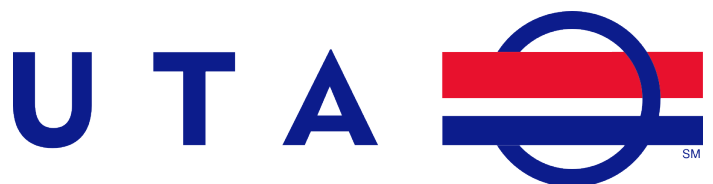# FTA Innovative Coordinated Access and Mobility Program – Final Report

Electronic Voucher Software

U T A

Table of Contents

Executive Summary

UTA requested and was awarded funds to collaboratively develop an innovative Electronic Voucher (eVoucher) solution to replace a manual paper system, particularly for trips that improve health care access. This solution includes a web-based application that keeps track of clients, drivers, payments, programs, and a mobile friendly portal. The mobile portal for drivers and clients allows for origin and destination confirmation, payment processing, and client verification. It will reduce administrative functions, potential waste, fraud, and abuse.

The eVoucher software solution was completed and piloted in Q3 of 2022 by our partners in Florida and Utah. The software was able to reduce administrative costs by approximately 33%. Throughout the pilot we completed 690 one-way trips in both Florida and Utah for a total of $26,652.19 in reimbursement for 129 clients.

Developing eVoucher

History of eVoucher

The Utah Transit Authority (UTA) serves three urbanized (UZA) areas of the Wasatch Front in and around Salt Lake City, Utah: Salt Lake/West Valley UZA, Ogden/Layton UZA and Provo/Orem UZA. In May 2017, the Coordinated Mobility Department started a paper voucher program with three human service transportation providers within our service area. This program provided funding and administrative support to pay drivers through paper checks. In 2018, after a review of what it was costing UTA for the administration of these programs, our department published a Request for Information (RFI) to determine if there was an "off the shelf" solution that would fit our needs. Those needs were: we needed a software that could track voucher funding sources, clients, drivers, trip information, as well as have a mobile aspect that could electronically pay drivers. After receiving no viable responses to our RFI and not finding anything in our own research, we set out to design our own electronic voucher (eVoucher) software solution.

In May 2019, UTA and the Coordinated Mobility department were awarded an FTA Innovated Coordinated Access and Mobility (ICAM) grant to fund the eVoucher project. In the grant application we named Cambridge Systematics as our software developer. In November 2019, we held our kickoff meeting at the offices of another partner CommunityHealth IT in Florida. This was a week of meetings to discuss the overall scope of the project and start to identify the needs of the software. Development started in January 2020 and was completed February 2022.

What is eVoucher

The eVoucher software system is comprised of three different components: an agency portal, a customer portal, and a driver portal.

Agency Portal

The agency portal allows an organization to keep track of the full life cycle of any voucher program. The portal can track voucher programs, funding sources, financial transactions, clients, drivers, and rides.

Each voucher program created by the agency can be fully customized. This customization gives each agency the ability to be flexible depending on the restrictions of their funding source.

The customization options for funding sources are:

- Trip Purposes (i.e., Medical and Grocery)
- Trip Reimbursement Rates (i.e., Flat Rate, Flat Rate Plus Mileage, and Mileage)
- Service Areas
- Service Locations
- Demographics (i.e., Seniors, Low-Income, and Persons with a Disability)
- Funding Periods

The portal also tracks all financial transactions associated with their programs. These transactions include deposits from the agency bank account into their Dwolla [1]wallet, deposits, and debits from the customers eVoucher account, and payments into the driver's personal bank account. The wallet is used as a holding account for all funds from the agencies funding source. This ensures that no debits are taken from the agencies bank account without the agency initiating those transactions.

The portal tracks all information for clients of the agency. Each client can be assigned to as many voucher programs as they are eligible for. The agency can then deposit funds into the clients eVoucher account where the system will automatically debit the funds from that account as trips are completed.

The portal tracks all information for the drivers used by the clients. These drivers do not have to be pre-qualified by the agency, but they do have to sign-up to be drivers through the agency. Once signed-up, the agency will then assign the driver to the clients they are eligible to drive. The agency will also be able to view all the trips made by the driver as well as all money paid to them.

Customer Portal

The customer portal allows the customers to log in using their personal username and password. This portal gives the customer the ability to see all past, future, and current day trips. We have planned for future phases of the software for this portal to become more robust and give the customer more access to their account.

---

[1] Dwolla is the current financial transaction company used to do all fund transfers between bank accounts.

Driver Portal

The driver portal is a mobile friendly web page. This allows the driver to use their smart phone or a computer to access the page. In this portal the driver can review any past, future, or current day trips. They can review all payments made to them for previous trips. The driver can also update any of their personal information without having to go back to the agency.

