

# Update on Maryland Healthcare Transportation Roundtable Meetings



ACCESS FOR ALL    APRIL 24, 2023

# WHEELS TO WELLNESS



COUNTY	AREA	POPULATION
CHARLES	458	161,503
CALVERT	213	92,003
ST. MARY'S	357	112,664
<b>TOTAL</b>	<b>1,028</b>	<b>366,170</b>

# CASE MANAGEMENT TEAMS

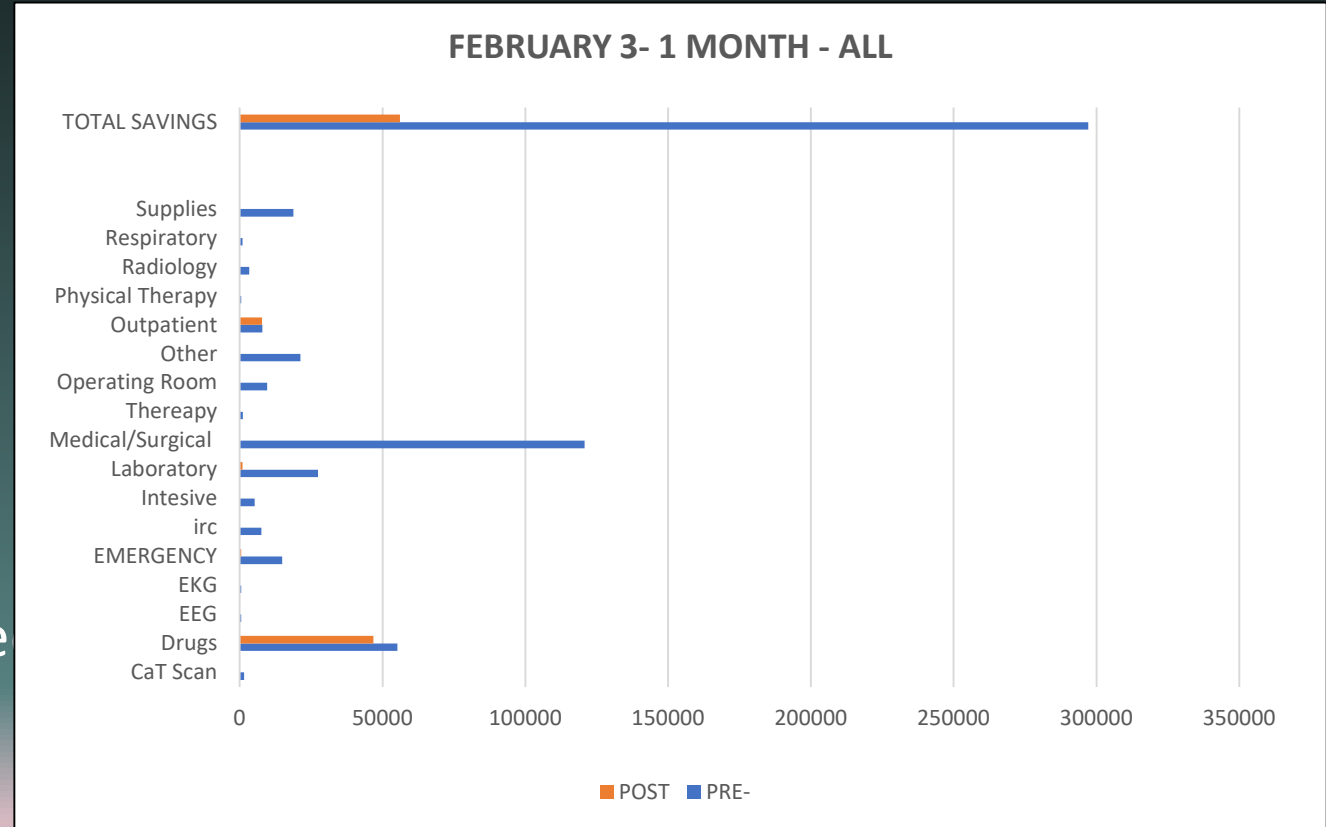
- Inpatient Case Managers
- Medical Social Workers
- Transitions to Home/AccessHealth
- Community Health Workers
- Transportation Coordinator



# CRISP Reports

**Health Information Exchange (HIE): State Health Information Exchange (HIE) electronic transfer of clinical information between health information systems.**

- **Systematic /Standardized Reporting-**  
Crisp reports are standardized throughout Maryland
- **Shared Data-** instantly share health information among doctors' offices, hospitals,.
- **Already Available-** CRISP reports are use throughout the State.



