

for SOUTHERN MARYLAND

WHAT WE DO:

Coordinate human service transportation drivers with local hospital case managers who identify patients needing reliable transportation for follow up healthcare.

CONTACT:

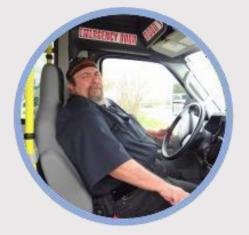
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HB 1243

Establishing the Rural Nonemergency Medical Transportation Program to allow hospitals to coordinate transportation provided by a nonprofit organization to or from medical services for eligible individuals; and requiring the Governor, beginning in fiscal year 2024, to include in the annual budget an appropriation of \$1,000,000 carry out the Act.

WHEELS TO WELLNESS

WHO WE ARE: MEDICAL AND TRANSPORTATION INDUSTRIES

- Hospitals are incentivized to reduce patient recidivism rates due to fines by the State.
- Drivers trained in eight (8) areas specializing in emergency response and safety.
- During prime office hours, drivers are underutilized and available for transportation.
- 100% grant funded through RMC and MDOT.

POPULATION SIZE: ONE IN FIVE APPOINTMENTS MISSED

- Two national studies estimate 1.21% to 1.33% of the population will miss a non-emergency medical appointment due to transportation.
- In Southern Maryland, at least 4,402 to 4,839 people will miss <u>at least</u> one or more appointments each year.
- The population has serious chronic health conditions and transportation challenges.
- This population is usually poorer and more rural.

RETURN ON INVESTMENT: SIGNIFICANT AND POSITIVE

Lansing Michigan- Tri-County Project found every \$1 spent on non-emergency medical transportation (NEMT) leads to more than \$6 in savings

Southern Maryland- Based on national studies, estimated over \$6.30 Return on Investment.

Wheels to Wellness CRISP Report- State Patient Health Information pre/post report shows 68% reductions in hospital charges.



WHAT WE DO:

Building Industry Resiliency

- We rely on the grant funds by the Rural Maryland Council and MDOT.
- We help Southern Maryland hospitals meet the State goal to reduce recidivism rates. Each year, since 2014, the Maryland Hospital Cost Review Commission evaluates readmission rates to penalize or reward hospitals.
- We stabilize human service by providing income during low demand hours by increasing use of **underutilized** transportation vehicles.
- We help reduce healthcare costs by ensuring patients each their appointments.

WHO WE SERVE: One in five missed medical appointments

- Each year, at least 4,500 Southern Maryland adults and 74,000 Marylanders who identified transportation for missed one or more appointments in the past year.
- Patients generally earn less, belong to a minority, non-white group and older.

THE RESULTS:

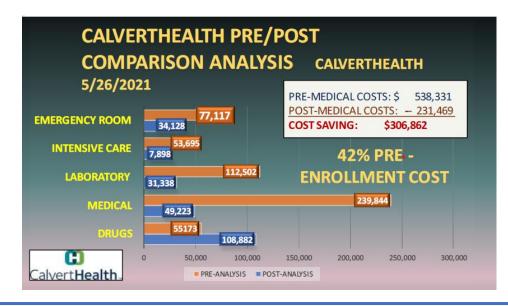
Positive returns and healthier patients

FY22 Southern Maryland Needs:

Start: August 6, 2018 Region Population: 366,170(100% of region) Estimated Patient population: 4,400-4,875 Current Paratransit Demand: 245 rides/day

YEAR	MILES	PATIENTS	FUNDING
2019	20,243	102	130,000
2020	13,152	120	66,096
2021	13,152	130	74,162
2022 (MID)	3,292	34	15,405

A recent CRISP Pre/Post Analysis Report by CalvertHealth demonstrates a 68% reduction of hospital charges. The Analysis identified a trigger date and then compared before and after charges of enrolled patients. While most areas showed cost reductions, drug prescription charges increased due to better healthcare management by patients.



WHAT WE NEED:

A Pathway Forward

- Reliable and stable funding for non-emergency medical transportation.
- Dialogue to incorporate transportation into healthcare to control costs.