In the driver portal, the driver can create a trip for a client that is assigned to them. This is one of two ways for a trip to be created. The other option is for the customer to call the agency and have them create the trip for them. When a trip is created, the software will verify that the client is eligible to be taken to all the stops along the trip. The software will also verify that the client has sufficient funds available to complete the trip.

After a trip has been verified, the driver goes through a series of steps, similar to an electronic manifest, where they complete each leg of the trip. At each leg, the client must verify that they are with the driver and the system verifies using GPS that they are at the required address. This is done through a one-time text code sent to the client's mobile phone or, if that is not an option, the client can use their finger to provide a signature on the driver's mobile device.

Once a trip has been completed and all addresses have been verified, the system will then generate a funds transfer from the agency Dwolla wallet to the driver's personal bank account. This process can take 3-5 business days depending on the driver's bank.

Advisory Council Partnerships and Stakeholder Input

During the planning phase of the project, we reached out to a group of subject matter experts in voucher programs and technology to help us focus our scope and ensure a high-quality product.

We have met with this council multiple times throughout the life of the project. They have been instrumental on helping us choose features that would benefit a larger number of users.

We hope to continue to use this council to help us direct future phases of the project.

Project Outcomes – Piloting eVoucher

Bear River Association of Governments

One of the organizations we partnered with to pilot the eVoucher software is Bear River Association of Governments (BRAG). BRAG is located in Northern Utah. The BRAG program serves anyone with a disability, over the age of sixty, or under the 150% poverty level and are living outside Cache Valley Transit District (CVTD) limits. Clients are able to choose their own drivers, and drivers get reimbursed forty cents per mile. Trips that qualify for reimbursement include medical appointment trips, medical supply, pharmacy, treatment centers, counseling, and grocery store.

One eligible client was chosen to be part of the pilot program for the eVoucher system because he was traveling from Box Elder County to Logan almost every day to get wound care and also traveling to Midvale, UT (Salt Lake County) for addiction treatment. He is on a limited income (Social Security Disability) and was a perfect candidate for the eVoucher system.

Table 1 - BRAG Trip Information

Date	Purpose	Miles	Reimbursement
April 26 2022	PHARMACY	16.3	$6.51
April 25 2022	MEDICAL APPOINTMENT	67.8	$27.13
April 18 2022	MEDICAL APPOINTMENT	99.6	$39.83
April 18 2022	MEDICAL SUPPLY	68.5	$27.41
April 8 2022	MEDICAL SUPPLY	68.7	$27.49
April 4 2022	MEDICAL APPOINTMENT	68.7	$27.48
March 29 2022	MEDICAL SUPPLY	99.6	$39.82
March 28 2022	MEDICAL APPOINTMENT	68.7	$27.48
March 21 2022	MEDICAL APPOINTMENT	68.6	$27.45
March 18 2022	MEDICAL APPOINTMENT	68.6	$27.45
March 17 2022	MEDICAL APPOINTMENT	68.6	$27.45
March 16 2022	MEDICAL APPOINTMENT	68.6	$27.45
March 15 2022	MEDICAL APPOINTMENT	68.6	$27.45
March 14 2022	MEDICAL APPOINTMENT	68.6	$27.45
March 11 2022	MEDICAL APPOINTMENT	67.8	$27.13
May 2 2022	MEDICAL SUPPLY	68.7	$27.48
May 3 2022	MEDICAL APPOINTMENT	15.9	$6.35
May 20 2022	MEDICAL APPOINTMENT	127.3	$50.90
May 31 2022	MEDICAL APPOINTMENT	68.7	$27.49
	TOTAL	**1317.9**	**$527.20**

Complete data is included in Appendix A.

Community HealthIT

Our other partner Community HealthIT (CommHIT) is based out of the Kennedy Space Center in Florida. Through a program called My Health Driv, CommHIT has been able to use paid drivers to transport patients primarily from care facilities to their medical appointments. The following is excerpts from the full report provided to UTA by CommHIT.

Figure 1- My Health Driv

With the use of eVoucher CommHIT drivers completed 671 unlinked trips for 128 Riders, with the majority of trips for medical visits (90.6%). Forty-six riders used the Grocery & Pharmacy Funding Source for a total of sixty-three unlinked trips.

Table 2 - CommHIT Trip Information

Ride	Total	Total	Total Miles	Avg. Miles Per	Total Cost	Avg. Cost Per Ride
Medical	608	82	4263.4	7.0	$ 23,774.25	$ 39.10
Grocery	36	23	145.1	4.0	$ 1,344.91	$ 37.36
Pharmacy	27	23	104	3.9	$ 1,005.83	$ 37.25
Total	**671**	**128**	**4512.5**	**6.7**	**$ 26,124.99**	**$ 38.93**

For the full report from CommHIT see Appendix B.

