



Kansas RTAP Fact Sheet

A Service of The University of Kansas Transportation Center for Rural Transit Providers

The Missing Link: Transportation's Role in Health Care

By Caitlin Zibers

"About 3.6 million Americans miss or delay medical appointments every year because they lack a ride to the doctor," according to Therese McMillan, Acting Administrator of the Federal Transit Administration (FTA). Additionally, estimates from the Robert Wood Johnson Foundation show nearly half the population in the United States lives with a chronic condition, and with an aging population it is reasonable to expect increases in need—not only in the level of care but access to care. Is connecting your riders to their healthcare providers an ever-increasing challenge? The message we hear from Kansas transit providers often is that the challenges are growing in terms of longer-distance trips to health care facilities and more people needing dialysis and other specialty care. Is there a plan for providing access to the increasing number of seniors and others with health challenges in your community? This article describes the Federal Transit Administration's new Rides to Wellness initiative, highlights key points from a recent summit, and profiles some of this year's funded projects under that initiative that may suggest some solutions in your community.

What exactly is the Rides to Wellness initiative?

The Rides to Wellness initiative stems from DOT Secretary Foxx's *Ladders of Opportunity*, an initiative designed by the U.S. Department of Transportation (DOT) to provide connections between communities and essential services. The Ladders of Opportunity initiative is focused on connecting people to economic opportunities such as jobs,

education, and essential community services such as health care in a reliable and affordable way. The driving idea behind the initiative, as stated by Secretary Foxx, is that "Through transportation, we can help ensure that the rungs on the ladder of opportunity aren't so far apart—and that the American dream is still within reach for those who are willing to work for it." (*Ladders of Opportunity*)

Three goals for improving health care access

Through this broader initiative, Rides to Wellness was created to serve the goal of linking communities to essential health services. Its vision: "through rides, people and community health thrive." To support this vision, three goals have been identified for the initiative: 1) increase access to care, 2) improve health outcomes, and 3) reduce health care costs.

Increasing access to care is perhaps the most visible outcome, and will be accomplished by providing transit opportunities and routes for patients. As communication between transportation agencies improves, overlapping services and gaps in service can be better identified, increasing the efficiency of local transit systems.

In Kansas, improved communication



to reduce gaps in service is being tackled with the development of regionalized services and the move towards one-touch, one-call centers. Better access to health care, along with other essential destinations such as jobs, is a driving force behind regionalizing transportation services in Kansas—identified as one of four goals in the regional transit implementation plan (KDOT, 2014).

Many communities, however, overlook the role transportation can have in increasing health outcomes and reducing health care costs. Health outcomes are a wide range of measures to determine a population's overall health, a few of which are: health-related quality of life, life expectancy, disability and disease. Transit services can contribute to improving these outcomes by incorporating multi-modal designs into the transit system, encouraging riders to be more active while connecting them with the preventative services that can identify potential health problems before they advance.

In addition to linking riders with preventative services, transit can also provide access to treatment of chronic illnesses that need regular attention, such as diabetes. By delivering riders to appointments for routine treatments and check-ups, the health care costs incurred from advanced illnesses can be reduced.

The Rides to Wellness initiative has a three-pronged strategy, beginning with building commitment and partnerships to identify and promote promising practices in healthcare transportation. Recognizing that several agencies play a role in providing local transportation services, this first step is essential to increase efficiency. The second strategy is to drive change with a healthcare transportation summit, which was held this spring and included a diverse group of agencies and stakeholders. Lastly, the initiative will stimulate investment through community grants to link healthcare and transportation, with 16 grants awarded for the year 2015.

Rides to Wellness Summit: Driving change

The national Rides to Wellness Summit, held in March 2015, brought together 100 professionals from the healthcare and transportation fields to discuss interagency cooperation and areas of opportunity. The purpose of the summit was to identify areas for possible collaboration to overcome the transportation barriers within the healthcare system. Among the speakers were representatives from the Federal Transit Administration (FTA), United States Department of Agriculture (USDA), Health and Human Services (HHS), and the National Center for Mobility Management (NCMM).

