

# Low-cost pilot program for sickle cell anemia clinic results in zero no-show rate

Uber Health proven to positively impact Boston Medical Center patient experience through reliable transportation



## The challenge

The pediatric hematology clinic at Boston Medical Center (BMC) offers state-of-the-art diagnosis and treatment of blood disorders, including genetic blood abnormalities such as sickle cell anemia.

The disease requires consistent, preventative care including four or more visits to the clinic a year. For many of the young patients' caregivers, transportation insecurity has proven to be a real challenge. As an urban safety-net hospital, BMC serves a diverse population that includes a high number of new immigrants with low income and Medicaid insurance. This at-risk population often can't afford a car, and public transportation can prove quite arduous and long — especially when traveling with children who are susceptible to infection.

Unfortunately, lack of transportation as an obstacle to care is not unique to the BMC clinic and its patients. The importance of transportation is so well established that the American Academy of Pediatrics, in its [position statement](#) on managing sickle cell disease in children, recommends that providers discuss transportation with families. According to the statement, "Transportation challenges, which disproportionately affect patients of lower socioeconomic status, are a major barrier to care for people with sickle cell disease."

"We got the idea to use Uber Health from our colleagues in BMC's Refugee Women's Health Clinic, an ob-gyn clinic that serves refugee, asylum-seeking, and new-immigrant communities," says Amy Sobota,

## Pediatric Hematology Clinic

### Challenges

- High patient no-show rate (25%)
- Late arrival for appointments common
- Erratic schedule made it difficult for staff to plan resources

### Solutions

- Patients with transportation challenges enrolled into pilot program
- Participants provided with complimentary rides to and from appointments
- Staff able to book rides up to 30 days in advance

### Results

- 100% of participants made scheduled appointments
- Projected BMC charges per visit almost 20 times higher than cost of ride itself
- Better on time arrival rate than those not in program
- Reduced the clinic's overall no-show rate by 8.5% in the 12 weeks following program

Source: Boston Medical Center HealthCity [blog](#), "Our Sickle Cell Anemia Clinic Was Struggling With No-Shows, So We Called an Uber."



“Incorporating Uber Health in the standard of care could have a profound impact on patient health and patient and provider satisfaction. It may also impact the sustainability of healthcare costs, especially for underserved populations with a high risk of transportation barriers.”

### Amy Sobota

Pediatric Hematologist-Oncologist, Boston Medical Center, and Assistant Professor of Pediatrics at Boston University School of Medicine

Pediatric Hematologist-Oncologist at Boston Medical Center, and Assistant Professor of Pediatrics, the Boston University School of Medicine.

While traditional forms of non-emergency medical transportation (NEMT) exist and may be reimbursable by Medicaid, in practice they can be quite inconsistent and cumbersome to use. They require preauthorization and booking well ahead of time.

Once the clinic staff learned that Uber Health would support their HIPAA-compliance program by adhering to its strict privacy standards, they were convinced it was an alternative worth testing.

“The first step in caring for our patients is to just get them to the clinic. So we decided to call an Uber,” says Sobota.

## The solution

Early 2019, the clinic rolled out Uber Health to all families currently receiving care for sickle cell disease in its pediatric hematology clinic. To be eligible for the service, families had to screen positive for transportation insecurity in the lead-up to their appointment. They also needed access to a mobile phone or texting plan, as well as their own car seats when needed.

### Here’s how the pilot program worked:

Two days ahead of the appointment, during routine reminder calls, the clinic’s administrative coordinator asked caregivers if they had a way to get to their appointment. If the answer was no, the caregiver was told about the program and given the opportunity to take part. For those interested, a ride from Uber Health was booked for the day of the appointment while the person was still on the line. The admin also entered a note about whether the Uber was offered and accepted (or declined) into the electronic health record. Return rides were arranged at the end of the patient’s visit.

## Results

Key figures from the pilot program include:

- 86 caregivers were contacted about upcoming appointments, and more than half (56%) of those who answered the phone reported transportation insecurity and were connected with Uber Health rides.
- The average cost of a ride was \$60, and the average round-trip distance was 24 miles.
- All 35 of the patients who took Uber Health showed up to their appointments, while the no-show rates for patients who reported they did not need transportation or were not reachable by phone were 14% and 17%, respectively — down from 25%.
- Patients who took Uber Health were more likely to be on time than patients who took other forms of transportation.

“Uber Health provided clear benefits to our patients, and it was also low-cost. Boston Medical Center’s Uber Health rides spend was far outweighed by the professional, hospital, lab, and pharmacy charges that the hospital expects to receive from missed appointments,” adds Sobota.



For more information on Uber Health, please visit:

[www.uberhealth.com](http://www.uberhealth.com)