Lessons Learned

This project became more difficult as it moved forward. We started out at a good pace with our developer and partners. Then as the pandemic hit, communications with our developer became less frequent. This led to delays in the project and a product that was less than we expected.

We also realized that we need to be more specific in our contracts when it comes to timetables and deliverables. One specific instance is we did not get a feature in the software because did not spell out the feature but left the wording vague.

The main lesson learned from this project is that we need to be more proactive in our communications with our contractors. We need to ask more questions when things are not up to our standards.

Impacts of COVID-19

COVID-19 had a significant impact on the development of eVoucher. Our developer, Cambridge Systematics, had a lot of turnover in the group that was primarily responsible for the development. Due to this turnover in staff, it delayed the completion of the software by approximately 15 months. This not only caused problems for us in our timeline, but also pushed back the pilot for our partners BRAG and CommHIT. Another issue that came up due to the delay in development was, we were not able to complete the 6-month pilot on which we had initially planned. We instead had only a 3-month pilot due to high-cost overruns by our developer.

Moving Forward

As we close out the ICAM grant, UTA and our partners look forward to continued development on the eVoucher software system. In 2020, UTA was awarded an FTA COVID-19 Research Demonstration Grant to further develop the software. With this grant, we will research the ability of the software to pay for a UTA transit fare, Transit Network Company (TNC) fares, as well as other public transportation options. We have also identified other key features that will be added that include: a native mobile app for both iOS and Android operating systems, a more robust customer portal, and the ability for third parties to pay into a clients account.

UTA is currently doing our due diligence in trying to find a company that will be able to support, host, market, develop, and license the eVoucher software in the future. UTA is looking for a company that is willing to move into a public private partnership and help us move eVoucher into other areas of the country. Our goal is to make eVoucher self-sufficient with the addition of licensees using the software. Program income generated from licenses will go back into the eVoucher program.

Conclusion

UTA is excited for the future of this software and for knowing this product can help to improve the lives of many people. We want to thank Cambridge Systematics for their hard work in developing the software. We would also like to thank Community HealthIT (Florida) and Bear River Association of Governments (Utah) for their partnership and willingness to help us pilot the software. Without them we would not have the software solution we do today.
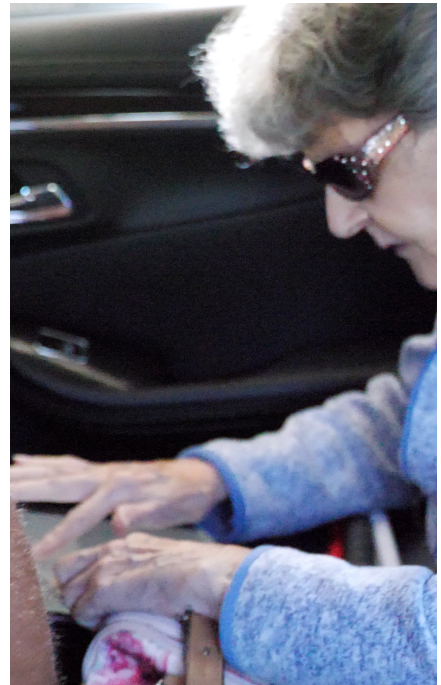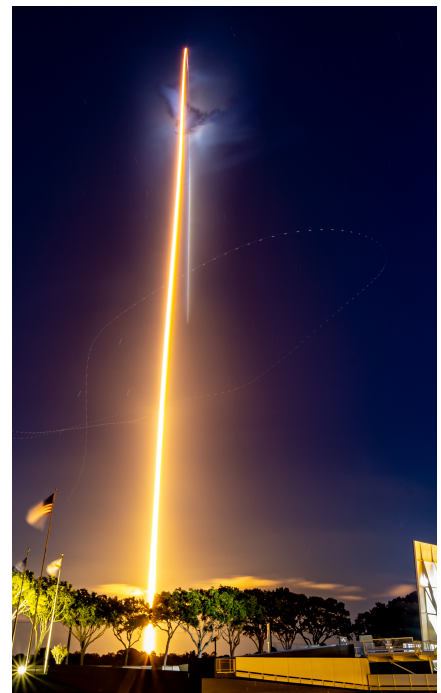
Appendices

Appendix A

Bear River Association of Governments

Appendix B

Community HealthIT

Final Report to UTA

EVOUCHER TESTING

Starting on February 26, 2022, CommHIT input Agency, Driver, and Rider information into the appropriate e-Voucher portals, and linked Riders to Drivers. From **Tuesday March 1 to Wednesday June 1**, CommHIT Drivers completed 671 unlinked trips for 128 Riders, with the vast majority of trips for medical visits (90.6%). Forty-six Riders used the Grocery & Pharmacy Funding Source for a total of 63 unlinked trips.

