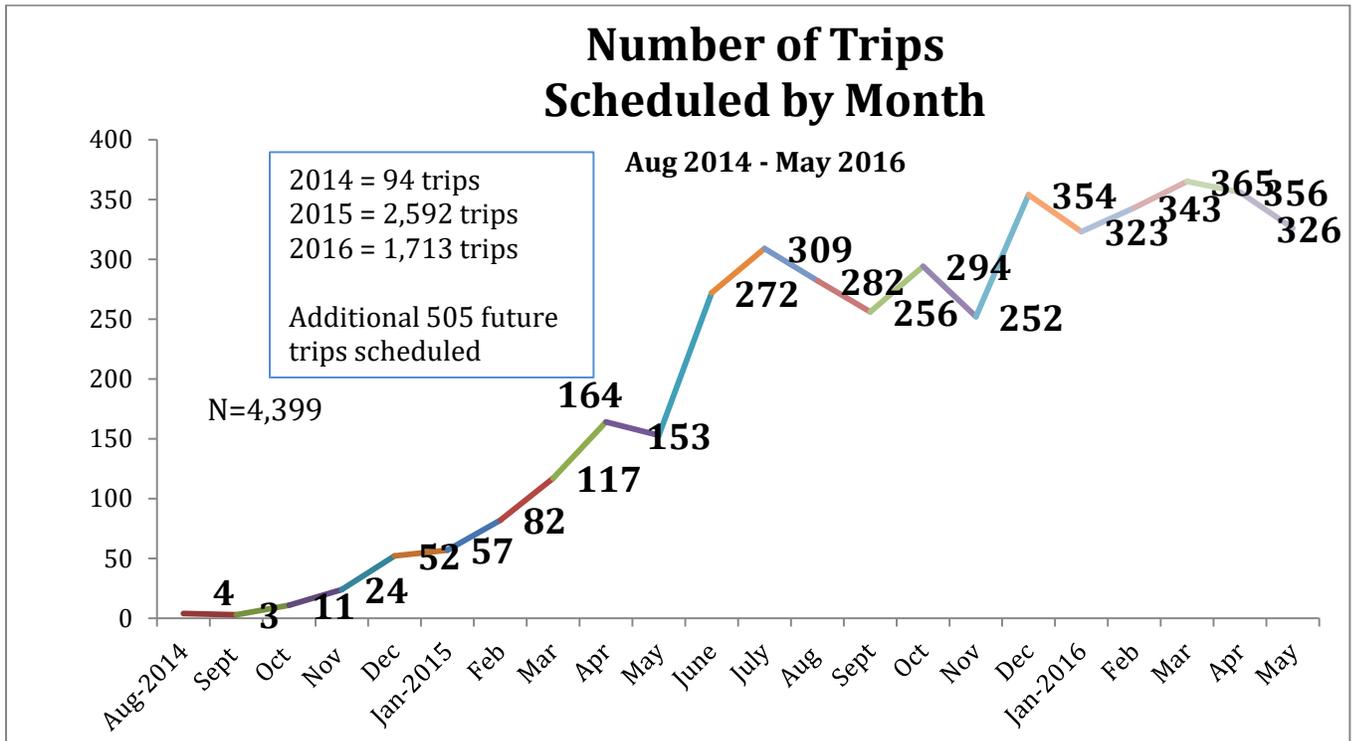
More than one-half (58%) of HealthTran riders reported they have mobility concerns. Many required special accommodations, i.e., walker or wheel chair, escort, lift, or car seat.



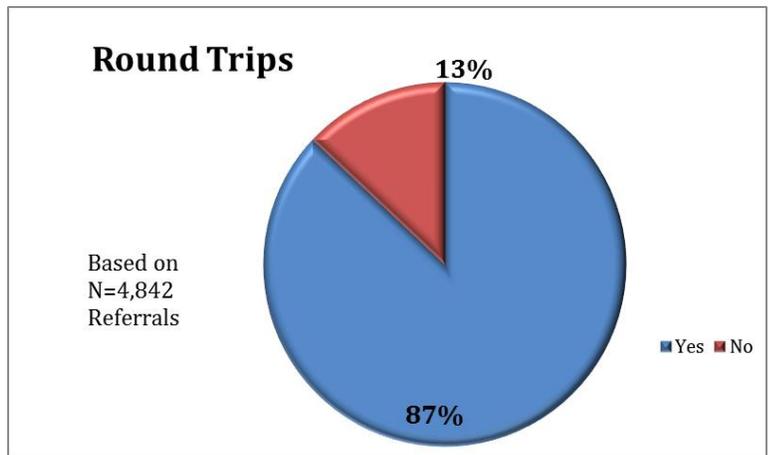
HealthTran Rides

The number of referrals to HealthTran for rides totaled 4,842 between August 2014 and the end of May 2016. Some referrals did not become trips and some riders took multiple trips. The growth in HealthTran can be seen in the following time chart. There were 94 trips in 2014; 2,592 trips in 2015, and the first 5 months of 2016, there have been 1,713 trips. Another 505 trips were scheduled beyond May 2016 when the data were selected for this report. Clearly this represents exponential growth!

