

FTA's Innovative Coordinated Access and Mobility (ICAM) Grant

People For People



**CHILDREN'S  
HEALTH  
CONNECTOR**

**Pilot-End  
Performance Evaluation  
April 2023**



## Prepared By

People For People prepared this document under a grant from the Federal Transit Administration's FAST act Section 2006(b), Pilot Program for Innovative Coordinated Access and Mobility (ICAM).

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## Executive Summary

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The Children's Health Connector was a pilot project with the goal to improve coordination of patient access to healthcare using the software platform GOIN'. Enhancements were made to the GOIN' software application to provide real-time coordination for transportation and healthcare partners to monitor whether a patient was picked up or not, vehicle capacity, expected time of arrival, weather, and travel conditions. The first goal of the program was to improve children's access to healthcare and health outcomes through greater access to healthcare. The second goal was the use of the GOIN' software to provide real time information on arrivals, delays, and cancellations at Seattle Children's Hospital so that resources could be better mobilized. The final goal was to use the Greater Columbia 211 Call Center to connect the patient to follow-up resources.

A consortium of agencies has coordinated transportation services for several years for children in central and eastern Washington State who need treatment at Seattle Children's Hospital. This consortium includes People For People's Non-Emergency Medical Transportation (NEMT), People For People's Greater Columbia 211 (GC211)– a referral call center, Medstar – a local transportation provider, and Seattle Children's Hospital. The software company GOIN' joined the above partners to provide an innovative technological solution for the project.

The GOIN' software was modified so that communication could be made between providers. The software was also integrated into People For People's TABSPro scheduling and billing software. The parent/guardians of patients with trips to Seattle Children's Hospital that were scheduled with Medstar as the transportation provider, were asked if they would be interested in using the GOIN' software application. The GOIN' application assisted the parent/guardian of the patient to track the location of the driver. Seattle Children's Hospital had the ability to monitor the patient's trip progress. After the trip was completed, and the parent/guardian of the patient used the GOIN' application, the GC211 call center contacted the parent/guardian of the patient for a post trip survey.

Due to the COVID-19 Pandemic, the pilot program did not meet all the performance measures and outcomes. There were two parents/guardians of patients that used the GOIN' application on the day of the trip. This was due to trips not being assigned to Medstar and the reduction of trips due to the COVID-19 pandemic. These two users were contacted and completed post-trip surveys. Only one user rated the application satisfactorily. Due to this, it is recommended that the pilot program not be continued. The software is still being used by Medstar, but it is not being used by Seattle Children's Hospital due to staff turnover.

There were four lessons learned from the pilot project. The first is that innovative technology can re-define service. Key partner participation is critical for the success of the project. There was too small of a sample population which resulted in minimal users. There were continued user interface issues that were not able to be quickly resolved due to staff turnover.

The COVID-19 pandemic created reduced trips, staffing challenges, and issues with social distancing that hindered the success of the pilot project.

## Chapter One – Introduction/Background

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### ***Introduction***

The Children's Health Connector was a pilot project designed to provide the communication needed between Non-Emergency Medical Transportation (NEMT) Brokers, transportation providers, patients, and Seattle Children's Hospital to ensure that patients arrived for the appointments, and if there were barriers, such as weather, that Seattle Children's was able to re-deploy their resources to serve the most children. GOIN' is an application for a smartphone that was created that allows the parent/guardian of the patient to know their pickup time, notifies Seattle Children's where the patient is en route, and approximate time of arrival.

This report presents an assessment of the Children's Health Connector over the 38-month pilot period. This includes a summary of the program development and launch, performance measures, and a qualitative assessment of outcomes derived from surveys and feedback.

### ***Background***

Children in central and eastern Washington State need access to specialty pediatric medical care. Due to the of the lack of specialty pediatric medical facilities in central and eastern Washington State, children must be transported over one hundred miles to Seattle and other locations in King County to receive regular treatment, attend follow-up appointments, or to undergo advanced surgeries. Access to care is impeded by lack of reliable transportation, the distance they need to travel, dangerous travel conditions over a mountain pass, and delays that profoundly impact their health outcomes. Children and parents/guardians without reliable transportation often rely on public transportation or Non-Emergency Medical Transportation (NEMT) to get to much-needed care.

Currently, NEMT Brokers, transportation providers, and health care providers do not have the means to communicate effectively with each other to ensure that children get the care, treatment, and surgeries they need. The access to care for children, as well as positive health outcomes, is impeded by a system in need of improvement. Each missed appointment, follow-up, or surgery increases the cost of healthcare. Physicians and medical teams scheduled to treat a child that fails to arrive at their appointment due to transportation issues, have now lost the opportunity to re-deploy resources to other patients. With improved communication, medical teams could be deployed to assist with other immediate care needs or children on a waiting list.



The nine counties that People For People's NEMT department serves are Benton, Chelan, Columbia, Douglas, Franklin, Kittitas, Okanogan, Walla Walla, and Yakima. These are prevalent poverty areas with high percentages of Hispanic and Latino populations. The children in these NEMT counties are more likely to live in impoverished rural communities.



In 2017, 162,310 trips were brokered through NEMT. Of these trips, 382 were scheduled directly to Seattle Children's Hospital, of which 101 were canceled or no-shows. According to Seattle Children's Hospital's Manager of External Affairs, a one-hour delay of a patient costs the hospital a minimum of \$450. Without the option of filling the time slot with another patient, the loss could be as high as \$15,000. For those with advanced surgeries, the cost can be up to \$100,000.

Besides a lack of access to health care in central and eastern Washington, as well as a lack of transportation options, Washington State's geography impairs the ability of children to cross the state to receive health care on the west side. The Cascade Mountain range separates central and eastern Washington State from Seattle, on the west side of the state, via I-90. Travel conditions can be unsafe, and there are often delays, forcing children to wait in traffic. Snoqualmie Pass's peak elevation is 3,015 feet and extends for fifty-four miles between Cle Elum and North Bend and carries an average of 29,000 vehicles through the pass per day. Travel conditions are often unpredictable and dangerous, due to weather, avalanches and avalanche maintenance, and vehicle accidents. Additionally, trips are often delayed in the traffic congested Puget Sound Region.

There is a lack of effective communication channels to report or learn of delays in trips, cancellations, and real-time en route information to NEMT and health and transportation providers. Currently, Seattle Children's Hospital relies on one part-time staff person to obtain and receive information regarding weather and scheduled trips and has no means to relay that information to medical personnel and teams awaiting patients traveling over central and eastern Washington State. As a result, medical personnel and teams scheduled to treat patients that arrive late or not at all are unable to see other high need patients or patients on waiting lists, thereby severely impacting health outcomes. Patients stuck in vans on Snoqualmie Pass also suffer negative health outcomes; they miss much needed appointments, are forced to wait for health care, or have appointments rescheduled. As shown in the mountain pass alert below, pass conditions are reported by the Washington State Department of Transportation (WSDOT). NEMT Brokers and transportation providers are registered to receive these notifications to assist in determining whether it is safe to travel over the mountain pass or if there will be travel delays. A pass closure could mean the need to cancel or re-schedule appointments or surgeries.



