

Improving Outcomes in Medicaid through Innovative Transportation Partnerships

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KEY HIGHLIGHTS

- Non-emergency medical transportation (NEMT) helps Medicaid beneficiaries access needed healthcare services and supports. Still, many beneficiaries miss appointments due to transportation-related issues.
- Amerigroup Tennessee and its transportation vendor, Tennessee Carriers, partnered with Lyft to enhance access to NEMT. Early findings suggest the program has improved outcomes and beneficiary satisfaction.
- This program is an example of how MCOs can be innovative partners with the state Medicaid agency in better meeting the healthcare needs of beneficiaries.



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Overview

Non-emergency medical transportation (NEMT) is a critical service for Medicaid beneficiaries who use it to get to and from medical appointments and to access other services and supports. In a recent survey of Medicaid beneficiaries, 60 percent reported that they could not attend their medical appointments without access to NEMT.¹

Medicaid beneficiaries and NEMT



60%

depend on NEMT for access to medical appointments

Most states do not require any cost sharing for NEMT. Yet individuals still encounter barriers to securing reliable transportation, such as delays and overbooked rides, which negatively affect their health and wellbeing. For instance, millions of Medicaid beneficiaries forgo or defer medical care due to transportation challenges.

The Amerigroup Tennessee health plan heard these same challenges and frustrations from its beneficiaries. To improve access to reliable and timely transportation services, the health plan led efforts to establish a partnership between Lyft and Tennessee Carriers, Inc.—the health plan’s transportation vendor. The state Medicaid agency was a strong supporter of this effort and played an important role during its development and eventual expansion. This partnership allows Tennessee Carriers to utilize Lyft as an option for NEMT rides for a wide range of ambulatory services and supports—such as office visits and treatment (e.g., dialysis, chemotherapy)—in addition to its existing contracted vans.

This paper shares early findings from the efforts of Amerigroup Tennessee and Tennessee Carriers to enhance access to NEMT via the Lyft program, highlighting how the program has helped achieve notable improvements in both outcomes and beneficiary satisfaction.

Medicaid Coverage of Transportation Services

Since its inception in 1965, Medicaid has offered beneficiaries access to NEMT services.² The benefit covers a broad set of services, including trips via public transportation (e.g., buses), taxis, specialized vehicles (e.g., wheelchair accessible), and private vehicles.³



NEMT helps beneficiaries access needed services and supports.

NEMT services help Medicaid beneficiaries access needed healthcare services and supports, such as primary and preventive care visits, chronic care management, and counseling sessions for mental health conditions or substance use disorders (MH/SUD).⁴ In recent years, some state Medicaid programs and health plans have expanded this benefit to support whole person care by covering trips for certain non-medical visits (e.g., picking up prescriptions, rides to grocery stores).⁵

Most states provide NEMT at no cost to the beneficiary, but nearly half of all states include some restrictions on the use of NEMT.⁶ For instance, 22 states have service limits or utilization requirements for NEMT services, such as requiring prior authorization, not covering the service when the household has a working vehicle, requiring prescriptions from providers for specialized transportation, or limiting NEMT to services within the local area.⁷

Medicaid managed care organizations (MCOs), which cover more than 75 percent of all Medicaid beneficiaries nationwide,⁸ are an integral part of the delivery of NEMT. States usually include NEMT in the benefits that MCOs bear responsibility for providing.⁹ In turn, Medicaid MCOs typically contract with a third party transportation broker to deliver these benefits. In states that do not include NEMT as part of their MCO contracts, Medicaid agencies will often contract with a third party transportation broker or, alternatively, use either their own transportation department or local/municipal service providers.¹⁰

Transportation Challenges Impact Health and Wellbeing

Despite the availability of the Medicaid NEMT benefit, millions of individuals still miss appointments each year because of transportation-related issues.¹¹ In 2017, 2.1 million beneficiaries under age 65 delayed their care due to lack of transportation.¹²



Missed appointments can **disrupt important preventive care and may ultimately lead to higher-cost care.**

