



**Minutes**  
**Health Express/I-med Charrette**  
**July 10, 2008**

Attendees: Candace Roeder, Holly Harper, David Melko, Mike Wixon, Will Garner, Gail Williams, Megan Siren, Tink Miller, Amy Bakker

Absent: Laura Webster, Bonnie Gore

**1) Updates/Review -**

- a. David is in the process of meeting with member jurisdictions to review the new CTSA which will be a Joint Powers Authority (JPA) between: Placer County Transportation Authority, City of Lincoln, City of Rocklin, City of Roseville, and City of Auburn, City of Colfax and City of Loomis.
- b. The current month-to-month PRIDE contract requires a 60-day notice of termination. If notice is given 9/1 then a new MOU could take place effective 11/1.
- c. David reviewed various stats of the CTSA transportation program under PRIDE. Key statistics for I-med:
  - i. 481 passengers – monthly average (about 400-450 one way trips)
  - ii. 16 passengers travel outside Placer--most go to Sacto County (46% from Rocklin, 22% Lincoln, 12% Roseville, 11% Auburn)
- d. It was noted that the current capacity of Health Express is about 450 one – way rides. If there is a small overlap of users of Health Express and PRIDE, this pilot could be looking at a close to doubling of service, or 900 one-way rides/mo.
  - i. We will estimate a budget based on 600 and 900 one-way rides.
  - ii. Most likely the contributions of the 2 partners will not be enough to accommodate the existing and growing demand. We will determine this more accurately as the Pilot moves forward.

**2) Definitions & Agreements**

**a. Term of Pilot Program:**

- i. The group agreed to a 2-year Pilot program
- ii. **Action: A draft MOU and Scope of Work will be created based on today's meeting and some additional research. – Lauren /David**
  1. The MOU will include a clause which will allow for an extension of the time frame assuming the partnership is working

**b. Service Area Definition:**



- i. Placer County – Western Placer County along Highway 80 to Colfax. Service from Auburn to Colfax will be provided west of 80 to the County line, and  $\frac{3}{4}$  mile east of Hwy. 80 up to Route 174.
  - 1. Forest Hills will not included

**c. Types of Transportation Requests Permitted (medically related)**

- i. Doctor – health & wellness
- ii. Vision
- iii. Adult day care (respite)
- iv. Chiropractor
- v. Mental health provider –therapist, family counseling included
- vi. Physical therapy
- vii. Dialysis – referred out
- viii. Labs

**Note:** Pharmacy will not be included in this phase of the Pilot Program.

**d. Eligibility**

- i. Elderly and Disabled
  - 1. Pilot must provide rides in relationship to the % of TDA funding of the pilot (currently \$375k of \$500k or 75%)
    - a. 75% of rides must accommodate Seniors or Disabled community members
    - b. Need to track % ADA, Disabled and Sr.
    - c. Get formal TDA definition – David
      - i. Disabled, ADA & Sr..
    - d. 60 yrs. old and above is definition for senior
- ii. Underserved/Indigent – case by case (25% served)
- iii. Health Express Screening to other transportation sources:
  - 1. Health Express is currently marketed as Last Resort- Pilot will move away from this term in marketing materials, however, it will still try to route requests to alternative public transportation services if applicable.
  - 2. Screening Process– Amy will let **all callers** know about alternative public transit option
    - a.

**e. Policies Needed:**

- i. Abuse of Service –
- ii. No show policy – take from Roseville
- iii. Complaint process
- iv. Door to Door Service – when applicable, what are policies and guidelines for transit operator
- v. In MOU – put that Health Express should solicit an RFP for the transit operations every 2-3 yrs.



- vi. Customer Service / Quality Standards
- vii. Transportation/Maintenance Requirements
- viii. Other operations standards

**f. Hours of Operation**

**i. Placer**

- 1. Scheduling: 7:00 am to 3:30pm (need to make next day appt. by 1pm previous day)
- 2. Rides: First pick up 8:30 am to last pick up 4:30 pm

**ii. Sacramento**

- 1. One day per week (half day TBD)
  - a. Look at database of current requests - Amy
  - b. Coordinate with Vic and Roseville trips and determine appropriate placement on schedule
  - c. Note: Paratransit was considered as drop off potential, but given their ADA requirement it does not seem like an option for current customers going to Sacto.