# BRIDGING HEALTHCARE AND TRANSPORTATION



## HEALTHCARE

Medicare  
Total Care

## TRANSPORTATION

Paratransit (over half)  
Senior Rides





## THE SURVEY

- Over 340 responses
- Mid July to November 1, 2023
- Predominantly healthcare and Transportation
- Provided geographic data
- Tracked perceptions and community knowledge of healthcare transportation.



Find solutions for NEMT, comp



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Define  
&  
inventory  
current  
programs

Analyze  
previous  
findings &  
evaluate  
coherent ideas

Identify  
strategies

ROUNDTABLE

I

ROUNDTABLE

II

ROUNDTABLE

III





**Erin Farley,**

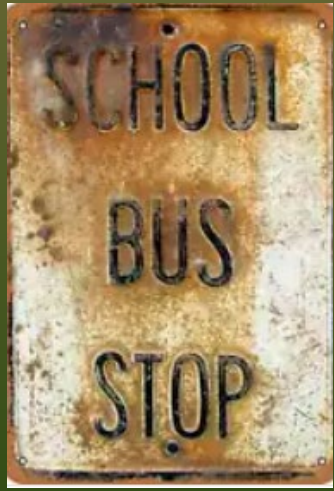
Spoke about challenges that the lack, or inability to, obtain healthcare transportation has on a family.

**Elaine Haytko, Executive Director Vermont  
Public Transportation Association,  
Spoke on solutions found in other States**