From: WSDOT SC TMC <[wsdot@service.govdelivery.com](mailto:wsdot@service.govdelivery.com)>

Sent: Wednesday, January 18, 2023 9:56 PM

To: [mdurbin@pfp.org](mailto:mdurbin@pfp.org)

Subject: WSDOT Alert: Pass Closure I-90 eastbound at milepost 47.0

**New Alert 9:54 pm**

**Pass Closure I-90 eastbound**

I-90 Snoqualmie Pass: Eastbound temporarily CLOSED at milepost 47, due to multiple spinouts: five miles west of the summit near Denny Creek. Westbound: Chains required for all vehicles except all-wheel drive, oversize vehicles prohibited.



## Chapter Two – Project Description

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The Children's Health Connector project aimed to reduce medical expenses and improve health care by improving communication between transportation providers, transportation Brokers, and medical service providers by using a new software called GOIN'. The GOIN' software application was tested and refined to provide real time information on arrivals, delays, and cancellations.

This pilot project tested the application of GOIN' with a test group of partners made up of Medstar Transportation, People For People's Non-Emergency Medical Transportation (NEMT) Broker Department, the Greater Columbia 211 (GC211) Referral Call Center, Washington 211 (WA211), and the Seattle Children's Hospital. The project focused on patients who are eligible for NEMT brokered services and are transported with Medstar vehicles to Children's Hospital in Seattle Washington.

With the improved communication, it was expected that scheduled medical services could be adjusted according to actual patient arrival times and medical costs reduced by not deploying medical teams too soon. More realistic patient arrival times would result in a reduced wait time for the medical service provider's expensive medical teams.

### ***Goals***

1. Improve children's access to health care via a partnership with GOIN', Medstar, People For People's Non-Emergency Medical Transportation Department (NEMT), Greater Columbia 211, Washington 211, and Seattle Children's Hospital, which allows for improved coordination, communications, and real-time tracking of patient's route and expected arrival to Seattle Children's Hospital.
2. Improve health outcomes of children through greater access to health care and follow-up communications via Greater Columbia 211.
3. Use the GOIN' software application to provide real time information on arrivals, delays, and cancellations to medical personnel at Seattle Children's Hospital so that they can be better mobilized to assist other patients with immediate medical needs, in turn increasing the number of children promptly seen and reducing costs to publicly supported health and transportation services.
4. Utilize the Greater Columbia 211 information and referral call center to communicate with patient/rider and connect patient/riders to transportation options, transfer calls to NEMT, verify rides the day before the appointment, and follow-up with patient/rider after appointment to offer assistance with information and service referrals, including transportation to follow-up appointments.



## Chapter Three – Key Partnerships

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A consortium of agencies has coordinated transportation services for several years. These services include providing transportation for children in central and eastern Washington State to Children’s Hospital in Seattle Washington. This consortium includes People For People’s Non-Emergency Medical Transportation (NEMT) Broker Department, People For People’s Greater Columbia 211 Referral Call Center, Medstar – a local transportation provider, and Seattle’s Children’s Hospital. The software company GOIN’ joined these partners to provide an innovative technological solution for our project. Each partner in this consortium was committed to this project and signed a Memorandum of Understanding indicating their involvement in this project. This Memorandum of Understanding is listed in Appendix B.

The partners agreed to the following tasks in support of this project.

### ***People For People’s Non-Emergency Medical Transportation (NEMT) Broker***

People For People is the Non-Emergency Medical Transportation (NEMT) broker for nine rural counties in Washington State and will assume the following responsibilities.

1. Facilitate monthly partnership meetings.
2. Collect data from partners that include information from rider, patient, NEMT Broker, NEMT transportation provider, healthcare provider, and 211 Information and Referral Specialists.
3. Provide timely reports for program and fiscal accountability.
4. Upgrade current NEMT software, TABSPro, to interface with GOIN’ technology.
5. Train NEMT Customer Service Representatives on the new service design.

### ***People For People’s Greater Columbia 211***

This Department is one of seven regional call centers for Washington 211 (WA211). People For People’s Greater Columbia 211 will assume the following responsibilities.

1. Train Greater Columbia 211’s Information and Referral Specialists to screen and provide a direct transfer to NEMT Broker for Medicaid eligible requests for transportation assistance.
2. Provide follow up call and/or text to patients and riders that request additional assistance with local resources to address the social determinants of health.
3. Update the community resource database to assure complete and accurate transportation, healthcare, and human resources are available by calling or going online.
4. Provide monthly information of the number of individuals requesting transportation, number of individuals screened and transferred to NEMT, and the number of follow up calls and or texts with the requested resources that individuals need.
5. Participate in monthly scheduled partner meetings to identify progress.

### ***Washington 211***

This statewide network provides an easy-to-remember number and a comprehensive, online, community resource database that connects people to a wide range of health and human services throughout Washington. The service helps people who are overwhelmed by the complexity of state and local human service systems get the help they need. Washington 211 will provide the following.

1. Provide universal access through a one-call, one-click resource—Dial 211 or click on [www.wa211.org](http://www.wa211.org)
2. Provide a seamless network of telephony for callers to access information and referrals for transportation, healthcare, and human services.
3. Provide an online database for individuals to search for resources in their local community.
4. Participate in monthly scheduled meetings to identify progress.

### ***Medstar Transportation***

Medstar is a contracted Non-Emergency Medical Transportation (NEMT) provider serving central Washington’s rural communities. Medstar has provided service for over 34 years and commits to providing the following.

1. Participate in coordinating NEMT transportation trips to and from Seattle Children’s Hospital.
2. Install and utilize GOIN’ software to facilitate information sharing between dispatch, driver, NEMT broker, and Seattle Children’s Hospital.
3. Train dispatch, drivers, and management staff on GOIN’.
4. Collect and report on the operational aspect of GOIN’, riders, departure and arrival times, no shows and cancellations, and cost savings.
5. Participate in monthly scheduled partner meetings to identify progress.

### ***GOIN’***

The GOIN’ Software Suite is a combination of a Rider App, Driver App, and Mobility Management Platform. Justin Bergener, CEO, committed to providing the following resources for this project:

1. Provide a shared, integrated technology system that will provide real-time updates on each patient(s) location while en route from rural communities to healthcare appointments in Seattle.
2. Customize GOIN’ to provide a systems coordination platform with a user interface for authorized Seattle Children’s Hospital staff to view patient transportation status and estimated times of arrival.
3. Customize GOIN’ to interface with TABSPro (NEMT software) with a NEMT Broker Mobility Management Dashboard.
4. Provide Medstar Transportation with a GOIN’ Driver App for a centralized resource for drivers and providers to manage regulation compliance, manifests, and available seats.
5. Provide training on the utilization of GOIN’ for the Medstar, NEMT Broker and Seattle Children’s Hospital users.

6. Create an API to provide access to integrate and scale the system to multiple providers, NEMT Brokers, and healthcare systems.
7. Participate in monthly scheduled partner meetings to identify design or training needs throughout the project.