Grocery	36	23	145.1	4	$1,344.91	37.36
Total	671	128	4512.5	6.7	$26,124.99	38.93

Rider Information

On March 3, CommHIT provided Drivers with a Survey for Riders to complete. The survey can be found at: https://forms.office.com/Pages/ResponsePage.aspx?id=Pbtg-ucuK02ImHheAN9f_192i6WUY8lHvVq2K25w9LNUNE1WNEZVMEJNUkI3V1ZZWllZRzNGMTNZVi4u.

Riders who can use the Internet can complete the survey themselves. Drivers are helping Riders that have difficulties with computers to complete the surveys with each Rider's consent.

Fifty-three of the 128 Riders completed CommHIT's Rider Survey (40.6% survey response rate).

Rider Stats (n = 53, unless otherwise stated)

Age group (n = 51)

AGE GROUP	PERCENTAGE	TOTAL CLIENTS
20-29	7.8%	4
30-39	9.8%	5
40-49	13.7%	7
50-59	21.7%	11
60-69	19.6%	10
70-79	27.5%	14

Race (n = 51)

RACE	PERCENTAGE	TOTAL CLIENTS
Caucasian	58.5%	31
Black	24.5%	13
Other	9.4%	5
Asian	3.8%	2

Ethnicity

ETHNICITY	PERCENTAGE	TOTAL CLIENTS
Hispanic	11.3%	6
Non-Hispanic	49.1%	26
Prefer not to answer	39.6%	21

Rider's need for an attendant

ATTENDANT NEEDED	PERCENTAGE	TOTAL CLIENTS
Yes	11.3%	6
No	88.7%	47

Rider's transportation-related health issues

MOBILITY CONSIDERATIONS	PERCENTAGE	TOTAL CLIENTS
Blind	3.8%	2
Cane-assisted	11.3%	6
Dizziness	3.8%	2
Door-to-door assistance	1.9%	1
Foldable Wheelchair	3.8%	2
Poor vision	9.4%	5
Memory issues/forgetfulness	22.6%	12
Trouble getting in and out of cars	18.9%	10
Trouble lifting and carrying	7.5%	4
Walker	11.3%	6
Wheelchair lift	18.9%	10
Pain	1.9%	1
Frailty	3.8%	2
None	18.9%	10
Speak in left ear/right ear	1.9%	1

Estimated number of rides needed per month (n = 51)

ESTIMATED RIDES NEEDED	PERCENTAGE	TOTAL CLIENTS
1-2	29.4%	15
3-4	37.3%	19
5-6	19.6%	10
7-8	9.8%	5
9+	3.9%	2

Rider's estimated use of MyHealthDrIv (medical rides vs. grocery/pharmacy)

RIDE TYPES NEEDED	PERCENTAGE	TOTAL CLIENTS
Medical rides	60.4%	32
Grocery/pharmacy	5.7%	3
Both	34.0%	18

Rider's ableness to text

CAN YOU TEXT WITH MYHEALTHDRIV?	PERCENTAGE	TOTAL CLIENTS
Yes	49.1%	26
No	50.9%	27

Rider's ableness to e-mail

CAN YOU E MAIL WITH MYHEALTHDRIV?	PERCENTAGE	TOTAL CLIENTS
Yes	30.2%	16
No	69.8%	37

Notes about CommHIT's eVoucher use
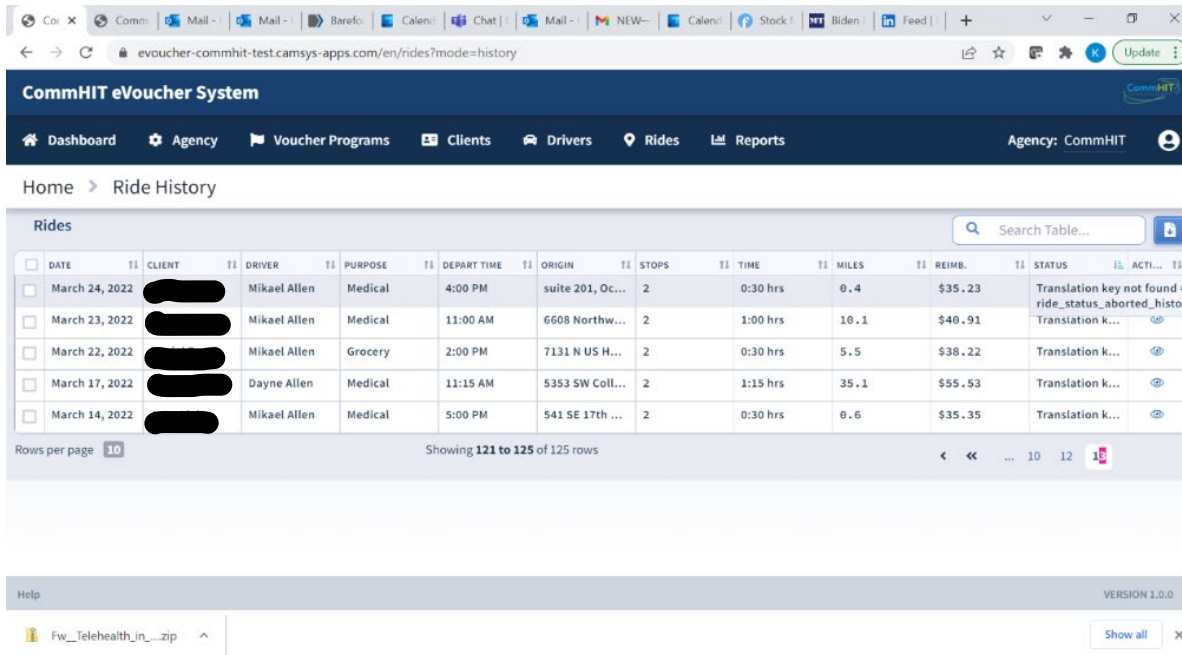
This is a historic list of issues and they have been taken care of for the most part:

- On 2/26/2022, when trying to save information, fields on the page may go blank. There is nothing to indicate that anything saves after you click "Save." Agency was trying to put in bank account info for Drivers.
- On 2/28/2022, to enroll a Rider/Customer, you have to remember to go to Driver list an link them. Perhaps it would be better if Driver could be assigned when you are putting Customer in the system.
- On 2/28/2022, Customer portal needs to say Customer's name once logged in. Right now, Agency has to book ride from Customer portal. (Ironically, Agency portal says "Welcome [name]). It would be helpful to have a reminder that you are in the right Customer portal when booking a trip.
- On 2/28/2022, Agency was incapable of scheduling trip because of system. When trying to schedule a trip, it would not validate. It had an issue with reimbursement validation. CS did something on the back-end to validate that the reimbursement was there. Kevin hit 'Save' afterward, and the discrete fields on the page went blank. The trip did not schedule and CS had to manually schedule trips.
- On 3/1/2022, Driver app set to Utah time so ride had to be postponed (a two-hour time difference). (Driver was using eVoucher to indicate when trips were to him.)

- On 3/3/2022, Driver accidentally hit button behind validation screen, starting the second trip. Driver could not go back to first trip to complete validation. (We may have to pay Driver another way for this trip—directly from CommHIT account, instead of eVoucher system.) It may be helpful to maybe have system ask Driver if they are sure that they want to go to the next trip.
- From 3/1/2022 – 3/5/2022, one of the Drivers has not had a single successful payment. On 3/2/2022, either the eVoucher system or Dwolla deleted the Driver's bank information. CS does not yet know what the issue is and has contacted Dwolla. CommHIT will have to pay Driver another way (independent of eVoucher system) if this doesn't get resolved on Monday March 7.
- On 3/4/2022, K Salzer account locked without failed login attempts causing it. Error messages were "InvalidAuthenticityToken" error and the "'Oversight' roles == roles.first.agency.agency_type." CS had to reset account.
- We had a reoccurring issue where the eVoucher App would not validate the final leg of the trip this has already happened Tues 22, Wed 23, Thurs, 24 and Fri 25 of March. The adjacent screenshot indicates this issue occurred when the rider was signing to validate the trip. This is a major issue at the moment because Drivers can't get paid from the system; CommHIT is having to send the payment request to its Financial Department in order for Drivers to receive payment. CommHIT is working with CS on this issue.
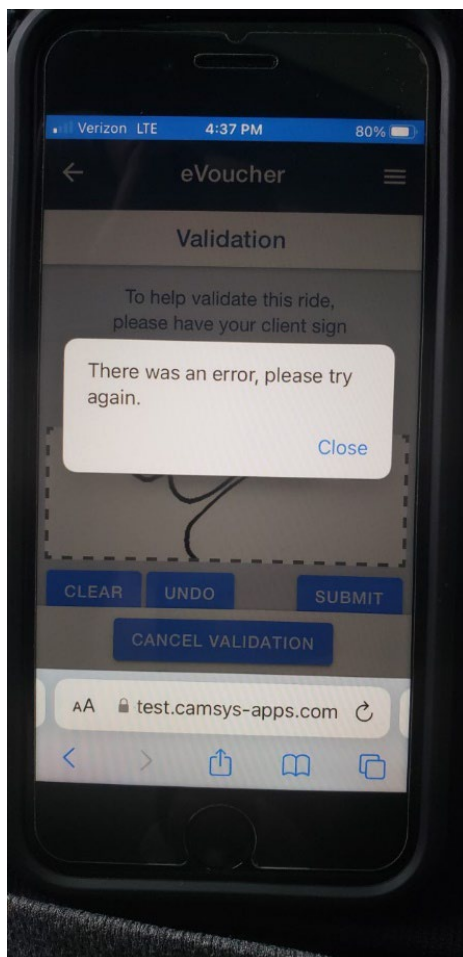
- Below is a screenshot of what the trips status looks like because of this issue in the Agency app.