Additionally, in a nationwide survey of Medicaid beneficiaries with disabilities, over 12 percent of respondents reported they could not get a ride to the doctor's office in the last six months.¹³ These challenges occur for a variety of reasons, such as rides being overbooked, inadequate supply of accessible vehicles, miscommunication about the number of riders being picked up, or the beneficiary not showing up for their ride.¹⁴

Missing appointments can adversely affect individuals' health outcomes and wellbeing. People who miss appointments may not be able to obtain important medications or other supports—disrupting preventive care and treatment for health conditions, including chronic conditions. For example, it is well established that not adhering to prescribed medications can worsen health outcomes—especially for individuals with chronic conditions—while also increasing avoidable utilization (e.g., emergency room visit) and creating unnecessary costs.¹⁵

Additionally, for people lacking transportation to promptly address an acute health care need (e.g., high fever, toothache), the condition may be left untreated, worsening until far more invasive or expensive care is needed. For example, beneficiaries experiencing MH/SUD may miss counseling sessions that help support their recovery.

Lack of reliable transportation also poses other challenges to keeping healthcare appointments. For instance, if a ride falls through, beneficiaries may not be able to take additional time off work for a rescheduled appointment.

Focus groups conducted by the Amerigroup Tennessee health plan with its members identified a range of challenges associated with transportation services—late pick-ups, missed rides, and vans breaking down, to name a few examples. To improve beneficiaries' experience and ensure they can access their services, Amerigroup Tennessee helped initiate and develop an innovative partnership between Lyft and Tennessee Carriers to enhance transportation services for Medicaid beneficiaries.

Amerigroup Tennessee’s Innovative Efforts to Enhance NEMT

Amerigroup Tennessee and Lyft, over a series of meetings, developed an enhanced approach to NEMT with the goal of eliminating barriers and closing gaps in transportation services. They then jointly reached out to Tennessee Carriers—the health plan’s contracted transportation vendor—to partner on implementation.¹⁶

Both Tennessee Carriers and TennCare strongly supported this effort as an opportunity to ensure people can get to and from their needed healthcare services and supports. Tennessee Carriers worked closely with Lyft to establish it as a subcontracted transportation provider.

TennCare provided legal and regulatory support to resolve barriers essential to getting the initiative off the ground. Additionally, in light of the early positive outcomes achieved through the pilot program, the state agency was a proponent of expanding the program sooner than planned.

The program, which adds Lyft rides as an option for NEMT, first launched in Shelby County (Memphis and surrounding area) in August 2019. It was soon expanded statewide in mid-January 2020, due to positive feedback from beneficiaries and providers and TennCare’s support of broader implementation.

Tennessee Carriers has direct access to the Lyft ridesharing platform through the partnership. Staff at Tennessee Carriers received specialized training from Lyft so they can navigate the platform directly and arrange rides for beneficiaries. Lyft drivers participating in this program go through additional screening (on top of what Lyft already requires for its drivers). Amerigroup Tennessee, Tennessee Carriers, and Lyft worked closely with the state to make sure beneficiary safety was paramount.

Beneficiaries using the service have a seamless and convenient experience. They engage with the service through Tennessee Carriers—just as they do for all other NEMT rides.¹⁷ Beneficiaries call one number for NEMT services; however, rather than being limited only to the traditional contracted vans, Tennessee Carriers now has the option to select a Lyft ride. Importantly, Tennessee Carriers also ensures that each individual is provided with the right transportation.¹⁸ For example, if a beneficiary needs a wheelchair accessible vehicle or door-to-door service, the vendor knows not to use Lyft. Beneficiaries are not left to navigate NEMT options themselves and potentially select the wrong one without realizing it. Once Tennessee Carriers books a Lyft ride for a beneficiary, the individual receives a confirmation notification via text from Lyft.



The Lyft program offers beneficiaries a seamless and convenient alternative for NEMT services.