### ***Seattle Children's Hospital***

Seattle Children's Hospital is a regional pediatric specialty hospital for a four-state region. It is ranked as one of the best children's hospital in the nation. Seattle Children's commits to the success of the project by providing the following.

1. Dedicate staff time to the coordination of transportation for children and families that travel from central and eastern Washington to Seattle for specialty care.
2. Provide ongoing training for Seattle Children's Hospital staff to effectively utilize GOIN' software to manage patient flow, report the estimated arrival, cancellations, or no shows to medical teams.
3. Identify and document issues, benefits, health care savings, and patient experience.
4. Participate in monthly scheduled partner meetings to identify progress.

Agency Name	Contact Person	Status
People For People NEMT	Marcy Durbin, Project Manager	Current
People For People NEMT	Jan Ollivier, Director of Transportation	Retired in May 2022
People For People NEMT	Renee Biles, Chief Operations Officer	Retired in June 2021
People For People	Tim St. Martin, Director of IT	Current
People For People	Andy Comer, Software Developer	Current
People For People NEMT	Kristin Melcher, Director of Transportation	Began April 2022
People For People NEMT	Tracy Sloan, Broker Supervisor	Current
People For People GC 211	Stacy Kellogg, Director of Social Services	Current
People For People GC 211	Teresa Sanchez, Call Center Supervisor	Current
WA211	Tim Sullivan, Director	Current
Medstar	Ahlisha Johnson, Operations Manager	Current
GOIN'	Justin Bergener, Chief Executive Officer	Current
GOIN'	Cole Barroar, Software Engineer	Current
Seattle Children's Hospital	Renata Taylor, Guest Services	December 2022 through February 2023
Seattle Children's Hospital	Julie Povick, Guest Services Manager	Project Implementation through October 2021
Seattle Children's Hospital	Jason Lux, Guest Services Specialist	Interim contact after Julie departed
Seattle Children's Hospital	Sara Pazos, Guest Services Specialist	Current

## Chapter Four – Implementation

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### *Partner Meetings*

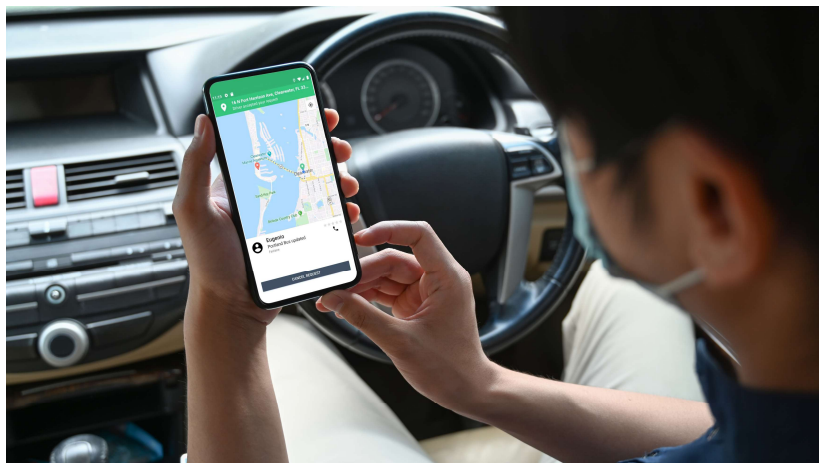
In order to coordinate between the key partners, monthly meetings were held beginning September 10, 2019, and lasted through the pilot program. These meetings provided a platform for partners to connect and give updates on the status of the pilot program. GOIN' provided demonstrations of recent changes to the software as the pilot progressed.

In the fall of 2021, it was determined from partner feedback that the GOIN' software application needed to be translated into Spanish. Previously, if the user's smartphone settings were set to a different language the application would be translated, but it was not native to the GOIN' platform. This could cause translation errors in the application. By having it translated within the application, there were no longer translation errors. The translation was completed in February 2022.

The partners were able to brainstorm ideas to improve the program and to obtain more users. At the March 2022 meeting, the partner group in attendance downloaded the GOIN' software application onto their smartphones. This included Androids as well as iPhones. Feedback to improve the user interface was provided. Some of the challenges encountered included difficulties signing in and not understanding the menu location or screen navigation. This allowed for feedback that not all users will be comfortable with technology or have the intuition to push different buttons to navigate the application.

Another idea that came from the meetings was to create a logo for the Children's Health Connector to use in the GOIN' software application. The logo was discussed among the partners and the final decision made in August 2022.

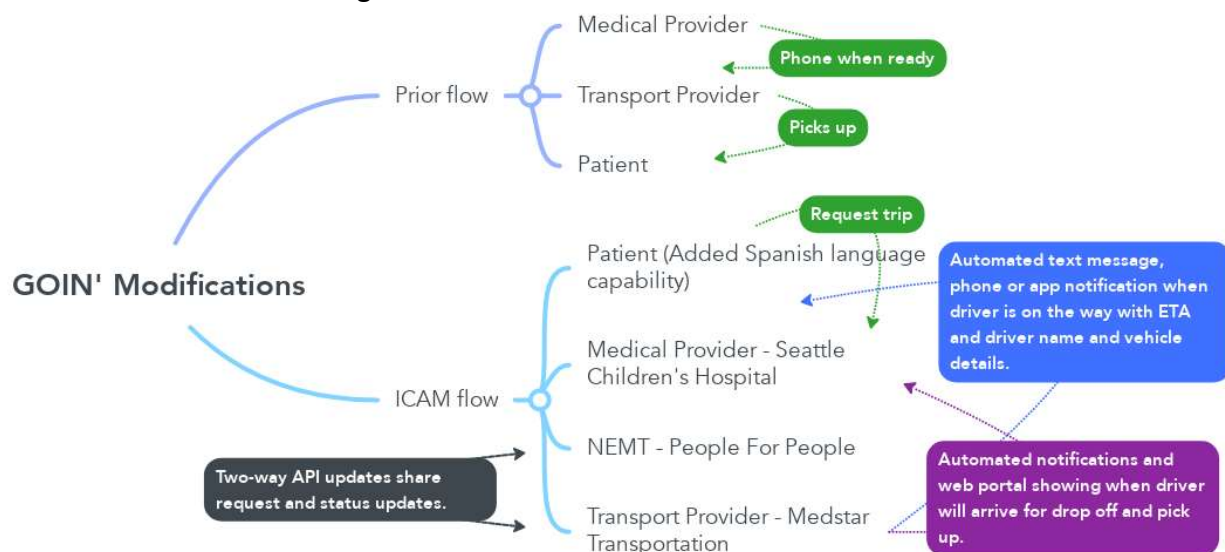
People For People also met via Zoom with Heather Edmonds, Senior Program Associate with USAging (formally known as National Association of Area Agencies on Aging) throughout the pilot program. During these meetings updates were provided regarding the status of the pilot and resources were shared to assist in the pilot program.



