



# NH Rides to Wellness Project “Bridge to Integration”

Patrick Herlihy, NHDOT  
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# SCC - Getting People Where They Need to Go

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The State Coordinating Council for Community Transportation (SCC) fosters the coordination of transportation services to get people where they need to go.

Coordination allows more efficient use of resources, increasing mobility options for more of NH's residents. Community transportation includes services that address the transit needs of a community, including the general public as well as special populations such as seniors, people with disabilities, and people with low income.



# SCC Membership (NH RSA 239-B)

- Commissioner of the Department of Health and Human Services, or designee;
- Commissioner of the Department of Transportation, or designee;
- Commissioner of the Department of Education, or designee;
- Executive Director of the Governor's Commission on Disability, or designee;
- Chair of the NH Transit Association, or designee;
- A representative of a Regional Planning Commission, appointed by the DOT Commissioner;
- A representative from a philanthropic organization, appointed by the DHHS Commissioner; and
- Eight (8) representatives from transportation providers, the business community, and statewide organizations, such as Granite State Independent Living, AARP, Easter Seals, and the UNH Institute on Disability, appointed by the NH Governor and Executive Council.

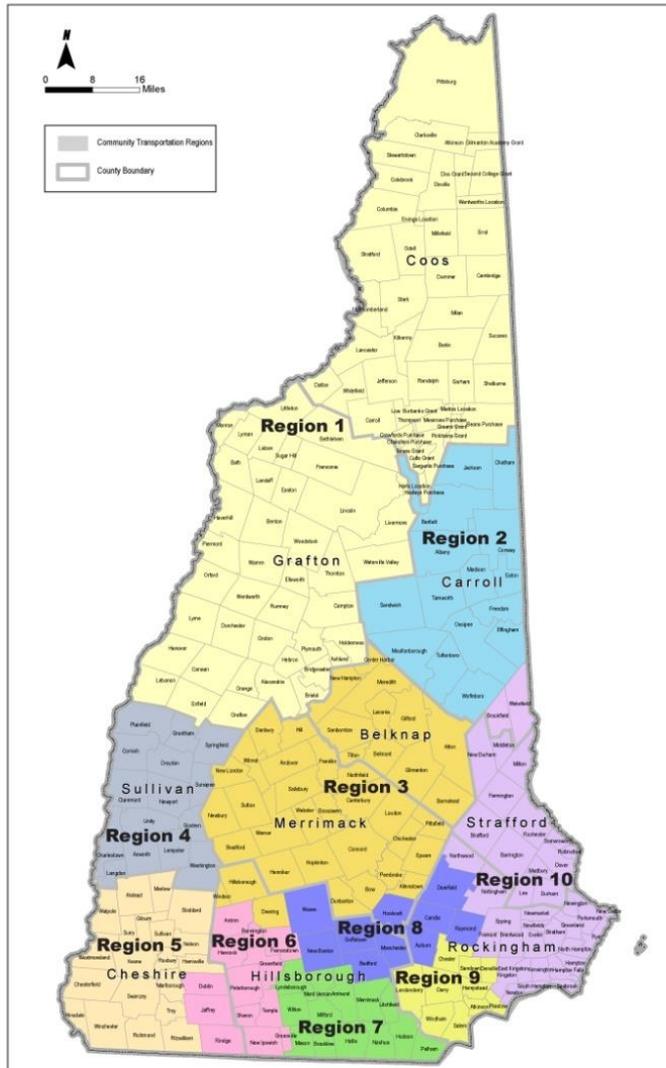
# Regional Coordinating Councils (RCCs)

- Comprised of regional providers, local sponsors, planning commissions and other stakeholders
- Select, guide, assist and support the Regional Transportation Coordinator (RTC) or Lead Agency
- Work with the RTC to develop local service delivery
- Provide feedback to SCC