Early Findings

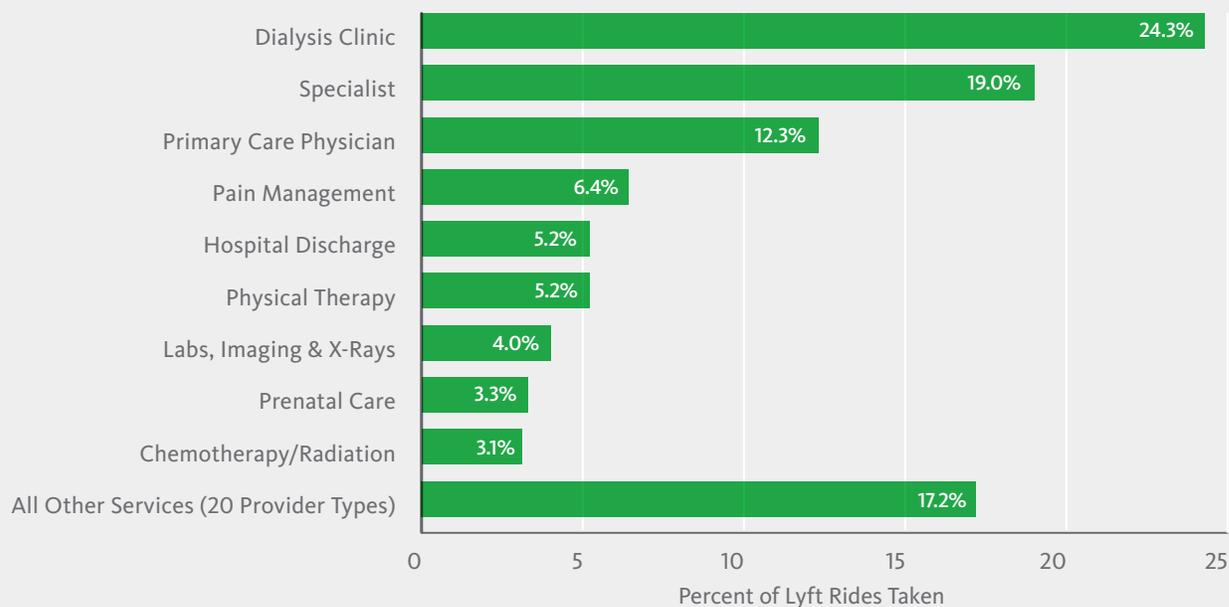
The innovative program to enhance NEMT through Lyft has connected Medicaid beneficiaries to important services and supports while improving outcomes and quality.

Utilization

The Lyft program provided more than 3,000 rides to beneficiaries enrolled in the Amerigroup Tennessee health plan from August 2019 through March 2020.¹⁹ The program has provided beneficiaries with transportation to an array of essential medical services—with dialysis services, specialists, and primary care physicians (PCPs) ranking as the most frequent trip destinations. More than half (56%) of all rides taken by Amerigroup Tennessee health plan members were to these three provider types.²⁰ (Figure 1) Beneficiaries also took rides to access critical services such as pain management, chemotherapy, and prenatal care visits.

While Lyft is an important addition to the NEMT program, it remains a small component of the more than 345,000 total NEMT rides that Amerigroup Tennessee beneficiaries received through Tennessee Carriers during the same time period.²¹

Figure 1
Lyft Rides by Provider Type



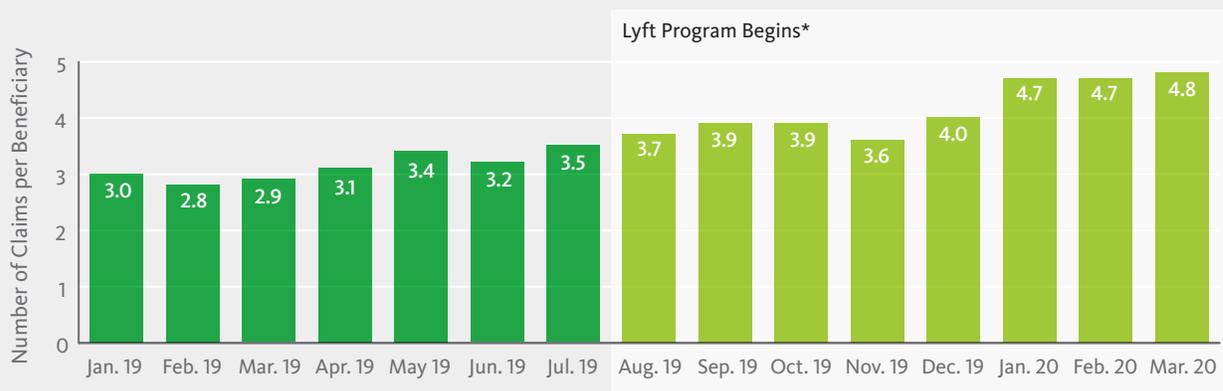
Source: Amerigroup Tennessee health plan data.