## Software Modification

The first stage of the project was the software modification of the GOIN' software application. The modifications were performed in the fall and winter of 2020. The GOIN' software suite was developed to "allow for end-to-end management of all transportation operations. GOIN's Android and iOS apps are intuitive for riders, and its platform allows for management of client's services. It provides efficient user-facing apps for riders and drivers and back-end platform for ride management and monitoring."<sup>1</sup> Figure 1 shows the process flow modification for the GOIN' software. The original version of the software was between GOIN', the transportation provider, the patient, and the medical provider. However, there was no communication with the medical provider. This meant that the medical provider was unable to track the progress of the trip and did not know if the patient had started the trip or if the patient was a no-show. The process was modified to provide for communication between the transportation provider, medical provider, NEMT Broker and the patient. With the modification, no-shows were identified as soon as the transportation provider arrived to pick up the patient.

Figure 1 – GOIN' Process Flow Modifications



The software modifications were developed for the alpha and beta testing with ten (10) users. This included integration with TABSPro which is the scheduling software that People For People uses to Broker NEMT trips. The Open-Source Routing Machine (OSRM) allowed for Application Programming Interface (API) between TABSPro and GOIN'. Seattle Children's was provided a login so that they would be able to see the trips arranged by the Broker that were assigned to Medstar.

There were several delays to the launch of the pilot program. The pilot project was supposed to launch in November 2019. The first delay was due to administrative issues with the Federal Transit Agency's (FTA) Transit Award Management System (TrAMS). In order to expend funds

<sup>1</sup> GOIN' (2023, March 31). *GOIN' SOFTWARE SUITE*. <https://goin.org/goin-software-suite/>

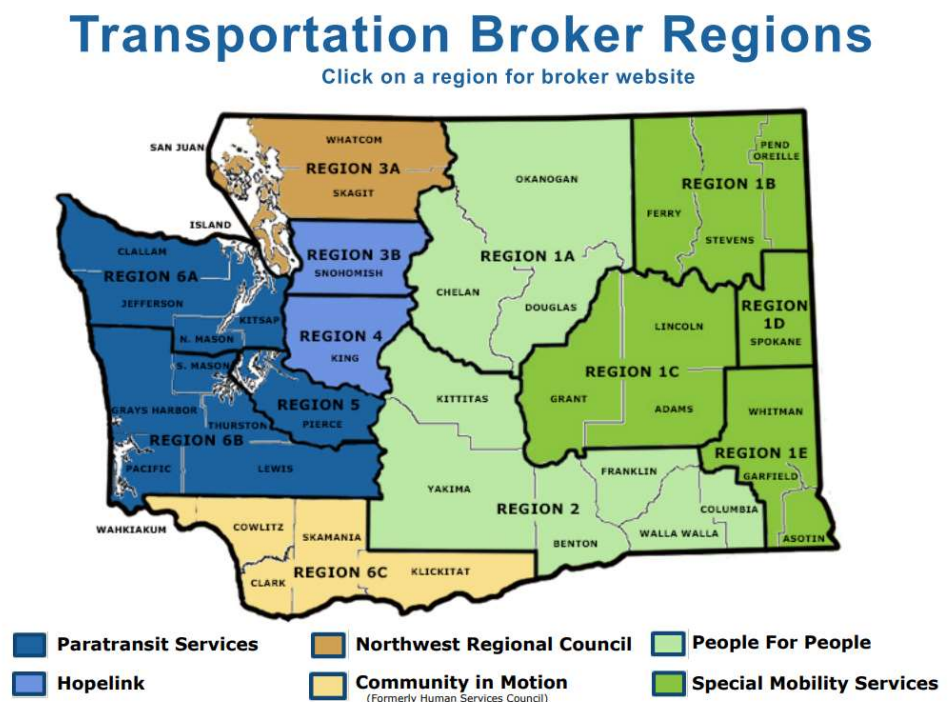
on FTA grants, grantees must be enrolled in TrAMS. The grant never was able to be enrolled in TrAMS. To solve the issue the grant administration was adjusted to be administered by Washington State Department of Transportation. This caused the revised launch to be in November 2020. There was further delay caused by the onset of the COVID-19 Pandemic. The testing phase was completed, and the program went live in January 2021. At the start of the pilot, People For People would ask the parents/guardians of the patients if they would be willing to allow their trips to be sent using the GOIN' software application. This resulted in few trips being used through GOIN'. Eventually it was determined that their permission was not required, since it was within the purview of the NEMT Broker. The trips were then sent through GOIN', however, they were sent in addition to the import of all trips assigned to Medstar through the existing API. A process should have been created to ensure that the trips were not sent as duplicates. This caused Medstar to delete the duplicated GOIN' trips. This process error was not discovered until December 2022 and then the pilot program ended January 31, 2023.

### ***Participant Selection***

There was a select population of patients that would be eligible to participate in the pilot. Only patients in Washington State Health Care Authority's Regions 1A and 2 were eligible since People For People is the NEMT Broker for those regions. As the map of Transportation Broker Regions<sup>2</sup> shows, the

eligible counties were Okanogan, Chelan, Douglas, Kittitas, Yakima, Benton, Franklin, Walla Walla, and Columbia. Seattle Children's Guest Services Specialist would speak with parents/guardians of the patients from these counties regarding the GOIN' software application. The ProviderOne numbers of the patients would then

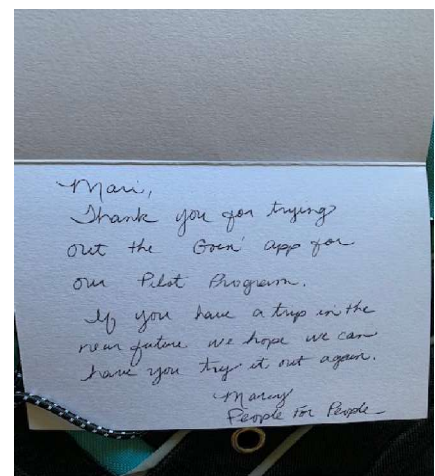
be provided to People For People's NEMT Customer Service Representatives. If the upcoming trips for these patients were scheduled with Medstar then the NEMT Customer Service Representatives would then contact the parents/guardians of the patients to inquire if they



<sup>2</sup> Washington State Health Care Authority. (2023, March 31). *Transportation Broker Regions*. <https://www.hca.wa.gov/assets/billers-and-providers/NEMTbrokermmap.pdf>



A collection of school supplies is displayed on a patterned surface. The items include a black and white fleece throw, a blue measuring tape, a stack of blue paper, a spiral notebook, a red folder, a yellow pencil case, and a green pencil case.



One of the goals of this pilot program was to improve health outcomes for children through greater access to care. The strategy used to meet this goal was through the use of participant surveys. A survey was developed for GC211 to use when contacting the participants. The survey was in English and Spanish (reference in Appendix D) and was included in GC211's VisionLink software.

The surveys also provided a chance for feedback on the GOIN' software application. One survey participant had an issue logging into the application on the day of their trip. This allowed the partners to review and see if a resolution could be obtained. This resulted in a different verification process of the GOIN' application to make it easier for future users. The next user did not have an issue logging into GOIN'.



## Chapter Five – Performance Measures

Major activity output measures are used to evaluate this project's activities, performance, and level of participation from partners and participants. Below are the output targets used for this project.

