



Blueprint for Aging
Start a Revolution : Age with Attitude

**Transportation Voucher
Pilot Project
Report**

March 2008

Introduction and Impetus for Pilot

The Blueprint for Aging, a collaborative of seniors, family members, nonprofits, businesses, and government agencies, is working to improve services, care, and quality of life for older adults in Washtenaw County under a grant from the Robert Wood Johnson Foundation.* Washtenaw County has seemingly above-average transportation options in its more populated centers, yet county-wide focus groups, one-on-one interviews, community forums and surveys conducted by the Blueprint revealed transportation issues among the highest priorities for seniors (behind only affordable medical care and access to prescription drugs).

Six Key Values guide the Blueprint for Aging in addressing transportation concerns and developing models to pilot systems change:

- Employ consumer centered approach
- Incorporate social networks
- Utilize neighborhood systems
- Promote sustainability
- Build trust
- Demonstrate efficiency

Projects across the country have demonstrated that vouchers can offer an effective way to deliver transportation services to seniors. The BFA pilot project set out to learn more about the transportation needs of seniors in Washtenaw County and to determine the potential of vouchers to meet those needs in a way that incorporates the values above.

Overview and Project Objectives

The overarching goal of the Project was to demonstrate effectiveness of a voucher program to meet varied transportation needs of seniors.

Objectives of the pilot and status:

- Develop and implement a program in which seniors have vouchers that cover a range of transportation options from formal services to informal services, including “natural helpers” from a participant’s own network of family, friends and neighbors (status = completed).

* Community Partnerships for Older Adults, a national program funded by the Robert Wood Johnson Foundation, helps communities develop leadership, innovative solutions, and options to meet the needs of older adults over the long term.

- Evaluate the effectiveness of vouchers as an affordable way for seniors to increase their options for transportation services (status = completed).
- Learn more about the transportation needs of Washtenaw County seniors (in one rural and one urban setting) and how they, as consumers, prefer to have those needs met (status = completed).

Outreach/Recruitment Methods and Results

Considering the diverse nature of Washtenaw County in terms of population density and the types of transportation services available to seniors, vouchers were utilized in one urban and one rural setting. Target areas were chosen based on reports of numbers of requests for rides from Neighborhood Senior Services' Medical Access program. Chelsea/Dexter comprised the greatest number of requests of a rural area and Ypsilanti comprised the greatest number of requests for an urban area.

Participants for the pilot project were secured in several ways. The Area Agency on Aging 1-B generated a list of clients in the designated areas known to have transportation needs. Each was contacted by his or her caseworker and asked about interest in participating in the pilot. Neighborhood Senior Services (NSS) also provided clients with transportation needs, including those using the Medical Access program.

Additional outreach efforts included contacting agencies serving older adults, senior centers and senior housing facilities. These efforts met with differing amounts of success by geographical area. Attempts to gain participants in the Chelsea/Dexter area were met with relatively low interest by individuals and, in some cases, directors of senior programs. Interest in using transportation vouchers was significantly higher in Ypsilanti. The pilot was advertised by building managers and senior center directors using word-of-mouth and flyers.

Blueprint staff held community meetings (outlined below) at senior centers and senior housing facilities in Chelsea and Ypsilanti that informed seniors about the pilot and oriented those interested in participating.

Gaining participation from formal transportation providers proved to be quite straightforward. Most had prior positive experiences with using agency-based vouchers and were happy to participate. Each agreed to forward all vouchers to the Blueprint on a monthly basis and accept reimbursement for services rendered at the end of the 3-month pilot.

Pilot Orientation

For one month prior to beginning the pilot project, two seniors with unmet transportation needs agreed to test the vouchers and the reimbursement system and give feedback to staff. Both formal and informal providers were used during this time. Several changes were made to the voucher design and orientation materials in the interest of streamlining the process.

Participants in the pilot were oriented in two ways. Those who attended Community Meetings (in senior housing facilities or senior centers) listened to a presentation that included:

- Interactive quiz on transportation and local options
- Background on the Blueprint and goals of the pilot
- Parameters of the pilot
- Orientation to the vouchers and how they are used including reimbursement process for informal providers
- Education about transportation services available in the county focusing on those services accepting vouchers for the pilot
- Q & A with Blueprint staff and transportation providers
- Review of materials included in travel folder (application for informal providers, list of providers and contact information, travel diaries, etc.)

