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Sen. Kathleen Vinehout writes about the recently released audit of the Non-Emergency Medical Transportation Program, used by many in Wisconsin for rides to medical appointments.

MADISON - Last April I wrote about many complaints I received concerning rides to medical appointments for folks in BadgerCare and other Medicaid programs.

People complained drivers didn't show up, rides were late, drivers didn't arrive for the return trip home and – at least in one case – the heater did not work in a van taking an elderly woman for her dialysis appointment.

Often patients were told no drivers were available. But local transportation companies told me they were not getting enough business. Local drivers thought the St. Louis-based contractor, Medical Transportation Management, Inc. (MTM) favored a few large companies over small local ones. MTM is the statewide Non-Emergency Medical Transportation 'broker' the state hired to arrange rides for eligible patients.

Complaints about poor service helped my colleagues and I convince other legislators to approve a full investigation of the program.

Over 300 people called the Legislative Audit Bureau's (LAB) hotline to share their complaints. These calls and over 50 interviews conducted by LAB staff were used to analyze problems with the Non-Emergency Medical Transportation Program. In addition, a survey was sent to 5,000 patients and their families. Also 311 transportation providers completed an internet-based survey.

The results of the year-long investigation are now in.

The new LAB report shows evidence of late rides, drivers' failure to pick up people for their return ride home and the tendency of MTM to choose a few large transportation companies over smaller, local companies.

Despite problems, of the 773 riders who responded to the questionnaire, almost 87% were satisfied or very satisfied with their overall experience.

During the audit study period (August 2013 through June 2014), MTM provided 2.3 million trips and, by its own standard, estimated 99.6% of these trips were complaint free.

The LAB reviewed 12,748 complaints filed with MTM. Two-thirds of the time the company did not provide patients timely updates on their investigation of complaints.

The most common substantiated complaint was that the patient had to reschedule a trip because the driver never arrived. Second most common was the driver was late.

Analysis by auditors showed problems, particularly in rural areas, with no vehicles available to transport patients.

A majority of transportation providers surveyed reported they were dissatisfied with MTM's trip scheduling, poor trip volume and poor compensation.

Drivers complained they were given a request for a ride after the time and date of the appointment. Since drivers were penalized for late rides, this led to time and energy spent by the provider to correct MTM's mistake.

The audit also provided unexpected insight into a significant cost of drug abuse – in this case transporting recovering patients to treatment for addiction. Trips to drug treatment programs

accounted for almost a quarter of the cost of services paid to providers during the audit period. In addition, 91 of the top 100 high cost patients had at least one drug addiction treatment visit.

Auditors mentioned that the lack of drug treatment services in rural areas contributed to high costs. In one case an individual made 540 trips between Ashland County and Eau Claire for treatment. In another case, an individual traveled 321 times between Polk County and Eau Claire. Recently enacted legislation to create new treatment programs in underserved and rural areas should help bring down future transportation costs.

Auditors found there was clearly a difference in patient satisfaction levels measured through an independent survey and the complaint rate of patients directly to MTM. These findings suggest a future independent survey could provide a more accurate perspective in determining actual patient satisfaction.

Nearly all complaints I heard leading up to this audit were verified by auditors. At the same time, most patients were satisfied with the ride service they received.

Some state programs might be pleased with such high satisfaction. But given the seriousness of the patients' conditions – needing renal dialysis for example – it makes sense that we should hold MTM to a very high standard.

As Representative Peter Barca testified at the hearing that began this audit process, "When people are in the most sensitive period of their life, we must ensure they receive services and are treated with respect and dignity."