<b><i>Major Activity Output Measures (Objectives)</i></b>	<b><i>Numerical Target</i></b>
No-show trips to Seattle Children's Hospital will decrease.	20%
Patients/clients will be called by Greater Columbia 211 to pre-verify trips to Seattle Children's Hospital.	50%
Patients/clients will receive an outreach call from Greater Columbia 211 to follow-up with an offer of information and referral (information related to health info/follow-up call after the trip and offer additional resources, as well as improved access and health outcomes).	50%
Patients/clients will learn how to use Greater Columbia 211 for information on transportation options and referrals to the Non-Emergency Medical Transportation Brokering Department.	20%

The performance measures for this pilot project were hindered by the effects of the COVID-19 pandemic. There is an expanded discussion on the effects in Chapter 9 – Impacts of COVID-19. Table 1 shows trip data from 2018 through 2020, which is prior to the pilot program. It shows the total trips made via a transportation provider, as opposed to gas reimbursement or bus passes, the total cancelled and the total that were No-Shows. It also breaks out the trips that were completed by Medstar.

Table 1 – Trips to Seattle Children’s Hospital Prior to Pilot Project

All Trips in 2018 to Children's Hospital			All Trips in 2019 to Children's Hospital			All Trips in 2020 to Children's Hospital		
Total Trips Made	684		Total Trips Made	612		Total Trips Made	442	
Total Cancelled	155	17.5%	Total Cancelled	145	18.5%	Total Cancelled	115	19.9%
Total No Showed	49	5.5%	Total No Showed	25	3.2%	Total No Showed	21	3.6%
<b>Grand Total</b>	<b>888</b>		<b>Grand Total</b>	<b>782</b>		<b>Grand Total</b>	<b>578</b>	
<b>2018 Trips by Medstar to Children's</b>			<b>2019 Trips by Medstar to Children's</b>			<b>2020 Trips by Medstar to Children's</b>		
Total Trips Made	365		Total Trips Made	396		Total Trips Made	171	
Total Cancelled	28	6.6%	Total Cancelled	43	9.4%	Total Cancelled	34	15.5%
Total No Showed	31	7.3%	Total No Showed	20	4.4%	Total No Showed	14	6.4%
<b>Grand Total</b>	<b>424</b>		<b>Grand Total</b>	<b>459</b>		<b>Grand Total</b>	<b>219</b>	

Table 2 shows the same data as Table 1, but after the pilot program began in January 2021. Comparison of the two tables shows there was no statistical impact to the No-Show rate for Seattle Children’s Hospital.

Table 2 – Trips to Seattle Children’s Hospital After Pilot Project Began

All Trips in 2021 to Children's Hospital			All Trips in 2022 to Children's Hospital		
Total Trips Made	510		Total Trips Made	587	
Total Cancelled	132	19.9%	Total Cancelled	155	20.1%
Total No Showed	21	3.2%	Total No Showed	30	3.9%
<b>Grand Total</b>	<b>663</b>		<b>Grand Total</b>	<b>772</b>	
<b>2021 Trips by Medstar to Children's</b>			<b>2022 Trips by Medstar to Children's</b>		
Total Trips Made	91		Total Trips Made	139	
Total Cancelled	57	36.8%	Total Cancelled	34	17.9%
Total No Showed	7	4.5%	Total No Showed	17	8.9%
<b>Grand Total</b>	<b>155</b>		<b>Grand Total</b>	<b>190</b>	

During the pilot program there were two individuals that used the GOIN’ application. Both individuals were contacted and completed surveys after their trips were completed.

## Chapter Six – Outcomes

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Outcomes are measured to evaluate the impact of this project in terms of increased knowledge, improved decision-making, and increased economic behavior. These measurements will help determine how effective this project is at increasing access to health care, improved health outcomes, and reduced healthcare costs are as follows.

<i><b>Outcome Measures</b></i>
<b><u>Eighty percent</u></b> of the Children’s Health Connector participants will provide a satisfactory rating of the GOIN’ application (through surveys).
Seattle Children's Hospital will have improved cost savings of <b><u>20%</u></b> (reduced healthcare costs). Track cost of no-shows/cancellations pre and post project.

Of the two users of the GOIN’ application for the trip, one user was satisfied with the GOIN’ application, and one user was not. That was due to technical issues on the day of their trip, and they were unable to open the application. This put the outcome at 50%.

Due to the turnover of staff at Seattle Children’s Hospital, there was no access to data to refute or support the improved cost savings of 20%.

## **Chapter Seven – Moving Forward/Sustainability**

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The pilot project was a promising endeavor. However, due to items outlined in Chapter 8 – Lessons Learned, this will not be a sustainable project moving forward. The GOIN' Software Suite is being used by Medstar as the communication platform between drivers and notifications to clients. People For People and Medstar are investigating the use of API through GOIN' for all Medicaid trips. This would provide real-time status updates and save time importing manually. Unfortunately, without renewed investment from Seattle Children's Hospital, the program will not be able to continue as originally planned. This project suffered greatly from the pandemic, as will be discussed in Chapter 9.

## Chapter Eight – Lessons Learned

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While the pilot program was designed to fill a critical gap in communication between patients, medical providers, transportation providers, and NEMT Brokers, unfortunately the program was not successful. The largest reason was due to complications from the COVID-19 pandemic. There are four lessons learned that can be applied to other software application pilot projects. They are innovative technology can re-define service, key partner participation is critical for success, large sample populations are necessary, and quickly resolving user interface issues with software applications.

### ***Innovative Technology***

The first lesson learned is that technology has advanced greatly in the world of transportation and has the ability to re-define service level. The GOIN' software closed the loop for communication between medical providers, transportation providers, NEMT Brokers, and patients. Other software applications available do not include the medical provider as a point of contact during transportation or medical appointments. This way medical providers are notified well before the assigned medical appointment time in the event of a no-show. They can also track the progress of a patient and adjust schedules as needed.

NEMT Brokers and transportation providers were able to integrate software applications without requiring the use of the same software. This allowed for ease of data transfer regarding trips. The downfall was the launch of the application as described below.

### ***Key Partner Participation***

The second lesson learned is regarding coordination among key partners. When the grant application was being developed there was strong support from People For People, Medstar, Seattle Children's Hospital, GOIN', and WA211. Unfortunately, the momentum was hindered due to the delay in the project being entered into TrAMS. The initial start date for the pilot to begin was delayed from August 2019 to January 2021. The delay coincided with the start of the COVID-19 pandemic. This caused the pilot project to no longer be a priority for each of the partners. This meant that technical issues were not resolved in a timely manner, which reduced forward momentum.

There was also significant turnover with each partner organization. People For People had a changeover of the Chief Operating Officer, Director of Transportation, and Chief Financial Officer. Seattle Children's Hospital had turnover of multiple staff at the Manager level. The final turnover was at Medstar with the Support Manager and Senior Accountant. With each turnover, the historical knowledge was lost and with the onset of the pandemic, time and resources became limited to invest in the project. Those that were brought on to replace individuals who turned over were not focused on the project, and it made it difficult to contact them for assistance. Julie Povick at Seattle Children's Hospital was the champion for this pilot program. Unfortunately, she separated from Seattle Children's Hospital in October 2021.