Interested participants unable to attend the larger meetings received individual home visits from Blueprint staff that included all the information above save the interactive quiz.

Model

Ease of use for participants was the highest priority when designing the voucher. Voucher designs that required maintenance of a balance or reliance on a great number of low-denomination coupons were prohibitively tedious. See final voucher design below.

Transportation Voucher		Maximum Value	\$5	<i>Voucher must be redeemed within 30 days of service</i>	No. #####
Pay to the order of: _____ Transportation Provider (Company or Individual)					
<div style="border: 1px solid black; padding: 5px; width: fit-content;"> \$ _____ <i>actual trip cost</i> </div>	<i>Destination</i> name & location _____		<div style="border: 1px solid black; padding: 5px;"> Trip Purpose <i>(circle all that apply)</i> shopping religious medical work/volunteer bank entertainment social/family other _____ </div>		
	<i>Destination</i> name & location _____				
	<i>Destination</i> name & location _____				
Trip Date _____	Name of Rider: _____				
For payment submit to:	Signature of Rider: _____				
Blueprint for Aging	<input type="checkbox"/> <i>Check if using multiple vouchers for same trip. Fill out entire first voucher.</i> <i>For remaining voucher(s), fill out provider's name, trip date and sign at the bottom</i>				
PO Box 995	White: Driver (send to Blueprint)		Yellow: Driver (keep for your records)		Pink: Rider (keep for your records)
Ann Arbor, MI 48106					
734.712.2586					

Each voucher indicated the rider and the provider (whether it is a formal provider such as Blue Cab or an informal provider such as the rider's nephew) as well as the date of the outing. The rider determined the voucher amount (up to, but not exceeding \$5) to be designated to the provider and could use multiple vouchers for one outing. Vouchers could be used at any time during the 3 months. Each voucher included lines for up to three destinations for the outing (legs of the trip) and required addresses or cross streets so that mileage could be determined. The rider also indicated the purpose of the trip (choosing from seven general areas or a write-in option).

In order to get as complete a picture as possible of the preferences of participants, the pilot included a wide range of formal transportation providers. People who needed transportation could use vouchers to purchase services from Ann Arbor Transportation Authority (ATA)'s A-Ride paratransit program or Huron Valley Ambulance (HVA)'s Health Van. With several weeks' notice, they could be used for the suggested donation of Neighborhood Senior Services (NSS)'s Medical Access Program that includes accompaniment to doctor's appointments if necessary. Vouchers could also be used for cab rides from Blue Cab or shared van rides from People's Express.

Evaluation Activities

Evaluation of the pilot included analysis of data collected from vouchers. Information regarding starting and ending destinations for each leg of an outing, type of transportation service used, purpose of the trip, and cost were entered into a database each time a voucher was received for reimbursement. Information about length and content of phone contacts with participants and providers was also recorded and entered. In addition, a convenience sample of participants completed a brief confidential phone survey about their experiences using vouchers after the pilot's completion

Results

Riders

The pilot consisted of 55 participants (45 in Ypsilanti and 10 in the Dexter/Chelsea area). However, some did not use their vouchers. Of the 42 participants who did make use of transportation vouchers, 35 were from Ypsilanti and 7 were from the Dexter/Chelsea area (78% and 70% usage rate respectively).

Reasons given for not participating once enrolled included a fear of vouchers being “taxable income,” health problems, lack of need due to other sources of transportation, and dementia making use too difficult.

Outings

During the course of the pilot, vouchers were used to purchase transportation services for 568 outings (each outing having one or more legs involved)*. When given a range of choices to meet their transportation needs, seniors in the pilot tended to choose informal providers over formal. Of outings taken in the course of the study, transportation was provided by an informal source 67% of the time with the remaining 33% provided by formal transportation services.

When using informal providers, 27% of the trips were for medical purposes, 23% for shopping, 23% for family/social visiting, 13% for religious activities, and 4% for banking. Of the trips with formal providers for which data specific to “purpose” was available (not from A-Ride), 51% of trips were for medical purposes, 31% for shopping, 12% for family/social visiting, and 3% for religious activities.

Of the outings for which there existed data for destinations and cost of trip, the cost per mile for transportation was calculated. When participants used Blue Cab for outings (56 trips), the cost averaged \$1.94/mile. When they used informal providers (360 trips), the cost averaged \$.71/mile. When riders used NSS (12 trips) giving the suggested donation using vouchers, the cost averaged \$.51/mile.