- On 3/24 & 3/25/2022, 25 screenshots indicated the issue occurred when the rider was signing to validate the trip.
- On 3/29/2022, there was an error screen when clicking on driver in driver list (happened about five more times)
- On 4/4/2022, Driver had issue loading address from driver app in the morning. He had to log out and log back in to resolve.
- Also, on 4/4/2022, when adding funds, Agency hit button twice because it was slow. System added the funds twice without completing the form a second time.
- On 4/12/2022 - 4/14/2022, when Agency logging in as Customers to schedule rides, the existing passwords didn't work for what seems to be all the accounts. Agency had to reset them to login for scheduling.
- On 5/9/2022, Driver needed password reset.
- On 5/14/2022, Agency learned from driver they do not have access to Rider's contact information
- No additional issues of note after 5/14/22

CommHIT didn't ever add Riders' emails to the system during the testing window. This would have allowed Riders to schedule their own rides. However, as the Agency, we could not schedule customers' rides. If Riders called us to help them with issues, we would not have been able to help them because the Agency portal did not allow us to schedule rides for customers; thus, we (the Agency) were logging in as the Rider to schedule rides. Helping the Riders with ride scheduling would have to be on the shoulders of the Drivers—who are driving, instead of "dispatching."

There was also an issue in April that resulted in Customer existing passwords becoming invalid. We had to reset them. That would have led to Customers losing trust in the system.

Workflow for Agency scheduling Riders

1. New Rider tells intermediary that they want to participate in MyHealthDrIv and provides needed ride details.
2. MyHealthDrIv (Agency) receives Rider information.
3. Agency adds Rider to account, adds funds, and links Rider to one of more Drivers.
4. Agency emails Cambridge Systematics to <u>confirm</u> Rider account in system. This step could take 24 hours after email sent.
5. If Rider needed trip before confirmation, the trip would happen outside of eVoucher.
6. Once Rider confirmed, then Agency schedules trip logged in as the Customer. (Agency can't schedule trip otherwise.)

Workflow for Driver scheduling Riders

1. New Rider tells intermediary that they want to participate in MyHealthDrIv and provides needed ride details.
2. MyHealthDrIv (Agency) receives Rider information.
3. Agency adds Rider to account, adds funds, and links Rider to one of more Drivers.
4. At this point the <u>Driver</u> is able to schedule the appointment without the Rider account being confirmed. (Agency did not do this for first month because we did not know that Drivers could schedule rides without Rider account confirmation.)

Agency tried not to have Drivers schedule Riders who were not confirmed to avoid vulnerable fraud points; however, Agency did allow Drivers to occasionally schedule unconfirmed Rider accounts if confirmation could occur before the trip. We wanted the rides to be on the eVoucher platform, whether Rider accounts were confirmed or not.

How Patient Riders Were Selected for This Demonstration

CommHIT's initial intention was to work solely with the research participants is the IRB-approved University of Florida's Health Cancer Center (UFHCC) clinical engagement research project entitled Project CONTINUITY. Many community groups are involved in outreach for Project CONTINUITY. For the patient-centered research project, CommHIT performs the Community Health Worker (CHW) training for this project and provision of transportation through MyHealthDrIv.

CommHIT is often tapped for community engaged research as it works on many federally-funded research projects with universities that have technology platform components and are to be used by community-based health professionals. This work includes a Feb 2022 registered clinical trial entitled, "Patient-Centered Chronic Pain Care (IPRO)" with Chris Harle, PhD (UF Chief Clinical Research Information Officer), Ramzi Salloum, PhD (UF Associate Professor College of Medicine Health Outcomes & Biomedical Informatics), and other researchers at the Gainesville and Jacksonville Florida UF locations (https://clinicaltrials.gov/ct2/show/NCT05256394).

Further, CommHIT's MyHealthDrIv provided transportation for COVID-positive patients to the first ever COVID monoclonal antibody infusion center at UF in Florida (https://ufhealth.org/news/2021/uf-health-pilot-program-deliver-covid-19-monoclonal-antibody-therapy-rural-communities).