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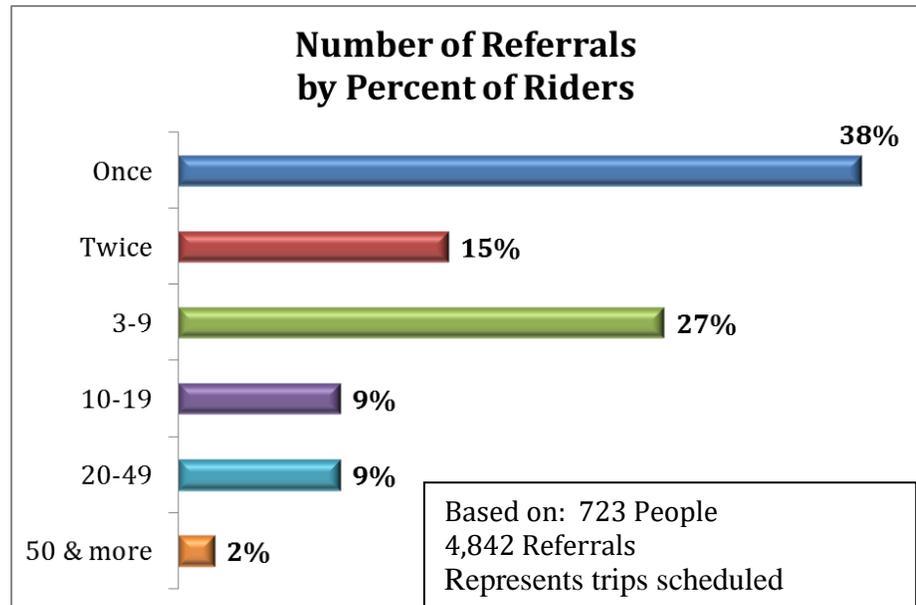


Nearly all of the trips provided transportation to and from pick-up location to health care provider.

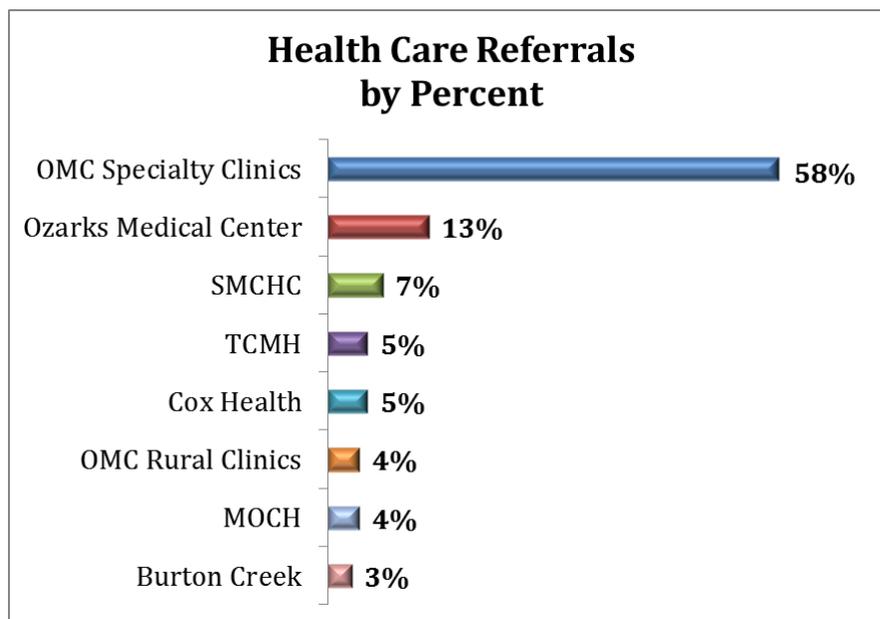


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The following chart shows how many referrals were made by the percent of riders. In other words, 38 percent of HealthTran riders were referred once; 15 percent were referred twice; et cetera. As you can see, 11 percent of riders took 20 or more trips during this 22 month period.