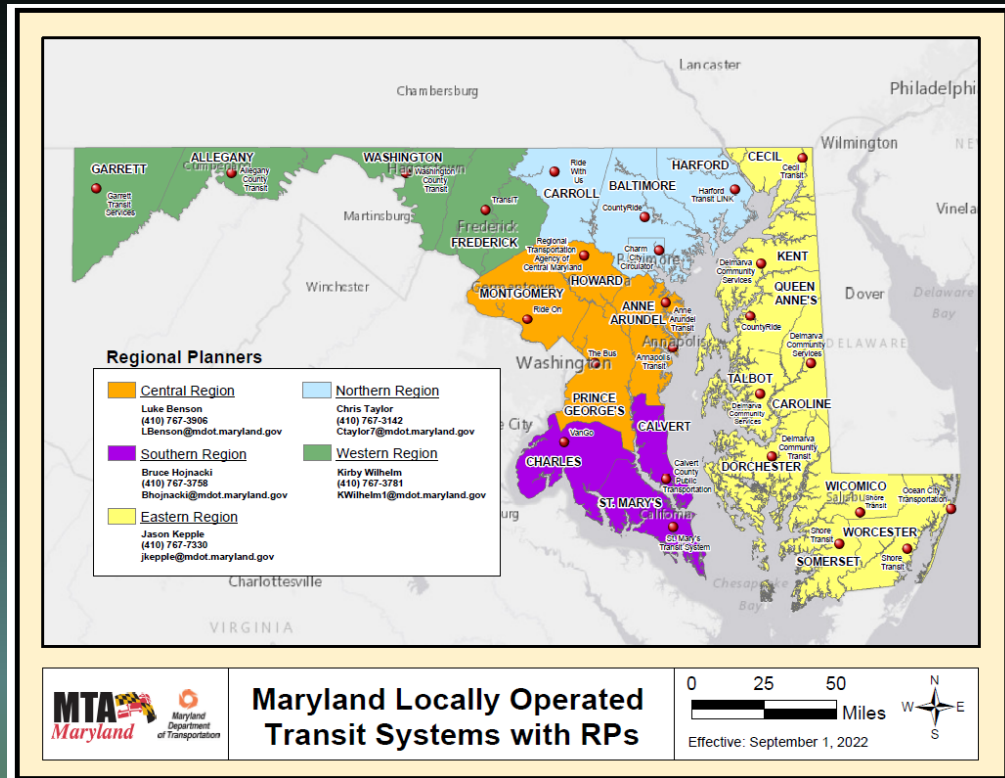


**Keith Adkins, Deputy Director at Delmarva Community  
Services,  
Spoke on possible solutions in Maryland.**

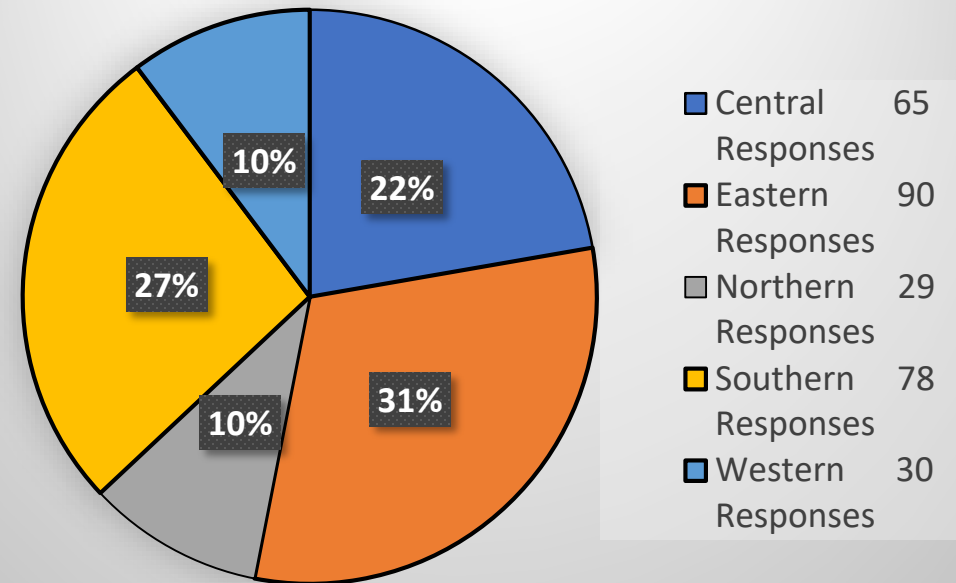




# SURVEY GEOGRAPHIC DISTRIBUTION



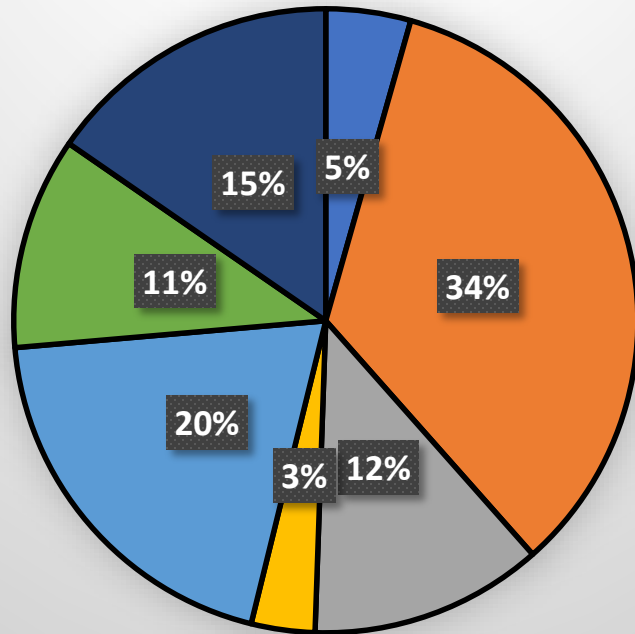
## WHAT REGION DO YOU REPRESENT?