Without the key partner participation, the pilot program was unable to use the full amount of the awarded grant.

### ***Small Sample Populations***

The third lesson learned was that the sample pilot population was much too small to reach the robust performance measures and objectives set for the grant. While there were thirty-three downloads of the GOIN' application, only two users attempted to use GOIN' to complete the trip. A factor that contributed to the small number of actual users was that in order to utilize the GOIN' application, the trip needed to be completed with Medstar. Medstar is not a sole-source transportation provider for the counties served by the pilot project. Therefore, on the day of scheduled trips, other transportation providers were used which meant that GOIN' was not able to be utilized. There was also a decline in trips caused by the COVID-19 pandemic. These factors left the program with a small number of potential users. Without participants to use the application, the partners defaulted to the original method of communication. Therefore, technical glitches were not found in a timely manner. When one was identified the software programmers had to re-familiarize themselves with the software, which took longer to resolve.

### ***User Interface Issues***

The fourth lesson learned was that user skillset needs to be considered when developing a new application. The GOIN' software application was not translated into Spanish until February 2022. Due to the demographic makeup of the population in the counties that were eligible for the pilot program, by not having the software translated at implementation, it further reduced potential users.

The parents/guardians of the patients that would use the application were not comfortable with a new technology and downloading a new application onto their phones. Parents/guardians had no interest in an application did they not see an immediate benefit in using because they were already under stress in obtaining treatment for their children and navigating the complicated health care system. The COVID-19 pandemic added yet another layer of concern. Parents/guardians were focused on transporting the vulnerable children and not exposing them to the coronavirus. They did not see the benefit of using the application and did not pass along any further feedback.

There were two parent/guardians who used the GOIN' application for their child's trips. The first parent/guardian tried to use the application on the day of the trip and encountered a cell carrier issue that prevented codes from being sent to the parent's cell phone. Therefore, they were unable to login to the application on the day of the appointment. This issue took months to resolve, however, an alternative method was created by sending the login pin code via email. The alternative method has provided a solution for carrier text message issues.

## Chapter Nine – Impacts of COVID-19

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The COVID-19 pandemic had a significant impact on the project and played a role in the pilot program's failure to meet expected outcomes. The issues caused by the pandemic were trip reduction, staffing challenges among partner agencies, and issues caused by social distancing requirements.

### ***Trip Reduction***

The pilot program went live in January 2021. During this year total trips to Seattle Children's Hospital were down 15% from 2019. Trips that were serviced by Medstar, and therefore eligible for the program, were down 66%. This meant fewer people that would be able to use the GOIN' application. Without a larger sample population, the application was not fully tested, and partners defaulted to their original methods of communication.

### ***Staffing Challenges***

Like many other businesses and organizations, all partners in the pilot project faced staffing challenges. There were multiple turnovers at Seattle Children's Hospital, which made it difficult to keep the partnership alive. Medstar and GOIN' had so much turnover in the early parts of the pandemic that their focus was on keeping their existing businesses running. This meant less resources to troubleshoot issues that arose with the beta testing of GOIN'. People For People experienced turnover in the leadership roles during the pandemic. Different individuals now occupy the Chief Operating Officer, Chief Financial Officer, and Director of Transportation roles. As a NEMT Broker, People For People struggled to find transportation providers to fill the trip requests. One reason is that not all transportation providers were willing to transport COVID-19 positive patients. The supply chain constraints were a large concern, because transportation providers could not obtain cleaning supplies and personal protective equipment. Vehicle and driver availability was impacted when transporting COVID-19 positive patients which required extensive sanitization procedures. All partners also experienced staffing shortages due to employees who became ill with COVID-19 and were out for extended periods of time.



### ***Social Distancing***

One of the main draws of the initial plan for the GOIN' application was the use of open seats available in vehicles on trips. The premise was that the partners would be able to see existing seat capacity on vehicles so that patients pending transit could be accommodated at the last



minute. Unfortunately, with the social distancing requirement, more vehicles were required to only have one passenger and attendant which made this impossible to use.

# **Appendix A**

## **Partnership Agreement Children's Health Connector**

PARTNERSHIP AGREEMENT  
CHILDREN'S HEALTH CONNECTOR

This Partnership Agreement confirms the agreement between  
**People For People**  
**Goin'**

**Scope of Agreement**

PEOPLE FOR PEOPLE in partnership with Goin' recognizes the importance of the Innovative Coordinated Access and Mobility (ICAM) Pilot Program and this agreement solidifies the coordinated sources and support of this program.

**People For People**

PEOPLE FOR PEOPLE is the Non-Emergency Medical Transportation (NEMT) broker for nine rural counties in Washington State and will assume the additional responsibilities related to this partnership agreement:

1. Prepare the billings for Washington State Department of Transportation (WSDOT) for the program expenses.
2. Receiving invoicing from Goin' to pass-through to WSDOT.

**Goin'**

Goin' is a company that has developed a mobility coordination software to facilitate enhanced transportation service for improved access efficiencies. Goin' will invoice PEOPLE FOR PEOPLE in the following manner:

<b>Goin' Software Professional Services</b>	
Software Implementation/Training	\$20,000
<i>Invoiced as a flat fee on initial invoice. Support to be provided with invoice of work performed.</i>	
Project Management	\$30,000
<i>Invoiced per hour at \$375 until reaching \$30,000. Estimated hours each month for the first three months are 125. Support to be provided with invoice of work performed.</i>	
<b>Goin' Medical Mobility</b>	
License	\$50,000
<i>Invoiced at a flat monthly rate of \$3,850 for 12 months and \$3,800 for 1 month until reaching \$50,000. Support to be provided with invoice.</i>	
Total FTA Request to be paid by PEOPLE FOR PEOPLE and then invoiced to WSDOT	\$100,000
<b>Goin' In-Kind Match</b>	
Expenses for mapping software paid for by Goin' included on invoices with support until reaching the dollar amount.	\$42,450
<b>Total</b>	
	\$142,450

Invoices are due to PEOPLE FOR PEOPLE by the 10<sup>th</sup> of the following month for the month you are requesting payment. For example, if requesting payment for December expenses, the invoice is due by January 10<sup>th</sup>. Initial invoicing will allow for previous month expenses. PEOPLE FOR PEOPLE will then invoice WSDOT on the 15<sup>th</sup> of the month. Invoice terms shall be NET 30.

Confidentiality: The parties shall use Personal Information and other confidential information gained by reason of this Contract only for the purpose of this Contract. PEOPLE FOR PEOPLE and Goin' shall not disclose, transfer, or sell any such information to any other party, except as provided by law or, in the case of Personal Information except as provided by law or with the prior written consent of the person to whom the Personal Information pertains. The parties shall maintain the confidentiality of all Personal Information and other confidential information gained by reason of this Partnership Agreement and shall return or certify the destruction of such information if requested in writing by the party to this Partnership Agreement that provided the information.