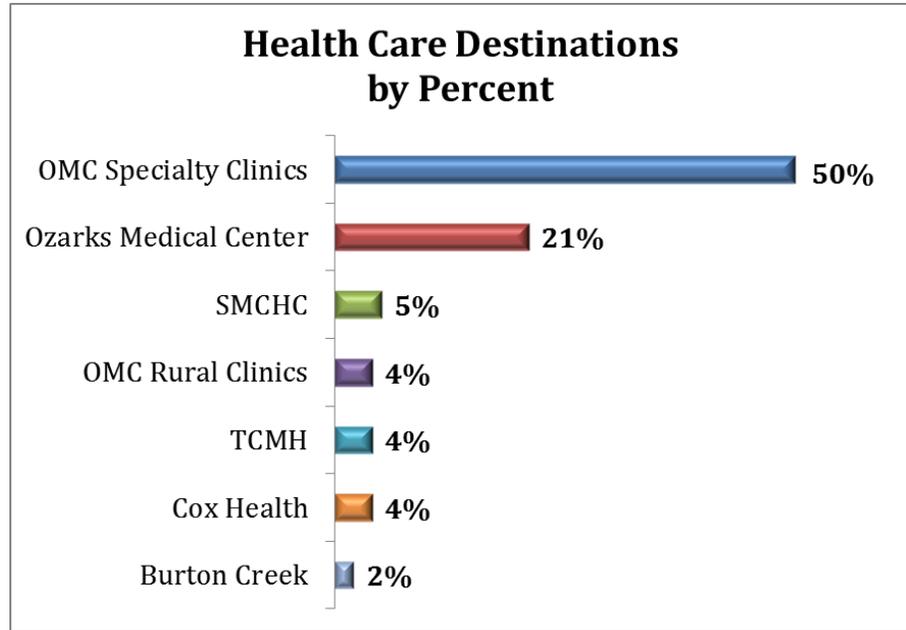


Three-quarters of the referrals to HealthTran for transportation came from Ozarks Medical Center, its Specialty Clinics and its Rural Clinics (75%). Referrals increased in late 2015 and 2016 from SMCHC and other providers in South Central Missouri.

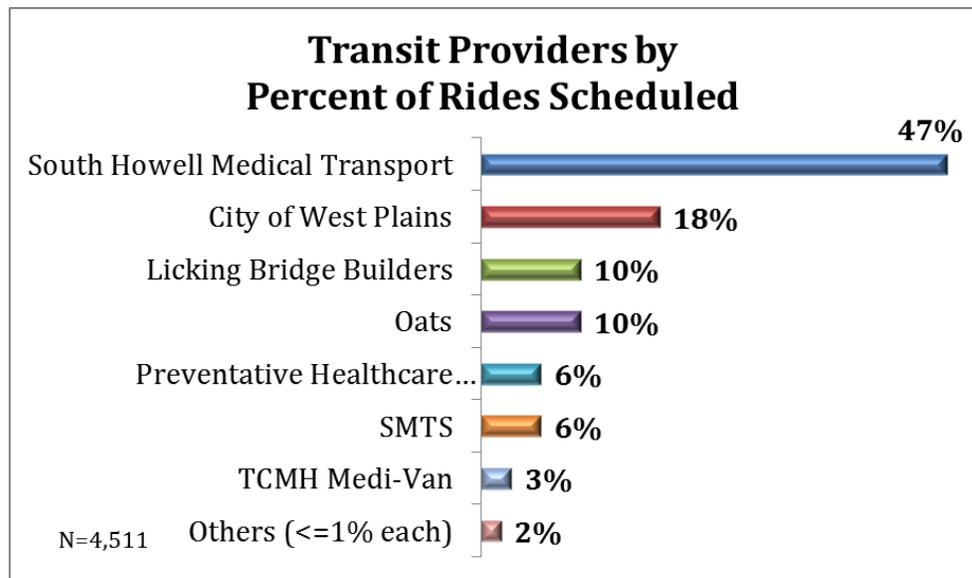


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Destinations for the referrals made to HealthTran were also primarily for Ozarks Medical Center, its Specialty Clinics, and its Rural Clinics which accounted for 75 percent of the health care destinations.



There are several transit providers partnering with HealthTran. To date, five in ten HealthTran rides are provided by South Howell Medical Transport.



CONCLUSION

With approximately six months left in the original funding grant that allowed HealthTran to be created, the program is on target with their goal of providing transportation to medical

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appointments for individuals who need it. The heavy concentration of West Plains, Howell County, and Ozarks Medical Center and its Specialty Clinics are the result of Ozarks Medical Center (OMC) not only embracing the program from the beginning, but the vast clinical capacity under OMC, especially to treat chronic illnesses. It is important to note the expansion into other counties and with other providers that has taken place most notably in 2016 with Cox Health, Texas County Memorial Hospital, and Mercy which represent large healthcare facilities. It is also important to note the increased use of HealthTran by SMCHC, MOCH, and JVCHC which furthers the goal of reaching those in need within the nine (or ten) county area of interest.

A full evaluation report will be provided at the conclusion of the original grant period (December 2016).