# NH Community Transportation Regions

New Hampshire Community Transportation Regions



Region 1: Coos & Grafton Counties

Region 2: Carroll County

Region 3: Mid-State

Region 4: Sullivan County

Region 5: Cheshire County

Region 6: Eastern Monadnock

Region 7: Nashua Region

Region 8: Manchester Region

Region 9: Greater Derry/Salem

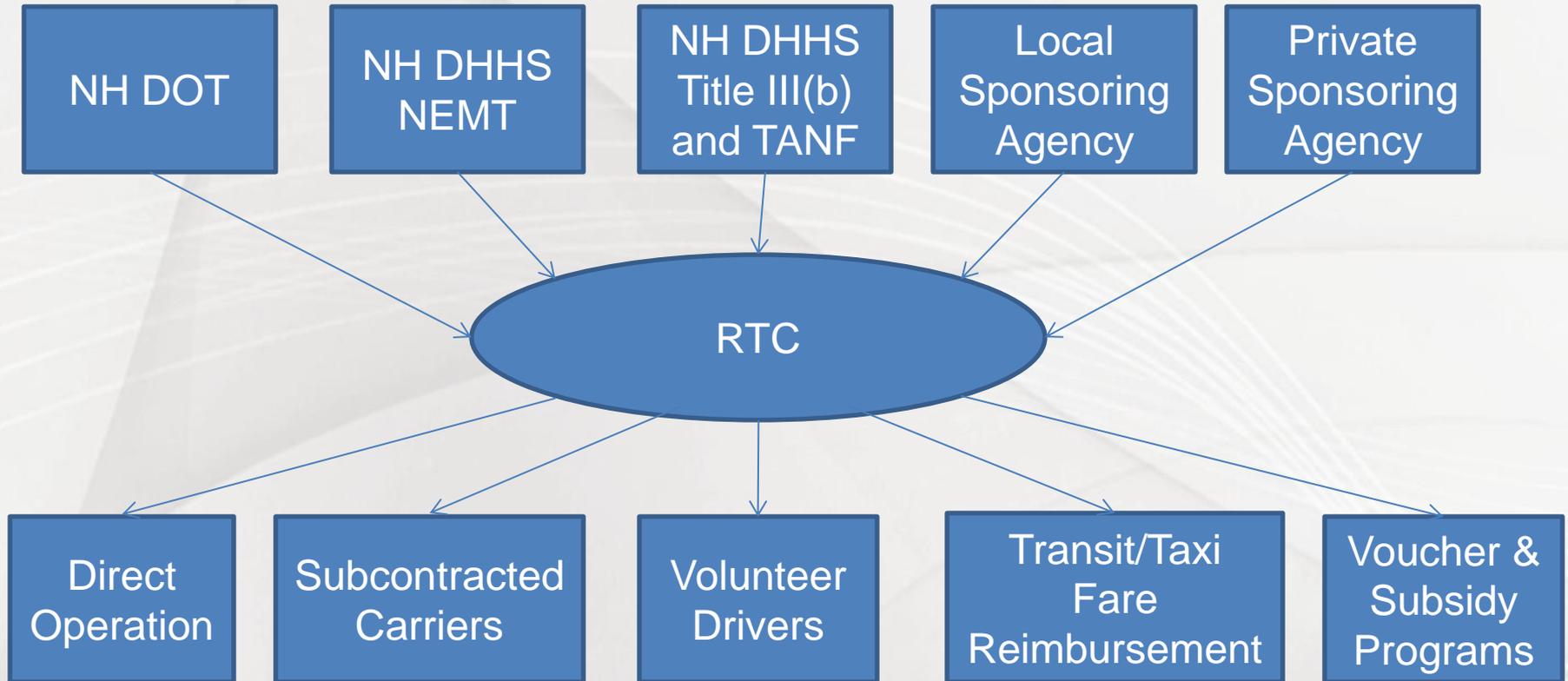
Region 10: ACT

# Regional Transportation Coordinators (RTCs)

- Operate as the lead transportation agency for the region
- Coordinate participating providers
- Bill funding agencies
- Develop additional service capacity



# NH's Coordination Model



# NH Benefits of Coordination

## Easier Access & Improved Efficiencies

- Coordination benefits providers by sharing on the road assets, having more riders in fewer vehicles and paying the fully allocated cost of the vehicle through cost allocation methods.
- Coordination benefits riders by easier access through one call-one click services.