The speakers highlighted ways in which transportation can influence a community's health. Audrey Rowe, Administrator of the Food and Nutrition Service for USDA, spoke about the transportation problems surrounding food access for children.

Kathy Greenlee, former Secretary of Health for Kansas, now working with Health and Human Services (HHS), stressed the importance of transporting

seniors and people with disabilities. Greenlee also highlighted alternative sources of health such as grocery stores and churches as a way to enhance community living for all citizens. She emphasized the growing need for senior transportation stating, "... 10,000 people will turn 65, every day for the next 17 years in this country. This is an issue we can't avoid" (Greenlee).

Over the next 17 years transportation systems will feel the strain of our aging population, underlining the need to strengthen the link between healthcare and transportation now, before our transportation systems are at full capacity.

Putting Rides to Wellness into action: Planning grants awarded

Carolyn Jeskey, co-director of the National Center for Mobility Management (NCMM), addressed these issues in a recent interview, describing the summit as an opportunity for cross-organizational collaboration. Taking the brainstorming from the summit a step further, as part of the Rides to Wellness initiative, the NCMM has administered 16 competitive planning grants to communities throughout the country, focusing on three main areas within healthcare: 1) transportation to post-hospitalization appointments, 2) primary and preventative care, and 3) behavioral health appointments. The grant recipients will have six months to develop and test solutions focused on one of these three areas ("16 Communities Receive Grants" pg. 1).

Jeskey went on to describe the long term benefits of these programs, stating: "One, it's the learning that we're going to get out of the 16 [grant recipients]. What they're doing is testing proposed projects and vetting them in the community before launching them... We want to be able to share the learning, share the process, and share what the hurdles were for these communities and how they overcame them."

Jeskey ended with describing how those lessons will be shared through webinars, conference presentations and podcasts.

While she acknowledged funding can be a significant barrier in increasing

access to health care and healthy activities for many communities who did not receive a grant, she encourages communities to begin by "reaching out and having those conversations with patients and seeing what their needs are... and then say: 'So what can we do together?'" (Jeskey, 2015).

Three "Rides to Wellness" examples

To help learn a little more about the projects funded under this round of planning grants, we took a closer look at three of the projects:

Missouri Rural Health Association.

This project covers nine rural counties in South Central Missouri and will focus on access to preventative and primary care. Two concepts have been proposed: the first being a train-the-trainer curriculum for volunteers from the hospital auxiliary, senior center, and other service agencies. The idea behind the curriculum is to train volunteers so that they can educate their own agencies in how to access HealthTran and other transportation services. The second concept involves a "healthcare provider subscription service to transportation" ("Healthcare Access Mobility Design Challenge" 25-26).

Mercy Medical Center.

Covering nine counties in central Iowa, this project focuses on access to post-hospitalization services to decrease the need for hospital readmission. The first concept proposed is a "rider's club" for patients being discharged from the hospital. They will be directed to the mobility coordinator to help connect them to transportation options. Second, this project plans to focus on volunteer transportation, with Mercy's Volunteer Services Department taking the lead in recruiting, screening, interviewing and conducting background checks on drivers. ("Healthcare Access Mobility Design Challenge" 45-46).

Interfaith Senior Programs, Inc.

This project, based in Waukesha, Wisconsin, focuses on access to preventative and primary care. The two concepts proposed are a one call center/central dispatch and travel training. The one call center/central dispatch will consist of one number that

would allow the caller to schedule a ride and receive eligibility screenings and administer the application. Additionally, travel training would produce a two pronged navigation program. Trained volunteers would accompany seniors and people with disabilities to help them learn to use the fixed-route bus service as well as assist individuals in creating an individualized transportation plan ("Healthcare Access Mobility Design Challenge" 33-34).