Data reflects 3,069 Lyft rides taken from the beginning of the program in August 2019 through the end of March 2020.

Care Improvements

Overall, beneficiaries receiving NEMT through the Lyft program appeared to experience improvements in measures of healthcare utilization, such as PCP visits and quality of care. Among beneficiaries who used the Lyft program, the number of claims per beneficiary per month for PCP visits increased by 13 percent during the first three full months (September–November 2019) of the program compared to the three months prior to implementation (May–July 2019).²² Program data also suggests a positive impact when looking at year-over-year changes. Compared to the first quarter of 2019, claims per beneficiary per month for PCP services were 63 percent higher in the first quarter of 2020 among individuals who used the Lyft program. (Figure 2)

Figure 2
PCP Claims per Beneficiary per Month Among Beneficiaries Who Used Lyft Rides, Before and After Program Launch



Source: Amerigroup Tennessee health plan data. To compare PCP use prior to and following the launch of the Lyft program in August 2019, the health plan analyzed claims data for only those members who used the Lyft program.

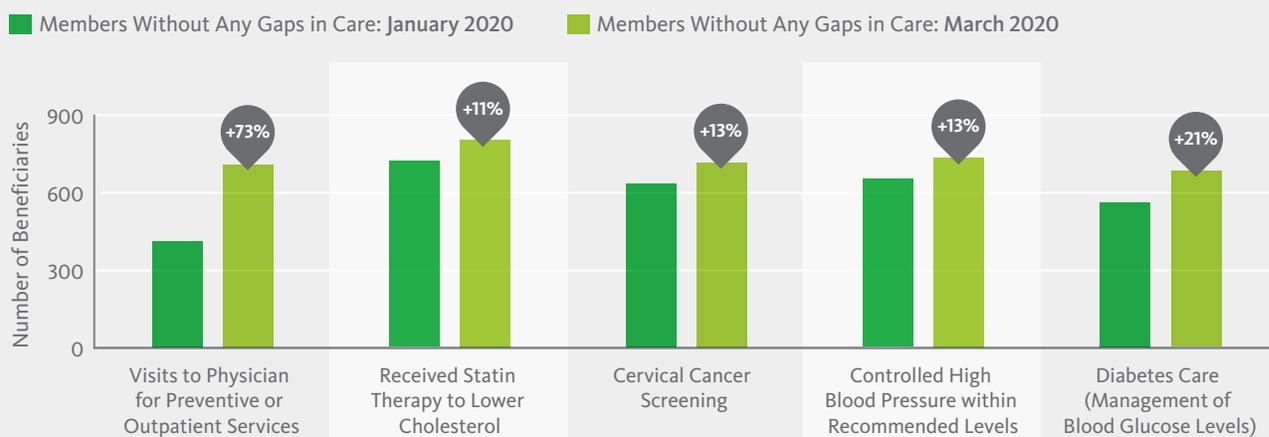
* The Lyft program began serving Amerigroup Tennessee members on August 19, 2019.