- 60% Eastern Shore and Southern Maryland
- Central Maryland was next largest

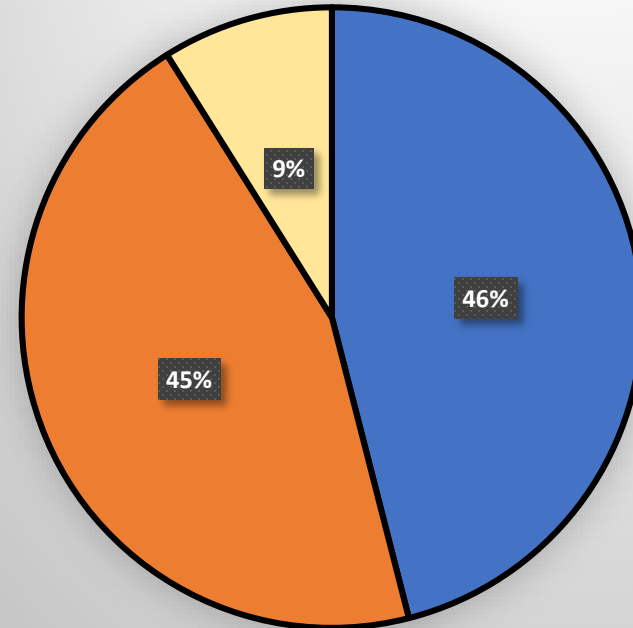
# SURVEY INDUSTRY REPRESENTATION

## What type of non-profit do you represent?



- Transportation
- Community Action Agency
- Other (specify)
- Human Service Provider
- Healthcare/Hospital
- Regional Council
- Education

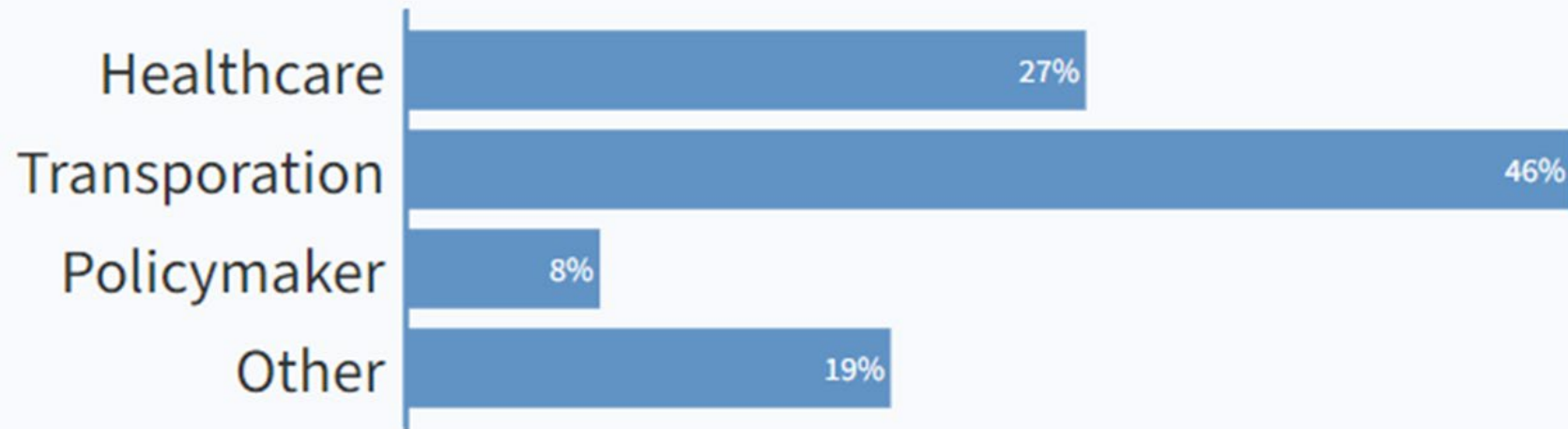
## HOW DO YOU CLASSIFY YOUR INDUSTRY?