**304 West Lincoln, Yakima, WA 98902, (509) 248-6726**

*We are an Equal Opportunity Agency and provider of employment & training and social services. Auxiliary aids and services are available upon request to individuals with disabilities. TTY 711*

## Certification Regarding Debarment and Suspension



PEOPLE FOR PEOPLE

### APPENDIX A TO TITLE 29, PART 98 - CERTIFICATION REGARDING DEBARMENT AND SUSPENSION - *Certification for Contracts, Grants, Loans, and Cooperative Agreements*

1. The undersigned (i.e., the Contractor signatory) certifies, to the best of his or her knowledge and belief, that it and its principals:
  - A. Are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from covered transactions by any Federal department or agency;
  - B. Have not within a three-year period preceding this proposal been convicted or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (Federal, State, or local) transaction or contract under a public transaction; violation of Federal or State antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;
  - C. Are not presently indicted or otherwise criminally or civilly charged by a government entity (Federal, State, or local) with commission of any of the offenses enumerated in paragraph (1)(B) of this certification; and,
  - D. Have not, within a three-year period preceding this application/proposal, had one or more public transactions (Federal, State, or local) terminated for cause or default.
2. Where the prospective primary participant is unable to certify to any of the statements in this certification, such prospective participant shall attach a signed explanation of such to this document.

GOIN', LLC

2/16/2021

APPLICANT ORGANIZATION

DATE SUBMITTED

Justin Bergner

CEO

NAME OF AUTHORIZED CERTIFYING OFFICIAL (PRINT OR TYPE)

TITLE

DocuSigned by:  
  
371A886F87AC4B1

SIGNATURE OF AUTHORIZED CERTIFYING OFFICIAL

**304 West Lincoln, Yakima, WA 98902, (509) 248-6726**

*We are an Equal Opportunity Agency and provider of employment & training and social services. Auxiliary aids and services are available upon request to individuals with disabilities. TTY 711*

**Indemnification and Hold Harmless:** Goin' agrees to hold harmless, indemnify and defend PEOPLE FOR PEOPLE, including its officials, officers, employees and agents, from and against any and all suits, actions, claims, liability, damages, judgements, costs and expenses (including reasonable attorney's fees) which result from and arise out of the sole negligence of or breach of this Agreement by Goin', its officials, officers, employees and agents.

PEOPLE FOR PEOPLE agrees to hold harmless, indemnify and defend Goin' including its officials, officers, employees and agents from and against any and all suits, actions, claims, liability, damages, judgements, cost and expenses (including reasonable attorney's fees) which result or arise out of the sole negligence or of breach of this Agreement by PEOPLE FOR PEOPLE, including its officials, officers, employees and agents.

In the event that the officials, officers, agents and/or employees of both PEOPLE FOR PEOPLE and Goin' are negligent, each party shall be liable for its contributory share of negligence for any suits, actions, claims, liability, damages, judgements, costs and expenses (including reasonable attorney's fees).

Nothing contained in this section of this Agreement shall be construed to create a right of indemnification in any third party.

All parties, being free from duress, enter into this agreement for their mutual benefit. The parties agree that they will fulfill their commitment to the project with the identified resources and for the duration of the project. The parties signing below warrant that they have read and understand this agreement and have authority to enter into this agreement.

DocuSigned by:  
*Madelyn Carlson*  
YAP0000P8M6CAGG  
2/16/2021

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PEOPLE FOR PEOPLE  
Madelyn Carlson, CEO

Date

DocuSigned by:  
  
 2/16/2021  
 271AB5F5E7AC48D0  
 Goin'  
 Justin Bergener, CEO & Founder  
 Date

# **Appendix B**

## **Memorandum of Understanding Children's Health Connector**



MEMORANDUM OF UNDERSTANDING  
CHILDREN'S HEALTH CONNECTOR

This Memorandum of Understanding (MOU) confirms the agreement between  
**People For People**  
**Washington Information Network 2-1-1**  
**Medstar**  
**Goin**  
**and**  
**Seattle Children's Hospital**

**Scope of Agreement**

People For People in partnership with Washington Information Network 2-1-1, Medstar, Goin, and Seattle Children's Hospital recognize the importance of coordinated access for transportation disadvantaged populations in order to increase access to care, improve health outcomes, and reduce healthcare costs. Each partner commits to coordinate resources and support the goals of the *Innovative Coordinated Access and Mobility Pilot Program*, Children's Health Connector.

**People For People**

People For People is the Non-Emergency Medical Transportation (NEMT) broker for nine, rural counties in Washington State and will assume the following responsibilities:

1. Facilitate monthly partnership meetings.
2. Collect data from partners that includes information from rider, patient, NEMT Broker, NEMT transportation provider, healthcare provider, and 2-1-1 Information and Referral Specialists.
3. Provide timely reports for program and fiscal accountability.
4. Upgrade current NEMT software, TABSPlus, to interface with Goin technology.
5. Assure that technology and processes are HIPPA compliant in accordance with Health Care Authority contract.
6. Train NEMT Customer Service Representatives on the new service design.
7. Participate in monthly scheduled meetings to identify progress.
8. The estimated participation in the Children's Connector project is a contribution of \$12,000 for the duration of the project.

**People For People's Greater Columbia 2-1-1** is one of seven regional call centers for Washington Information Network 2-1-1 (WIN211). People For People's Greater Columbia 2-1-1 will assume the following responsibilities:

1. Train Greater Columbia 2-1-1's Information and Referral Specialists to screen and provide a direct transfer to NEMT Broker for Medicaid eligible requests for transportation assistance.
2. Assure that technology and processes are HIPPA compliant in accordance with Health Care Authority contract.
3. Provide follow up call and/or text to patients and riders that request additional assistance with local resources to address the social determinants of health.
4. Update the community resource database to assure complete and accurate transportation, healthcare, and human resources are available by calling or going online.
5. Provide monthly information of the number of individuals requesting transportation, number of individuals screened and transferred to NEMT, and the number of follow up calls and or text with the requested resources that individuals need.

6. Participate in monthly scheduled meetings to identify progress

#### **Washington Information Network 2-1-1**

Washington Information Network 2-1-1 is the statewide network that provides an easy-to-remember number and a comprehensive, online, community resource database that connects people to a wide range of health and human services throughout Washington. The service helps people who are overwhelmed by the complexity of state and local human service systems get the help they need.

Washington Information Network 2-1-1 will provide the following:

1. Provide universal access through a one-call, one-click resource—Dial 2-1-1 or click on [www.win211.org](http://www.win211.org)
2. Provide a seamless network of telephony for callers to access information and referrals for transportation, healthcare, and human services.
3. Provide an online database for individuals to search for resources in their local community.
4. Assure that technology and processes are HIPPA compliant in accordance with Health Care Authority contract.
5. Participate in monthly scheduled meetings to identify progress.
6. The estimated value of the integrated phone and community resource database for this project is \$25,050.

#### **Medstar**

Medstar is a contracted Non-Emergency Medical Transportation (NEMT) provider serving central Washington's rural communities. Medstar has provided service for over 34 years and commits to provide the following:

1. Participate in coordinating NEMT transportation trips to and from Seattle Children's Hospital.
2. Install and utilize Goin software to facilitate information sharing between dispatch, driver, NEMT Broker, and Seattle Children's Hospital.
3. Assure that technology and processes are HIPPA compliant in accordance with Health Care Authority contract.
4. Train dispatch, drivers, and management staff on Goin.
5. Collect and report on the operational aspect of Goin, riders, departure and arrival times, no shows and cancellations, and cost savings.
6. Participate in monthly scheduled meetings to identify progress.
7. The estimated participation in the Children's Connector project is a contribution of \$7,000 for the duration of the project.

