PROJECT OVERVIEW

Transportation barriers prevent millions of people from accessing healthcare every year. In 2017, 5.8 million Americans delayed medical treatment due to lack of transportation. Yet research consistently shows that access to routine and preventative care improves health outcomes and avoids costly emergency department visits.

The advent of shared mobility services, such as ridehailing, combined with technology advances provides new solutions to overcome transport barriers to healthcare. Across the country, care providers are partnering with shared mobility services to establish new ways for patients to access on-demand rides to and from medical appointments. Ridehailing companies like Uber and Lyft have active programs to provide transport to medical care and studies show that a near majority of Americans have experience using such services.

RESEARCH GOALS

The study conducted a nationwide scan to examine the current landscape of innovative healthcare mobility services. The team first analyzed the policy environment in which innovation is occurring. Services were then described and cataloged by their key features. The study features specific examples of hospitals, health systems, and paratransit providers who are leveraging ridehailing technology to improve healthcare transportation.

IMPACTS

Technological advances are reshaping options for accessing healthcare and it has been difficult for practitioners and transportation providers to understand these swift changes. This work provides a clear categorization of new mobility innovations. This typology is useful especially for transit providers who may be interested in leveraging new technology via partnerships in their own service. It is also useful for health care providers and clinicians who want to learn about potential new solutions that can be put in place for their patients with transportation barriers.

WHO BENEFITS?

Transit agencies, ridehailing companies, paratransit providers, health care providers, insurers

RESEARCH TEAM

Noreen McDonald, Ph.D.
Chair, City and Regional Planning
University of North Carolina at Chapel Hill

Mary Wolfe, Ph.D.
Research Scientist
University of North Carolina at Chapel Hill
FINDINGS

The study revealed that ridehailing options are being incorporated in electronic health record workflows of clinicians and are becoming a part of the choice set for patients through formal partnerships. Three core types of collaboration were identified:

1) Healthcare provider leverages ridehailing technology to book patient trips;
2) Insurer partners with a ridehailing company; and
3) Paratransit provider partners with a ridehailing company.

The on-demand nature of rides and integration of ride requests and payment options appear to be the strongest drivers of these innovations.

PRODUCT

Taxonomy of shared mobility options for healthcare – The study produced a taxonomy of shared mobility options for accessing healthcare.

<table>
<thead>
<tr>
<th>Type I</th>
<th>Type II</th>
<th>Type III</th>
</tr>
</thead>
<tbody>
<tr>
<td>Healthcare provider leverages ridesourcing tech.</td>
<td>Insurer partners with TNC</td>
<td>Paratransit provider partners with TNC</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Who books the ride?</th>
<th>Clinician (on patient’s behalf); patient (sometimes)</th>
<th>Patient or clinician</th>
<th>Usually the riders/patients</th>
</tr>
</thead>
<tbody>
<tr>
<td>Who pays?</td>
<td>Healthcare providers; brokers; patient</td>
<td>Insurance companies; health plans</td>
<td>Transit agency; patient pays ‘fare’ with substantial subsidy from transit agency</td>
</tr>
<tr>
<td>Eligible for Medicaid reimbursement?</td>
<td>Varies by TNC; in many cases, yes, given patient eligibility</td>
<td>n/a</td>
<td>Yes, given patient eligibility</td>
</tr>
<tr>
<td>Patient Benefits:</td>
<td>Shorter wait times &amp; less uncertainty; Reminders and tracking through smartphone, flip phone, or analog phone</td>
<td>Financial support for patients; Addresses social determinant of health Greater patient engagement</td>
<td>Dynamic booking circumstances need for advance booking; Increased trip reliability; Patients who otherwise can’t afford TNC service have access</td>
</tr>
<tr>
<td>Healthcare Provider Benefits:</td>
<td>Can track patients’ trips as well as own spending; Dynamic booking (instant or in advance)</td>
<td>Greater patient engagement; reduced costs in long-term</td>
<td>Reduced appt. no-shows</td>
</tr>
</tbody>
</table>

Source: authors’ own analysis of findings of nationwide scan

This research is part of STRIDE Project G (Transit in the Era of Shared Mobility). For more information, visit https://stride.ce.ufl.edu/project-g/