Lastly, CommHIT is one of the 13 members of the OneFlorida+ Clinical Research Consortium and Data Trust that includes: UF, University of Miami, Florida State University, University of South Florida, Emory University, University of Alabama Birmingham, and all of Florida's major health systems. Additionally, CommHIT's President/CEO serves as the Chair of the UFHCC Community Outreach and Engagement Advisory Council. In this role she works with ALL cancer center researchers—from those who do benchtop research to population health research—to ensure that their research connects to the needs of UFHCC's 22-county service area.
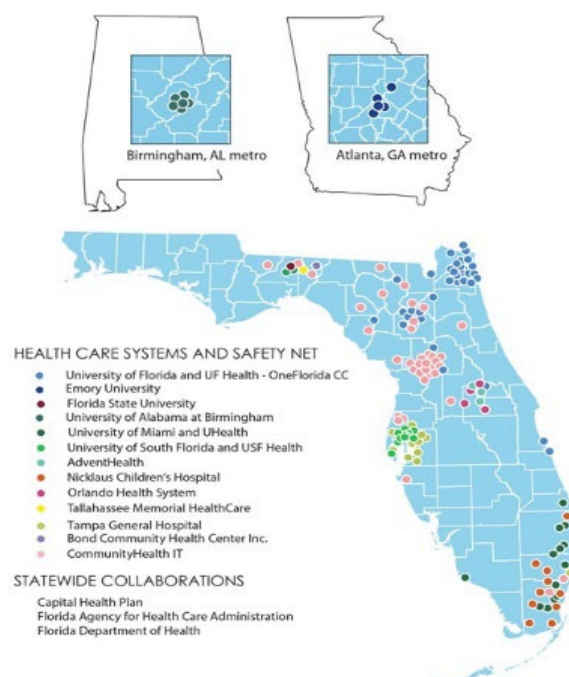
ABOUT PROJECT CONTINUITY: Project CONTINUITY is a multi-pronged community approach to increase access to high-quality cancer prevention, detection, and treatment services (https://cancer.ufl.edu/community-2/project-continuity/). Project CONTINUITY was launched to increase access to evidence-based cancer screenings, with an initial focus on cervical cancer screening and HPV vaccine uptake in vulnerable populations. Beyond that, Project CONTINUITY ensures a connection to needed care for all individuals, across the continuum from screening through treatment, using tailored communications, community outreach and engagement and clinical navigation services. By intervening at partnering health facilities that provide care in underserved communities, UFHCC and its partners can tailor high-quality care to each person, based on their social and healthcare needs, to link them to needed care and follow-up. These efforts are made possible through collaboration between community leaders, local health care facilities, providers, and researchers. In partnership with the UF Mobile Outreach Clinic, Project CONTINUITY is offering cervical cancer screening days where women can obtain needed exams and testing as well establish a long-term and therapeutic relationships with primary care providers to address health care needs. CommHIT gets the women who need transportation to this care.

Because CommHIT had to test the eVoucher system partially during a window without Project CONTINUITY Riders, CommHIT engaged area medical facilities—including assisted living facilities—to provide us with patients who they knew needed medical transportation. CommHIT made it clear to medical providers and patient clients that we will not be using this electronic system after June 1; so, trips will only be guaranteed free of charge to them through June 1. We used our professional non-emergency medical transportation drivers to do this work so that we could accommodate riders who even needed wheelchair lifts and other complex transportation needs.

In May, UFHCC was ready to add Project CONTINUITY Riders to the eVoucher testing/demonstration. Several of the 128 Riders are women in Project CONTINUITY who were able to received needed cervical cancer screens.

A video documenting the project can be seen at https://youtu.be/BY6eskqk-Wk

MyHealthDrīv

MyHealthDrīv (pronounced My Health DRIVE) helps participants have an easier time getting healthy by providing: TRANSPORTATION, SOCIAL SUPPORT, and HEALTHCARE…