Over the next six months of project development, the main goal is to hone these solutions and figure out how the services will be most effective, according to Margaux Shields, mobility manager for Interfaith Senior Programs. The keys to success include involving a wide variety of stakeholders such as "the aging and disability resource center, local regional planning commission, 211 operators, the metro bus transit of Waukesha, members from the planning and development commission, riders, and two of the three major health care systems," says Shields. Additionally, she believes getting community leaders on board with this project "so that there is a willingness to fund it and see it as a useful endeavor and a priority" is essential for success of

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—Therese McMillan, Acting Administrator to the Federal Transit Administration

this project.

Shields' advice to other communities interested in strengthening the link between transportation and healthcare is to reach out.

"We found that there's been a real willingness and excitement among healthcare organizations to actually engage in working on transportation issues because they've realized it's such an issue...literally just making that contact is crucial, and getting research from social workers, nurses and individuals who are helping patients with transportation. That front line research really helps determine what needs to be addressed." (Shields)

Conclusion

As transportation continues to integrate with health systems, look for ways within your own community to initiate and support collaboration between the two networks. Populations are aging, and as a result we will continue to experience a higher demand for medical, social and behavioral services. An inclusive and innovative transportation network has the ability to act as the link, increasing access while decreasing healthcare costs. For inspiration, look at the results of the projects that have been funded, and tailor their techniques to your community. For a complete list of funded projects and to access the slides from the June 24 webinar, visit the National Center for Mobility Management's website at http://nationalcenterformobilitymanagement.org/rides-to_wellness_home/.

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Sources

- "16 Communities Receive Grants to Pursue Innovative Mobility Solutions to Health Care Services." National Center for Mobility Management. National Center for Mobility Management, June 10, 2015. Web. 27 July 2015. http://nationalcenterformobilitymanagement.org/wp-content/uploads/2015/06/Press_Release_Healthcare_Transportation_Grantees_06.10.15.pdf
- Greenlee, Kathy. "Remarks at the Rides to Wellness Summit." National Center for Mobility Management, Health and Human Services. 11 March 2015. Keynote Address. <http://nc4mm.vpsgdev.net/wp-content/uploads/2015/04/Kathy-Greenlee-Transcript.pdf>
- "Healthcare Access Mobility Design Challenge". All Team Webinar 1, National Center for Mobility Management, Web, 24 June 2015. Webinar. http://nationalcenterformobilitymanagement.org/wp-content/uploads/2014/11/06.24.15_Webinar.pdf
- Jeskey, Carolyn. Telephone interview. 30 July 2015.
- KDOT Regional Transit Business Model Implementation Plan, December 31, 2014. <https://www.ksdot.org/Assets/wwwksdotorg/bureaus/burTransPlan/pubtrans/pdf/KDOT%20Regional%20Transit%20Business%20Model%20Implementation%20Volume%20I-II.pdf>, accessed August 12, 2015.
- McMillan, Therese. "Healthy aging? FTA's working on that." FTA. np, Web. 27 July 2015. <https://www.transportation.gov/fastlane/ride-to-wellness>
- National Center for Mobility Management. Web. 27 July 2015. <http://nationalcenterformobilitymanagement.org/rides-to-wellness/>
- Rowe, Audrey. "Remarks at the Rides to Wellness Summit." National Center for Mobility Management, Food and Nutrition Service. 11 March 2015. Keynote Address. < <http://nc4mm.vpsgdev.net/wp-content/uploads/2015/04/Audrey-Rowe-Transcript.pdf>>
- Shields, Margaux. Personal Interview. 6 August 2015.
- "Ladders of Opportunity." Department of Transportation. np, Web. 27 July 2015. <http://www.transportation.gov/ladders>
- The Growing Burden of Chronic Disease in America. May/June 2004. Publisher: Association of Schools of Public Health Publication: Public Health Reports. Author(s): Anderson G, and Horvath J.