

Launched in March 2019, **901RideChoice** seeks to improve rider access to transportation services using a call center and online trip-planning resource.

Key Objectives:

- Improve information and coordination for ease of access to transportation options
- Develop coordinated healthcare transportation solutions
- Increase access to primary and preventive care among seniors and people living with disabilities
- Increase feeling of independence and improve access to daily amenities for elderly residents and people living with disabilities.

March 2019 - February 2020



2,425 total calls, with an avg. of 221 calls per month

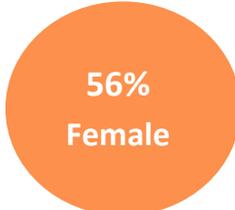
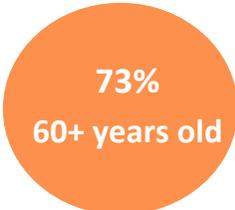
50% of calls are information-seeking, without a specific trip requested

45% of calls result in referral to transportation and other services

76% of transportation referrals are related to healthcare transportation



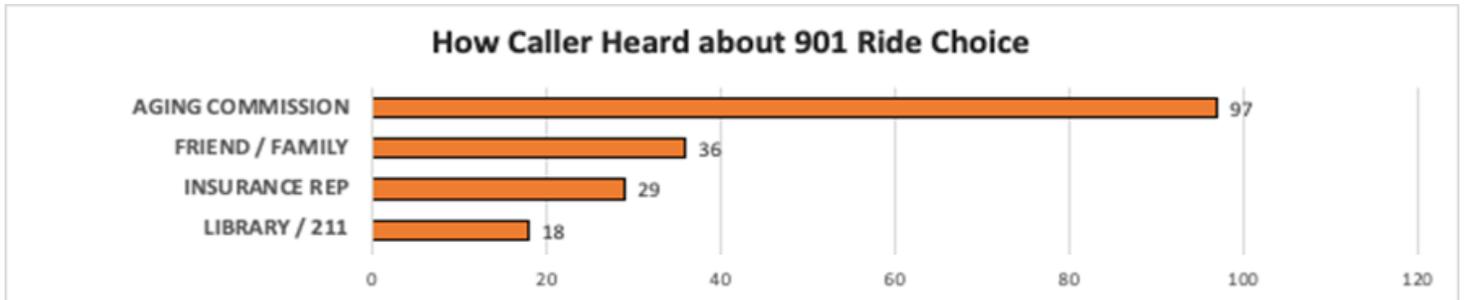
Caller Demographics



Referrals and Program Marketing

901RideChoice has recorded upwards of **2,500 calls**. Much of the success can be attributed to the investment in marketing in the first two quarters of the effort, along with ongoing partner engagement. Television and radio were the most effective in reaching the targeted demographic, followed by continued partner referral support, outreach, and word of mouth.

Diverse group of referral partners and methods resulted in a wide variety of referrals.



Partners

211 | City of Memphis Fire/Emergency Services | Coordinated Response to Elderly Abuse (CREA) | MATA | Memphis Center for Independent Living (MCIL) | Memphis Housing Authority | Meratin | MIFA | Shelby County Community Services: Aging Commission | Shelby County Community Services: Crime, Victim, and Rape Center | United Way Driving the Dream | Urban Strategies

Observations and Recommendations



Observation: 76% of ride referrals related to healthcare transportation (visits to doctor or pharmacy)

Top Destinations: Medical District (38104) East Memphis (38119)

Next Steps: Work with EMS to determine if 901RideChoice has potential to relieve call volume in certain patient categories.



Observation: The three zip codes with the most riders (38109, 38116, and 38127) report low average household income. In areas with highest call volume, more than 10% of households do not own a car.

Next Steps: Targeted advertising in communities with low car ownership. This targeted outreach and support may be achieved through media and by working with neighborhood associations, CDCs, or other community partners.



Observation: Of those who didn't use referred transportation service, 61% reported financial barriers as the reason for not taking the trip. 85% of rides required self-payment from the rider instead of being covered by insurance. Medical appointments only have a 12% trip success rate.

Recommendation:

1. Provide ride stipends for medical appointments to reduce cost barrier.
2. Investigate opportunities for improving insurance-provider match. Medical ride stipends are a relatively inexpensive way to provide equitable solutions to healthcare barriers in our vulnerable communities.
3. Insurance is an underutilized resource. Increase awareness of rides covered by insurance and improve matching for riders.
4. Continue to recruit and onboard low-cost ride providers.



Observation: Within our first year, **901RideChoice** has recorded upwards of 3,000 calls. Our call center partners note that similar programs have taken upward of 3 years to receive the same call volume.

Recommendation: Focus funding on call center and low-tech options. The current demographic primarily served by **901RideChoice** is an older population that has shown limited interest in email correspondence or the online 901RideChoice portal. Call center and customer service has consistently been reported as a key value.



Observation: 50% of calls are information seeking and do not have a specific trip in mind.

Recommendation: Recalibrate how data is captured, moving away from a trip-based system to a call-based system. This will allow for better data collection and deeper analysis. This is currently in progress by Innovate Memphis.

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