## Improved Mobility

- Coordinated, enhanced service delivery results in improved personal mobility for system users. With coordination activities, trips to medical appointments, employment and other activities can be better fulfilled.

## Streamlined Funding and Reporting

- Coordination allows state agencies and local providers to better identify the needs and gaps in service areas, as well as develop a better understand of the services that may currently be available as well as potential new funding resources.

## Solving Mutual Challenges

- Meeting regularly to discuss transportation issues helps state agencies and local providers come together to develop strategies and solve problems by sharing solutions.

## Other Community Benefits

- Decentralized approach that is responsive to regional capacity and local differences



# NH Challenges to Coordination

## Funding

- A lack of funding is a barrier to coordination. NH DOT is currently the only limited state funding source using the coordination model.
- In 2011 NH DHHS implemented a statewide managed care model for the Medicaid program funneling NEMT dollars through a statewide broker contracted by the two MCO's operating in NH

## Lack of Directives to Coordinate

- The lack of a mandate for state agencies to coordinate resources has been a major obstacle to creating efficiencies through coordination. Without the requirement to use their funds efficiently across agencies for transportation services, most agencies do not coordinate trips. NH currently has no directive that will encourage efficiency through coordination.

## Competing Systems

- The coordination model relies on the ability of the lead agency to perform rides themselves when appropriate.
- The Medicaid NEMT rules (January 20, 2009) prohibit self referral, therefore requiring a broker to act as an intermediary.

## Turf and Trust Issues

- Competition for resources, threats to autonomy and a lack of trust need to be addressed and overcome for coordination to be successful.

## Rural Areas

- Due to NH's rural nature there is a lack of sufficient providers in many areas of the state.

## Agency Attitudes

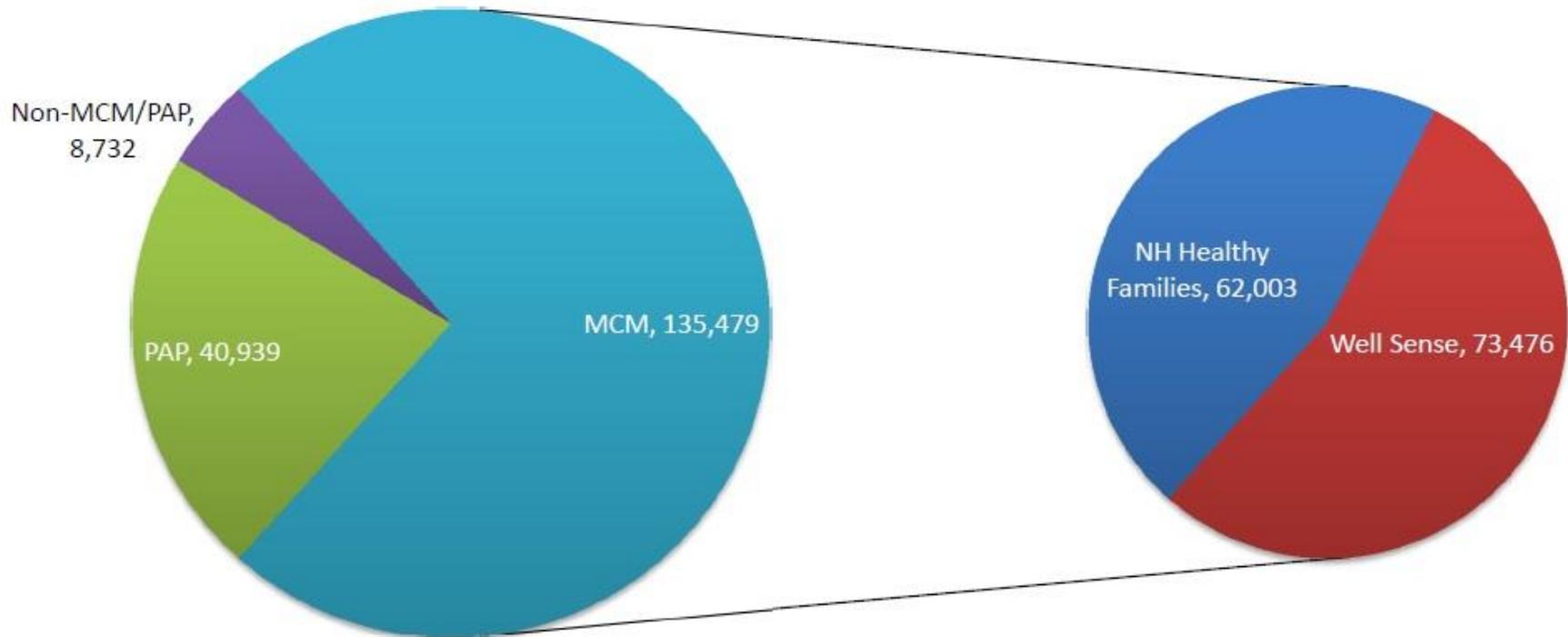
- Finding lead agencies can be difficult due to the reluctance of transit agencies to act as coordinators without adequate funding to perform those tasks.