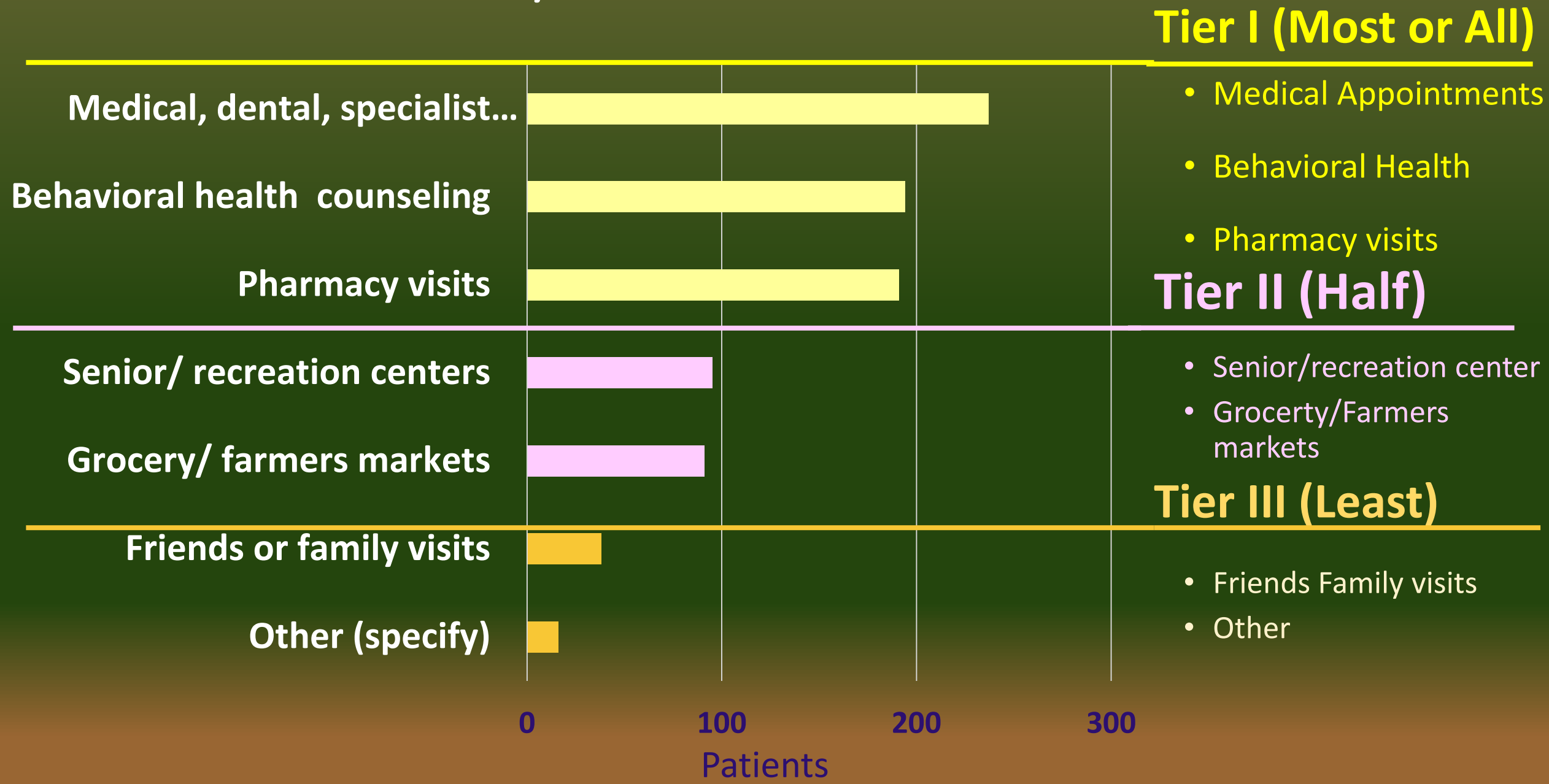
- Government
- Non-profit
- Private, for profit