#### **Goin**

Goin is a company that has developed a mobility coordination software to facilitate enhanced transportation service for improved access and efficiencies. Goin commits to provide the following:

1. Provide a shared, integrated technology system that will provide real-time updates on each patient's location while en route from rural communities to healthcare appointments in Seattle.
2. Customize Goin to provide a systems coordination platform with a user interface for authorized Seattle Children's staff to view patient transportation status and estimated times of arrival.
3. Assure that technology and processes are HIPPA compliant in accordance with Health Care Authority contract.

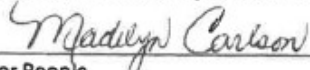
4. Customize Goin to interface with TABSPlus (NEMT Software) with a NEMT Broker Mobility Management Dashboard.
5. Provide Medstar Transportation with a Goin Driver App for a centralized resource for drivers and providers to manage regulation compliance, manifests, and available seats.
6. Provide training on the utilization of Goin for the Medstar, NEMT Broker, and Seattle Children's Hospital users.
7. Create an API to provide access to integrate and scale the system to multiple providers, NEMT Brokers, and healthcare systems.
8. Participate in monthly scheduled meetings to identify design or training needs throughout the project.
9. Provide a Rider app, for IOS and Android. It has a rider profile for mobility and assistance needs, an account based wallet, notification preference by default, and push notifications. It also has service memberships and a 'request a ride' option. Users can see the estimated time of arrival (ETA) of drivers and can rate the driver. Through the web app, users can set notification preference for voice or text message. The ability to send Spanish reminders is available soon.
10. Participate in monthly scheduled meetings to identify progress.
11. Goin will commit to \$110,000 in kind, which included design, development and project management.

#### **Seattle Children's**

Seattle Children's Hospital is a regional pediatric specialty hospital for a four state region. It is ranked as one of the best children's hospital in the nation. Seattle Children's commits to the success of the project by providing the following:

1. Dedicate staff time to the coordination of transportation for children and families that travel from central and eastern Washington to Seattle for specialty care.
2. Assure that technology and processes are HIPPA compliant in accordance with Health Care Authority contract.
3. Provide ongoing training for Seattle Children's Hospital staff to effectively utilize Goin software to manage patient flow, report the estimated arrival, cancellations, or no shows to medical teams.
4. Identify and document issues, benefits, health care savings, and patient experience.
5. Participate in monthly scheduled meetings to identify progress.
6. Seattle Children's will commit \$8,000 in-kind match to assure the success of the project.

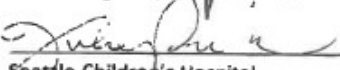
All parties, being free from duress, enter into this agreement for their mutual benefit. The parties agree that they will fulfill their commitment to the project with the identified resources and for the duration of the project. The parties signing below warrant that they have read and understand this agreement and have authority to enter into this agreement.

  
People For People  
Madelyn Carlson, CEO  
Date

  
Washington Information Network 2-1-1  
Tim Sullivan, Director  
11/6/18  
Date

  
Medstar  
Betsy Dunbar, Director of Transportation Success  
11-6-18  
Date

  
Goin  
Justin Bergener, CEO, Founder  
11/06/2018  
Date

  
Seattle Children's Hospital  
Julie Povick, Manager, Observership Office, External Relations  
and International Exchanges  
11/6/18  
Date

# **Appendix C**

## **Children's Health Connector Guest Services Specialist Script**

## Children's Health Connector Pilot Project Scripting

We are participating in a Pilot Project with Children's Hospital, Medstar transportation and a company called GOIN'. This pilot project is to improve communications, improve children's access to health care, and improve health outcomes.

Because your child is provided medical care in Seattle at Children's Hospital you qualify to participate in this pilot project. If you would like to participate, we will note that in our system. This will also provide a reminder call from 211 Information and Referral about your trip and pickup time. They may call you to see how the trip went after your return home and provide referrals for other social and health services.

Your trip may be scheduled with Medstar or another provider. This pilot only applies if your trip is scheduled with **Medstar**. If you do participate in this Pilot project there is an application developed by GOIN', that you can download on your mobile device for free. The application is optional, but it can provide real-time information on arrivals and delays. We can provide you with the link via email or over the phone, or via text, which method would you prefer?

### Further Reference Information:

*If a client asks what information you are sharing with Medstar you can say just their address and phone number like we do for any trips dispatched to Medstar.*

*211 will only receive the name/client name and phone number. The 211 specialist is a People For People employee and working closely with the Broker Department on this pilot project.*

GOIN.org

Download from the Apple AppStore or

<https://apps.apple.com/us/app/goin-rides-for-all/id1363873138>

Get it On Google Play

<https://play.google.com/store/apps/details?id=com.goin.rider.app>

Text "Go" to 206-594-4646

# **Appendix D**

## **Children's Health Connector Survey Questions for VisionLink**



## Children's Health Connector Survey Questions for Vision Link

### How are we doing?

We are committed to providing you with the best transportation experience possible, so we welcome your comments. Please answer the following questions regarding our GOIN' App. Thank you.

Estamos comprometidos a brindarle la mejor experiencia de transporte posible, por lo que agradecemos sus comentarios. Por favor responda las siguientes preguntas sobre nuestra aplicación GOIN'. Gracias.

### What is your preferred language?

¿Cuál es su idioma preferido?

☐ English ☐ Spanish ☐ Other \_\_\_\_\_

### Were you informed about the GOIN' App to check on our trip status?

¿Se le informó sobre la aplicación GOIN' para verificar el estado de su viaje?

☐ Yes ☐ No

### Did you use the GOIN' App?

¿Usó la aplicación GOIN' en?

☐ Yes ☐ No

### Did you use the GOIN' App to check on your arrival/departure times?

¿Usó la aplicación Goin' para verificar sus horas de llegada y partida?

☐ Yes ☐ No

### Were you satisfied with how the GOIN' App worked?

¿Está satisfecho con la manera cómo funciona la aplicación GOIN'?

☐ Yes ☐ If no, please explain.

Comment:

### What restrictions do you have with your mobile phone service?

¿Qué restricciones tiene con su servicio de teléfono celular?

Carrier coverage Issues ☐ Yes | ☐ No

Cost to text ☐ Yes | ☐ No

Limited data ☐ Yes | ☐ No

Not enough memory to download GOIN' App ☐ Yes | ☐ No

### Did you have to cancel your trip?

¿Tuvo que cancelar su viaje?

☐ Yes ☐ No

**How did you cancel your trip?**

**¿De qué manera cancel su viaje?**

GOIN' App ☐

Called Medstar ☐

Called the Broker Call Center ☐

211 ☐

**Was the cancellation process easy?**

**¿Fue fácil el proceso de cancelación?**

☐ Yes ☐ No

**Comments:**