## Cultural Differences

- Transportation and human services professionals have different languages, objectives and motivators. These cultural differences can lead to difficulties in the coordination process.



# NH Medicaid Enrollment by Program 10/1/16



*Notes: Members are open for services as of the point in time as of the source date. Data excludes members without full Medicaid benefits (Family Planning Only & Medicare Savings Plans). Non-MCM/PAP includes members transitioning into MCM or PAP, members exempt from both programs, including members with employer-based insurance purchased by Medicaid through the Health Insurance Premium Program.*

# NH Medicaid NEMT Ridership

Health Plan	Date Range	Number of Trips (by Mode)					Average Trips	
		Taxi & Livery	Ambulance*	Wheelchairs	Volunteer	Friends & Family	Per Month	Per Year
A	YTD 15/16 Average/Month	6,541	12	999	15	3,817	11,384	136,608
B	YTD 15/16 Average/Month	14,823	14	1,078	119	12,114	28,148	337,776
C	YTD 15/16 Average (Jan-Sep)	8,604	6	1,004	99	5,455	15,168	136,512
<b>TOTALS</b>		<b>29,968</b>	<b>32</b>	<b>3,081</b>	<b>233</b>	<b>21,386</b>	<b>54,700</b>	<b>610,896</b>
<p><b>Note: Health Plan C did not begin operation until 1/1/16</b></p>								