Providers

Informal

Of the informal providers (driving for 67% of all outings), 20% were family members, 18% were neighbors, 14% were friends and 19% were “other.”

Formal

Of the trips provided by formal transportation services (33% of all outings), 47% were from Blue Cab, 34% were from A-Ride, 14% were from NSS Medical Access Program, and 6% were from the W.A.V.E.

* Some participants used vouchers to purchase tickets or bus passes and documented travels in a “trip diary” (purpose of trip, destination, type of service), but not amount per trip

Destinations

In the course of the pilot project, 219 specific destinations were identified, in comparison to a general “purpose”. The most frequently visited destination was a senior center/congregate meal site (with 67 visits). The next most frequently visited destination was a church (a small number of participants made very regular trips). Of the top 12 most frequently visited sites, 5 were food-related.

Encounters

Blueprint staff logged in 124 contacts (primarily by phone) with participants and providers totaling 618 minutes. It should be noted that contacts were not always entered, and so these are conservative figures.

Results from Brief Telephone Survey of Participants

Blueprint staff conducted brief phone interviews with a convenience sample of participants (22 were home and answered questions).

- 91% said vouchers made it easier getting where they wanted and needed to go
- 50% said they cannot go all the places they want and need to go
- The other 50% said they can, but only with varying degrees of difficulty (most said great difficulty)
- 55% said they prefer informal providers (a few said that’s their preference, but they don’t have any informal providers)
- 32% of participants said that while using vouchers they went out more than they did without vouchers
- 36% of participants used a different/new provider after having learned about all their options within the pilot

Listed as benefits of using vouchers (from most number of mentions to least):

1. Freedom to make choices
2. Financial assistance of having the vouchers (not paying for transportation out of pocket)
3. Having “something to offer” or “not being such a burden” (on informal providers)

Listed as detractors of using vouchers (from most number of mentions to least):

1. Need to fill out vouchers
2. Denomination of the vouchers (“wasting” \$2 from the voucher if giving \$3 to a provider)
3. Pilot only lasted 3 months

Lessons Learned

For reasons that include accompaniment, ease (especially when not feeling “like a burden”), and lower cost, a majority of participants preferred informal providers to formal providers. These rides were less expensive than using cabs and may be less expensive than using paratransit, though that cannot be determined within the scope of this pilot (those purchasing scrips did not fill out vouchers for individual trips). It’s interesting to note the data showed neighbors and friends (as a group) provided more trips than family members. It points to a potential use of vouchers – assisting family members in caregiving through a range of services including even informal providers.

When choosing a formal service, participants preferred cabs for convenience and ease (especially when the financial burden of paying for the service is eliminated or reduced). Also, there were not restrictions on geographical area or times of day when using a cab as with A-Ride. It is important to note, however, that in order to use vouchers for A-Ride, participants needed to be approved and given a green card (itself a process involving doctor’s letter), send in vouchers and wait for tickets to be mailed back to them or visit the AATA office. It is possible that participants in the study chose the cab service for its simplicity.

Many of the participating seniors used vouchers for grocery shopping. A smaller number used vouchers to very regularly visit a senior nutrition site (one woman was able to increase her attendance from once a week to three times a week during the period she was given vouchers). Because the nutrition site is located within a senior center, many of those enjoying the meal program participated in group activities and events as well. While the nutrition site was the most frequently visited destination, , it should be noted that this was, in part, because of a high number of trips (the program runs 5 days a week) among a few participants. Also, it should be noted that while medical appointments, which accounted for the largest number of trips, had such a large number of separate destinations, that no one site was highly represented.

Recommendations for Further Implementations

It is recommended that this pilot be further implemented with a systems-level focus and one that successfully reaches rural parts of Washtenaw County. Between two and four destinations that benefit from distribution of senior transportation vouchers or destinations identified by seniors will be engaged in testing distribution, usefulness and feasibility from an organizational perspective. Examples of test-destinations might include senior centers or geriatric medical clinics. Directors of programs or agencies involved will identify participants for whom attendance could be improved with transportation assistance. Evaluation of the pilot will measure programmatic impact. Additional implementation will streamline administrative responsibilities, including the possibility of an e-voucher distribution and tracking system.