- MOSTLY GOVERNMENT AND NON-PROFIT
- LARGEST NON-PROFIT IS HEALTHCARE/HOSPITAL

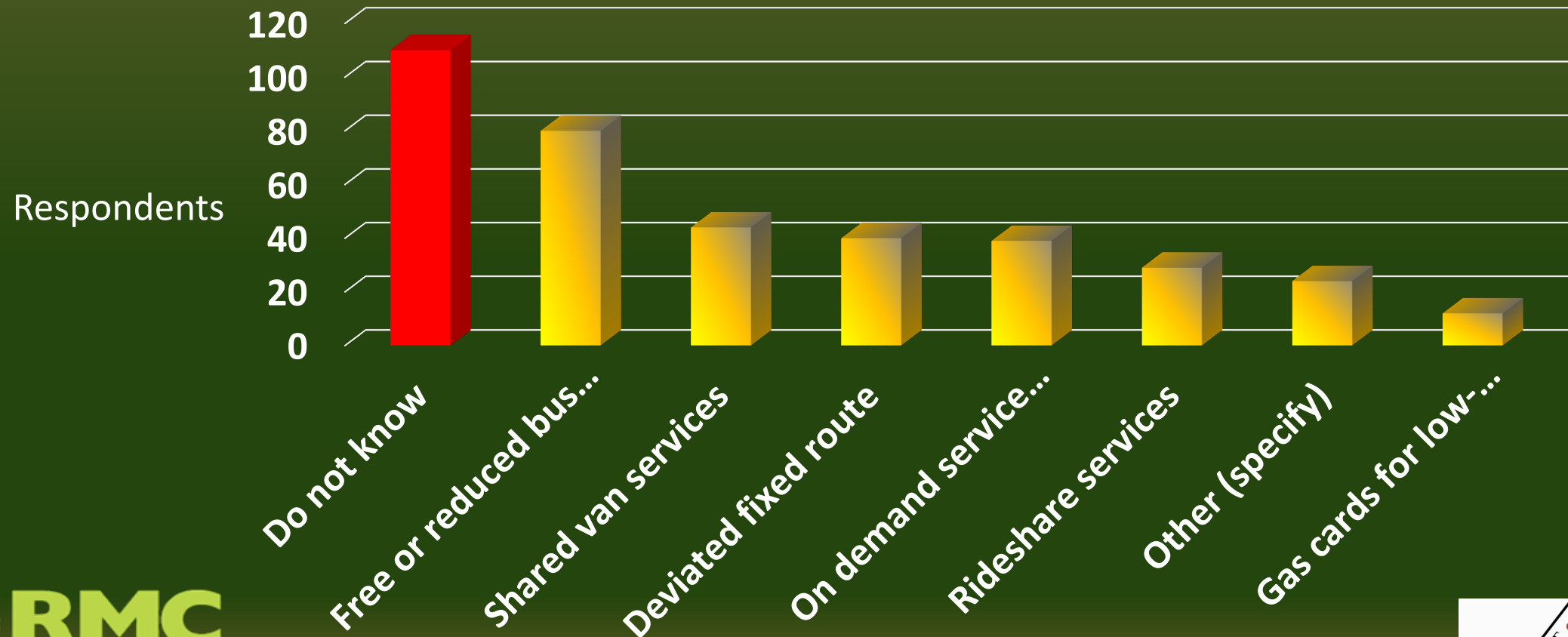
## What industry do you represent?