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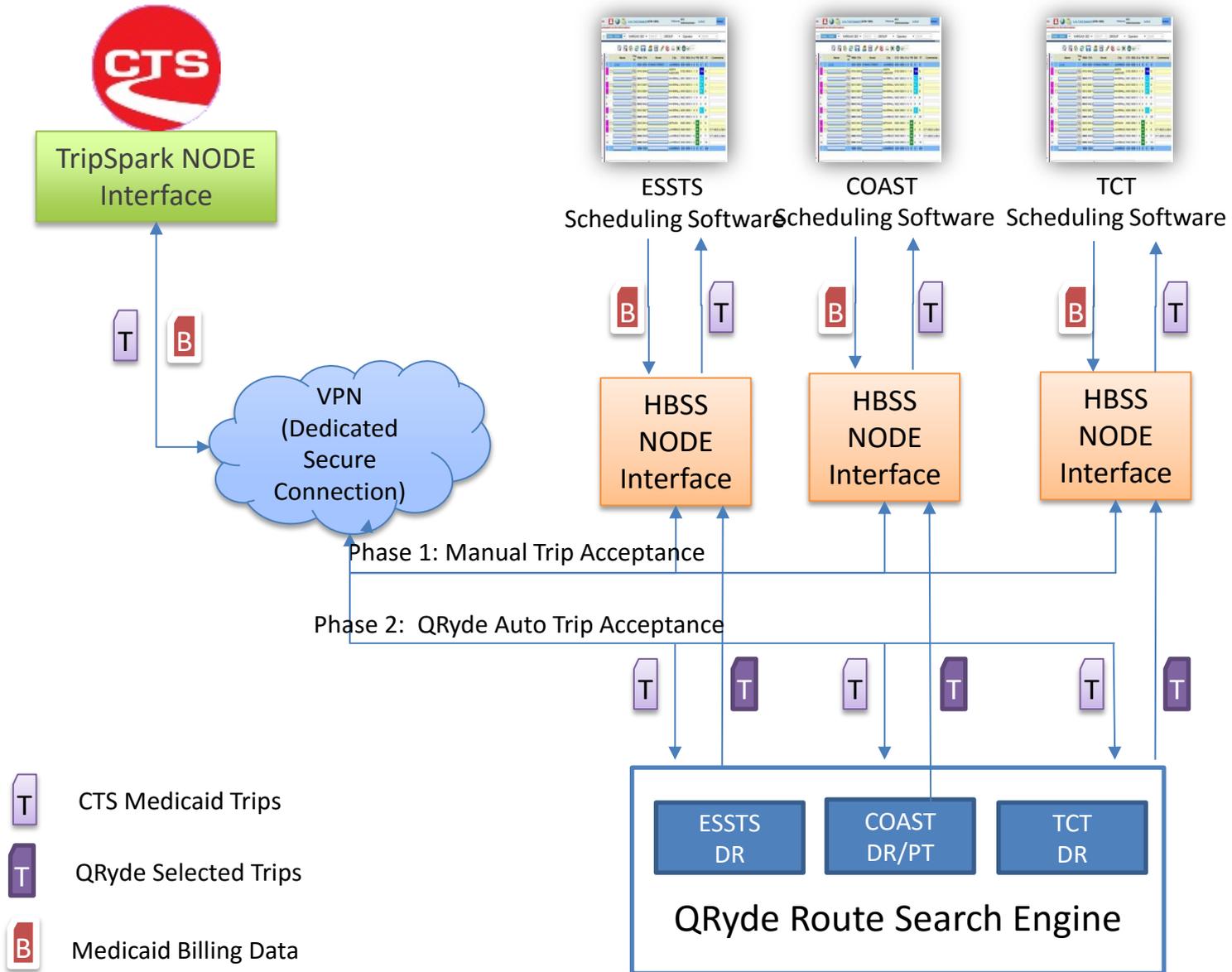
- Three (3) site pilot project that will provide an application that will seamlessly allow Medicaid trips to be integrated with non-Medicaid trips where practicable and appropriate for Medicaid passengers.
- \$182,880 FTA grant to foster key innovative coordination elements of the FAST Act.
- Local cash match of \$46,220 to be provided by CTS and HBSS.

# Rides to Wellness Pilot Sites

- Region 10 Lead Agency: COAST
  - Small Urban Public Transit System
    - Fixed Route w/ ADA Paratransit
    - Medicaid NEMT Provider
- Region 9 Lead Agency: CART/Easter Seals
  - Small Urban Public Transit System
    - Demand Response Service
    - Medicaid NEMT Provider
- Region 1 & 2 Lead Agency: Tri-County Transit (CAP)
  - Rural Transit System
    - Route Deviation & Demand Response
    - Medicaid NEMT Provider



# NHDOT Rides to Wellness Project: Integrating Medicaid Rides with Paratransit/Demand Response Rides



# Overall Project Benefits

1. Improved overall efficiency by better placement of rides on existing routes
2. Increased trips and Medicaid revenue to local agencies
3. Reduced overall cost of transportation across funding sources due to increased shared rides and reduced labor costs
4. Improved coordinated trip activity reporting
5. Increased data security
6. Increased participation of Volunteer Drivers

# Project Benefits by Stakeholder

## Agencies

- Direct upload of trips to their systems saves time and reduces data inaccuracies
- Direct upload of billing data to brokerage system saves time and reduces data inaccuracies
- Advanced scheduling (QRyde) options will make capacity available to broker, reducing unacceptable trips being assigned to agencies
- Increases critical “passenger miles per vehicle” metric

## NEMT Broker

- Direct data transfer improves timeliness of ride acceptance and billing
- Greater access to vendors’ capacity at the route/time level, reducing or eliminating need for ‘scheduling’ rides for agencies

## Riders

- Increased efficiency means faster and better access to transportation

# Questions?

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