In addition, the health plan observed immediate improvements in quality for beneficiaries who used the Lyft program, as measured by the Healthcare Effectiveness Data and Information Set (HEDIS). The HEDIS metrics can be used to identify “gaps in care,” which are recommended preventive care services (e.g., physician visits, screenings) or clinical goals (e.g., blood pressure levels) that an individual has not yet met. During the first three months of the Lyft program (roughly mid-August 2019 through mid-November 2019), the number of beneficiaries who visited a physician for preventive or outpatient services increased by approximately 50 percent among those using Lyft for at least one ride.²³

Quality data from the first quarter of 2020 (Figure 3) suggests that the improvements observed by the health plan in the first three months of the program are persisting. The Lyft program is continuing to contribute to improvements in the number of physician visits and it may be having a positive impact on other HEDIS measures for attainment of recommended preventive care and clinical goals. Among those who used the Lyft program, the number of beneficiaries who visited a physician for preventive or outpatient services increased by 73 percent between January and March 2020.²⁴ This is notable, since it is one of the areas where the Lyft program is most likely to have a direct impact. The health plan also observed positive changes in other HEDIS metrics for recommended services and clinical goals, such as cervical cancer screening (13%) and management of blood glucose levels in individuals with diabetes (21%).²⁵

Figure 3
Achievement of Select HEDIS Measures Among Beneficiaries Who Used the Lyft Program

January 2020 – March 2020



Source: Anthem Public Policy Institute analysis of Amerigroup Tennessee health plan data for select HEDIS measures.

Satisfaction

Improvements in care and quality were accompanied by high levels of beneficiary satisfaction. Over 96 percent of individuals who used the service indicated satisfaction with the Lyft program, based on a survey conducted by the Amerigroup Tennessee health plan.²⁶

Further supporting this indicator of satisfaction is a concurrent decrease in the number of transportation-related grievances that Amerigroup Tennessee beneficiaries filed each month. During the first three full months of the Lyft program in Shelby County (September–November 2019), the number of transportation-related grievances in the county decreased by 46 percent compared to the three full months prior to implementation (May–July 2019).²⁷ The number of transportation-related grievances filed each month continued to decline through the end of March 2020. This data suggests that the availability of a more personalized and timely transportation experience may have helped improve beneficiary experience.

Discussion

This innovative approach to NEMT has shown promise to improve access to reliable transportation while also increasing Medicaid beneficiary satisfaction and appropriate utilization of healthcare services and supports.

Offering Beneficiaries Greater Flexibility

One of the key benefits of the enhanced NEMT program using Lyft is flexibility. The Lyft program fills a critical gap for beneficiaries—providing timely and reliable transportation when traditional providers are not available to deliver the service. The efforts of Amerigroup Tennessee and Tennessee Carriers to connect beneficiaries to Lyft rides can help reduce instances in which beneficiaries are late to or miss appointments entirely.

Looking Ahead

The Amerigroup Tennessee health plan is building on the early success of the program with Lyft and Tennessee Carriers. In particular, the program's success garnered support at the state level for statewide expansion. The health plan is now working on smooth implementation so all of the plan's beneficiaries have access to this program.

The health plan is also working with Lyft and Tennessee Carriers to identify opportunities where the Lyft program can be leveraged to close gaps in care and improve adherence for preventive visits. For instance, one potential focus is on improving access to, and attendance at, prenatal care visits.

An absence of reliable transportation can also have a meaningful impact on social drivers of health, such as access to healthy food options, community engagement, employment, and school attendance. Recognizing this intersection, Amerigroup Tennessee is looking to expand the Lyft program more broadly to address social drivers of health—in particular by providing meal delivery services, which is a benefit offered to many individuals enrolled in Medicaid.



Individuals benefited from enhanced access to reliable transportation, **leading to improved outcomes and satisfaction.**

Conclusion

NEMT has long served as a critical resource—ensuring that Medicaid beneficiaries who cannot afford or lack adequate access to transportation can still obtain care and services to improve their health and wellbeing.

The program with Lyft and Tennessee Carriers is an example of how MCOs can be innovative partners with the state Medicaid agency in better meeting the healthcare needs of beneficiaries. It is also an example of MCOs collaborating with key service providers—in this case the NEMT broker and a ridesharing service—to improve the delivery system.