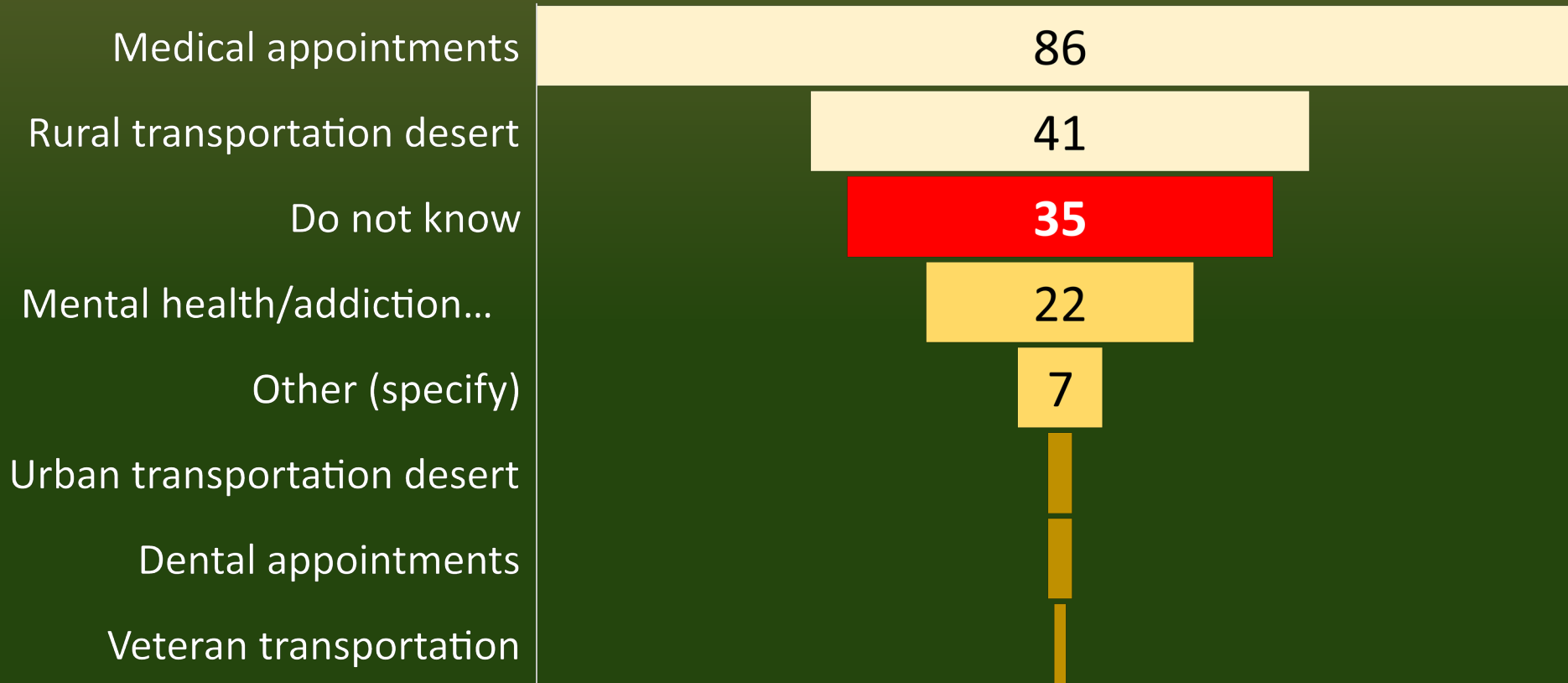
# How do you define a NEMT ride?



# In your community, do you know what NEMT transportation services are currently available?

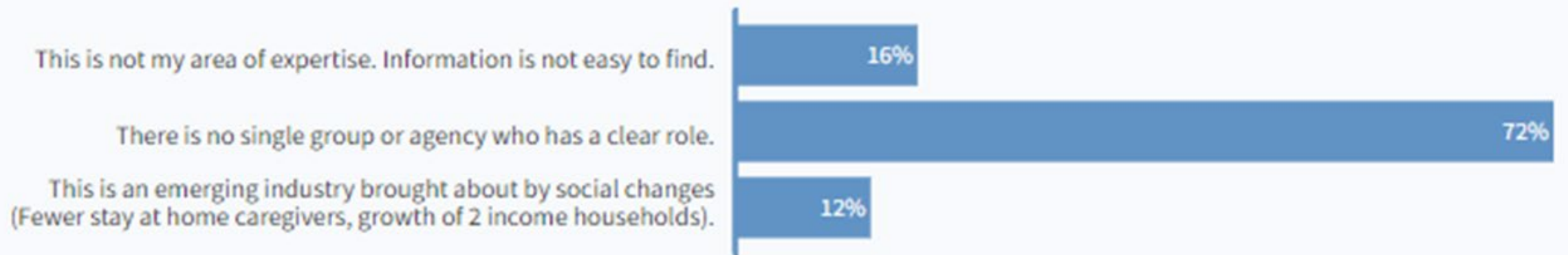


# What is your community's most urgent NEMT need?



# ***“THERE IS NO SINGLE GROUP OR AGENCY WHO HAS A CLEAR ROLE”***

**Why do you think there is such a high number of "expert" responders who do not know current non-emergency medical transportation options despite the need?**





# ROUNDTABLE I & II FINDINGS

## FOCUS AREAS

### COORDINATION

There is a lack of diversity in funding and needs related to transportation that makes coordination challenging between healthcare and transportation providers.