**g. Door to Door vs. Curb to Curb**

- i. Health Express will provide "Door to Door" On request
  - 1. Add to policy – the law, and liability?
- ii. Ask Vic- can you leave the sight of the vehicle, what is the current procedure? – Amy
  - 1. Suggestion: 1<sup>st</sup> threshold / door →TBD
- iii. Marketing: keep out language of Door to Door

**h. Fares/sliding scale – Health Express is a no cost service / donation based**

- i. 10% - Fair revenue to operating costs – use partner \$'s to meet this
  - 1. \$125k firm contribution (local support) \* 75% seniors (TDA)/\$500k – 19%
    - a. local cash grants or subsidies (Kaiser/Sutter)

**3) Liability - Who is liable under this contract?**

- a. By Contract Health Express assumes the liability
  - i. Candace to review her Liability and map to requirements
  - ii. Additional liability costs will be billed to Health Express
- b. Risk management needs to review—David
- c. David to send comparable PCT contract for liability language
- d. What are liabilities of Srs. First, PCN, -Candace. Lauren

**4) Call Center Operations – method of referral**



- a. Plan to transition to one call Center by end of pilot (Amy, Mike, Lauren, David)
  - i. Look at dispatch point too
- b. Amy continues to be call intake at first

#### 5) Financial:

- a. Baseline funding
  - i. \$125k from Health Express hospital partners
  - ii. \$375k from CTSA
  - iii. End of 2 yr. period examine the baseline contributions
- b. Develop Funding plan & action plan – LO/DM
  - i. Cost/ trip , efficiency, serving 2x more for 70% of price!
  - ii. Lincoln could potentially give \$'s for it's I-med day
  - iii. Identify potential sponsors, funders
  - iv. Serve Seniors and Disabled (TDA definition of where funds need to go) based on TDA % contribution to pilot
    - 1. Currently 75%, if Health Express raises more than \$125k, then this percentage can be lowered
  - v. Note: CTSA doesn't assume Health Express shortfall funding goal of \$200k

#### 6) Scope of Service

- a. Health Express covers existing rides
- b. Review parameters of today
- c. TOWG is public partner side of things

#### 7) Organizational Structure

- a. TOWG/Health Express Team – Partnership
  - i. Oversight by : Board JPA / Board of Seniors First – ultimate decisionmakers
- b. Role: Partners (as opposed to contractors)
  - i. New partners can join Health Express/Pilot team if they contribute \$20k or more
- c. Health Express: Need to set quality, customer service and other operational standards → leverage TOWG group for existing materials (Will Garner)
  - i. Performance
  - ii. Vehicle Maintenance and liability – standards
  - iii. Quality of Service – Late arrival
- d. Role of group –
  - i. Define MOU
  - ii. Oversight of Pilot
  - iii. Work out budget & action plan (Lauren & David)
- e. Decision-making - Consensus – fall back to vote



## 8) Communications

- a. Reports on Ridership, etc.- monthly to TOWG
  - i. Lauren to send sample reports to TOWG group
- b. Team reviews all marketing content for comments
- c. Branding
  - i. Health Express - Candace to trademark along with logo
- d. Immediate communication needs
  - i. Press around partnership in Fall
    1. JPA formed , press
  - ii. Press conference
  - iii. Workshop for stakeholder review – David send emails of current stakeholders
    1. Design process, set the date – shoot for 1<sup>st</sup> week Sept. (LO/DM)
- e. Changes to Website
  - i. Make more interactive website – have an “ask amy”
  - ii. Tracker to web
  - iii. Schedule
  - iv. Include Policies & procedures
  - v. Hours of operation

### Additional Actions:

- Communication with PRIDE. – David
  - What are PRIDE’s intentions? Medi-cal, volunteer trips?, cease the service?
- Reports/Data - Pilot will track – Amy
  - # of pharmacy requests
  - # of Medi-cal requests
  - Need to track % ADA, Disabled and Sr per the definitions
- Current List of Medi-Cal providers – Amy to send to David and rest of TOWG
- Confirm Uniform Standard of Accounts for Health Express - GASB ? - Candace
- Create an RFP and process to solicit transportation bids on new project which expects to double capacity of Health Express
  - Will be run in parallel with pilot (Macy will start pilot and if a preferred provider that is not Macy is selected, then a smooth transition plan for service will be created). (LO/HH/CR)
- Get Trapeze reports from PRIDE - David

**NEXT MEETING TIME: AUGUST 13, 10:30 TO 1:30 PM PTCPA OFFICES**