Endnotes

- ¹ Medical Transportation Access Coalition. (n.d.). The Value of Medicaid's Transportation Benefit: Results of a Return on Investment Study. Analysis conducted by Wakely, Faegre Baker Daniels Consulting, and Dr. Patricia Salber. Retrieved May 28, 2020, from <https://mtacoalition.org/wp-content/uploads/2018/08/NEMT-ROI-Study-Results-One-Pager.pdf>.
- ² Community Catalyst. (n.d.). Medicaid Non-Emergency Medical Transportation (NEMT) Advocacy Guide. Retrieved March 30, 2020, from <https://www.communitycatalyst.org/resources/publications/document/2019/NEMT-Advocacy-Toolkit.pdf>.
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- ⁵ Medicaid managed care plans are also covering this as a value added benefit to help close gaps in social drivers of health.
- ⁶ The Henry J. Kaiser Family Foundation. (2020). Medicaid Benefits: Non-Emergency Medical Transportation Services – 2018. Retrieved March 30, 2020, from <https://www.kff.org/medicaid/state-indicator/non-emergency-medical-transportation-services/?currentTimeframe=0&sortModel=%7B%22colId%22:%22Location%22,%22sort%22:%22asc%22%7D>. States that did require cost-sharing indicated amount ranging from \$0.50 to \$2.00, depending on the vehicle (e.g., specialized medical vehicle, non-emergent ambulance)
- ⁷ The Henry J. Kaiser Family Foundation. (2020).
- ⁸ America's Health Insurance Plans. (2020, June 23). New Study: States Increase Transition to Medicaid Managed Care. Retrieved August 8, 2020, from <https://www.ahip.org/new-study-states-increase-transition-to-medicaid-managed-care/>.
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- ¹¹ Komenda, J. (2017, January 13). 5 Ways Healthcare Transportation Must Change in 2017. MedCity News. Retrieved March 30, 2020, from <https://medcitynews.com/2017/01/5-ways-healthcare-transportation-must-change-2017/>.
- ¹² Medicaid and CHIP Payment and Access Commission. (2019, May).
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- ¹⁵ See for example: Iuga, A. & McGuire, M. (2014, February 20). Adherence and Health Care Costs. *Risk Management and Healthcare Policy* 7, 35-44. Retrieved May 26, 2020, from <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3934668/pdf/rmhp-7-035.pdf>; and Khanna, R., et al. (2012, March). Medication Adherence Among Recipients with Chronic Diseases Enrolled in a State Medicaid Program. *Population Health Management* 15(5), 253-260. Retrieved May 26, 2020, from: https://www.researchgate.net/publication/221687326_Medication_Adherence_Among_Recipients_with_Chronic_Diseases_Enrolled_in_a_State_Medicaid_Program.
- ¹⁶ In its capacity as the NEMT vendor, Tennessee Carriers holds the contract with Lyft; since its launch, at least one other health plan in the state has also adopted this program.
- ¹⁷ Per the program parameters, to qualify for Lyft rides beneficiaries must be able to send and receive texts and connect to the internet via a smartphone. Additionally, all riders must be ambulatory and utilizing curbside services.
- ¹⁸ The initial pilot program agreement excluded any trips for the following reasons: behavioral health, drug and alcohol treatment, crisis stabilization, and pharmacy trips. After expansion of the program in January 2020, MCOs and Tennessee Carriers may request Lyft trips for these appointment types, but selected behavioral health, drug and alcohol treatment, and pharmacy trips remain excluded.
- ¹⁹ Data from the Amerigroup Tennessee health plan.
- ²⁰ Anthem Public Policy Institute analysis of data from the Amerigroup Tennessee health plan.
- ²¹ Data from the Amerigroup Tennessee health plan and Tennessee Carriers, Inc.
- ²² Anthem Public Policy Institute analysis of data from the Amerigroup Tennessee health plan.
- ²³ Ibid.
- ²⁴ Ibid.
- ²⁵ Ibid.
- ²⁶ Data from the Amerigroup Tennessee health plan.
- ²⁷ Anthem Public Policy Institute analysis of data from the Amerigroup Tennessee health plan.

ABOUT US

Anthem Public Policy Institute

Anthem's Public Policy Institute was established to share data and insights to inform public policy and shape the healthcare programs of the future. The Public Policy Institute strives to be an objective and credible contributor to healthcare innovation and transformation through publication of policy-relevant data analysis, timely research, and insights from Anthem's innovative programs.

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