### INDUSTRY CHARACTERISTICS

Since socio-economic status is connected to health and since demand exceeds services provided by social welfare, transit and healthcare, characteristics for each industry should be evaluated.

### COMMUNITY MEMBER CHARACTERISTICS

Health and human services transportation provides unique community member challenges and coordination is critical for effective service.

# FOCUS AREA I - COORDINATION

## ROUNDTABLE III

### **Policy Statements Discussed**

- Reestablish the State Coordinating Committee for Human Services
- MD 211 to inventory Maryland health & human services transportation programs.

# **FOCUS AREA I – COORDINATION**

## **ROUNDTABLE III**

### ***RECOMMENDED POLICY STATEMENT:***

***Re-establish the State Coordinating Committee for Human Services Transportation to provide guidance to Regional Coordinating Bodies/ Metropolitan Planning Organizations (MPO's) and program funding.***

# FOCUS AREA II—INDUSTRY CHARACTERISTICS

## ROUNDTABLE III

### POLICY STATEMENTS DISCUSSED

- Develop regional partnerships with Transportation Network Companies (TNC), non-profits for dialysis community members.
- Re-instate MDOT funding reduced in FY 21 due to CARES Act.
- Monitor Federal Register Vol 87 Number 172 pages 5460-54855

# FOCUS AREA II—INDUSTRY CHARACTERISTICS

## ROUNDTABLE III

### ***RECOMMENDED POLICY STATEMENT:***

*Develop flexible, regional partnerships with Transportation Network Companies (TNC)/Non-profits supported with adequate funding.*

# FOCUS AREA III – CLIENT CHARACTERISTICS

## ROUNDTABLE III

### POLICY STATEMENTS DISCUSSED

- Develop regional partnerships with Transportation Network Companies (TNC), non-profits for dialysis community members.
- Re-instate MDOT funding reduced in FY 21 due to CARES Act.
- Monitor Federal Register Vol 87 Number 172 pages 5460-54855

# FOCUS AREA III – CLIENT CHARACTERISTICS

## ROUNDTABLE III

### ***RECOMMENDED POLICY STATEMENT:***

*Codify a new health and human services transportation program in the MD Department of Health that supports inter-regional, inter-county and interstate transportation.*

# ROUNDTABLE I & II FINDINGS

## FOCUS AREAS

### COORDINATION

*Re-establish the State Coordinating Committee for Human Services Transportation to provide guidance to Regional Coordinating Bodies/ Metropolitan Planning Organizations (MPO's) and program funding.*

### INDUSTRY CHARACTERISTICS

*Develop flexible, regional partnerships with Transportation Network Companies (TNC)/Non-profits supported with adequate funding.*

### COMMUNITY MEMBER CHARACTERISTICS

*Codify a new health and human services and human services transportation program in the MD Department of Health that supports inter-regional, inter-county and interstate transportation.*



# **Senate Bill 511/ House Bill 596:**

**Establishes State Coordinating Committee for Health and Human Services Transportation to examine transportation needs of residents who are elderly, have a disability, or require transportation to access jobs, medical and other health-related appointments;**

- . Repeals \$500,000 cap on Maryland Senior Rides Program;**
- . Repeals the \$400,000 cap on Job Access and Reverse Commute Program**

# **RURAL MARYLAND COUNCIL FY 2024 RURAL TRANSPORTATION PILOT PROJECT**

## **Announced upcoming Rural Healthcare transportation grant program for FY24**

- \$300,000 for entire state.
- Inter-regional transportation for rural patients who need to specialized care in the urban areas.

# BENEFITS OF NEW RURAL HEALTHCARE PROGRAM

- Rural community members who need specialized care, including dentistry.
- Urban community members who need follow up care but unable to use public transit.
- Inter-regional transportation was prioritized during Roundtable meetings
- More to come.

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# Questions?

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