youtu.be
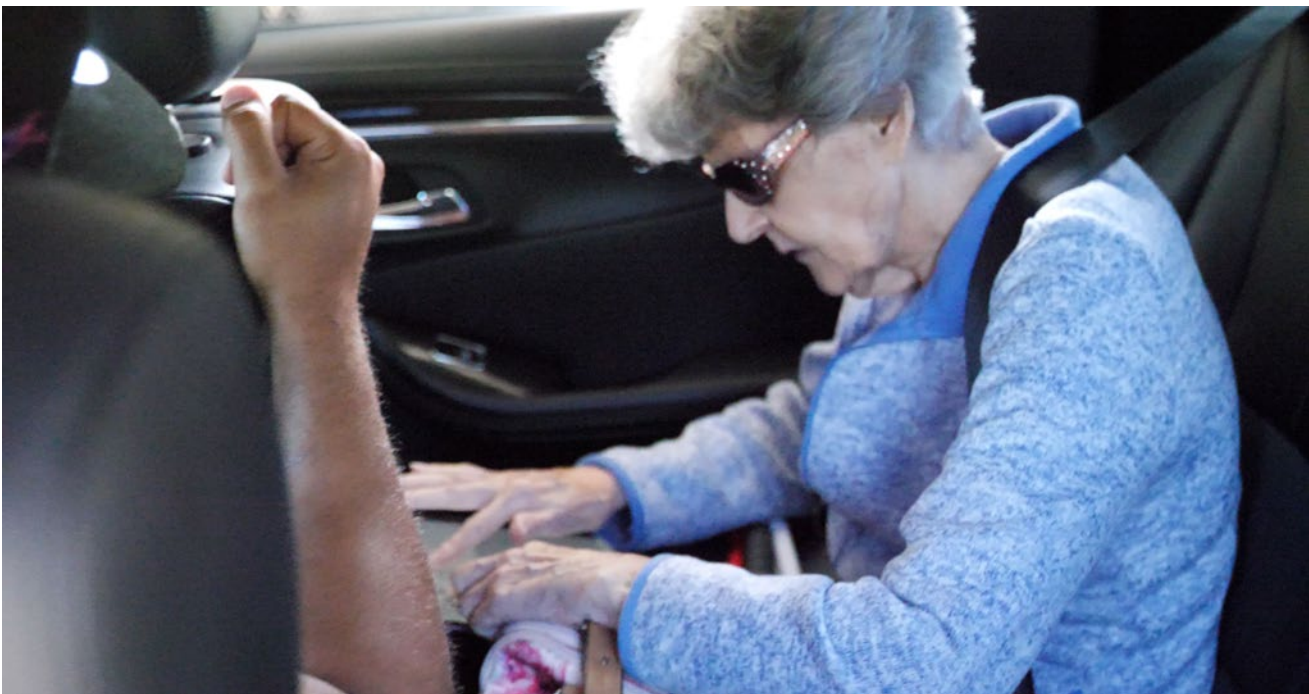
☐

This 8-min video provides interviews of:

- Riders
- Drivers
- one of the participating healthcare providers
- one of the participating Assisted Living Facilities
- Marion County Fire Rescue Lieutenant

Screenshots from the Video

Outreach for Patient Riders

Below is the outreach one-pager that CommHIT used to identify Patient Riders at partnering medical facilities. ***As I mentioned, we reached out directly to the medical providers to identify patients in need.*** The medical providers are working with us and gave this information to their patients.

<div align="center">

For Medical Providers:

Your patients can receive free rides to office visits, grocery stores, and pharmacies from March 1 through June 1.

</div>

Patients need to contact Kevin Salzer, MSP, AICP, at Kevin.Salzer@MyHealthDriv.org OR call/text (904)432-6648 to sign up. Please, contact Kevin at least two days ahead of your needed trip/appointment so that he can ensure a driver is prepared for you.

Why are we providing this free service to patients?
Through a Federal Transit Administration (FTA) grant, CommunityHealth IT, Inc. (CommHIT) a 501(c)(6), is to demonstrate the benefit of a digital transportation system for people who need health-related trips. We have three months to complete the free TO YOU demonstration. CommHIT is performing the demonstration for Utah Transit Authority (UTA)—the prime on this grant. Drivers and coordinators are compensated through the federal grant program. Driver operate under MyHealthDrīv (pronounced "My Health DRIVE"), one of the not-for-profit services that CommHIT provides.

What are we "demonstrating"?
Much like "Uber" or "Lyft," the system schedules and books rides to and from medical visits, grocery visits, and pharmacy visits. All rides are provided by professional non-emergency medical transport drivers, who regularly provide transportation to medical visits. Drivers wait on patients to complete their visit and takes them back home or to the grocery or pharmacy, if needed. Our caring, trained drivers become health partners for the entire duration of each round trip—whether to office visits or other health-related needs. We are blending the value of these health-related trips with a digital transportation platform that can be used for professional or volunteer drivers nationwide; the platform was developed using the federal grant funds. The "demo" runs from March 1 to June 1 2022.

Why should I do this?

Health-related activities can be stressful and overwhelming to anyone at times. Drivers understand what patients are going through. Our drivers give patients a helping hand, making patients' lives a little easier so they can concentrate on getting better.

You do not need to provide any financial information or tip drivers. CommHIT does NOT collect identifying information to share with third parties. Any information that you provide to us for rides is only shared with your driver who is registered on the system for the sole purpose of your appropriate care.

What if I have a hard time getting in and out of vehicles?

All drivers are trained and experienced with assisting patients who may have instability or issues with walking. Please let us know this information ahead of time so that the driver is prepared for you.

To learn more about CommHIT's MyHealthDrĪv, visit www.CommunityHealthIT.org/myhealthdriv.